

## County of Albany

Harold L. Joyce Albany County Office Building 112 State Street - Albany, NY 12207

## Legislation Text

File #: TMP-2214, Version: 1		
REQUEST FOR LEGISLATIVE ACTION		
Description (s.g. Contract Authorizat	ion for Information Complete).	
<b>Description (e.g., Contract Authorization for Information Services):</b> Request from ACDCYF for permission to submit a proposal for grant funding from OCFS for CAPTA and CARA funds.		
Date:	January 6, 2021	
Submitted By:	Scott McNelis	
Department: Title:	Children, Youth and Families Contract Administrator	
Phone:	7306	
Department Rep.	1000	
Attending Meeting:	Moira Manning, Commissioner	
Purpose of Request:		
☐ Adopting of Local Law		
☐ Amendment of Prior Legislation		
☐ Approval/Adoption of Plan/Procedure		
☐ Bond Approval		
☐ Budget Amendment		
☑ Contract Authorization		
☐ Countywide Services		
☐ Environmental Impact/SEQR		
☐ Home Rule Request		
☐ Property Conveyance ☐ Other: (state if not listed)	Click or tap here to enter text.	
Other. (State if Not listed)	Click of tap here to enter text.	
CONCERNING BUDGET AMENDMENTS		
Increase/decrease category (choose all that apply):		
☐ Contractual		
☐ Equipment		
☐ Fringe		
☐ Personnel		
□ Personnel Non-Individual		

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□ Revenue	
Increase Account/Line No.: Source of Funds: Title Change:	Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.
CONCERNING CONTRACT AUTHORI	<u>ZATIONS</u>
Type of Contract:  ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☒ Grant New Submission Date Deadline 12/30/20xt.	
Contract Terms/Conditions:	
Party (Name/address):	
NYS Office of Children and Family Servi 52 Washington Street Rensselaer, NY 12144 Additional Parties (Names/addresses): Click or tap here to enter text.	ces
Amount/Raise Schedule/Fee: Scope of Services:	\$90,000 Co-location services for Behavioral Health and Child Protective Services
Bond Res. No.: Date of Adoption:	Click or tap here to enter text. Click or tap here to enter text.
CONCERNING ALL REQUESTS	
Mandated Program/Service: If Mandated Cite Authority:	Yes □ No ⊠ Click or tap here to enter text.
Is there a Fiscal Impact: Anticipated in Current Budget:	Yes ☑ No ☑ Yes ☑ No ☑
County Budget Accounts: Revenue Account and Line:	AA6119 03610

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Revenue Amount: \$90,000

Appropriation Account and Line: AA6119 12205

Appropriation Amount: \$90,000

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: 100%

County: Click or tap here to enter text. Local: Click or tap here to enter text.

Term

Term: (Start and end date) 12/1/2020 - 11/30/2021

Length of Contract: 12 Months

Impact on Pending Litigation Yes □ No ☒

If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: 228-15, 184-15
Date of Adoption: 6/8/15, 5/11/15

<u>Justification</u>: (state briefly why legislative action is requested)

Please see Attached