

Legislation Text

File #: TMP-4981, Version: 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services): Contract Authorization for Healthy Families

Date:
Submitted By:
Department:
Title:
Phone:
Department Rep.
Attending Meeting:

January 5, 2024 Scott McNelis Children, Youth and Families Contract Administrator 7306

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
- \Box Other: (state if not listed)

Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- □ Contractual
- □ Equipment
- □ Fringe
- □ Personnel
- Personnel Non-Individual
- □ 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 AUTHORIZATIONS

Type of Contract:

- □ Change Order/Contract Amendment
- □ Purchase (Equipment/Supplies)
- □ Lease (Equipment/Supplies)
- □ Requirements
- Professional Services
- □ Education/Training
- □ Grant
- Choose an item.

Submission Date Deadline Click or tap to enter a date.

- □ Settlement of a Claim
- □ Release of Liability
- □ Other: (state if not listed)

Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address): New York State Office of Children and Family Services 52 Washington Street Rensselaer NY 12144

Additional Parties (Names/addresses):

Parsons Child and Family Center 60 Academy Road Albany NY 12208

Amount/Raise Schedule/Fee:\$1,225,025Scope of Services:Funding for the New York Healthy Families Home VisitingProgram to provide intensive home visits to pregnant woman and new parents

Bond Res. No.:	Click or tap here to enter text.
Date of Adoption:	Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:

Yes

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If Mandated Cite Authority:		
Is there a Fiscal Impact: Anticipated in Current Budget:	Yes ⊠ No □ Yes ⊠ No □	
County Budget Accounts:		
Revenue Account and Line: Revenue Amount:	AA6119 03406 \$1,225,025	
Appropriation Account and Line: Appropriation Amount:	AA6119 44400 .1 \$601,949 \$623,076	
Source of Funding - (Percentages) Federal: State: County: Local:	Click or tap here to enter text. 100%	
Term Term: (Start and end date) Length of Contract:	7/1/2023 - 6/30/2024 12 Months	
Impact on Pending Litigation If yes, explain:	Yes \Box No \boxtimes Click or tap here to enter text.	
Previous requests for Identical or Sim Resolution/Law Number: Date of Adoption:	ilar Action: 22-238, 21-173, 20-201,19-266,18-202,17-188,16-230, 7/11/22, 6/14/21,6/8/20, 7/8/19,5/14/18, 5/8/17, 6/13/16,	
Justification: (state briefly why legislat	ive action is requested)	

Justification: (state briefly why legislative action is requested) Please see attached