

## County of Albany

112 State Street Albany, NY 12207

## Legislation Text

File #: TMP-1844, Version: 1  REQUEST FOR LEGISLATIVE ACTION  Description (e.g., Contract Authorization for Information Services): Authorization to accept grant funding from NYSOFA for the Aging and Disability Resource Center COVID-19 Pandemic Response				
			Date:	8/20/2020
			Submitted By:	Patrick Dillon
Department:	Aging			
Title:	Contract Administrator			
Phone:	518 447 7733			
Department Rep.				
Attending Meeting:	Deborah C. Riitano, Commissioner			
Purpose of Request:				
<ul> <li>□ Adopting of Local Law</li> <li>□ Amendment of Prior Legislation</li> <li>□ Approval/Adoption of Plan/Proce</li> <li>□ Bond Approval</li> <li>□ Budget Amendment</li> <li>⋈ Contract Authorization</li> <li>□ Countywide Services</li> <li>□ Environmental Impact/SEQR</li> <li>□ Home Rule Request</li> <li>□ Property Conveyance</li> <li>□ Other: (state if not listed)</li> </ul>	dure  Click or tap here to enter text.			
CONCERNING BUDGET AMEND	MENTS			
Increase/decrease category (chool ☐ Contractual ☐ Equipment ☐ Fringe	ose all that apply):			
□ Personnel				

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☐ 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 AUTHOR	<u>IZATIONS</u>
Type of Contract:  ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☒ Grant   Acceptance   Submission Date Deadline Click ☐ Settlement of a Claim ☐ Release of Liability ☐ Other: (state if not listed)	
Contract Terms/Conditions:	
Party (Name/address):  New York State Office for Aging Two Empire State Plaza Albany, New York 12223-1251	
Additional Parties (Names/addresses): Click or tap here to enter text.	
Amount/Raise Schedule/Fee: Scope of Services: funding from NYSOFA for critical relief funds for increase virtual access to services and respond	\$35,858.00  Requesting authorization for the Department for Aging to accept grant r COVID-19 pandemic response to support efforts to enhance and to the critical needs of its target population.
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.

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ls there a Fiscal Impact:	Yes ⊠ No □	
Anticipated in Current Budget:	Yes □ No ⊠	
County Budget Accounts:		
Revenue Account and Line:	A3677203344	
Revenue Amount:	\$35,858.00	
Appropriation Account and Line:	A9677244046	
Appropriation Amount:	\$35,858.00	
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)	4/1/2020 - 9/30/2021	
Length of Contract:	18 months	
<del>o</del>		
Impact on Pending Litigation	Yes □ No 🏻	
If yes, explain:	Click or tap here to enter text.	
Draviaua raguanta far Idantical ar Circila	r Action.	
Previous requests for Identical or Simila	r Action:	

NA

NA

## **Justification**: (state briefly why legislative action is requested)

Resolution/Law Number:

Date of Adoption:

The Department for Aging (DFA) requests legislative approval to accept grant funding from New York State Office for Aging and Administration for Community Living (ACL). This funding shall provide support to Aging and Disability Resource Centers / No Wrong Door Systems (NY Connects) to "prevent, prepare for, and respond to COVID-19. As a result of Coronavirus Preparedness and Response Supplemental Appropriation Act, 2020 this funding will enable NY Connects to mitigate the adverse effects of the pandemic including social isolation and limited access to nutritional and personal care services.