



County of Albany

112 State Street
Albany, NY 12207

Legislation Text

File #: TMP-1958, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

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

Request to amend contract with NYSDOH for supplemental Immunization Action Plan grant funding and amend the 2020 Health department budget.

Date: 09/29/2020
Submitted By: Dr. Elizabeth Whalen
Department: Health
Title: Commissioner of Health
Phone: 518-447-4584
Department Rep.
Attending Meeting: Dr. Elizabeth Whalen

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.](#)

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- ☐ Contractual
- ☒ Equipment
- ☐ Fringe
- ☐ Personnel

- ☐ Personnel Non-Individual
☒ Revenue

Increase Account/Line No.: Various lines
Source of Funds: NYS Department of Health
Title Change: 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

Acceptance

Submission Date Deadline 10/1/2020

- ☐ 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):

NYS Dept of Health
Empire State Plaza, Corning Plaza
Albany, NY 12237

Additional Parties (Names/addresses):

Click or tap here to enter text.

Amount/Raise Schedule/Fee: \$67,468
Scope of Services: The program seeks to remove barriers to immunization and to ensure that 90% of all children in Albany County are completely immunized by their second birthday.

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 ☒ No ☐
If Mandated Cite Authority: Article 6 of PHL Part 40 of Title 10 of NYSCRR

Is there a Fiscal Impact: Yes ☒ No ☐Anticipated in Current Budget: Yes ☐ No ☒County Budget Accounts:

Revenue Account and Line: A 4010.0.4407

Revenue Amount: \$15,000

Appropriation Account and Line: A4010.2.2600

Appropriation Amount: \$15,000

Source of Funding - (Percentages)

Federal: 100%

State: Click or tap here to enter text.

County: Click or tap here to enter text.

Local: Click or tap here to enter text.

Term

Term: (Start and end date) April 1, 2020 - March 31, 2021

Length of Contract: 12 months

Impact on Pending LitigationYes ☐ No ☒

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

Previous requests for Identical or Similar Action:

Resolution/Law Number: 156 of 2018

Date of Adoption: 4/9/2018

Justification: (state briefly why legislative action is requested)

Albany County Department of Health has been notified of supplemental funding for the Immunization Action Plan (IAP) contract. This additional funding is to expand and enhance local health department's (LHD) influenza vaccine outreach, promotion and mass vaccination activities for the 2020-21 flu season. In addition to enhancing influenza vaccine outreach activities, enhancing mass vaccination capacity will allow LHDs to more rapidly ramp up COVID19 mass vaccination activities when COVID-19 vaccine becomes available. We are requesting approval to accept this additional funding and amend the 2020 department budget. The remaining grant funds will be placed in the 2021 department budget.