



# County of Albany

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

## Legislation Text

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**File #:** TMP-2483, **Version:** 1

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### REQUEST FOR LEGISLATIVE ACTION

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

Activity Department Staff Amendments to the 2021 Budget

Date: May 4, 2021  
Submitted By: Larry I. Slatky  
Department: Shaker Place Rehabilitation and Nursing Center  
Title: Executive Director  
Phone: 518-213-8940  
Department Rep.  
Attending Meeting: Larry I. Slatky

**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.: NH 6020 Occupational Therapy Assistant/Activity Leader  
Source of Funds: Eliminate Titles Asst. Dir. Leisure Time Activity/Activity Asst  
Title Change: Eliminate Source of Fund Line Titles/Create Increase Account Line No.

### **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):**

Shaker Place Rehabilitation and Nursing Center  
100 Heritage Lane  
Albany, New York 12211

**Additional Parties (Names/addresses):**

Click or tap here to enter text.

Amount/Raise Schedule/Fee: NH 6020 11919001 640022 \$46,078.00/NH 6020 15293004 640513  
\$23,458.00 Eliminate These Titles and Create Occupational Therapy Assistant \$37,100.00 and Activity Leader  
\$31,347.00.

**Scope of Services:** The Shaker Place Assistant Director Leisure Time Activity has resigned/retired and due to the revisions of the NYSDOH/CMS regulations the Activities Assistant Title is no longer required. Therefore, we are recommending to eliminate these two titles and budget lines and create an Occupational Therapy Assistant and Activity Leader line to comply with NYSDOH PDPM regulations and reimbursement criteria. This budget amendment will save \$999.00 per year.

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: NYSDOH

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

County Budget Accounts:

Revenue Account and Line: Click or tap here to enter text.  
Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: NH 6020 11919001 640022/NH 6020 15293004 640513/Create two  
new budget lines  
Appropriation Amount: \$46,078.00/\$23,488.00/Add: \$37,100.00/\$31,437.00

Source of Funding - (Percentages)

Federal: 0  
State: 0  
County: 100  
Local: 0

Term

Term: (Start and end date) 6/1/2021-12/31/2021  
Length of Contract: N/A

Impact on Pending Litigation

If yes, explain: Yes ☐ No ☒  
Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: Click or tap here to enter text.  
Date of Adoption: Click or tap here to enter text.

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

With the retirement of the Assistant Director of Leisure Time Activity it will allow us to adjust the department's staffing to comply with NYSDOH and CMS regulatory requirements toward the PDPM program.