

County of Albany

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

Legislation Text

File #: TMP-2642, Version: 1	
REQUEST FOR LEGISLATIVE ACTION	N
Description (e.g., Contract Authorizat Request to amend the 2021 Health Dep	ion for Information Services): artment budget to apply a collective bargaining salary step
Date:	08/2/2021
Submitted By:	Dr. Elizabeth Whalen
Department:	Health
Title:	Commissioner of Health
Phone:	8/2/2021
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 AMENDMENT	<u>τs</u>
Increase/decrease category (choose a ☐ Contractual ☐ Equipment ☐ Fringe ☐ Personnel ☐ Personnel Non-Individual	all that apply):

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□ Revenue		
Increase Account/Line No.: Source of Funds: Title Change:	A.4010.1.5162.001 County and NYS 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	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): Click or tap here to enter text. Additional Parties (Names/addresses):		
Click or tap here to enter text.		
Amount/Raise Schedule/Fee: Scope of Services:	Click or tap here to enter text. Click or tap here to enter text.	
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.	
ls there a Fiscal Impact: Anticipated in Current Budget:	Yes ⊠ No □ Yes □ No ⊠	

County Budget Accounts:

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

Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: A.4010.1.5162.001

Appropriation Amount: \$400

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: 36% County: 64%

Local: Click or tap here to enter text.

<u>Term</u>

Term: (Start and end date)

Click or tap here to enter text.

Click or tap here to enter text.

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: Click or tap here to enter text. Date of Adoption: Click or tap here to enter text.

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

Albany County Department of Health is asking permission to amend the 2021 Health department budget to increase the Senior Public Health Aide line by \$400. This increase is due to a collective bargaining salary step, and will bring the 2021 salary to \$55,936.