

## County of Albany

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

## Legislation Text

File #: TMP-2189, Version: 1		
REQUEST FOR LEGISLATIVE ACTION		
Description (e.g., Contract Authorizat Contract Authorization for Homeless & T	•	
Date:	12/28/2020	
Submitted By:	Mark Gleason	
Department:	Mental Health	
Title:	Operations Analyst	
Phone:	518-447-3017	
Department Rep.		
Attending Meeting:	Dr. Stephen Giordano, Director	
Purpose of Request:		
<ul> <li>□ Adopting of Local Law</li> <li>□ Amendment of Prior Legislation</li> <li>□ Approval/Adoption of Plan/Procedure</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>	Click or tap here to enter text.	
CONCERNING BUDGET AMENDMENTS		
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:	Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.
CONCERNING CONTRACT AUTHORIZ	ZATIONS
Type of Contract:  ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☒ Grant ☐ Renewal ☐ Submission Date Deadline Click of ☐ Settlement of a Claim ☐ Release of Liability	or tap to enter a date.
☐ Other: (state if not listed)	Click or tap here to enter text.
Contract Terms/Conditions:	
Party (Name/address):     Homeless & Travelers Aid Society     138 Central Ave. Albany NY 12206  Additional Parties (Names/addresses):     Click or tap here to enter text.	
Amount/Raise Schedule/Fee: Scope of Services:	\$130,000 Provides case management services as a subcontractor under the receives from the NYS Division of Criminal Justice Services.
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.
Is there a Fiscal Impact: Anticipated in Current Budget:	Yes □ No ☒ Yes ☒ No □

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County Budget Accounts:

Revenue Account and Line: AA4322.03490
Revenue Amount: \$130,000

Appropriation Account and Line: AA4322.44479
Appropriation Amount: \$130,000

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.

<u>Term</u>

Term: (Start and end date) 10/1/2020-9/30/2020

Length of Contract: 12 Months

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: 381
Date of Adoption: 9/9/2019

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

Homeless and Travelers Aid Society (HATAS) was the successful proposer to the RFP 2017-088 to provide case management services to individuals returning from state prison who are served by the Re-entry Grant the Department of Mental Health receives from the NYS Division of Criminal Justice Services. HATAS will act as a sub-contractor for the Albany County Department of Mental Health as it relates to the DCJS (Division of Criminal Justice Services) Re-entry grant. HATAS supports prison re-entry clients with housing, client wellness and employment placement programs as a way to reduce recidivism in Albany County.