



# County of Albany

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

## Legislation Text

---

**File #:** TMP-3647, **Version:** 1

---

### REQUEST FOR LEGISLATIVE ACTION

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

ACDMH requests contract authorization for Albany County Department for Children, Youth and Families

Date:	September 26, 2022
Submitted By:	Mark Gleason
Department:	Mental Health
Title:	Operations Analyst
Phone:	518-447-3014
Department Rep.	
Attending Meeting:	Dr. Stephen Giordano, Director

### 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.: Click or tap here to enter text.  
Source of Funds: Click or tap here to enter text.  
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

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) Pass through funding of NYS OMH funds

#### **Contract Terms/Conditions:**

Party (Name/address):

Albany County Department for Children, Youth and Families (DCYF)

Additional Parties (Names/addresses):

Click or tap here to enter text.

Amount/Raise Schedule/Fee: \$323,324  
Scope of Services: Provides clinic, health home and SPOA services to children and their families suffering from mental illness

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: Click or tap here to enter text.

Is there a Fiscal Impact: Yes ☒ No ☐

Anticipated in Current Budget: Yes ☒ No ☐

County Budget Accounts:

Revenue Account and Line: Mental Health A34322.03490 & A44322.04490

Revenue Amount: \$323,324

Appropriation Account and Line: Albany County DCYF A94322.44432

Appropriation Amount: \$323,324

Source of Funding - (Percentages)

Federal: 10%

State: 90%

County: Click or tap here to enter text.

Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/1/2023-12/31/2023

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: 463

Date of Adoption: 12/6/2021

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

The Department of Mental Health requests permission to enter into a contract in 2023 with Albany County Department for Children, Youth and Families (DCYF) for the provision of clinic, health home and Single Point of Access (SPOA) services to Albany County children and their families suffering from mental illness. NYS Office of Mental Health (OMH) shall provide pass through funding to DCYF through Albany County Department of Mental Health in the amount of \$323,324. This appropriation is anticipated in the 2023 budget. There is no County share associated with this contract.