

**HEALTH AND FAMILY SERVICES COMMITTEE**  
**THURSDAY, March 6, 2014 9:15 AM**

**Committee Members: Cindy Kurpil Gieger, Chair, Kitty Vetter, Vice Chair,  
Kathy LaBuda, Jonathan Rouis, and Ira Steingart**

**CALL TO ORDER**  
**ATTENDANCE**

**COMMENTS: Committee Chair/Commissioner**

**REPORTS:**

- 1. HEAL Grant Update – Deborah DeJesus, ACC Administrator**
- 2. Brief Housing Update**

**DISCUSSIONS:**

- 1. Restructure of FIT**

**RESOLUTIONS:**

**Adult Care Center Resolutions -None**

**Department of Community Services Resolutions - None**

**Department of Family Services Resolutions**

- 1. To authorize County Manager to enter into agreement with the Sullivan County Child Care Council, Inc. for the provision of Informal Child Day Care Related Services.**
- 2. To authorize County Manager to enter into agreement for the provision of Community Optional Preventive Services (COPS).**
- 3. To enter into agreements for the provision of Domestic Violence related services for the period from January 1, 2014 through December 31, 2014.**
- 4. To authorize County Manager to enter into agreement with DNA Diagnostics Center, Inc. for the provision of Genetic (DNA) Testing and Reporting Services.**
- 5. To authorize County Manager to enter into agreement for the provision of Professional Services for period from January 1, 2014 through December 31, 2014.**
- 6. To authorize County Manager to execute agreements with New York and other State of Commonwealth approved Foster Care Related Service Providers.**
- 7. To authorize County Manager to enter into agreements for the provision of Child Support Related Legal Services for period from January 1, 2014 through December 31, 2014.**
- 8. To authorize County Manager to enter into agreements for the provision of various Medical Assistance Program Related Services for period from January 1, 2014 through December 31, 2014.**
- 9. To authorize agreements for the provision of Non-Secure Detention Related Services from January 1, 2013 through December 31, 2013 and from January 1, 2014 through December 31, 2014.**
- 10. To authorize County Manager to execute an agreement for Persons In Need of Supervision (PINS) related preventive services.**
- 11. To authorize County Manager to execute agreement for Persons In Need of Supervision (PINS) related preventive services.**
- 12. To authorize County Manager to enter into agreement for the Provision of Professional Services for period from January 1, 2014 through December 31, 2014(Montefiore).**
- 13. To authorize County Manager to enter into agreement for the Provision of Professional Services for period from January 1, 2014 through December 31, 2014 (Schmidt).**

14. To enter into agreement for the Provision of Preventive Related Services for period from January 1, 2014 through December 31, 2014 (CACHE).
15. To authorize County Manager to enter into agreement for the provision of Preventive Related Services for period from January 1, 2014 through December 31, 2014 (Occupations, Inc.).
16. To authorize County Manager to enter into agreement for the Provision of Preventive Related Services for period from January 1, 2014 through December 31, 2014 (RSS).
17. To authorize County Manager to enter into agreement for the provision of Welfare to Work Employment Related Services from January 1, 2014 through December 31, 2014 (IMA).
18. To enter into agreement for the Provision of Welfare to Work, Employment and Employment Training related services from January 1, 2014 through December 31, 2014.
19. To authorize County Manager to enter into agreement for the provision of Welfare to Work, Employment and Training Related Services from January 1, 2014 through December 31, 2014 (CWD).
20. To authorize County Manager to enter into an agreement authorizing payment of the One-Stop Center's Rental Costs for the period from January 1, 2012 through December 31, 2013.

#### **Office for the Aging**

21. To authorize execution of 2014-2015 contract between Sullivan County Office for the Aging and Frances S. Clemente, Attorney at Law.

#### **Public Health Services Resolutions**

22. To authorize a contract with Taconic Health Information Network and Community, Inc. (THINC, Inc.)

#### **Youth Bureau – None**

#### **PRESENTATIONS:**

1. American Red Cross Proclamation
2. RSVP National Service Day of Recognition – Caryn Matthews

#### **MONTHLY REPORTS**

Adult Care Center – 23  
Community Services – 24  
Family Services – 25-33  
Office for the Aging – None  
Public Health Services – 34

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreement for the provision of Informal Child Day Care related and CCTA services.

Is subject of Resolution mandated? Explain:

Yes, 18 NY CRR Part 415 Child Care Services, 415.4 Local district responsibility.

Does Resolution require expenditure of funds? Yes  No

If "Yes", provide the following information:

Amount to be authorized by Resolution: \$ 112,050.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6055 46 4615

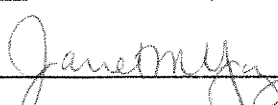
If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County \$ \_\_\_\_\_ Grant(s) \$ \_\_\_\_\_

State \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Federal Government \$ 112,050.00 (Specify) \_\_\_\_\_

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ SCCCC, Inc ] of [ Liberty, NY ]

Nature of Other Party to Contract: Local Supplier Other:

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 03/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 93,375.00

Resolutions authorizing prior contracts (Resolution #s): 234-13, 159-12

Future Renewal Options if any:

May be renewed annually to the extent contract required & funding remains available.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 NY CRR Part 415 Child Care Services, 415.4 Local district responsibility

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \$112,050

Efforts made to find Less Costly alternative:

N/A - SCCCC, Inc is the state approved CCRR provider for this region.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Not Applicable - State Vendor

Person(s) responsible for monitoring contract (Title): TA Director

Pre-Legislative Approvals:

- A. Director of Purchasing: *Larry Jones* Date *2/27/14*
- B. Management and Budget: *Janet Myers* Date *2/27/14*
- C. Law Department: *Thomas J. Gaudery* Date *3/5/14*
- D. County Manager: *John Votaw* Date *3/5/14*
- E. Commissioner: *J. R. Riser* Date *02/06/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT WITH THE SULLIVAN COUNTY CHILD CARE COUNCIL, INC FOR  
THE PROVISION OF INFORMAL CHILD DAY CARE RELATED SERVICES**

**WHEREAS**, the County of Sullivan, through the Department of Family Services is required to arrange for the provision of Informal Child Day Care related services including the provision of Child Care Time and Attendance (CCTA) services; and

**WHEREAS**, the County of Sullivan, through the Department of Family Services contracts with the Sullivan County Child Care Council, Inc for those services; and

**WHEREAS**, the Sullivan County Child Care Council, Inc is capable of and willing to provide these services at a combined cost not to exceed \$112,050 during the period from January 1, 2014 through December 31, 2014.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement with the Sullivan County Child Care Council, Inc for Informal Child Day Care related and CCTA services during the period January 1, 2014 through December 31, 2014; and

**BE IT FURTHER RESOLVED**, these contracts are at the County’s discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of these contracts not exceed the Department of Family Services budgeted amount for informal child day care related services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

To: Sullivan County Legislature

Fr: Randy J. Parker, Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize COPS-Preventive services contract. NYS OCFS funding is available for COPS-approved preventive services. DFS will contract for the provision of OCFS COPS-approved preventive services through an MOU with Sullivan County Public Health Services.

Is subject of Resolution mandated? Explain:

Yes preventive services are required per 18 NYCRR 423.

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 139,598.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6010 38 40 4001

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	<u>\$39,058.00</u>	Grant(s)	\$ _____
State	<u>\$68,540.00</u>	Other	\$ _____
Federal Government	<u>\$32,000.00</u>	(Specify)	_____

Verified by Budget Office: \_\_\_\_\_

*Janet Myg*

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ SC Public Health Services ] of [ Liberty, NY ]

Nature of Other Party to Contract: Local Supplier Other:

Duration of Contract: From 10/01/2013 To 09/30/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2008 To 12/31/2008

Amount authorized by prior contract(s): 191,000.00

Resolutions authorizing prior contracts (Resolution #s): 594-07, 79-05

Future Renewal Options if any:

As approved and funded by NYS OCFS.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

Preventive Services are required per 18 NYCRR 423. COPS programs funded through OCFS.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): 139,598

Efforts made to find Less Costly alternative:

N/A - PHS is an approved Healthy Beginnings/Healthy Families New York provider.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

N/A this is approved provider for the services in this region.

Person(s) responsible for monitoring contract (Title): Services Director



**Pre-Legislative Approvals:**

- A. Director of Purchasing: Kathy Jones Date 2/27/14
- B. Management and Budget: Janet Miley Date 2/27/14
- C. Law Department: Thomas J. Cowley Date 3/5/14
- D. County Manager: John Poter Date 3/5/14
- E. Commissioner: [Signature] Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT FOR THE PROVISION OF COMMUNITY OPTIONAL PREVENTIVE  
SERVICES (COPS) PREVENTIVE SERVICES**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, contracts for the provision of certain preventive services; and

**WHEREAS**, funding is available to purchase certain New York State Office of Children and Family Services (OCFS) approved preventive services; and

**WHEREAS**, the County of Sullivan, through the Department of Family Services, wishes to contract through Memorandum of Understanding (MOU) for the provision of OCFS approved COPS-Preventive services with Sullivan County Public Health Services; and

**WHEREAS**, the Sullivan County Public Health Services is capable and willing to provide such services at a cost not to exceed \$139,598.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute an MOU between Sullivan County Department of Family Services and Sullivan County Public Health Services at a cost not to exceed amounts approved by OCFS for the period from October 1, 2013 through September 30, 2014; and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this contract is not exceed the Department of Family Services budgeted amount for COPS-Preventive related services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 3/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreement for the provision of Domestic Violence related services.

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**Is subject of Resolution mandated? Explain:**

Yes, 18 NY CRR Part 462 Nonresidential Services for Victims of Domestic Violence.

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**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

**Amount to be authorized by Resolution:** \$ 82,800.00

**Are funds already budgeted? Yes  No**

**If "Yes" specify appropriation code(s):** A6070 46 4615

**If "No", specify proposed source of funds:** \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County	\$ <u>31,464.00</u>	Grant(s)	\$ _____
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State	\$ <u>51,336.00</u>	Other	\$ _____
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Federal Government	\$ _____	(Specify)	_____
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**Verified by Budget Office:** 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**

Request for Authority to Enter into Contract with [ CACHE ] of  
[ Liberty, NY ]

Nature of Other Party to Contract: Local Supplier Other:

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 82,800.00

Resolutions authorizing prior contracts (Resolution #s): 126-13, 514-11

Future Renewal Options if any:

May be renewed annually to the extent funding remains available.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 NY CRR Part 462 Nonresidential Services for Victims of Domestic Violence.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \$82,800

Efforts made to find Less Costly alternative:

\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

*Continuation of services req'd. To be reviewed to RFP/Quote*

Person(s) responsible for monitoring contract (Title): TA Director

Pre-Legislative Approvals:

- A. Director of Purchasing: Janet Jones Date 2/28/14
- B. Management and Budget: Janet Jones Date 2/27/2014
- C. Law Department: Thomas J. Cawley Date 3/5/14
- D. County Manager: John Paul Date 3/5/14
- E. Commissioner: J. R. [Signature] Date 2/20/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY EXECUTIVE COMMITTEE RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO AGREEMENTS FOR THE PROVISION OF DOMESTIC VIOLENCE RELATED SERVICES FOR THE PERIOD FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to provide certain domestic violence related services for Sullivan County individuals and desires to do so through purchase of service contract, and

**WHEREAS**, the Department of Family Services desires to contract with Community Action Commission to Help the Economy (CACHE) for the provision of domestic violence related services, at a cost not to exceed \$82,800 for the period from January 1, 2014 through December 31, 2014.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute agreement for the provision of domestic violence related services during the period from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of domestic violence related services contracts is not exceed the Department of Family Services budgeted amount for those services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Division of Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 3/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize DNA Testing and Reporting services agreement.

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**Is subject of Resolution mandated? Explain:**

Titles 6-A&6-B NYS SSL child support enforcement program. Articles 4,5,5-A&5-B Family Court Act & Sections 236&240 Domestic Relations Law paternity and support.

**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

**Amount to be authorized by Resolution:** \$ 7,200.00

**Are funds already budgeted? Yes  No**

**If "Yes" specify appropriation code(s):** A6010 38 47 4720

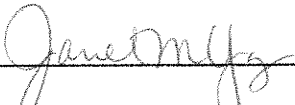
**If "No", specify proposed source of funds:** \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County	\$ <u>3,600.00</u>	Grant(s)	\$ _____
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State	\$ _____	Other	\$ _____
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Federal Government	\$ <u>3,600.00</u>	(Specify)	_____
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**Verified by Budget Office:** 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**

Request for Authority to Enter into Contract with [DNA Diagnostics Center, Inc] of [Fairfield, OH]

Nature of Other Party to Contract: .

Other: State Approved

Duration of Contract: From 04/01/2014 To 03/31/2015

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 04/01/2013 To 03/31/2014

Amount authorized by prior contract(s): 7,200.00

Resolutions authorizing prior contracts (Resolution #s): 124-13, 104-12

Future Renewal Options if any:

Renewable to the extent funding remains available and/or LDSS contract required.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

Titles 6-A&6-B NYS SSL child support enforcement program. Articles 4,5,5-A&5-B Family Court Act & Sections 236&240 Domestic Relations Law paternity and support.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \$7,200.

Efforts made to find Less Costly alternative:

N/A - state approved provider.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Contractual services req'd. Service to be reviewed to quote - JF

Person(s) responsible for monitoring contract (Title): Fraud Investigations Director



Pre-Legislative Approvals:

- A. Director of Purchasing: Lacey Jones Date 2/28/14
- B. Management and Budget: Jane Meyer Date 2/27/14
- C. Law Department: Thomas J. Cowley Date 3/5/14
- D. County Manager: John P. Stoddard Date 3/5/14
- E. Commissioner: W. Jones Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT WITH DNA DIAGNOSTICS CENTER, INC. FOR THE PROVISION OF  
GENETIC (DNA) TESTING AND REPORTING SERVICES**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is in need of genetic identity (DNA) testing and reporting to establish parentage in child support enforcement cases; and

**WHEREAS**, the Department of Family Services contracts with a state approved provider, DNA Diagnostics Center, Inc for those services; and

**WHEREAS**, DNA Diagnostics Center, Inc is capable of and willing to provide such services at prevailing rates.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to enter into agreement with DNA Diagnostics Center, Inc for the provision of DNA testing and reporting services at a cost not to exceed \$7,200 during the period from April 1, 2014 through March 31, 2015; and

**BE IT FURTHER RESOLVED**, these contracts are at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of these contracts not exceed the Department of Family Services budgeted amount for DNA testing and reporting related services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreement for the provision of professional, consumer credit reporting services.

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Is subject of Resolution mandated? Explain:

Yes, 18 NY CRR Chapter II Regs of the DSS, Subchapter B Public Assistance, Article 1 Determination of Eligibility--General & Article 2 Determination of Eligibility--Categorical

Does Resolution require expenditure of funds? Yes  No

If "Yes", provide the following information:

Amount to be authorized by Resolution: \$ 7,020.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6010 38 40 4001

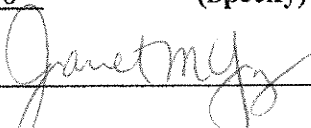
If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County \$ 1,010.00 Grant(s) \$ \_\_\_\_\_

State \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Federal Government \$ 6,010.00 (Specify) \_\_\_\_\_

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ Experian ] of  
[ Costa Mesa, CA ]

Nature of Other Party to Contract: National Vendor **Other:**

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 7,020.00

Resolutions authorizing prior contracts (Resolution #s): 145-13, 517-11

Future Renewal Options if any:

May be renewed annually to the extent funding remains available.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 NY CRR Chapter II Regs of the DSS, Subchapter B Public Assistance, Article 1  
Determination of Eligibility--General & Article 2 Determination of Eligibility--Categorical.  
Consumer credit reports is required for eligibilty determinations.

If "No" provide other justification for County to enter into this Contract: [County does not  
have resources in-house, best source of the subject materials, required by grant, etc.]:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state  
maximum potential cost): \$7,020.

Efforts made to find Less Costly alternative:

\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Not Applicable

Person(s) responsible for monitoring contract (Title): TA Director

Pre-Legislative Approvals:

- A. Director of Purchasing: Judy Jones Date 2/28/14
- B. Management and Budget: Janet Myggy Date 2/27/14
- C. Law Department: Thomas J. Cowley Date 3/5/14
- D. County Manager: John Stovall Date 3/5/14
- E. Commissioner: [Signature] Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT FOR THE PROVISION OF PROFESSIONAL SERVICES FOR PERIOD  
FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, requires the use of certain professional services; and

**WHEREAS**, the Department of Family Services needs to again contract with (Experian Information Solutions, Inc dba) Experian for consumer credit reporting services at a cost not to exceed \$7,020 for the period from January 1, 2014 through December 31, 2014.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute agreement for the provision of professional services with Experian for the period from January 1, 2014 through December 31, 2014; and

**BE IT FURTHER RESOLVED**, these contracts are at the County’s discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of these contracts not exceed the Department of Family Services budgeted amount for professional services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Division of Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize contracts with various New York State and other State or Commonwealth approved residential Foster Care providers.

Is subject of Resolution mandated? Explain:

Section 395 et seq. of Social Services Law, 18 CRR-NY Article 2 Family and Children's Services, Article 3 Child-Care Agencies Part 442, and Article 10-C of the Family Court Act.

Does Resolution require expenditure of funds? Yes  No

If "Yes", provide the following information:

Amount to be authorized by Resolution: \$ 5,708,125.00

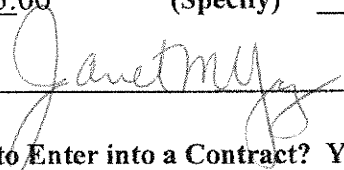
Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6119 46 4615/A6109 46 4615/A6123 46 4615

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	\$ <u>1,427,031.00</u>	Grant(s)	\$ _____
State	\$ <u>1,427,031.00</u>	Other	\$ _____
Federal Government	\$ <u>2,854,063.00</u>	(Specify)	_____

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ various ] of [ various ]

Nature of Other Party to Contract: Other: state-approved

Duration of Contract: From 07/01/2014 To 06/30/2015

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 07/01/2013 To 06/30/2014

Amount authorized by prior contract(s): 5,708,125.00

Resolutions authorizing prior contracts (Resolution #s): 179-13, 231-12

Future Renewal Options if any:

As LDSS remains required to have services available ongoing basis.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

Section 395 et seq. of Social Services Law, 18 CRR-NY Article 2 Family and Children's Services, Article 3 Child-Care Agencies Part 442, and Article 10-C of the Family Court Act.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Maximum potential cost \$5,708,125 combined.

Efforts made to find Less Costly alternative:

Procurement status reviewed.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Not Applicable

Person(s) responsible for monitoring contract (Title): Services Director



Pre-Legislative Approvals:

- A. Director of Purchasing: *Kathy Jones* Date *2/27/14*
- B. Management and Budget: *Janet Myer* Date *2/27/14*
- C. Law Department: *Thomas J. Cowley* Date *3/5/14*
- D. County Manager: *John Beal* Date *3/5/14*
- E. Commissioner: *[Signature]* Date *02/06/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO EXECUTE AGREEMENTS  
WITH NEW YORK AND OTHER STATE OR COMMONWEALTH APPROVED  
FOSTER CARE RELATED SERVICE PROVIDERS**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is mandated to make available Foster Care related services as needed for children/youth; and

**WHEREAS**, various New York State and other State or Commonwealth approved providers are capable and willing to enter into agreement to provide Foster Care services for Sullivan County children/youth at State or Commonwealth approved rates; and

**WHEREAS**, certain New York State and other State or Commonwealth approved providers are additionally capable and willing to provide New York State Office of Children and Family Services (OCFS) allowable designated program activities, including aftercare services, during the trial discharge phase to be provided to the child and family for the duration of the aftercare period when the child remains in the care and custody of a local social services official during a period of aftercare/trial discharge to be paid at a per diem rate as the need arises.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute agreements with New York State and other State or Commonwealth approved Foster Care related service providers for Sullivan County youth during the period from July 1, 2014 through June 30, 2015; and

**BE IT FURTHER RESOLVED**, these contracts are at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of these contracts not exceed the Department of Family Services budgeted amount for foster care related services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 3/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreement(s) for the provision of 111-g Legal services relative to child support services.

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**Is subject of Resolution mandated? Explain:**

Yes, Section 111-g of the New York State Social Services Law.

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**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

Amount to be authorized by Resolution: \$ 4,500.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6010 38 40 4008

If "No", specify proposed source of funds: \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County	\$ <u>1,575.00</u>	Grant(s)	\$ _____
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State	\$ <u>675.00</u>	Other	\$ _____
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Federal Government	\$ <u>2,250.00</u>	(Specify)	_____
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**Verified by Budget Office:** 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ qualified local attorneys ] of [ various, local ]

Nature of Other Party to Contract: National Vendor Other:

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 4,500.00

Resolutions authorizing prior contracts (Resolution #s): 241-13, 414-12, 511-11

Future Renewal Options if any:

May be renewed annually to the extent funding remains available.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

Section 111-g of the New York State Social Services Law. Legal services are best provided through purchase of service agreements to eliminate conflicts of interest where the Department of Family Services is approached by both parents in child support enforcement.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \$4,500.

Efforts made to find Less Costly alternative:

\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Not Applicable - legal services are exempt fr. RFP procedure *RFP procedure*  
*AF*

Person(s) responsible for monitoring contract (Title): Fraud Investigations Director

Pre-Legislative Approvals:

- A. Director of Purchasing: *Deborah Jones* Date *2/27/14*
- B. Management and Budget: *Janet Melby* Date *2/27/14*
- C. Law Department: *Thomas J. Cowley* Date *3/5/14*
- D. County Manager: *John [unclear]* Date *3/5/14*
- E. Commissioner: *J. [unclear]* Date *2/06/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENTS FOR THE PROVISION OF CHILD SUPPORT RELATED LEGAL  
SERVICES FOR PERIOD FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is mandated to provide legal services to County residents seeking child support services, and

**WHEREAS**, said legal services are best provided through purchase of service agreements to eliminate conflicts of interest where the Department of Family Services is approached by both parents in child support enforcement, and

**WHEREAS**, local attorneys are willing and able to provide said legal services as described under Section 111-g of the New York State Social Services Law, and

**WHEREAS**, the cost of said legal services shall not exceed \$4,500 collectively for the period from January 1, 2014 through December 31, 2014, and

**WHEREAS**, costs incurred in the provision of said legal services are to be reimbursed to the County of Sullivan by the client, the respondent or by federal and state funding.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute agreements for the provision of said legal services during the period from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, these contracts are at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of these legal services contracts not exceed the Department of Family Services budgeted amount for those child support related legal services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 2/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreements for the provision of various Medical Assistance (MA or Medicaid) program related services.

**Is subject of Resolution mandated? Explain:**

Yes, 18 NY CRR, Chapter II Regulations of the Department of Social Services, Subchapter E Medical Care.

**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

**Amount to be authorized by Resolution: \$** \_\_\_\_\_

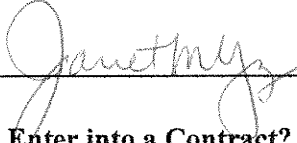
**Are funds already budgeted? Yes  No**

**If "Yes" specify appropriation code(s):** \_\_\_\_\_

**If "No", specify proposed source of funds: MMIS**

**Estimated Cost Breakdown by Source:**

County	\$ _____	Grant(s)	\$ _____
State	\$ _____	Other	\$ _____
Federal Government	\$ _____	(Specify) <u>N/A</u>	_____

**Verified by Budget Office:** \_\_\_\_\_ 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**





Pre-Legislative Approvals:

- A. Director of Purchasing: *Kathy Jones* Date *2/27/14*
- B. Management and Budget: *Janet Miller* Date *2/27/14*
- C. Law Department: *Thomas J. Cowley* Date *3/5/14*
- D. County Manager: *Julie Deibel* Date *3/5/14*
- E. Commissioner: *[Signature]* Date *02/06/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENTS FOR THE PROVISION OF VARIOUS MEDICAL ASSISTANCE  
PROGRAM RELATED SERVICES FOR PERIOD FROM JANUARY 1, 2014  
THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to arrange for the provision of various Medical Assistance (MA or Medicaid) program services for eligible Sullivan County individuals, and

**WHEREAS**, the Department of Family Services contracts with GTL Link to Life dba Critical Signal Technologies Inc for Personal Emergency Response System (PERS) services; with Any-Time Home Care, Inc; Family Empowerment Council, Inc; Family Empowerment Council, Inc; Independent Living, Inc; Mid-Hudson Managed Home Care, Inc; Wellness Home Care, Ltd; and Litson Health Care, Inc dba Willcare for personal care services, and

**WHEREAS**, payments for the aforementioned services are made at New York State approved rates.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute agreements for the provision of various Medical Assistance program services, as detailed above, for the period from January 1, 2014 through December 31, 2014; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Law Office.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize 2013 & 2014 agreements for the provision of Non-Secure Detention related services, including authorization of 2013 rate change not specifically authorized by resolutions 414-12, 145-13 and 241-13.

Is subject of Resolution mandated? Explain:

9 NYCRR Part 180 Juvenile Detention Facilities Regulations.

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ \_\_\_\_\_

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6123 46 4615

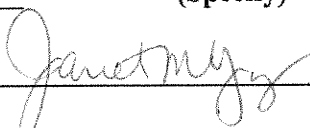
If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County \$ \_\_\_\_\_ Grant(s) \$ \_\_\_\_\_

State \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Federal Government \$ \_\_\_\_\_ (Specify) 49% state aid

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ Berkshire Farm Center ] of [ Canaan, NY ]

Nature of Other Party to Contract: Out Of County Vendor      Other:

Duration of Contract: From 01/01/2013 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2012 To 12/31/2012

Amount authorized by prior contract(s): \_\_\_\_\_

Resolutions authorizing prior contracts (Resolution #s): 516-11, 414-12, 145-13, 241-13

Future Renewal Options if any:

May need to be renewed annually.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

9 NYCRR Part 180 Juvenile Detention Facilities Regulations.

The County utilizes NSD as prescribed by and in compliance with the Family Court Act and/or the Criminal Procedures Law, and the Regulations of NYS OCFS.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \$275.05 per diem (CY 2013) \$285.05 per diem (CY 2014)

Efforts made to find Less Costly alternative:

\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

*Continuation of services is req'd. These services will be reviewed & RFP'd, if applicable/Rf.*

Person(s) responsible for monitoring contract (Title): Services Director

Pre-Legislative Approvals:

- A. Director of Purchasing: *Tracy Russ* Date *2/27/14*
- B. Management and Budget: *Janet Meyer* Date *2/27/14*
- C. Law Department: *Thomas J. Cowley* Date *3/5/14*
- D. County Manager: *John P. Wood* Date *3/5/14*
- E. Commissioner: *[Signature]* Date *02/06/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE AGREEMENTS FOR THE PROVISION OF NON-  
SECURE DETENTION RELATED SERVICES FROM JANUARY 1, 2013 THROUGH  
DECEMBER 31, 2013 AND FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to arrange the provision of non-secure detention services for Sullivan County youth and families, and

**WHEREAS**, the Department of Family Services contracts with Berkshire Farm Center and Services for Youth for Unreserved Usage, Non-Secure Detention services at annually adjusted per diem rates; and

**WHEREAS**, Berkshire Farm Center and Services for Youth Unreserved Usage, Non-Secure Detention per diem rate increased 1/1/2013 to \$275.05 and increased 1/1/2014 to \$285.05; and

**WHEREAS**, Resolution Number 516-11, adopted on 12/22/2011, authorized the 1/1/2012-12/31/2012 Berkshire Farm Center and Services for Youth Unreserved Usage, Non-Secure Detention contract at the 2012 per diem rate of \$265.05 at the County's discretion subject to annual appropriation; and

**WHEREAS**, Sullivan County contracts that lapsed 12/31/2012 were all authorized to be extended first through 3/31/2013 by Resolution Number 414-12, then further through 6/30/2013 by Resolution Number 145-13 then through 12/31/2013 by Resolution Number 241-13 and all three extending resolutions (414-12, 145-13 and 241-13) were silent as to rates and/or contract not-to-exceed amounts.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute agreements as detailed above for the provision of the above named services from January 1, 2013 through December 31, 2013 and from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, these contracts are at the County's discretion subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of the non-secure detention services contracts not exceed the Department of Family Services budgeted amount for the services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

Moved by \_\_\_\_\_,  
Seconded by \_\_\_\_\_,  
and adopted on motion \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Division of Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize PINS-Preventive related contract.

Contract allows County to offer PINS diversion services designed to provide an immediate response to families in crisis in accordance with Chapter 57 of the Laws of 2005, PINS Reform Legislation Effective April 1, 2005.

Is subject of Resolution mandated? Explain:

Chapter 57 of the Laws of 2005 applicable to PINS cases require that immediate access to crisis intervention services and respite be available.

Does Resolution require expenditure of funds? Yes  No

If "Yes", provide the following information:

Amount to be authorized by Resolution: \$ 18,000.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6070 46 4615

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County                    \$ 6,840.00                    Grant(s)                    \$ \_\_\_\_\_

State                     \$ 11,160.00                    Other                         \$ \_\_\_\_\_

Federal Government \$ \_\_\_\_\_                    (Specify) \_\_\_\_\_

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [DisputeResolutionCenterDRC] of [Goshen, NY]

Nature of Other Party to Contract: Out Of County Vendor      Other:

Duration of Contract: From 07/01/2014 To 06/30/2015

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 07/01/2013 To 06/30/2014

Amount authorized by prior contract(s): 18,000.00

Resolutions authorizing prior contracts (Resolution #s): 127-13, 206-12

Future Renewal Options if any:

PINS Reform Legislation requires LDSS to have services available ongoing basis.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

PINS Reform Legislation.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Maximum potential cost \$18,000.

Efforts made to find Less Costly alternative:

Procurement status reviewed.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Construction of Services. To be reviewed for RFP/Quote

Person(s) responsible for monitoring contract (Title): Services Director



Pre-Legislative Approvals:

- A. Director of Purchasing: Justin Jones Date 2/28/14
- B. Management and Budget: Janet Meyer Date 2/27/14
- C. Law Department: Thomas J. Cowling Date 3/5/14
- D. County Manager: John P. [unclear] Date 3/5/14
- E. Commissioner: [Signature] Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO EXECUTE AN  
AGREEMENT FOR PERSONS IN NEED OF SUPERVISION (PINS) RELATED  
PREVENTIVE SERVICES**

**WHEREAS**, the County of Sullivan is required to have available services relevant to Persons In Need of Supervision (PINS) diversion including immediate 24-hours-a-day, 7-days-a-week crisis intervention related response services to families in crisis in accordance with PINS Reform Legislation; and

**WHEREAS**, said crisis intervention services help reduce the use of more costly non-secure detention and foster care services; and

**WHEREAS**, the Department of Family Services will again enter into agreement for crisis intervention services for families of and for youth at risk of PINS; and

**WHEREAS**, one or more New York State Office of Court Administration approved agency shall provide crisis intervention services at locally negotiated rates at costs not to exceed \$18,000 for the period from July 1, 2014 through June 30, 2015 through an agreement with the Department of Family Services.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to enter into agreement for the provision of PINS Related crisis intervention services for the period from July 1, 2014 through June 30, 2015; and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this contract not exceed the Department of Family Services budgeted amount for those PINS-preventive related services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

Moved by \_\_\_\_\_,  
Seconded by \_\_\_\_\_,  
and adopted on motion \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Division of Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize PINS-Preventive related service contract.  
Contract allows County to offer PINS diversion related services designed to provide residential respite to families in crisis in accordance with Chapter 57 of the Laws of 2005, PINS Reform Legislation Effective April 1, 2005.

Is subject of Resolution mandated? Explain:

Chapter 57 of the Laws of 2005 applicable to PINS cases require that immediate access to crisis intervention services and respite be available.

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 20,000.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6070 46 4615

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County \$ 7,600.00 Grant(s) \$ \_\_\_\_\_

State \$ 12,400.00 Other \$ \_\_\_\_\_

Federal Government \$ \_\_\_\_\_ (Specify) \_\_\_\_\_

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ A Friend's House ] of  
[ Middletown, NY ]

Nature of Other Party to Contract: Out Of County Vendor Other: \_\_\_\_\_

Duration of Contract: From 07/01/2014 To 06/30/2015

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 07/01/2013 To 06/30/2014

Amount authorized by prior contract(s): 20,000.00

Resolutions authorizing prior contracts (Resolution #s): 127-13, 206-12

Future Renewal Options if any:

PINS Reform Legislation requires LDSS to have services available ongoing basis.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

PINS Reform Legislation.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Maximum potential cost \$20,000.

Efforts made to find Less Costly alternative:

Procurement status reviewed.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Continuation of services req'd. Review for possible RFP/Quote

Person(s) responsible for monitoring contract (Title): Services Director

Pre-Legislative Approvals:

- A. Director of Purchasing: Janet Jones Date 2/28/14
- B. Management and Budget: Janet Myers Date 2/27/14
- C. Law Department: Thomas J. Cowley Date 3/5/14
- D. County Manager: Dale Beck Date 3/5/14
- E. Commissioner: [Signature] Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO EXECUTE AGREEMENT  
FOR PERSONS IN NEED OF SUPERVISION (PINS) RELATED PREVENTIVE  
SERVICES**

**WHEREAS**, the County of Sullivan is required to have available services relevant to Persons In Need of Supervision (PINS) diversion including residential respite for families of youth at risk of PINS in accordance with PINS Reform Legislation; and

**WHEREAS**, said residential respite services help reduce the use of more costly non-secure detention and foster care services; and

**WHEREAS**, the Department of Family Services will again enter into agreement for residential respite services for families of and for youth at risk of PINS; and

**WHEREAS**, one or more New York State Office of Children and Family Services approved agency shall provide residential respite services at state approved and locally negotiated rates at costs not to exceed \$20,000 for the period from July 1, 2014 through June 30, 2015 through an agreement with the Department of Family Services.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to enter into agreement for the provision of PINS Related residential respite services for the period from July 1, 2014 through June 30, 2015; and

**BE IT FURTHER RESOLVED**, this contract is at the County’s discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this contract not exceed the Department of Family Services budgeted amount for those PINS-preventive related services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 3/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreements for the provision of Professional services to accomplish CPS related services.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Is subject of Resolution mandated? Explain:**

Yes, SOS. LAW § 423-a : NY Code - Section 423-A: Child advocacy centers established and NY Code - Title 6: Child Protective Services (CPS)

**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

Amount to be authorized by Resolution: \$ 17,000.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6070 46 4615

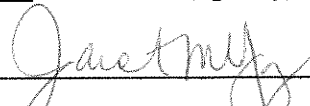
If "No", specify proposed source of funds: \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County	\$ <u>6,460.00</u>	Grant(s)	\$ _____
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State	\$ _____	Other	\$ _____
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Federal Government	\$ <u>10,540.00</u>	(Specify)	_____
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**Verified by Budget Office:** \_\_\_\_\_ 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**

Request for Authority to Enter into Contract with \_\_\_\_\_ of \_\_\_\_\_

Nature of Other Party to Contract: .

Other: Local & Out of County

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 17,000.00

Resolutions authorizing prior contracts (Resolution #s): 145-13, 516-11

Future Renewal Options if any:

May be renewed annually subject to continued funding availability.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

SOS. LAW § 423-a : NY Code - Section 423-A: Child advocacy centers established and NY Code - Title 6: Child Protective Services (CPS).

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

Requested RFP 2013 and 2014.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Combination of services req'd To be reviewed for possible RFP/RFQ

Person(s) responsible for monitoring contract (Title): Services Director



Pre-Legislative Approvals:

- A. Director of Purchasing: J. Jay Jones Date 2/28/14
- B. Management and Budget: J. M. Miller Date 2/27/14
- C. Law Department: Thomas J. Cowley Date 3/5/14
- D. County Manager: John Stone Date 3/5/14
- E. Commissioner: [Signature] Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT FOR THE PROVISION OF PROFESSIONAL SERVICES FOR PERIOD  
FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services requires certain professional services to accomplish the provision of services for Sullivan County youth and families; and

**WHEREAS**, the Department of Family Services contracts with Montefiore Medical Center for Child Sexual Abuse Assessment Related services at a cost not to exceed \$17,000.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement as detailed above for the provision of the above mentioned professional services during the period from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this professional services contract not exceed the 2014 Department of Family Services budgeted amount for those professional services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreement for the provision of Professional services.

Is subject of Resolution mandated? Explain:

Not directly, this is a professional service required to accomplish CPS related service provision.

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 4,500.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6070 46 4615

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	\$ <u>1,710.00</u>	Grant(s)	\$ _____
State	\$ <u>2,790.00</u>	Other	\$ _____
Federal Government	\$ _____	(Specify)	_____

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [MaryMay SCHMIDT, LMHC] of [Monticello, NY]

Nature of Other Party to Contract: Professional Other:

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 4,500.00

Resolutions authorizing prior contracts (Resolution #s): 145-13, 516-11

Future Renewal Options if any:

May be renewed annually subject to continued funding availability.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

This is a professional service required to accomplish CPS related service provision.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Maximum potential \$4,500.

Efforts made to find Less Costly alternative:

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Continuation of services req'd. To be reviewed to quote Rf.

Person(s) responsible for monitoring contract (Title): Services Director

Pre-Legislative Approvals:

- A. Director of Purchasing: Justin Jones Date 2/28/14
- B. Management and Budget: James Miller Date 2/27/14
- C. Law Department: Thomas Cowley Date 3/5/14
- D. County Manager: [Signature] Date 3/5/14
- E. Commissioner: [Signature] Date 2/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT FOR THE PROVISION OF PROFESSIONAL SERVICES FOR PERIOD  
FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services requires certain professional services to accomplish service provision for Sullivan County youth and families; and

**WHEREAS**, the Department of Family Services contracts with Mary May Schmidt, LMHC for therapeutic services at a cost not to exceed \$4,500.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement as detailed above for the provision of the above mentioned professional services during the period from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this professional services contract not exceed the 2014 Department of Family Services budgeted amount for those professional services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreements for the provision of Preventive related services.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is subject of Resolution mandated? Explain:

Yes, 18 NY CRR Part 423 Preventive Services Regulations.  
\_\_\_\_\_

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 100,000.00

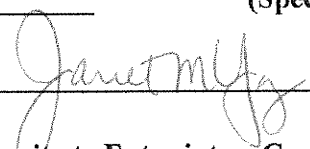
Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6070 46 4615

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	\$ <u>38,000.00</u>	Grant(s)	\$ _____
State	\$ <u>62,000.00</u>	Other	\$ _____
Federal Government	\$ _____	(Specify)	_____

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ CACHE ] of  
[ \_\_\_\_\_ ]

Nature of Other Party to Contract: .

Other: Local & Out of County

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 100,000.00

Resolutions authorizing prior contracts (Resolution #s): 145-13, 516-11

Future Renewal Options if any:

May be renewed annually subject to continued funding availability.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 NY CRR Part 423 Preventive Services Regulations.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

Requested RFP 2013 and 2014.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Continuation of services req'd. To be renewed for RFP/Rf.

Person(s) responsible for monitoring contract (Title): Services Director



Pre-Legislative Approvals:

- A. Director of Purchasing: *Nicky Jones* Date 2/28/14
- B. Management and Budget: *Janet Myers* Date 2/27/14
- C. Law Department: *Thomas J. Crowley* Date 3/5/14
- D. County Manager: *Chris Reed* Date 3/5/14
- E. Commissioner: *[Signature]* Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT FOR THE PROVISION OF PREVENTIVE RELATED SERVICES FOR  
PERIOD FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to provide certain preventive related services for Sullivan County youth and families; and

**WHEREAS**, the Department of Family Services contracts with Community Action Commission to Help the Economy (CACHE) for Family Advocacy services at a cost not to exceed \$100,000.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute agreement as detailed above for the provision of the above mentioned preventive related services during the period from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this preventive related services contract not exceed the 2014 Department of Family Services budgeted amount for said preventive related services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 3/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreements for the provision of Preventive related services.

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**Is subject of Resolution mandated? Explain:**

Yes, 18 NY CRR Part 423 Preventive Services Regulations.

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**Does Resolution require expenditure of funds? Yes  No**

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 239,000.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6070 46 4615

If "No", specify proposed source of funds: \_\_\_\_\_

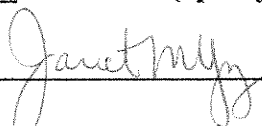
**Estimated Cost Breakdown by Source:**

County	\$ <u>90,820.00</u>	Grant(s)	\$ _____
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State	\$ <u>148,180.00</u>	Other	\$ _____
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Federal Government	\$ _____	(Specify)	_____
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**Verified by Budget Office:** \_\_\_\_\_



**Does Resolution request Authority to Enter into a Contract? Yes  No**

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [Occupations, Inc.] of  
[\_\_\_\_\_]

Nature of Other Party to Contract: -

Other: Local & Out of County

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 239,000.00

Resolutions authorizing prior contracts (Resolution #s): 145-13, 516-11

Future Renewal Options if any:

May be renewed annually subject to continued funding availability.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 NY CRR Part 423 Preventive Services Regulations.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

Requested RFP 2013 and 2014.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Continuation of services req'd to be reviewed for possible RFP

Person(s) responsible for monitoring contract (Title): Services Director

Pre-Legislative Approvals:

A. Director of Purchasing: *Jacoby Jones* Date *2/28/14*  
B. Management and Budget: *Granberry* Date *2/27/14*  
C. Law Department: *Thomas J. Cowley* Date *3/5/14*  
D. County Manager: *[Signature]* Date *3/5/14*  
E. Commissioner: *[Signature]* Date *02/06/2017*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT FOR THE PROVISION OF PREVENTIVE RELATED SERVICES FOR  
PERIOD FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to provide certain preventive related services for Sullivan County youth and families; and

**WHEREAS**, the Department of Family Services contracts with Occupations, Inc for Clinical Case Work and Community Alternatives services at a cost not to exceed \$239,000.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement as detailed above for the provision of the above mentioned preventive related services during the period from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, this contract is at the County’s discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this preventive related services contract not exceed the 2014 Department of Family Services budgeted amount for preventive related services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 3/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize agreements for the provision of Preventive related services.

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**Is subject of Resolution mandated? Explain:**

Yes, 18 NY CRR Part 423 Preventive Services Regulations.

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**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

**Amount to be authorized by Resolution:** \$ 276,000.00

**Are funds already budgeted? Yes  No**

**If "Yes" specify appropriation code(s):** A6070 46 4615

**If "No", specify proposed source of funds:** \_\_\_\_\_

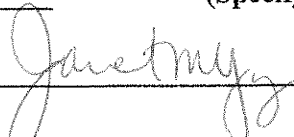
**Estimated Cost Breakdown by Source:**

County	\$ <u>104,880.00</u>	Grant(s)	\$ _____
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State	\$ <u>171,120.00</u>	Other	\$ _____
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Federal Government	\$ _____	(Specify)	_____
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**Verified by Budget Office:** \_\_\_\_\_



**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**

Request for Authority to Enter into Contract with [                     various                     ] of  
[ various ]

Nature of Other Party to Contract: .

Other: Local & Out of County

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 276,000.00

Resolutions authorizing prior contracts (Resolution #s): 145-13, 516-11

Future Renewal Options if any:

May be renewed annually subject to continued funding availability.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 NY CRR Part 423 Preventive Services Regulations.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

Requested RFP 2013 and 2014.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Continuation of services reqd. to be reviewed for RFP/RF.

Person(s) responsible for monitoring contract (Title): Services Director



Pre-Legislative Approvals:

- A. Director of Purchasing: *[Signature]* Date 2/28/14
- B. Management and Budget: *[Signature]* Date 2/27/14
- C. Law Department: *[Signature]* Date 3/5/14
- D. County Manager: *[Signature]* Date 3/5/14
- E. Commissioner: *[Signature]* Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
RESOLUTION TO AUTHORIZE COUNTY MANAGER TO ENTER INTO  
AGREEMENT FOR THE PROVISION OF PREVENTIVE RELATED SERVICES FOR  
PERIOD FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to provide certain preventive related services for Sullivan County youth and families; and

**WHEREAS**, the Department of Family Services contracts with Rehabilitation Support Services (RSS) for Multi-Systemic Therapy services at a cost not to exceed \$276,000.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute an agreement as detailed above for the provision of the above mentioned preventive related services during the period from January 1, 2014 through December 31, 2014, and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this preventive related services contract not exceed the 2014 Department of Family Services budgeted amount for those preventive related services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Division of Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize welfare-to-work, employment and employment training related services agreement.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is subject of Resolution mandated? Explain:

18 CRR-NY Part 385 Public Assistance and Food Stamp Employment Program Requirements.

Does Resolution require expenditure of funds? Yes  No

If "Yes", provide the following information:

Amount to be authorized by Resolution: \$ 5,000.00

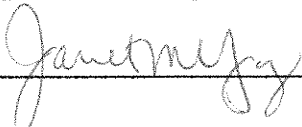
Are funds already budgeted? Yes  No  40--

If "Yes" specify appropriation code(s): A6010 38 4017

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	\$ _____	Grant(s)	\$ _____
State	\$ _____	Other	\$ _____
Federal Government	\$ <u>5,000.00</u>	(Specify)	_____

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [Industrial Medicine Associates] of [various-Tarrytown, Middletown and Albany NY]

Nature of Other Party to Contract: Local Supplier Other:

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 5,000.00

Resolutions authorizing prior contracts (Resolution #s): 127-13, 206-12

Future Renewal Options if any:

Renewable to the extent funding available and/or as re-negotiated and/or RFPed.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 CRR-NY Part 385 Public Assistance and Food Stamp Employment Program Requirements.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Maximum potential cost \$5,000.

Efforts made to find Less Costly alternative:

Procurement status reviewed.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Not Applicable This is a p.c. (annual) [signature]

Person(s) responsible for monitoring contract (Title): TA Director

Pre-Legislative Approvals:

- A. Director of Purchasing: *Tracy Jones* Date *2/28/14*
- B. Management and Budget: *Jane Myer* Date *2/27/14*
- C. Law Department: *Thomas J. Cowley* Date *3/5/14*
- D. County Manager: *Libby* Date *3/5/14*
- E. Commissioner: *[Signature]* Date *02/06/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
TO AUTHORIZE COUNTY MANAGER TO ENTER INTO AGREEMENT FOR THE  
PROVISION OF WELFARE TO WORK, EMPLOYMENT RELATED SERVICES  
FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to provide for various welfare-to-work, employment related services, and

**WHEREAS**, the Department will again contract with Industrial Medicine Associates, PC (IMA) for medical examination and reporting services, at a cost not to exceed \$5,000 for the period from January 1, 2014 through December 31, 2014.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute the above listed agreement for the provision of welfare-to-work, employment related services during the period from January 1, 2014 through December 31, 2014; and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this contract not exceed the Department of Family Services budgeted amount for welfare-to-work, employment related services; and

**BE IT FURTHER RESOLVED**, that the form of said contract will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Division of Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize welfare-to-work, employment and employment training related transportation service agreement(s).

Is subject of Resolution mandated? Explain:

18 CRR-NY Part 385 Public Assistance and Food Stamp Employment Program Requirements.

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 300,000.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6109 46 4615/A6140 46 4615

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	\$ <u>106,500.00</u>	Grant(s)	\$ _____
State	\$ <u>43,500.00</u>	Other	\$ _____
Federal Government	\$ <u>150,000.00</u>	(Specify)	_____

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ one or more qualified ] of [ various ]

Nature of Other Party to Contract: Local Supplier Other:

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013

Amount authorized by prior contract(s): 300,000.00

Resolutions authorizing prior contracts (Resolution #s): 127-13, 206-12

Future Renewal Options if any:

Renewable to the extent funding available and/or as re-negotiated and/or RFPed.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

18 CRR-NY Part 385 Public Assistance and Food Stamp Employment Program Requirements.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Maximum potential cost \$300,000.

Efforts made to find Less Costly alternative:

Procurement status reviewed.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)  
RFP - X

Person(s) responsible for monitoring contract (Title): TA Director



Pre-Legislative Approvals:

- A. Director of Purchasing: *[Signature]* Date 2/28/14
- B. Management and Budget: *[Signature]* Date 2/27/14
- C. Law Department: *[Signature]* Date 3/5/14
- D. County Manager: *[Signature]* Date 3/5/14
- E. Commissioner: *[Signature]* Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
TO AUTHORIZE COUNTY MANAGER TO ENTER INTO AGREEMENT FOR THE  
PROVISION OF WELFARE TO WORK, EMPLOYMENT AND EMPLOYMENT  
TRAINING RELATED SERVICES FROM JANUARY 1, 2014 THROUGH DECEMBER  
31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to provide for various welfare-to-work, employment and employment training related services, and

**WHEREAS**, the Department will again contract with Rolling V Bus Corporation for WTW Related Transportation services, at a total cost not-to-exceed \$ 300,000 for the period from January 1, 2014 through December 31, 2014.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute the above listed agreement with Rolling V Bus Corporation for the provision of welfare-to-work, employment and employment training related transportation services during the period from January 1, 2014 through December 31, 2014; and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of this contract not exceed the Department of Family Services budgeted amount for welfare-to-work, employment and employment training related transportation services; and

**BE IT FURTHER RESOLVED**, that the form of said contract(s) will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Randy J. Parker, Division of Health and Family Services Commissioner

**Re:** Request for Consideration of a Resolution:

**Date:** 3/6/2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize welfare-to-work, employment and employment training related services agreements.

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**Is subject of Resolution mandated? Explain:**

18 CRR-NY Part 385 Public Assistance and Food Stamp Employment Program Requirements.

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**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

Amount to be authorized by Resolution: \$ 345,661.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A6010 38 40 4001/A6010 52 R4610 R228

If "No", specify proposed source of funds: \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County                    \$ 117,525.00                    Grant(s)                    \$ \_\_\_\_\_

State                     \$ \_\_\_\_\_                    Other                         \$ \_\_\_\_\_

Federal Government \$ 228,136.00                    (Specify) \_\_\_\_\_

**Verified by Budget Office:** 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**

Request for Authority to Enter into Contract with [ various ] of [ various ]

Nature of Other Party to Contract: Local Supplier Other:

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes X No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2013 To 12/31/2013
Amount authorized by prior contract(s): 345,661.00
Resolutions authorizing prior contracts (Resolution #s): 127-13, 206-12

Future Renewal Options if any:

Renewable to the extent funding available and/or as re-negotiated and/or RFPed.

Is Subject of Contract - i.e. - the goods and/or services Mandated? Yes X No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:
18 CRR-NY Part 385 Public Assistance and Food Stamp Employment Program Requirements.

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Maximum potential cost \$345,661

Efforts made to find Less Costly alternative:

Procurement status reviewed.

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Continuation of services req'd to be reviewed for possible RFP/RF

Person(s) responsible for monitoring contract (Title): TA Director

Pre-Legislative Approvals:

- A. Director of Purchasing: *Lydia Jones* Date *2/28/14*  
B. Management and Budget: *Janet Miller* Date *2/27/14*  
C. Law Department: *Thomas Cowley* Date *3/5/14*  
D. County Manager: *[Signature]* Date *3/5/14*  
E. Commissioner: *[Signature]* Date *02/25/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE TO AUTHORIZE COUNTY MANAGER TO ENTER INTO AGREEMENT FOR THE PROVISION OF WELFARE TO WORK, EMPLOYMENT AND TRAINING RELATED SERVICES FROM JANUARY 1, 2014 THROUGH DECEMBER 31, 2014**

**WHEREAS**, the County of Sullivan, through the Department of Family Services, is required to provide for various welfare-to-work, employment and employment training related services, and

**WHEREAS**, the Department will again contract with the Sullivan County Center for Workforce Development (CWD) for WTW Employment and Training (E&T) related services at a total cost not to exceed \$345,661.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute the above listed agreement for the provision of welfare-to-work, employment and employment training related services during the period from January 1, 2014 through December 31, 2014; and

**BE IT FURTHER RESOLVED**, these contracts are at the County’s discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, the maximum of these contracts not exceed the Department of Family Services budgeted amount for welfare-to-work, employment and employment training related services; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Randy J. Parker, Division of Health and Family Services Commissioner

Re: Request for Consideration of a Resolution:

Date: 3/6/2014

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize payment of rent for One Stop Center

Is subject of Resolution mandated? Explain:

Does Resolution require expenditure of funds? Yes  No

If "Yes", provide the following information:

Amount to be authorized by Resolution: \$ 45,220.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): \_\_\_\_\_

If "No", specify proposed source of funds: A6010 38 40 4001/A6010 52 R4610R228

Estimated Cost Breakdown by Source:

County	\$ <u>15,375.00</u>	Grant(s)	\$ _____
State	\$ _____	Other	\$ _____
Federal Government	\$ <u>29,845.00</u>	(Specify)	_____

Verified by Budget Office: Janet M. [Signature]

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ various ] of  
[ various ]

Nature of Other Party to Contract: Local Supplier Other:

Duration of Contract: From 01/01/2012 To 12/31/2013

Is this a renewal of a prior Contract? Yes \_\_\_ No

If "Yes" provide the following information:

Dates of prior contract(s): From \_\_\_\_\_ To \_\_\_\_\_

Amount authorized by prior contract(s): \_\_\_\_\_

Resolutions authorizing prior contracts (Resolution #s): \_\_\_\_\_

Future Renewal Options if any:

Renewable to the extent funding available and/or as re-negotiated and/or RFPed.

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes \_\_\_ No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Not Applicable - lease

Person(s) responsible for monitoring contract (Title): TA Director



Pre-Legislative Approvals:

- A. Director of Purchasing: *[Signature]* Date 2/29/14
- B. Management and Budget: *[Signature]* Date 3/27/14
- C. Law Department: *[Signature]* Date 3/5/14
- D. County Manager: *[Signature]* Date 3/5/14
- E. Commissioner: *[Signature]* Date 02/24/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE  
TO AUTHORIZE COUNTY MANAGER TO ENTER INTO AN AGREEMENT  
AUTHORIZING PAYMENT OF THE ONE-STOP CENTER'S RENTAL COSTS FOR  
THE PERIOD FROM JANUARY 1, 2012 THROUGH DECEMBER 31, 2013**

**WHEREAS**, the Department of Family Services, through Memorandum of Agreement (MOA), contracts with the Center for Workforce Development (CWD) for the provision of employment related services; and

**WHEREAS**, a portion of those employment related client services are accomplished at the Sullivan One-Stop Center where CWD pays rent; and

**WHEREAS**, CWD charges DFS for Welfare-to-Work (WTW) Employment and Training operational cost under the DFS with CWD Welfare-to-Work (WTW) MOA; and

**WHEREAS**, CWD's charge to DFS for the One-Stop rent in 2012 in excess of the 2012 WTW E&T MOA not-to-exceed (NTE) amount is \$22,054 and One-Stop rent in 2013 in excess of the 2013 WTW E&T MOA not-to-exceed (NTE) amount is \$23,166.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute a separate MOA agreement to allow CWD to bill DFS for rental costs in excess of the welfare-to-work employment and training MOA not-to-exceed amount as required during the period from January 1, 2012 through December 31, 2013; and

**BE IT FURTHER RESOLVED**, this contract is at the County's discretion, subject to annual appropriation; and

**BE IT FURTHER RESOLVED**, that the form of said contracts will be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2014.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature  
Fr: Deborah E. Allen, Director, Office for the Aging  
Re: Request for Consideration of a Resolution:  
Date: 1/23/14

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]  
Authorize County Manager to execution of 2014-2015 contract between Sullivan County Office for the Aging and Francis S. Clemente, Attorney at Law for mandated legal services for senior citizens as required by the New York State Office for the Aging, for the Title IIIB grant for legal services.

Is subject of Resolution mandated? Explain:  
Yes, Mandated/Budgeted.

Does Resolution require expenditure of funds? Yes  No   
If "Yes", provide the following information:  
Amount to be authorized by Resolution: \$ 15,808.00 7,904 Budgeted 2014  
Are funds already budgeted? Yes  No  7,904 to be Budgeted in 2015  
If "Yes" specify appropriation code(s): A7610-87-40-4008  
If "No", specify proposed source of funds: \_\_\_\_\_  
Estimated Cost Breakdown by Source:  
County                    \$ 1,580.00                    Grant(s)                    \$ 0.00  
State                     \$ 0.00                         Other                         \$ 0.00  
Federal Government \$ 14,228.00                    (Specify) funds for 2 year contract

Verified by Budget Office: *Janet Myz*

Does Resolution request Authority to Enter into a Contract? Yes  No   
If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with Francis S. Clemente of  
[Attorney at Law \_\_\_\_\_]

Nature of Other Party to Contract: Professional \_\_\_\_\_ Other: Consultant \_\_\_\_\_

Duration of Contract: From 01/01/2014 To 12/31/2015

Is this a renewal of a prior Contract? Yes  No \_\_\_\_\_

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2012 To 12/31/2013

Amount authorized by prior contract(s): 7,904.00

Resolutions authorizing prior contracts (Resolution #s): 67-12 and 392-12

Future Renewal Options if any:

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No \_\_\_\_\_

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

New York State Office for the Aging for the Title IIIB grant provision of mandated  
Legal services for senior citizens.

If "No" provide other justification for County to enter into this Contract: [County does not  
have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state  
maximum potential cost): \$15,808.00 for 2 year period (\$7,904.00 per year)

Efforts made to find Less Costly alternative:

N/A

Efforts made to share costs with another agency or governmental entity:

N/A

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

N/A - legal services are exempt from procurement, etc.

Person(s) responsible for monitoring contract (Title): Deborah E. Allen, Director/OFA

**Pre-Legislative Approvals:**

- A. Director of Purchasing: *James Jones* Date *2/28/14*
- B. Management and Budget: *Janet Myers* Date *2/27/14*
- C. Law Department: *Thomas J. Cowley* Date *3/5/14*
- D. County Manager: *John [unclear]* Date *3/5/14*
- E. Commissioner: *[unclear]* Date *02/06/2014*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**Resolution No.**

**RESOLUTION INTRODUCED BY HEALTH AND FAMILY SERVICES COMMITTEE**

**RESOLUTION TO AUTHORIZE EXECUTION OF 2014-2015 CONTRACT BETWEEN SULLIVAN COUNTY OFFICE FOR THE AGING AND FRANCES S. CLEMENTE, ATTORNEY AT LAW.**

**WHEREAS**, the County of Sullivan, through the Office for the Aging, provides mandated Legal Services for senior citizens in Sullivan County, and

**WHEREAS**, Frances S. Clemente, Attorney at Law can provide Legal Services.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature does hereby authorize the County Manager to execute a contract with Frances S. Clemente, Attorney at Law for provision of mandated legal services for senior citizens as required by the New York State Office for the Aging, for the Title IIIB grant not to exceed \$7,904.00 for the period of 01/01/2014-12/31/2014 of which \$7,114.00 is received from Title IIB Federal funds and \$790.00 from County funds, and not to exceed \$7904.00 for the period of 01/01/2015-12/31/2015 of which \$7,114.00 is received from Title IIB Federal funds and \$790.00 from County funds for a total of \$15,808.00 for 01/01/2014-12/31/2015 of which \$14,228.00 is received from Title IIB federal funds and \$1,580.00 from County funds; and

**BE IT FURTHER RESOLVED**, that the form of such agreement be approved by the Sullivan County Department of Law.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, **2014.**

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Nancy McGraw, Public Health Director

**Re:** Request for Consideration of a Resolution: To authorize a contract with Taconic Health Information Network & Community Inc. (THINC)

**Date:** February 3, 2014

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

This resolution will allow Public Health Services to obtain health information regarding communicable diseases.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Is subject of Resolution mandated? Explain:**

N/A

\_\_\_\_\_

\_\_\_\_\_

**Does Resolution require expenditure of funds? Yes \_\_\_ No**

**If "Yes, provide the following information:**

Amount to be authorized by Resolution: \$ \_\_\_\_\_

Are funds already budgeted? Yes \_\_\_ No \_\_\_

If "Yes" specify appropriation code(s): \_\_\_\_\_

If "No", specify proposed source of funds: \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County \$ \_\_\_\_\_ Grant(s) \$ \_\_\_\_\_

State \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Federal Government \$ \_\_\_\_\_ (Specify) \_\_\_\_\_

**Verified by Budget Office:** Janet McGraw

**Does Resolution request Authority to Enter into a Contract? Yes  No \_\_\_**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**

Request for Authority to Enter into Contract with [ Taconic Health Information ] of [ Information Network & Community Inc. (Susan S. Stuard CEO) ]

Nature of Other Party to Contract: Not-For-Profit Corporation Other: \_\_\_\_\_

Duration of Contract: From 01/01/2014 To 12/31/2014

Is this a renewal of a prior Contract? Yes \_\_\_ No

If "Yes" provide the following information:

Dates of prior contract(s): From \_\_\_\_\_ To \_\_\_\_\_

Amount authorized by prior contract(s): \_\_\_\_\_

Resolutions authorizing prior contracts (Resolution #s): \_\_\_\_\_

Future Renewal Options if any:

Annual renewals

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes \_\_\_ No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

To obtain health data regarding communicable diseases

\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): N/A

Efforts made to find Less Costly alternative:

N/A

\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

N/A

\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

This service does not have a cost. Not Applicable, etc.

Person(s) responsible for monitoring contract (Title): Nancy McGraw, Public Health Director



Pre-Legislative Approvals:

- A. Director of Purchasing: *[Signature]* Date 2/28/14
- B. Management and Budget: *[Signature]* Date 2/27/14
- C. Law Department: *[Signature]* Date 3/5/14
- D. County Manager: *[Signature]* Date \_\_\_\_\_
- E. Commissioner: *[Signature]* Date 02/06/2014

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**RESOLUTION NO.            INTRODUCED BY HEALTH AND FAMILY SERVICES  
COMMITTEE TO AUTHORIZE A CONTRACT WITH TACONIC HEALTH  
INFORMATION NETWORK AND COMMUNITY, INC. (THINC, Inc.)**

**WHEREAS**, the County of Sullivan, wishes to contract with Taconic Health Information Network and Community, Inc. (THINC, Inc.) to share and exchange health data with THINC, Inc. and the State Network (SHIN-NY) ; and

**WHEREAS**, THINC is a New York State not-for-profit corporation that sponsors a clinical information data exchange (the “CDE”) that facilitates the exchange of health information among health care providers and other health-related entities in the Hudson River Valley region of New York State; and

**WHEREAS**, The New York eHealth Collaborative (“NYeC”) has been designated by New York State as responsible for managing and operating a private, statewide health information network, known as the Statewide Health Information Network of New York (“SHIN-NY”), which is intended to transform the largely paper-based medical records system into a statewide, electronic, interconnected system; and

**WHEREAS**, Sullivan County Public Health Services is the local public health authority that wishes to utilize the CDE and ultimately, provided that that THINC enters into the NYeC Agreement, the SHIN-NY Platform in order to access private health information to improve communicable disease surveillance and timeliness of data sharing with local health providers as authorized and required by public health law; and

**WHEREAS**, the contract will be in accordance with applicable health information technology standards and specification; and

**WHEREAS**, the information will include but not be limited to patient demographics, clinical data interface for the continuity of care document (CCD); and

**WHEREAS**, the contract shall be an annual contract, renewable by written notice annually; and

**NOW, THEREFORE, BE IT RESOLVED**, the Sullivan County Legislature authorizes the County Manager to contract with THINC, Inc. to share and exchange the data electronically.

**BE IT FURTHER RESOLVED**, the form of said contract shall be approved by the Sullivan County Attorney’s Office.



SULLIVAN COUNTY DEPARTMENT OF  
COMMUNITY SERVICES  
STATISTICAL SUMMARY FOR: JAN 1, 2014 - JAN 31, 2014

PROGRAM	CLIENTS ON ROLLS:			CLIENTS ON ROLL:		
	1/1/2014	ADMISSIONS	DISCHARGES	1/31/2014	CLIENTS SERVED	UNITS OF SERVICE
***SULLIVAN COUNTY MENTAL HEALTH CLINIC	416	38	33	421	454	1,085
***CHILDREN'S UNIT	45	12	11	46	57	138
TREATMENT REACHING YOUTH (SCHOOL-BASED)	99	14	9	104	113	270
FORENSIC UNIT	31	21	12	40	52	100
DOMESTIC VIOLENCE INTERVENTION & TREATMENT	-	-	-	-	-	14
<b>TOTAL MENTAL HEALTH</b>	<b>591</b>	<b>85</b>	<b>65</b>	<b>611</b>	<b>676</b>	<b>1,587</b>
CONTINUING DAY TREATMENT	45	2	45	2	47	1,588
ADULT CASE MANAGEMENT	55	4	-	59	52	231
BLENDED ICM/SCM (ADULT)	53	3	5	51	46	46
INTENSIVE CASE MANAGEMENT (KENDRA LAW)	18	1	-	19	19	19
INTENSIVE CASE MANAGEMENT (ADULT) SHARED	37	6	-	43	43	43
BLENDED ICM/SCM (CHILD)	21	2	1	22	12	47
CHEMICAL DEPENDENCY CLINIC	383	15	29	369	398	456
CHEM DEP: FORENSIC	-	-	-	-	48	58
WAITING LIST-SPOA Adult	-	-	-	-	-	-
WAITING LIST-SPOA Child	-	-	-	-	-	-
<b>TOTAL TREATMENT PROGRAMS</b>	<b>612</b>	<b>33</b>	<b>80</b>	<b>565</b>	<b>665</b>	<b>2,488</b>
TRANSPORTION (CDT)	-	-	-	-	-	278
RCPC-MICHELE EHERTS	12	-	1	11	12	49
RPC-KATHY RYAN	12	1	1	12	12	12
	# of calls	#of ph interv	Outreaches	Hosp Ref	Admits	
MOBILE MENTAL HEALTH	378	167	32	8	4	
CM CIS	12	9	2	1	1	

SULLIVAN COUNTY DEPARTMENT OF  
COMMUNITY SERVICES  
STATISTICAL SUMMARY FOR: JAN 1, 2013 TO JAN 31, 2013

PROGRAM	CLIENTS ON ROLLS:			CLIENTS ON ROLL:		
	1/1/2013	ADMISSIONS	DISCHARGES	1/31/2013	CLIENTS SERVED	UNITS OF SERVICE
***SULLIVAN COUNTY MENTAL HEALTH CLINIC	443	27	53	417	470	941
***CHILDREN'S UNIT	44	6	3	47	50	158
TREATMENT REACHING YOUTH (SCHOOL-BASED)	104	16	3	117	120	272
FORENSIC UNIT	20	14	14	20	34	97
DOMESTIC VIOLENCE INTERVENTION & TREATMENT	-	-	-	-	-	22
<b>TOTAL MENTAL HEALTH</b>	<b>611</b>	<b>63</b>	<b>73</b>	<b>601</b>	<b>674</b>	<b>1,490</b>
CONTINUING DAY TREATMENT	57	5	5	57	62	2,580
ADULT CASE MANAGEMENT	60	1	-	61	56	220
BLENDED ICM/SCM (ADULT)	29	4	2	31	31	31
INTENSIVE CASE MANAGEMENT (KENDRA LAW)	9	1	-	10	10	10
INTENSIVE CASE MANAGEMENT (ADULT) SHARED	21	3	-	24	18	18
BLENDED ICM/SCM (CHILD)	25	1	8	18	16	18
CHEMICAL DEPENDENCY CLINIC	334	40	22	352	374	520
CHEM DEP: FORENSIC	-	-	-	-	39	90
WAITING LIST-SPOA Adult	-	-	-	3	-	-
WAITING LIST-SPOA Child	-	-	-	1	-	-
<b>TOTAL TREATMENT PROGRAMS</b>	<b>535</b>	<b>55</b>	<b>37</b>	<b>557</b>	<b>606</b>	<b>3,485</b>
TRANSPORTATION (CDT)	57	5	5	57	62	444
RCPC-MICHELLE EHERTS	12	-	-	12	12	48
RPC-KATHY RYAN	12	1	1	12	12	12
	# of calls	#of ph interv	Outreaches	Hosp Ref	Admits	
MOBILE MENTAL HEALTH	321	150	53	15	13	
CM CIS	19	17	2	-	-	



**COUNTY OF SULLIVAN**  
**Division of Health and Family Services**  
**SULLIVAN COUNTY HUMAN SERVICES COMPLEX**  
COMMUNITY LANE  
PO BOX 231  
Liberty, NY 12754

Division of Health and Family Services Office of Contracts Compliance  
Monthly Report – January 2014

Sullivan County DHFS Office of Contract Compliance Monthly Report	
<b>JANUARY 2014</b>	<b>DFS</b>
Total number of formal agreements in effect at the end of last month:	79
Total number of agreements which expired/were terminated at the end of last month:	29
Total number of agreements renewed, extended or re-initiated this month:	29
Total number of new agreements which were initiated this month:	0
Total number of agreements in effect at the end of this month:	79
Number of RFA/RFP/Proposals coordinated this month:	2
Number of intra-county arrangements coordinated this month:	1
Number of new agreements, addenda and/or modifications developed this month:	3
Performance and outcomes measures developed, identified and/or evaluated:	0
Reports received from on-site monitoring visits and/or follow-ups performed:	0
Reports received from state oversight contract providers:	0
Reports received from self-report contract providers:	6
Reports received by in-house end user/s:	0
Trend analyses of need indicators performed:	2
Total contract related technical assistances/supports provided:	21
Total number of program areas/types of service currently handling:	11
Total number of contracts currently managing:	79
<b>Notes:</b>	
Additional and/or non-contract related technical assistances/supports provided:	1
DFS agreements not previously included in count were added December 2013 forward:	7
Other than DHFS agency technical assistances/supports provided:	

SULLIVAN COUNTY DEPARTMENT OF FAMILY SERVICES

CASELOADS

MONTH	PA TANF			PA SAFETY NET			NPA FS			MA			MA/SSI			FHP		
	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014
JANUARY	508	555	438	472	440	363	4535	4668	5850	5220	6105	6675	2610	2693	2702	923	1115	1074
FEBRUARY	572	557		453	443		5109	5717		5579	6104		2655	2708		1074	1100	
MARCH	568	533		457	440		5160	5796		5616	6234		2963	2704		1067	1095	
APRIL	571	523		456	455		5187	5817		5710	6336		2683	2701		1071	1099	
MAY	582	509		473	439		5170	5808		5760	6351		2692	2710		1073	1098	
JUNE	571	500		466	433		5214	5719		5799	6379		2694	2713		1087	1111	
JULY	547	494		453	413		5221	5716		5789	6455		2713	2731		1089	1092	
AUGUST	532	470		416	396		5371	5715		5896	6517		2723	2730		1090	1100	
SEPTEMBER	529	462		434	379		5410	5689		5892	6538		2714	2730		1085	1077	
OCTOBER	547	463		432	371		5462	5672		5934	6582		2699	2714		1085	1085	
NOVEMBER	563	459		445	387		5499	5675		6010	6565		2705	2702		1095	1076	
DECEMBER	562	446		441	368		5571	5786		6014	6580		2705	2692		1109	1089	
AVERAGE	554	498	438	450	414	363	5242	5648	5850	5768	6396	6675	2713	2711	2702	1071	1095	1074
	7%	-10%		0%	-8%		12%	8%		7%	11%		3%	0%		7%	2%	

SULLIVAN COUNTY DEPARTMENT OF FAMILY SERVICES

CHILD SUPPORT UNIT	2013 YTD	2014 YTD	2014 JAN
SUPPORT COLLECTIONS	9340224	668248	668248
TOTAL NON-DFS	8720501	624602	624602
TOTAL DFS	619723	43646	43646
TANF	829248	24989	24989
NON-TANF	255487	18657	18657
TOTAL PETITIONS FILED	324	23	23
# PATERNITIES ESTABLISHED	242	9	9
# OPEN CASES	5488	-21	5487

ADULT SERVICES UNIT	2013 YTD	2014 YTD	2014 JAN
<b>PERSONAL CARE AIDES</b>			
CASES OPENED	75	10	10
CASES CLOSED	58	5	5
# CASES (AVG)	167.5833333	177	177
<b>ETHQP</b>			
CASES OPENED	19	3	3
CASES CLOSED	42	5	5
# CASES (AVG)	73.1666667	63	63
<b>PERS</b>			
CASES OPENED	18	2	2
CASES CLOSED	28	5	5
# CASES (AVG)	68.25	62	62
<b>PSA REFERRALS</b>			
SELF NEGLECT	59	10	10
NEGLECT BY CARE GIVER	10	2	2
PHYSICAL	4	0	0
VERBAL/EMOTIONAL	5	0	0
FINANCIAL	37	6	6
SEXUAL	0	0	0
MENTAL ILL	92	13	13
DRUG/ALCOHOL	1	0	0
DEMENTIA	3	0	0
POOR HOUSING CONDITIONS	42	8	8
EVICTIION/HOMELESS	35	12	12
<b>PSA</b>			
CASES OPENED	221	23	23
CASES CLOSED	260	28	28
# CASES (AVG)	139.9166667	167	167
<b>GUARDIANSHIPS</b>			
OPEN	126	13	13

CHILDREN SERVICES UNIT	2013 YTD	2014 YTD	2014 JAN
<b>CHILD PROTECTIVE SERVICES</b>			
# OF NEW REPORTS	1595	156	156
# OF INDICATED REPORTS	287	23	23
PHYSICAL ABUSE	13	0	0
EMOTIONAL ABUSE	1	1	1
SEXUAL ABUSE	6	0	0
NEGLECT	131	11	11
DOMESTIC VIOLENCE	22	1	1
EDUCATIONAL NEGLECT	51	1	1
# OF UNFOUNDED REPORTS	855	73	73
# OF COURT ORDERED 1034 INVESTIGATIONS	37	3	3
<b>FOSTER CARE</b>			
AVG. MONTHLY CASELOAD (TRADITIONAL)	70.25	77	77
AVG. MONTHLY CASELOAD (RESIDENTIAL)	13.6666667	14	14
<b>PREVENTIVE</b>			
AVG. MONTHLY CASELOAD	99.9166667	147	147
<b>SPECIAL INVESTIGATIONS UNIT</b>			
<b>FRAUD COMPLAINTS AND INVESTIGATIONS</b>			
# REFERRALS RECEIVED	3814	380	380
# COMPLAINTS DISMISSED	803	88	88
# ASSIGNED FOR INVESTIGATION	3012	292	292
# CASES COMPLETED	2806	294	294
# CASES: YEAR END	823	827	827
<b>FRONT END DETECTIONS (FEDS) (INCLUDES EVR)</b>			
# CASES REFERRED	2401	234	234
# CASES SUBSTANTIATED	2391	252	252
# CASES UNSUBSTANTIATED	0	0	0
COST AVOIDANCE	1797446	\$ 2,304,732	\$ 2,304,732
<b>RESOURCES UNIT (RECOVERIES)</b>			
ACCIDENT LIENS	140138	\$37,300	\$37,300
PROPERTY LIENS	130444	\$0	\$0
ESTATE CLAIMS	105848	\$0	\$0
INSURANCE, MORTGAGES	300	\$0	\$0
RECOUPMENTS	101896	\$6,810	\$6,810
RESTITUTION	33664	\$8,671	\$8,671
RESOURCE UNIT TOTAL	512290	\$52,761	\$52,761
<b>BURIALS</b>			
# REQUESTED	141	11	11
# APPROVED	91	7	7
COSTS	241556	\$19,600	\$19,600

# Division of Health and Family Services

January 2014 Monthly Report

**RANDY J. PARKER, COMMISSIONER**

March 6, 2014



# Division of Health and Family Services

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## January 2014 Monthly Report

### Adult Care Center:

#### HEAL Grant

A status report was sent to NYS DOH regarding the work that has been completed as per their site visit in January.

The Executive Leadership of the Family Council has been kept informed of the renovation project. Letters to families and residents will be forthcoming once there is an opening date for the renovated lobby and Rehabilitation Unit.

A ribbon cutting ceremony is being planned to celebrate the re-opening of the first floor's Dementia Unit, Rehabilitation Unit and Lobby.

#### Dementia Training

Staff training on working with residents with dementia, in a sensitive and person centered approach, has begun. The training covers the following topics: defining dementia, impact of dementia on how people function, ways to help those with dementia, communication challenges, non-verbal strategies, ways to improve verbal communication, ways dementia impacts behavior, and how to understand/reduce/eliminate behaviors.

#### Feasibility Study

The requested information has been submitted.

#### Finance Administrative Officer

The new Finance Administrative Officer has started.

### Community Services:

#### Ongoing Operations:

Our overall operations were performed slightly better than last year's pace. The chemical dependency outpatient treatment clinic's productivity was slightly down compared to last year (see statistics attached). The Department served 1176 Sullivan County residents In January.

The transition of the Day Treatment program to a Personal Recovery Oriented Services (PROS) program continued with the last of the trainings for staff, as well as, orientation with RSS was completed. The facility was inspected and given approval. The contract between the County and RSS Inc. was fully executed. The PROS program is scheduled to take place as of 2/3/14.

#### Local Government Units Activities:

The Department worked with the State Office of Alcoholism and Substance Abuse Services to preserve over \$248,000 in funding for prevention activities to continue to come to Sullivan County instead of being put into a State-wide bid process. Doing so assures that these resources will remain here and allow DCS and our planning partners to develop a local RFP for prevention services/activities of Sullivan County residents.



The Department met with the Sullivan County Veteran's Office to begin an effort to develop a veteran's outreach center/program to support vet's who are coming home and may be having adjustment issues at home or in the workplace.

The Department's Behavioral Health Planning committee met and reviewed the local services plan as to progress toward many goals for behavioral health needs/services but in particular the stated goals of enhance peer support services; supported housing and suicide prevention activities. Taskforces for both peer support development and suicide prevention have been named and will be seeking grant monies where available.

The Department attended a regional Office of Persons w/ Developmental Disabilities provider meeting to see where the Stat is on the re-organization of care under a managed care, disaster recovery protocols for residents of 12 or more people and day habilitation services.

Other regular activities performed were: the meeting of the internal corporate compliance committee reviewing internal operations, Legislative committee actions, New York State Conference of Local Mental Hygiene Executive and Directors Committee Meetings and Regional Health Home Steering Committee meeting.

## Family Services:

### Contracts

Workload - In January 2014 this office had seventy 79 active DFS agreements in place of all types. The total of 79 active agreements includes 11 agreements of various formats required by state agencies.

- 9 with a range of providers (DOH required state model facilitated enrollment protocols with 3 providers, DOH required state model MOU for MA Outreach with 4 providers, DOH required MOU delineating LDSS, DDSO & DOH responsibilities in regard to adult protective services, DOH required state model provider referral agreements with 2 comprehensive Medicaid case management (CMCM) providers, and
- 2 with state agencies (OCFS for child protective service and child welfare services related funded portable information technology and OTDA for use of Imaging/Enterprise Document Repository (I/EDR))

The remaining 53 agreements are for the provision of service across the areas of Child Care (3), Child Support (2), Domestic Violence/Family Violence related (1), Supplemental Nutrition Assistance Program (SNAP fka Food Stamps) related (2), institutional Foster Care (18), Homeless/Housing related (1), Medicaid/Medical Assistance program related (12), Preventive services related (5), Non-Secure Detention (NSD) services related (1), Professional services (5), and Welfare-to-Work related (3).

Major Issues - In January 2014 this office completed 2 separate cost trend reviews of foster care payments reports from fiscal unit (both reports on 2013/2014 contract payments) resulting in initiation of 3 contract modifications, initiated internal review listing for changes to and renewals of DFS contracts relative to the county 2014 budget cycle and correlating resolutions/cover memoranda.

State Reports - In January 2014 this office received courtesy copies of the November 2013 domestic violence program related state reports filed by DFS domestic violence program related services contractor, CACHE with the OCFS Domestic Violence Unit.

Corporate Compliance - In January 2014 this office ran exclusions lists at System for Awards Management (SAM), the US Department of Health and Human Services Office of the Inspector General, and NYS Office

of the Medicaid Inspector General and compared those against active DFS contractors and DFS staff names with the monthly results published to DFS shared access drives.

### Fraud Investigations

Special Investigations: As of 1/1/14 the Special Investigations Unit had 829 Active Investigations. During the month 380 total Fraud Referrals were received resulting in 292 investigations assigned to the Unit and 88 were dismissed. The Fraud Investigators completed 294 investigations. As of 1/31/14 the end of the month total was 827 active investigations.

The unit received 234 referrals for Front End Detection and Eligibility Verification Review investigations. The unit closed 252 FEDS/EVR investigations resulting in a \$2,304,732 Monthly Cost Avoidance.

The unit collected \$37,300 for Accident Liens, \$6,810 for Recoupments, and \$8,671 for Restitution, a total of \$52,781 in Resource and Collection Recovery.

The Unit received 11 requests for indigent burials resulting in 7 burials being approved, a \$19,600 total indigent burial costs.

Child Support Enforcement: The Child Support Enforcement Unit Collections for the month of January 2014 are \$668,248. The total TANF collections are \$24,989 and the total DFS NON-TANF collections are \$18,657. The DFS total amount collected is \$43,646.

There were 23 petitions filed in the month of January 2014 and 9 Paternity Establishments (including acknowledgements). The total CSEU cases open as of January 2014 are 5,467.

### Services

#### Foster Care/Adoption

As of January, 2014 there are 91 children in foster care. 22 of the total number are in residential centers or group home settings. 13 of the total number are freed for adoption. There is on-going activity to reduce the number of children in foster care through discharge to a parent or other appropriate resource, discharge to independent living or adult custodial care as well as adoption.

#### Child Protective Services

The CPS unit received 156 new reports alleging child abuse and/or maltreatment January, 2014. 24 of these reports were assigned to the FVRT.

#### Preventive

The preventive unit has 99 open cases at the end of January, 2014. During January there were 30 new referrals. The unit also has 48 active referrals that are receiving assessments and/or short term services.

#### Adult Services

The adult services unit has 167 open PSA cases at the end of January, 2014. Of the 167, 80 are representative payee cases and 13 guardianships. Personal care aide services are provided to cases. There are 63 long term cases and 62 PERS (personal emergency response) cases.

## Temporary Assistance (TA)

### Temporary Assistance (TA) Monthly Report:

As of 1/31/14, the breakdown of Temporary Assistance active cases was as follows:

- 438 PA TANF cases (Public Assistance, Temporary Aid to Needy families)
- 363 PA SN cases ( Public Assistance, Safety Net)
- 5850 NPA FS (Non- Public Assistance, Food Stamp)
- 3074 HEAP cases (Home Energy Assistance Program)

### Medical Assistance (MA) Monthly Report:

As of 1/31/14, the breakdown of Medical Assistance active cases was as follows:

- 6675 MA cases (Medical Assistance)
- 2702 MA/ SSI cases ( Medical Assistance/ Supplemental Security Income)
- 1074 FHP cases (Family Health Plus)

### Department Goals:

- Create a vendor verification policy. Policy was drafted and is ready for use. Staff will be trained on new procedures and forms.
- Continue to provide training for staff on topics, such as timely processing of cases, state regulations, interviewing techniques, budgeting, etc. Training has been held on the Cash Management System (CAMS), which addressed the need to verify if there are current payment agreements or repayments outstanding and whether they are active and current.
- Caseloads in MA/TA have been reorganized to address shortage of staff in keys areas. We have identified reports that will be helpful in scheduling work to increase efficiency and timeliness.
- Data entry of applications has been improved. Additional changes have been made to improve the timeliness of data entry and application processing.
- Continue to work cooperatively with all units in the division to identify necessary improvements and implement changes to increase productivity.

### Reports and Plan updates:

- Biennial Employment Plan- working with OTDA on recommended changes.
- Child and Family Services Plan for the DFS and Youth Bureau- revising and finalizing the report
- The Child Care Quarterly audit was completed and submitted on time.

### Contract monitoring:

- Review of contracted homeless case management services to evaluate services required with reduced number of homeless cases.

Review of contracted employment services to include changes made to the Biennial Employment Plan.

## Office for the Aging:

- EISEP Services (non-Medical/non-Medicaid Homecare) - 787 hours of Personal Care Assistance provided to 21 participants.
- Home Delivered Meals-4,221 meals provided to 201 participants.
- Congregate Meals-1825 meals provided to 199 participants.
- Medical Transportation-106 medical trips provided to 53 individuals.
- Shopping bus-95 clients provided transportation for shopping on a weekly basis.
- Emergency Medical Alerts provided to 35 clients.

## Public Health:

The Public Health Director continued to work with members of the Rural Health Network on the following community outreach and planning initiatives:

- Prescription Drug abuse prevention and awareness – met with Superintendents
- Installed a new Drop Box at the Liberty Police Department (first one was installed in Fallsburg PD)
- Trained smoking cessation counselors to conduct classes for the public
- Have reached out to various organizations to promote worksite wellness with incentives to improve employee health

Communicable Disease staff investigated several dog bites that involved unvaccinated animals. Treatment is very expensive. We are planning to do more public education and awareness as we move into spring and summer months.

Caseload in CHHA continues to be high; nursing positions need to be filled due to staffing issues and a request to fill at least one vacancy will be forthcoming next month.

Fiscal Administrator is working on state aid application and fourth quarter claim.

Corporate Compliance activities – checked monthly with no findings

Contracts- having an additional attorney in the county attorney's office has helped our department tremendously to get contracts reviewed in a more timely manner. We continue to work on renewals with the Purchasing Department and plan to make contract modifications in March.

#### **Youth Bureau:**

##### Activities in basic program areas

The Youth Bureau funded and provided technical assistance to 25 youth programs in 2013 and those 25 funded programs served 8,639 youth. In 2013, the Youth Bureau funded and assisted in the planning and developing of two new youth programs; the OLWEUS Bullying Prevention program and the Nesin Children's Community Chorus.

##### State reports submitted

2013 Program Annual Assessments for all OCFS funded programs were submitted to the State on February 3, 2014.

The annual Child and Family Services Plan Update is due to the State by February 28, 2014. The Youth Bureau's portion of this plan has been completed.

##### Contract/program monitoring and compliance

In addition to reviewing program reports and claims, I maintained phone and e-mail contact with funded program personnel. Programs are in compliance as to their program activities and OCFS procedures.

##### Major issues in the department

None at present.

# Sullivan County Public Health Services

## Monthly Report: January 2014

### HOME HEALTH CARE:

#### Certified Home Health Agency

# of new patients: 105  
# of discharges: 101  
# of home visits made (includes HHA visits) 1462

#### Maternal Child Health Program

# of referrals: 32  
# of visits made: 81

#### Car Seat Program and Cribs for Kids Program

# of car seat installations: 9  
# of car seat checks: 0  
# of cribs and education sessions: 2

#### Communicable Disease Program

# of communicable diseases reported: 107  
# of STDs reported: 24  
# of Rabies-related incidents: 13  
# Rabies Clinics: 0  
# of animals receiving rabies vaccines: 0  
# people receiving post exposure prophylaxis  
for rabies exposure: 0  
# of HIV Testing: 2

### WOMEN, INFANTS & CHILDREN (WIC) PROGRAM:

# of WIC participants served: 2324 (Women: 429 Infants: 418 Children: 969)

### CHILDREN WITH SPECIAL HEALTH CARE NEEDS (CSHCN) PROGRAM:

#### Early Intervention Program

# of children in program: 147

#### Physically Handicapped Children's Program

# of children on PHCP: 2  
# of children in CSHCN program: 3

#### Long Term Home Health Care Program

# of skilled nursing home visits made: 173  
# of total patients on program: 70  
# of other home visits made: 1389  
# of Personal Emergency Response System: 52

#### Healthy Families of Sullivan Program

# of families on program: 74  
# of home visits made: 188  
# of referrals: 47

#### Immunizations

# of immunizations given: 63  
# of flu clinics: 0

#### Lead Poisoning Prevention Program

# children screened: 96  
# children with elevated Blood Lead Levels: 2  
# homes requiring NYSDOH inspection: 1

#### Bilingual Outreach Worker

# visits made: 30  
# of outreach: 25  
Attended all immunization clinics for 1/8/14

### DEPARTMENT HIGHLIGHTS:

On January 10, 2014 the New York State Department of Health's Bureau of Early Intervention informed the Sullivan County Early Intervention Program that the County is due \$222,802 in reimbursement for Early Intervention claims for the period of January 2005 through March 2010. This payment is anticipated to be received in late February or early March. With the Preschool Special Education Program's Medicaid payment for \$246,309 this brings the total revenue received by the Early Care Program to \$469,111 in just three months