



PERSONNEL COMMITTEE

September 7, 2017 – 12:00 P.M.

Personnel Committee Members

**Nadia Rajs, Chair
Scott Samuelson, Vice Chair
Alan Sorensen
Ira Steingart
Catherine Owens**

AGENDA

DEPARTMENTS:

1. Personnel
2. Risk Management and Insurance

DISCUSSION: None

RESOLUTIONS:

1. To confirm a temporary Sullivan County Adult Care Center Onsite Supervising Administrator.
2. To upgrade an Account Clerk/Database to a Senior Account Clerk/Database within the Department of Family Services.
3. To upgrade the title of a Family Services Investigator Trainee to a Family Services Investigator position in the Department of Family Services.

PUBLIC COMMENT:

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

To: Sullivan County Legislature

Fr: Joeseph A. Todora, Commissioner DHFS

Re: Request for Consideration of a Resolution: To create confirm the appointment of a Supervisory Administrator to the ACC

Date:

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.]

To create and confirm the appointment of Shennoy Wellington to Supervisory Administrator from 5/27/2017 to 8/12/2017 at an hourly rate of \$80.255

Is subject of Resolution mandated? Explain:

Yes, the NYS Department of Health requires continuous administrator coverage at the Adult Care Center

Does Resolution require expenditure of funds? Yes No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 3,900.00

Are funds already budgeted? Yes No

If "Yes" specify appropriation code(s): E6020-81-10-1011/8201-200

If "No", specify proposed source of funds: _____

Estimated Cost Breakdown by Source:

| | | | |
|--------------------|----------|-----------|----------|
| County | \$ _____ | Grant(s) | \$ _____ |
| State | \$ _____ | 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 [_____] of
[_____]

Nature of Other Party to Contract: .

Other:

Duration of Contract: From _____ To _____

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:

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.)

Person(s) responsible for monitoring contract (Title): _____

Pre-Legislative Approvals:

A. Director of Purchasing: Ampson Lewis Date 9/11/17

B. Management and Budget: Janet Myg Date 9/6/17

C. Law Department: [Signature] Date 9/5/17

D. County Manager: [Signature] Date 9/6/17

E. Commissioner: [Signature] Date 9/11/17

9/1/15

Vetted in _____ Committee on _____

**RESOLUTION NO. INTRODUCED BY THE PERSONNEL COMMITTEE TO UPGRADE AN
ACCOUNT CLERK/DATABASE TO A SENIOR ACCOUNT CLERK/DATABASE WITHIN THE
DEPARTMENT OF FAMILY SERVICES**

WHEREAS, the Accounting Unit of the Department of Family Services (DFS) is responsible for all duties related to the financial operation of DFS; and

WHEREAS, a job reclassification form was filed to upgrade Budget Position #2693 from Account Clerk/Database to Senior Account Clerk/Database; and

WHEREAS, the Personnel Director has determined that the Account Clerk/Database is working out of title and recommends that the position be upgraded to Senior Account Clerk/Database; and

NOW, THEREFORE, BE IT RESOLVED, that Account Clerk/Database, Budget Position #2693, be upgraded to the title of Senior Account Clerk/Database in the Department of Family Services; and

BE IT FURTHER RESOLVED, the salary for this position be retroactive to August 10, 2017.

Moved by _____,

Seconded by _____,

And adopted on motion _____, 2017.

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

To: Sullivan County Legislature

Fr: Joseph A. Todora, Commissioner

Re: Request for Consideration of a Resolution: Upgrade an Account Clerk/Database to Senior Account Clerk/Database

Date: 9/7/2017

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.]

The Director of Personnel has determined that the Account Clerk/Database is working out of title and recommends that the position be upgraded to Senior Account Clerk/Database.

Is subject of Resolution mandated? Explain:

No

Does Resolution require expenditure of funds? Yes No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 4,019.00

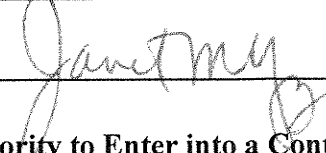
Are funds already budgeted? Yes No

If "Yes" specify appropriation code(s): 6010-50-10-1011/8001/8005/8006

If "No", specify proposed source of funds: Amount authorized is for the upgrade.

Estimated Cost Breakdown by Source:

| | | | |
|--------------------|--------------------|-----------|----------|
| County | \$ <u>1,045.00</u> | Grant(s) | \$ _____ |
| State | \$ <u>1,005.00</u> | Other | \$ _____ |
| Federal Government | \$ <u>1,969.00</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 [_____] of [_____]

Nature of Other Party to Contract: .

Other:

Duration of Contract: From _____ To _____

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:

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.)

Person(s) responsible for monitoring contract (Title): _____

Pre-Legislative Approvals:

- A. Director of Purchasing: Amyson Lewis Date 8/15/17
 - B. Management and Budget: Janit Myers Date 8/15/17
 - C. Law Department: [Signature] Date 8/15/17
 - D. County Manager: [Signature] Date 9/6/17
 - E. Commissioner: [Signature] Date 8/15/17
- [Signature] 8/31/17

Vetted in _____ Committee on _____

**RESOLUTION NO. INTRODUCED BY THE PERSONNEL COMMITTEE TO UPGRADE THE
TITLE OF A FAMILY SERVICES INVESTIGATOR TRAINEE TO A FAMILY SERVICES INVESTIGATOR
POSITION IN THE DEPARTMENT OF FAMILY SERVICES**

WHEREAS, the Special Investigations Unit of the Department of Family Services provides investigations into public assistance cases and investigates potential fraud; and

WHEREAS, there is a need for a Family Services Investigators in the Special Investigations Unit and in some cases Family Services Investigator Trainees are appointed; and

WHEREAS, when a Family Services Investigator Trainee has been in the position for one year and has successfully completed the training required to become a Family Services Investigator, the position needs to be upgraded; and

NOW, THEREFORE, BE IT RESOLVED, that Family Services Investigator Trainee, Budget Position #2242, will be upgraded to the title of Family Services Investigator in the Special Investigations Unit of the Department of Family Services; and

BE IT FURTHER RESOLVED, this will be retroactive to May 23, 2017.

Moved by _____,

Seconded by _____,

And adopted on motion _____, 2017.

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

To: Sullivan County Legislature

Fr: Joseph A. Todora, Commissioner DHFS

Re: Request for Consideration of a Resolution: Upgrade title of FS Investigator Trainee to FS Investigator

Date:

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.]

Employee completed the one year of training for the Family Services Investigator. The budget position needs to be upgraded from Trainee to Investigator.

Is subject of Resolution mandated? Explain:

No.

Does Resolution require expenditure of funds? Yes No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 2,500.00

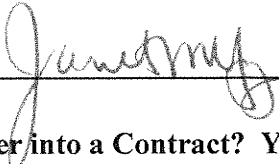
Are funds already budgeted? Yes No

If "Yes" specify appropriation code(s): 6010-55-10-1011 - Covered by vacancies

If "No", specify proposed source of funds: Amount is for upgrade

Estimated Cost Breakdown by Source:

| | | | |
|--------------------|--------------------|-----------|----------|
| County | \$ <u>800.00</u> | Grant(s) | \$ _____ |
| State | \$ _____ | Other | \$ _____ |
| Federal Government | \$ <u>1,700.00</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 [_____] of
[_____]

Nature of Other Party to Contract: .

Other:

Duration of Contract: From _____ To _____

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:

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.)

Person(s) responsible for monitoring contract (Title): _____

Pre-Legislative Approvals:

A. Director of Purchasing: Amson Lewis Date 9/1/17

B. Management and Budget: Ch Janitmyz Date 9/6/17

C. Law Department: [Signature] Date 9/5/17

D. County Manager: [Signature] Date 9/6/17

E. Commissioner: [Signature] Date 8/7/17

8/31/17

Vetted in _____ Committee on _____