

# SOCIAL SERVICES COMMITTEE

May 28, 2010

## AGENDA

### **Motion to accept minutes of previous meeting (4/23/10)**

1. Overtime Report.
2. Budget status report.
3. Program Statistics.
4. I would like to acknowledge Kyle Graves as the First Team Player of the Month for Social Services for going above and beyond her normal duties at the Department.
5. We received a letter of appreciation from the State for our work in meeting the State and Federal Work Participation Rate requirements. As a result of counties efforts the State will not have any federal fiscal penalties.
6. Request a resolution for permission to renew the agreement between Warren County Department of Social Services and Cornell Cooperative Extension for the operation of the Food Stamp Nutrition Education Program from October 1, 2010 through September 30, 2011.
7. Mayor Diamond is asking the County to consider adopting a policy to prohibit where homeless recipients can be placed. Open discussion.
8. Request permission to send:
  - a. Julie Pearl to attend the 14<sup>th</sup> Annual Aging Conference in Albany from 6/8 – 6/9/10.
  - b. Tammy Breen and Maureen Schmidt to attend The Logic to Contracting with Parenting Programs at Lake Placid from 7/13 – 7/14/10.
  - c. Suzanne Wheeler, Glenn Trackey and Lisa Zulaf to Rochester, NY to attend NYWFIA 27<sup>th</sup> Annual Training Seminar from 6/6 – 6/9/10.
  - d. The following staff to NYPWA: Suzanne Wheeler, Sheila Weaver, Lillian Hayes, Kathy Baker, Harold B. McGee, Anthony Jordan, Kelly Barker, Julianna Pearl, Jamie Brochu, Patti Martin and Diane Coughlin in Saratoga Springs from July 19<sup>th</sup> – 21st, 2010.
  - e. Harold B. McGee to attend NYSBA Advanced Document Drafting for the Elder Law Practitioner at 11 Cornell Road, Latham NY on June 11, 2010.

## ***RESOLUTION REQUEST FORM NO. 4***

### ***Request for Extending, Rescinding or Amending Existing Contract***

**DEPARTMENT NAME: Social Services**

**DATE: May 7, 2010**

- (a) Purpose of Contract Change: To Extend for another year
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 458 of 2006, 252 of 2008
- (c) Name of Contractor: Cornell Cooperative Extension
- (d) Address of Contractor: 377 Schroon River Road, Warrensburg, NY 12885
- (e) Contractor's Contact Person and Telephone Number: James Seeley 623-3291
- (f) Commencement Date of Extension: October 1, 2010
- (g) Termination Date of Extension: September 30, 2011
- (h) Payment Provisions:
  - i) lump sum amount
  - ii) hourly rate amount
  - iii) total amount not to exceed \$108,000
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (i) Where are the Funds for this Contract? List Budget Code, (with title), Object Code (with title), and Amount: **OR** Capital Project **OR** Capital Reserve Project Number, and Title, and Amount: A.6010

## ***RESOLUTION REQUEST FORM NO. 5***

### ***Request to Apply for a Grant Application and Grant Agreement***

**DEPARTMENT NAME: Social Services**

**DATE: May 26, 2010**

- (a) Purpose of Grant: To obtain housing and supportive services for sex offenders
- (b) Name of Grantor: NYSOTDA - Bureau of Contract Management
- (c) Address of Contractor: 40 North Pearl Street, 13 - B, Albany, NY 12243
- (d) Grantor's Contact Person and Telephone Number: John W. Printup (518) 486-6352
- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach? Yes it will be
- (f) Effective Date of Grant: September 2010
- (g) Termination Date of Grant: To be determined
- (h) Total Dollar Amount Involved (not to exceed): A minimum of \$100,000, a maximum of \$7 Million.
- (i) Deadline to Submit Grant Application and/or Grant Agreement: August 2010
- (j) Is a Budget amendment required? No If yes, also complete and submit Form No. 7.
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? No If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
- (i) Is a Local Share Required? No If Yes, Where are the Funds? List Budget Code (with title), Object Code (with title), and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

# RESOLUTION REQUEST FORM NO. 12

Schedule "A"

## NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an existing funded position in their budget that is vacated due to a retirement, resignation or termination. This notice may not be used for requests to create a new position. For complete instructions on the procedure to be followed, see the reverse of this form.

### DEPARTMENT HEAD COMPLETES THIS SECTION

Department Social Services

Title of Position Social Welfare Examiner

Base salary \$29,710

Budget code and title A. 6010 40.00

This position is vacated due to:  Retirement  Resignation  Termination

Employee No. 11539

### COMMISSIONER OF ADMINISTRATIVE & FISCAL SERVICES COMPLETES THIS SECTION

Name of Committee *Social Services* Date *5/28/10*

The Commissioner has no objection to the filling of the vacancy.

The Commissioner objects to the filling of the vacancy.

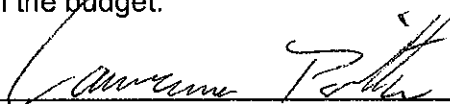
Commissioner Signature \_\_\_\_\_

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee *Social Services* Date *5/28/10*

The committee has no objection to the filling of the vacancy.

The committee objects to the filling of the vacancy and will be sending a resolution to the full board to have the position removed from the budget.

Ranking Committee Member Signature  \_\_\_\_\_

### PERSONNEL COMMITTEE COMPLETES THIS SECTION

Date

The Personnel Committee has no objection to the filling of the vacancy.

The Personnel Committee objects to the filling of the vacancy and will be sending a resolution to the full board to have the position removed from the budget.

Ranking Committee Member Signature \_\_\_\_\_

**SCHEDULE "A"**  
**AUTHORIZATION TO ATTEND MEETING OR CONVENTION**

**Check one:**

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Social Services Committee hereby authorizes Harold B. McGee  
(Supervisory Committee) (Employee Name)

to attend NYSBA Advanced Document Drafting for the Elder Law Practitioner  
(Name of meeting or organization)

at NYS Nurse's Association, 11 Cornell Rd., Latham, NY

(Address)

on 6/11/10 Mode of transportation to be used N/A  
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is not a county vehicle or mass transportation, please explain: Per the discretion of the Commissioner

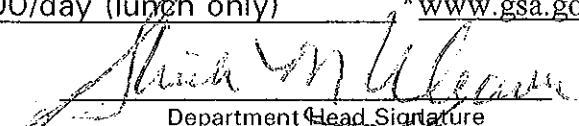
**Proper documentation must be attached when submitting for approval.**  
(Please check documents attached)

- Notice of meeting or convention including cost.

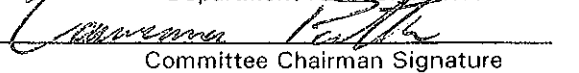
**For Overnight Travel**

- Room rate \$ \_\_\_\_\_ GSA \* Rate \$ \_\_\_\_\_
- Meal costs - GSA \*per diem rate \$ \$15.00/day (lunch only) \*[www.gsa.gov](http://www.gsa.gov)

Date: 5/25/10

  
Department Head Signature

Date: \_\_\_\_\_

  
Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

\*\*\*\*\*

Please check to request a fleet vehicle.

**REQUEST FOR USE OF FLEET VEHICLE**

\*\*\*\*\*

**Filing Instructions:**

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, if required.
5. Copy to Commissioner of Administrative and Fiscal Services if credit card will be used.

**SCHEDULE "A"**  
**AUTHORIZATION TO ATTEND MEETING OR CONVENTION**

**Check one:**

- In-State (needs Supervisory Committee authorization)  
 Out-Of State (needs Board resolution)

The Social Services Committee hereby authorizes Sheila Weaver, Suzanne Wheeler, Lillian Hayes, Kathy Baker, Harold B. McGee, Anthony Jordan, Kelly Barker, Julianna Pearl, Jamie Brochu, Patti Martin, Diane Coughlin  
(Supervisory Committee) (Employee Name)

to attend NYPWA Summer Conference  
(Name of meeting or organization)

at The Saratoga Hilton, Saratoga Springs, NY  
(Address)

on 7/19-7/21/10 Mode of transportation to be used N/A  
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is not a county vehicle or mass transportation, please explain: Per the discretion of the Commissioner

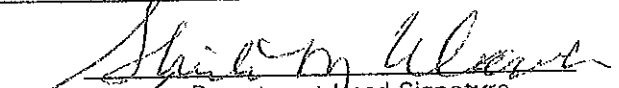
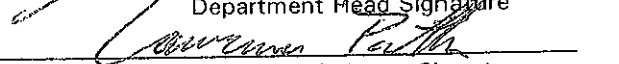
**Proper documentation must be attached when submitting for approval.**  
(Please check documents attached)

- Notice of meeting or convention including cost.

**For Overnight Travel**

- Room rate \$ \_\_\_\_\_ GSA \* Rate \$ \_\_\_\_\_  
 Meal costs - GSA \*per diem rate \$ \$13.00/day (lunch only) \* [www.gsa.gov](http://www.gsa.gov)

Date: 5/22/10

  
Department Head Signature  
  
Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

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**SCHEDULE "A"**  
**AUTHORIZATION TO ATTEND MEETING OR CONVENTION**

**Check one:**

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Social Services Committee hereby authorizes Suzanne Wheeler, Lisa Zulauf, Glenn Trackey  
(Supervisory Committee) (Employee Name)

to attend NYWFIA 27<sup>th</sup> Annual Training Seminar  
(Name of meeting or organization)

at Hyatt Regency Rochester 125 East Main St., Rochester, NY  
(Address)

on 6/6-6/9/10. Mode of transportation to be used N/A  
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is not a county vehicle or mass transportation, please explain: Per the discretion of the Commissioner

**Proper documentation must be attached when submitting for approval.**  
(Please check documents attached)

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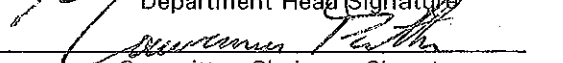
**For Overnight Travel**

- Room rate \$ \$169.00 GSA \* Rate \$ \_\_\_\_\_
- Meal costs - GSA \*per diem rate \$ 43.00/per day (lunch and dinner)

\* [www.gsa.gov](http://www.gsa.gov)

Date: 5/12/10

Date: \_\_\_\_\_

  
\_\_\_\_\_  
Department Head Signature  
  
\_\_\_\_\_  
Committee Chairman Signature

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**SCHEDULE "A"**  
**AUTHORIZATION TO ATTEND MEETING OR CONVENTION**

**Check one:**

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Social Services Committee hereby authorizes Tammy Breen, Maureen Schmidt  
(Supervisory Committee) (Employee Name)

to attend The Logic to Contracting with Parenting Programs  
(Name of meeting or organization)

at High Peaks Resort, 1 Mirror Lake Dr., Lake Placid, NY  
(Address)

on 7/13-7/14/10 Mode of transportation to be used N/A  
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is **not** a county vehicle or mass transportation, please explain: Per the discretion of the Commissioner

**Proper documentation must be attached when submitting for approval.**  
(Please check documents attached)

- Notice of meeting or convention including cost.

**For Overnight Travel**

- Room rate \$ \$51.00 GSA\* Rate \$ \_\_\_\_\_
- Meal costs - GSA \*per diem rate \$ 15.00/per day (lunch only) \*[www.gsa.gov](http://www.gsa.gov)

Date: 5/10/10

  
Department Head Signature  
  
Committee Chairman Signature

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**SCHEDULE "A"**  
**AUTHORIZATION TO ATTEND MEETING OR CONVENTION**

**Check one:**

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Social Services Committee hereby authorizes Julianna Pearl  
(Supervisory Committee) (Employee Name)

to attend 14<sup>th</sup> Annual Aging Concerns Unite Us Conference  
(Name of meeting or organization)

at The Desmond Hotel, Albany, NY  
(Address)

on 6/8-6/9/10 Mode of transportation to be used N/A  
(Dates) (County Vehicle or Mass Transportation)

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**Proper documentation must be attached when submitting for approval.**

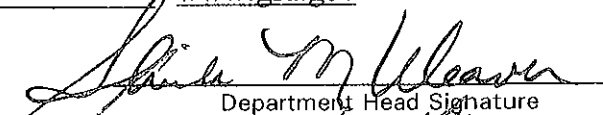
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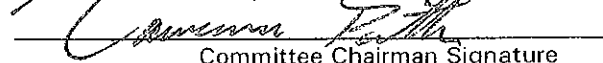
**For Overnight Travel**

Room rate \$ \_\_\_\_\_ GSA\* Rate \$ \_\_\_\_\_  
 Meal costs - GSA \*per diem rate \$ \_\_\_\_\_ \*[www.gsa.gov](http://www.gsa.gov)

Date: 4/29/10

  
Department Head Signature

Date: \_\_\_\_\_

  
Committee Chairman Signature

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# Budget Performance Report

From Date: 1/1/2010 To Date: 5/26/2010

Account Number	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/Rec'd	Prior Year Total
Fund: A General Revenue									
Department 6010 Social Services									
1801 Repay of Medical Assist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14,243.00	(\$14,243.00)	+++	\$0.00
1809 Repay of Aid to A.D.C.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
1810 Administration	\$40,000.00	\$0.00	\$40,000.00	\$7,174.25	\$0.00	\$12,728.48	\$27,271.52	32%	\$0.00
1811 Medical Incentive Earning	\$55,000.00	\$0.00	\$55,000.00	\$4,526.00	\$0.00	\$18,447.03	\$36,552.97	34%	\$0.00
1819 Repay of Child Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
1823 Repay of Juv Delinq Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
1829 Repay of State Train Sch	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$241.51	(\$241.51)	+++	\$0.00
1840 Repay of Home Relief	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
1842 Repay Emer Aid for Adults	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
1855 Repayments of Day Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
1870 Repay Soc. Srv Recipients	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
2701 Refund of Prior Year Expense	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,118.20	(\$1,118.20)	+++	\$0.00
3601 Medical Assistance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3606 Special Needs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3609 Aid for Family Assistance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3610 Social Services Admin	\$1,422,478.00	\$0.00	\$1,422,478.00	\$0.00	\$0.00	\$385,037.00	\$1,037,441.00	27%	\$0.00
3616 Local Administration Fund	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$18,830.00)	\$18,830.00	+++	\$0.00
3619 Child Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3640 Home Relief	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3642 Emergency Aid for Adults	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3661 Family & Child Srv Block	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
4601 Medical Assistance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
4609 Aid for Dependent Children	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
4610 Social Services Admin	\$4,528,269.00	\$0.00	\$4,528,269.00	\$0.00	\$0.00	\$946,505.00	\$3,581,764.00	21%	\$0.00
4615 Flexible Fund for Family Service	\$1,825,974.00	\$0.00	\$1,825,974.00	\$0.00	\$0.00	\$0.00	\$1,825,974.00	0%	\$0.00
4619 Foster Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
4623 Juvenile Independent Live	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
4640 Home Relief	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
4661 Soc. Serv - Title IV-B Funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
4689 Performance Award/Soc Srv	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00

# Budget Performance Report

From Date: 1/1/2010 To Date:5/26/2010

Account Number	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year Total
Department 6100 Medical totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
Department 6101 Medical Assistance									
1801 Repay of Medical Assist	\$400,000.00	\$0.00	\$400,000.00	\$24,264.18	\$0.00	\$141,461.39	\$258,538.61	35%	\$0.00
3601 Medical Assistance	\$125,000.00	\$0.00	\$125,000.00	\$0.00	\$0.00	\$0.00	\$125,000.00	0%	\$0.00
4601 Medical Assistance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
Department: 6101 Medical Assistance totals:	\$525,000.00	\$0.00	\$525,000.00	\$24,264.18	\$0.00	\$141,461.39	\$383,538.61	27%	\$0.00
Department: 6102 MMIS - Local Share									
2772 Intergovernmental Transfers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3602 M.M.I.S.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
Department: 6102 MMIS - Local Share totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
Department: 6106 Special Needs									
3606 Special Needs	\$970.00	\$0.00	\$970.00	\$0.00	\$0.00	\$0.00	\$970.00	0%	\$0.00
Department: 6106 Special Needs totals:	\$970.00	\$0.00	\$970.00	\$0.00	\$0.00	\$0.00	\$970.00	0%	\$0.00
Department: 6109 Aid To Dependent Children									
1809 Repay of Aid to A.D.C.	\$250,000.00	\$0.00	\$250,000.00	\$34,763.65	\$0.00	\$104,806.39	\$145,193.61	42%	\$0.00
3609 Aid for Family Assistance	\$688,694.00	\$0.00	\$688,694.00	\$0.00	\$0.00	\$55,360.00	\$633,334.00	8%	\$0.00
4609 Aid for Dependent Children	\$1,377,388.00	\$0.00	\$1,377,388.00	\$0.00	\$0.00	\$102,417.00	\$1,274,971.00	7%	\$0.00
Department: 6109 Aid To Dependent Children totals:	\$2,316,082.00	\$0.00	\$2,316,082.00	\$34,763.65	\$0.00	\$262,583.39	\$2,053,498.61	11%	\$0.00
Department: 6119 Child Care									
1819 Repay of Child Care	\$183,000.00	\$0.00	\$183,000.00	\$17,271.66	\$0.00	\$50,099.11	\$132,900.89	27%	\$0.00
3619 Child Care	\$1,908,286.00	\$0.00	\$1,908,286.00	\$0.00	\$0.00	\$116,505.00	\$1,791,781.00	6%	\$0.00
4619 Foster Care	\$269,842.00	\$0.00	\$269,842.00	\$0.00	\$0.00	\$228,022.00	\$41,820.00	85%	\$0.00
Department: 6119 Child Care totals:	\$2,361,128.00	\$0.00	\$2,361,128.00	\$17,271.66	\$0.00	\$394,626.11	\$1,966,501.89	17%	\$0.00
Department: 6123 Juvenile Delinquent Care									
1823 Repay of Juv Delinq Care	\$0.00	\$0.00	\$0.00	\$26.00	\$0.00	\$78.00	(\$78.00)	+++	\$0.00
1850 Repay Pub. Facil (Children)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
3623 Juv. Delinquents - Facility	\$2,625.00	\$0.00	\$2,625.00	\$0.00	\$0.00	\$0.00	\$2,625.00	0%	\$0.00
4623 Juvenile Independent Live	\$2,625.00	\$0.00	\$2,625.00	\$0.00	\$0.00	\$0.00	\$2,625.00	0%	\$0.00
Department: 6123 Juvenile Delinquent Care totals:	\$5,250.00	\$0.00	\$5,250.00	\$26.00	\$0.00	\$78.00	\$5,172.00	1%	\$0.00

# Budget Performance Report

From Date: 1/1/2010 To Date: 5/26/2010

Account Number	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/Rec'd	Prior Year Total
260 Other Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
410 Supplies	\$50,000.00	\$0.00	\$50,000.00	\$155.50	\$0.00	\$17,537.63	\$32,462.37	35%	\$0.00
411 Rent-Building/Property	\$715,860.00	\$0.00	\$715,860.00	\$0.00	\$0.00	\$0.00	\$715,860.00	0%	\$0.00
413 Repair & Maint-Bldg/Property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
418 Ins-General Liability	\$58,000.00	\$0.00	\$58,000.00	\$0.00	\$0.00	\$44,904.13	\$13,095.87	77%	\$0.00
421 Equipment Rental	\$12,000.00	(\$1,500.00)	\$10,500.00	\$747.00	\$2,560.00	\$4,214.99	\$3,725.01	65%	\$0.00
422 Repair/Maint-Equipment	\$9,500.00	\$0.00	\$9,500.00	\$539.00	\$0.00	\$2,602.33	\$6,897.67	27%	\$0.00
423 Telephone	\$25,000.00	\$0.00	\$25,000.00	\$2,641.89	\$0.00	\$6,878.52	\$18,121.48	28%	\$0.00
424 Postage	\$40,000.00	\$0.00	\$40,000.00	\$10.80	\$0.00	\$14,029.52	\$25,970.48	35%	\$0.00
426 Subscriptions	\$3,000.00	\$0.00	\$3,000.00	\$0.00	\$0.00	\$219.00	\$2,781.00	7%	\$0.00
427 Memberships & Dues	\$4,605.00	\$0.00	\$4,605.00	\$0.00	\$0.00	\$3,730.00	\$875.00	81%	\$0.00
428 Data Processing & Internet Fees	\$5,000.00	\$0.00	\$5,000.00	\$95.00	\$0.00	\$390.00	\$4,610.00	8%	\$0.00
432 Special Project Supply	\$93,000.00	\$0.00	\$93,000.00	\$0.00	\$0.00	\$0.00	\$93,000.00	0%	\$0.00
435 Medical Fees	\$30,000.00	\$0.00	\$30,000.00	\$622.84	\$0.00	\$8,425.22	\$21,574.78	28%	\$0.00
436 Advertising Fees	\$3,800.00	\$0.00	\$3,800.00	\$0.00	\$0.00	\$0.00	\$3,800.00	0%	\$0.00
437 Consulting Fees	\$7,860.00	\$0.00	\$7,860.00	\$655.00	\$5,240.00	\$2,620.00	\$0.00	100%	\$0.00
439 Misc Fees & Expenses	\$8,250.00	\$0.00	\$8,250.00	\$49.00	\$0.00	\$3,322.57	\$4,927.43	40%	\$0.00
440 Legal/Transcript Fees	\$10,000.00	\$0.00	\$10,000.00	\$0.00	\$0.00	\$922.10	\$9,077.90	9%	\$0.00
441 Auto-Supplies & Repair	\$0.00	\$1,500.00	\$1,500.00	\$180.61	\$0.00	\$576.19	\$923.81	38%	\$0.00
442 Automotive - Gas & Oil	\$14,000.00	\$0.00	\$14,000.00	\$1,358.70	\$0.00	\$3,311.08	\$10,688.92	24%	\$0.00
443 Auto Rental	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
444 Travel/Education/Conference	\$65,000.00	\$0.00	\$65,000.00	\$462.58	\$400.00	\$13,057.48	\$51,542.52	21%	\$0.00
445 Foods	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
470 Contract	\$750,000.00	\$3,365.70	\$753,365.70	\$11,007.91	\$230,570.43	\$74,000.95	\$448,794.32	40%	\$0.00
472 Bank Charges	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
810 Retirement	\$569,764.00	\$0.00	\$569,764.00	\$0.00	\$0.00	\$0.00	\$569,764.00	0%	\$0.00
830 Social Security	\$306,000.00	\$0.00	\$306,000.00	\$10,414.15	\$0.00	\$68,545.12	\$207,454.88	32%	\$0.00
831 Medicare Contribution	\$72,000.00	\$0.00	\$72,000.00	\$2,435.53	\$0.00	\$23,046.80	\$48,953.20	32%	\$0.00
840 Workmen's Compensation	\$14,053.00	\$0.00	\$14,053.00	\$0.00	\$0.00	\$14,052.74	\$0.26	100%	\$0.00
850 Unemployment Insurance	\$16,000.00	\$0.00	\$16,000.00	\$0.00	\$0.00	\$6,030.91	\$9,969.09	38%	\$0.00
855 Disability	\$8,800.00	\$0.00	\$8,800.00	\$0.00	\$0.00	\$553.05	\$8,246.95	6%	\$0.00
860 Hospitalization	\$1,324,422.00	\$0.00	\$1,324,422.00	\$222,382.80	\$0.00	\$655,095.09	\$669,326.91	49%	\$0.00
865 Dental Insurance	\$24,488.00	\$0.00	\$24,488.00	\$3,826.00	\$0.00	\$11,454.00	\$13,034.00	47%	\$0.00

# Budget Performance Report

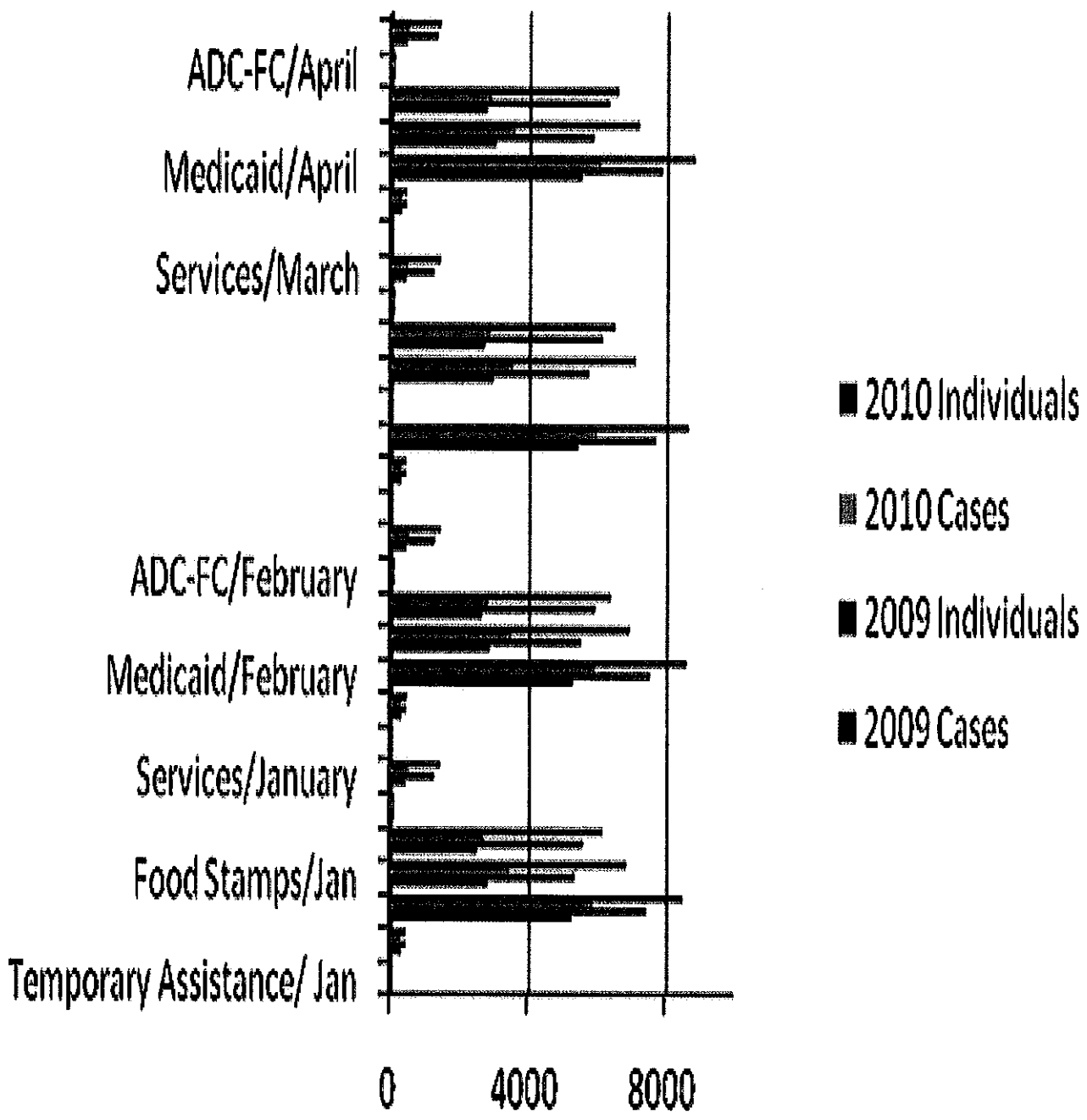
From Date: 1/1/2010 To Date: 5/26/2010

Account Number	Adopted Budget	Budget Amendments (\$1,267.00)	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rcd'd	Prior Year Total
445 Foods	\$80,000.00		\$78,733.00	\$0.00	\$24,840.13	\$19,517.34	\$34,375.53	56%	\$0.00
451 Medical Supply Expense	\$8,000.00	\$0.00	\$8,000.00	\$0.00	\$0.00	\$1,110.49	\$6,889.51	14%	\$0.00
453 Uniforms & Clothing	\$300.00	\$0.00	\$300.00	\$0.00	\$0.00	\$66.99	\$243.01	19%	\$0.00
470 Contract	\$32,000.00	\$0.00	\$32,000.00	\$0.00	\$0.00	\$4,946.48	\$27,053.52	15%	\$0.00
710 Interest-Indebtedness	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
810 Retirement	\$109,308.00	\$0.00	\$109,308.00	\$0.00	\$0.00	\$0.00	\$109,308.00	0%	\$0.00
830 Social Security	\$57,000.00	\$0.00	\$57,000.00	\$1,804.99	\$0.00	\$18,125.69	\$38,874.31	32%	\$0.00
831 Medicare Contribution	\$13,500.00	\$0.00	\$13,500.00	\$422.14	\$0.00	\$4,239.07	\$9,260.93	31%	\$0.00
840 Workmen's Compensation	\$2,898.00	\$0.00	\$2,898.00	\$0.00	\$0.00	\$2,898.05	(\$0.05)	100%	\$0.00
850 Unemployment Insurance	\$5,000.00	\$0.00	\$5,000.00	\$0.00	\$0.00	\$0.00	\$5,000.00	0%	\$0.00
855 Disability	\$3,000.00	\$0.00	\$3,000.00	\$0.00	\$0.00	\$1,054.26	\$1,945.74	35%	\$0.00
860 Hospitalization	\$264,430.00	\$0.00	\$264,430.00	\$15,994.60	\$0.00	\$114,599.04	\$149,830.96	43%	\$0.00
865 Dental Insurance	\$4,865.00	\$0.00	\$4,865.00	\$324.00	\$0.00	\$1,952.00	\$2,913.00	40%	\$0.00
Department: 6030 Countryside Adult Home totals:	\$1,718,676.74	\$0.00	\$1,718,676.74	\$53,210.05	\$38,816.01	\$533,334.96	\$1,146,525.77	33%	\$0.00
Department: 6050 Public Facil. For Children									
130 Salaries - Part Time	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
210 Furniture/Furnishings	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
230 Automotive Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
413 Repair & Maint.-Bldg/Property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
415 Electricity	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
416 Oil & Gas-Heating	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
417 Water/Sewer/Taxes	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
418 Ins-General Liability	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
422 Repair/Maint-Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
423 Telephone	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
436 Advertising Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
439 Misc Fees & Expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
441 Auto-Supplies & Repair	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
442 Automotive - Gas & Oil	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
457 Child Care Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
469 Other Payments/Contributions	\$25,000.00	\$0.00	\$25,000.00	\$746.28	\$2,160.57	\$10,720.90	\$12,118.53	52%	\$0.00
470 Contract	\$100,000.00	\$0.00	\$100,000.00	\$7,099.50	\$68,998.85	\$31,001.15	\$0.00	100%	\$0.00
830 Social Security	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00

# Budget Performance Report

From Date: 1/1/2010 To Date:5/26/2010

Account Number	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/Rec'd	Prior Year Total
Department: 6123 Juvenile Delinquent Care									
470 Contract	\$15,000.00	\$0.00	\$15,000.00	\$3.42	\$0.00	\$205.20	\$14,794.80	1%	\$0.00
Department: 6123 Juvenile Delinquent Care totals:	\$15,000.00	\$0.00	\$15,000.00	\$3.42	\$0.00	\$205.20	\$14,794.80	1%	\$0.00
Department: 6129 State Training School									
470 Contract	\$230,600.00	\$0.00	\$230,600.00	\$0.00	\$0.00	\$57,908.64	\$172,691.36	25%	\$0.00
Department: 6129 State Training School totals:	\$230,600.00	\$0.00	\$230,600.00	\$0.00	\$0.00	\$57,908.64	\$172,691.36	25%	\$0.00
Department: 6140 Home Relief									
470 Contract	\$1,415,000.00	\$0.00	\$1,415,000.00	\$77,773.63	\$0.00	\$481,510.54	\$933,489.46	34%	\$0.00
Sub Department: 0175 Homeless Prevention Rehousing									
470 Contract	\$0.00	\$327,957.00	\$327,957.00	\$56,970.81	\$0.00	\$154,605.45	\$173,351.55	47%	\$0.00
Sub Department: 0175 Homeless Prevention Rehousing totals:	\$0.00	\$327,957.00	\$327,957.00	\$56,970.81	\$0.00	\$154,605.45	\$173,351.55	47%	\$0.00
Department: 6140 Home Relief totals:	\$1,415,000.00	\$327,957.00	\$1,742,957.00	\$134,744.44	\$0.00	\$636,115.99	\$1,106,841.01	36%	\$0.00
Department: 6141 Fuel Crisis Assistance									
470 Contract	\$30,000.00	\$0.00	\$30,000.00	\$320.00	\$0.00	\$307.69	\$29,692.31	1%	\$0.00
Department: 6141 Fuel Crisis Assistance totals:	\$30,000.00	\$0.00	\$30,000.00	\$320.00	\$0.00	\$307.69	\$29,692.31	1%	\$0.00
Department: 6142 Emergency Aid For Adults									
410 Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$0.00
470 Contract	\$25,200.00	\$0.00	\$25,200.00	\$201.95	\$0.00	\$3,867.55	\$21,332.45	15%	\$0.00
Department: 6142 Emergency Aid For Adults totals:	\$25,200.00	\$0.00	\$25,200.00	\$201.95	\$0.00	\$3,867.55	\$21,332.45	15%	\$0.00
Revenue Totals:	\$17,041,997.00	\$327,957.00	\$17,369,954.00	\$245,848.25	\$0.00	\$3,292,126.41	\$14,077,827.59	19%	\$0.00
Expenditure Totals:	\$31,285,530.30	\$337,946.24	\$31,623,476.54	\$1,621,957.42	\$355,369.40	\$9,945,714.73	\$21,322,392.41	33%	\$0.00
<b>Fund Totals: General</b>	<b>(\$14,243,533.30)</b>	<b>(\$9,989.24)</b>	<b>(\$14,253,522.54)</b>	<b>(\$1,376,109.17)</b>	<b>(\$355,369.40)</b>	<b>(\$6,653,588.32)</b>	<b>(\$7,244,564.82)</b>		<b>\$0.00</b>
Revenue Grand Totals:	\$17,041,997.00	\$327,957.00	\$17,369,954.00	\$245,848.25	\$0.00	\$3,292,126.41	\$14,077,827.59	19%	\$0.00
Expenditure Grand Totals:	\$31,285,530.30	\$337,946.24	\$31,623,476.54	\$1,621,957.42	\$355,369.40	\$9,945,714.73	\$21,322,392.41	33%	\$0.00
<b>Grand Totals:</b>	<b>(\$14,243,533.30)</b>	<b>(\$9,989.24)</b>	<b>(\$14,253,522.54)</b>	<b>(\$1,376,109.17)</b>	<b>(\$355,369.40)</b>	<b>(\$6,653,588.32)</b>	<b>(\$7,244,564.82)</b>		<b>\$0.00</b>



<b>Program/Month</b>	<b>2009 Cases</b>	<b>2009 Individuals</b>	<b>2010 Cases</b>	<b>2010 Individuals</b>	<b>Percent increase</b>
Temporary Assistance/ Jan	303	440	275	434	
Medicaid/January	5262	7428	5877	8481	10%
Food Stamps/Jan	2804	5349	3433	6849	18%
HEAP/Jan	2503	5589	2704	6165	7%
ADC-FC/Jan	94	95	101	101	7%
Services/January	433	1255	494	1445	12%
Temporary Assistance/ Feb	309	443	292	463	
Medicaid/February	5288	7516	5912	8595	11%
Food Stamps/Feb	2870	5516	3488	6936	18%
HEAP/February	2631	5930	2800	6380	6%
ADC-FC/February	94	95	100	100	6%
Services/February	434	1267	495	1443	12%
Temporary Assistance/ March	294	420	286	445	
Medicaid/March	5421	7690	5961	8639	9%
Food Stamps/March	2964	5732	3544	7097	16%
HEAP/March	2707	6140	2841	6497	5%
ADC-FC/March	87	88	100	100	13%
Services/March	428	1235	487	1413	12%
Temporary Assistance/ April	305	441	283	437	
Medicaid/April	5522	7872	6073	8812	9%
Food Stamps/April	3025	5873	3588	7196	15%
HEAP/April	2765	6313	2876	6587	4%
ADC-FC/April	87	87	100	100	13%
Services/April	456	1323	490	1443	7%

# Countryside COMMITTEE

May, 2010

## AGENDA

1. Update on Countryside, information on meetings and what has been discovered thus far.
2. Request a resolution to pursue a Social Adult Day Care Waiver from the State -- We are looking into a Social Model Day Care Program. We would have to request a waiver through the State. It would be for 6 individuals. We would have a gross revenue of \$52,620 plus transportation costs after creating one position and changing hours of another staff person.
3. Request a resolution to move \$20,000.00 from part time to overtime pursuant to the treasurers request even though we are only at 51% of our usage.

### Pending Items:

- 1) Committee to establish a sub-Committee to make the determination of the future of Countryside Adult Home and decide how to deal with the repercussions. (01.22.10)
- 2) Ms. Weaver to conduct further research pertaining to the use of available space at Countryside Adult Home for temporary housing for the homeless. (03.26.10)
- 3) Committee tabled discussion on request for a resolution to pursue a Social Adult Day Care Waiver from the State pending further statistical details regarding the demand for such services in Warren County. (04.23.10)



**WARREN COUNTY YOUTH BUREAU**  
**1340 STATE ROUTE 9**  
**LAKE GEORGE, NEW YORK**  
**12845-9803**

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Linda L. LaRock, Administrative Assistant ([lrocl@co.warren.ny.us](mailto:lrocl@co.warren.ny.us))

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**SOCIAL SERVICES COMMITTEE**  
**YOUTH PROGRAMS**

**May 28, 2010**

1. Update: Warren County Youth Court

Despite the loss of \$44,804 in funding, the Warren County Youth Court program will be *downsized but sustained* for 2010. We will continue to contract with the Council for Prevention of Alcohol and Substance Abuse to run the program.

2. safeTALK Suicide Alertness Training – May 11 & May 25<sup>th</sup>

The Youth Bureau and Commissioner Weaver teamed up to bring this “best practice” program to Warren County to help build a suicide-safer community. American Foundation for Suicide Prevention provided the 3 hour workshop *at no charge*. 51 individuals from public health, probation, social services, victim services/DA, OFA, human resources, youth agencies and schools attended.