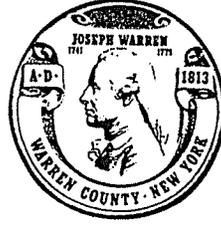


# WARREN COUNTY BOARD OF ELECTIONS

*3<sup>rd</sup> Floor Human Services Building  
1340 STATE ROUTE 9  
LAKE GEORGE, NY 12845  
FAX: (518) 761-6480*

*WM. A. MONTFORT  
DEMOCRATIC COMMISSIONER  
TEL: (518) 761-6459*



*MARY BETH CASEY  
REPUBLICAN COMMISSIONER  
TEL: (518) 761-6458*

04-26-13

## Support Services Committee Agenda

1. Lever Machine disposition.
2. Permission to attend the ECA Annual Summer Conference in Lake Placid NY.

## Montfort, William

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**From:** Micheal Leo <mleo@islipfd.org>  
**Sent:** Wednesday, April 24, 2013 2:01 PM  
**To:** Montfort, William  
**Subject:** Islip Fire District

April 24, 2013

Hi Bill,

The Islip Fire District is interested in the acquisition of Warren Counties retired election machines that may possibly be let go by your board of elections. The Islip Fire District is a non for profit government organization and as such, our interest in these machines are for our organizations use only and not to rent or resell. We appreciate your consideration and if I can be of any further assistance please do not hesitate to contact me using the information below.

Michael Leo  
Commissioner  
Islip Fire District  
28 Monell Ave.  
Islip, NY 11751  
917.288.1510  
[mleo@islipfd.org](mailto:mleo@islipfd.org)

**Casey, MaryBeth**

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**From:** NYSECA [nyseca@newyorkstateelectioncommissionersassociation.ccsend.com] on behalf of NYSECA [tferrarese@monroecounty.gov]  
**Sent:** Monday, April 22, 2013 12:25 PM  
**To:** Casey, MaryBeth  
**Subject:** NYSECA - 2013 Summer Conference Material



## ELECTION COMMISSIONERS ASSOCIATION OF THE STATE OF NEW YORK 2012-2013

April 22, 2013

**Jerry Eaton**  
*President*  
175 Arsenal Street  
Room 404  
Watertown, NY 13601

**William Fruci**  
*First Vice-President*

**Michael Northrup**  
*Second Vice President*

**Susan Bahren**  
*Third Vice President*

**Thomas F Ferrarese**  
*Secretary-Treasurer*  
39 Main Street W  
Rochester, NY 14620  
Phone: 585-753-1560  
Fax: 585-753-1531

**Nancy Leven**  
*Chairman*  
*Executive Committee*

**Joseph Welch**  
*Chairman*  
*Legislative Committee*

Dear Commissioners, Deputy Commissioners, Board Staffs,  
Members of the State Board, Vendors and Friends,

The Annual Election Commissioner's Association Summer Conference will be held from Tuesday, June 18th thru Friday, June 21st at the High Peaks Resort, 2384 Saranac Ave, Lake Placid, NY 12946. (518) 523-4411, Fax: (518)523-1120 and email [reservations@highpeaksresort.com](mailto:reservations@highpeaksresort.com) The NYSBOE will again be presenting some of the sessions as they are not having a spring conference. Find the conference packet attached below. There is also a PDF Fill-In for the ECA Registration that is also in the packet to make it easier to fill out:

[2013 Summer Conference Packet](#)

[2013 ECA Conference Registration Form - Fill-In](#)

All attendee reservations must be made with the hotel no later than Monday, May 20, 2013. Packages are based on a per person basis. Three-night package is \$616.08 without a Tax Exempt Certificate and \$560.60 with a Tax Exempt Certificate for single occupancy and \$393.48 and \$359.60 respectively for double occupancy. Two-night package is \$499.41 and \$455.20 for single or \$334.40 and \$306.20 respectively for double. Although the Hotel Reservation Form does not indicate that Tuesday's Dinner is part of the package the ECA is picking up that meal. The completed Hotel Reservation Form can be faxed (518)523-1120 or emailed [reservation@highpeaksresort.com](mailto:reservation@highpeaksresort.com) directly to the hotel. A completed tax exempt form (ST-129 - enclosed) is required when making your reservation to get the tax exempt rate.

Everyone attending the conference must also complete the enclosed Conference Registration Form (different from the hotel reservation

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

Check one:

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

The Support Services Committee hereby authorizes All four staff  
\_\_\_\_\_  
(Supervisory Committee) (Employee Name)

to attend NYS Election Commissioners Association  
\_\_\_\_\_  
(Name of meeting or organization)

at High Peaks Resort, 2384 Saranac Ave, Lake Placid NY 12946  
\_\_\_\_\_  
(Address)

on June 19,2013-June 21,2013 . Mode of transportation to be used  
\_\_\_\_\_  
(Dates) (County Vehicle or Mass Transportation)

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

County Car  
\_\_\_\_\_

**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 \$ \$455.20@ inclusive 2 nights & meals \_\_\_\_\_ GSA\* Rate \$

Meal costs - GSA\* per diem rate \$ \_\_\_\_\_

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

Date: 04-22-2013 \_\_\_\_\_

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**

\*\*\*\*\*  
\*\*\*\*\*

**Warren County**  
**SUPPORT SERVICES COMMITTEE**  
**(INSURANCE)**

April 26, 2013 @ 10:30am

Information Submitted By: Amy Clute, Insurance Administrator

Committee Members: Chairman, Supervisor Taylor  
Supervisor Strainer  
Supervisor Loeb  
Supervisor McDevitt  
Supervisor Frasier  
Supervisor Mason  
Supervisor Vanselow

**I. Action agenda – matters requesting Resolutions of the Board and / or Committee approval.**

1. Requesting Resolution approving the attached “Smoking and Tobacco Use Policy”. The former “No Smoking Policy” was rescinded by R480 of 2003 when the NYS clean indoor air act was enacted. The Employee Safety Committee noticed smokers congregating near buildings entrances causing employees and visitors to travel through second hand smoke when entering County buildings. The Employee Safety Committee requested this policy in effort to assure the areas around County buildings are safer and healthier worksites. The attached policy prohibits smoking within 50 feet of County buildings. The policy has been reviewed and approved by the Employee Safety Committee, the Risk Management Steering Committee, Needham Risk Management, the County Attorney and the County Administrator. (Pages 2-4)
2. Requesting Resolution approving the attached “Workplace Harassment Policy”. The former “Sexual Harassment Policy” approved by R339 of 1994 has become out of date and did not address all types of “workplace harassment”. The attached policy has been reviewed and approved by the Employee Safety Committee, the Risk Management Steering Committee, Needham Risk Management, the County Attorney and the County Administrator. The policy was also shared with representatives of the County’s various unions. (Pages 5-10)

**II. Pending items.**

1. The resolution approved by the Committee at the March 22, 2013 meeting regarding the “Travel Policy and County Vehicle Use Regulations” was tabled before the Board meeting on April 19, 2013. Concerns were raised by DPW and discussed at a special meeting of the Risk Management Steering Committee on April 18, 2013. The policy is currently being revised and will be brought back to this Committee in the near future.
2. Responses to the RFP for Property and Casualty Insurance Broker Services are due at the Purchasing Department on May 2, 2013.

# **RESOLUTION REQUEST FORM NO. 20**

## **MISCELLANEOUS**

***\*Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.  
Please attach any backup information available and be as detailed as possible.***

**DEPARTMENT NAME: Self-Insurance**

**DATE: 4-26-13**

- (a) Purpose of Request: Approving the Warren County Smoking and Tobacco Use Policy
  
- (b) Details: Approving the attached smoking and tobacco use policy prohibiting smoking within 50 feet of County buildings.
  
- (c) Previous Resolution Number: R480-2003
  
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: not applicable.

**Sample: A.8021 470 Planning & Community Development – Contract**

\* as listed in budget and LOGOS

**Warren County  
SMOKING AND TOBACCO USE POLICY**

**DRAFT 4/5/13**

**A. PURPOSE**

The purpose of this policy is to ensure compliance with federal and state law on the use of tobacco products in places of employment, including public buildings, as well as to control smoking in areas immediately surrounding the workplace.

The New York State Clean Indoor Air Act (“Act”) prohibits smoking in all places of employment, which includes all County facilities and all County vehicles. Further, Warren County prohibits smoking and tobacco use within 50 feet of County buildings. More specifically, the purpose of this policy and consistent with the Act is to protect Warren County employees and the general public visiting Warren County buildings from the dangers of secondhand smoke.

**B. REGULATIONS AND PROCEDURES**

1. This policy applies to all County departments, County employees, Elected Officials and the general public.

Smoking and tobacco use are prohibited in all County buildings, in all County vehicles, and within fifty (50) feet of any County building. A County “building” shall be defined as any building that the County owns, leases or maintains.

Cigarette butts shall be properly disposed of in the areas where smoking is permitted in the containers designed for such. Under no circumstances shall cigarette butts be disposed of in the building vestibules, inside County buildings, or in trash cans. The containers shall be placed at locations determined by the Buildings and Grounds Department, but in no event less than fifty (50) feet from any County building.

2. The Buildings and Grounds Department will be responsible for prominently posting and properly maintaining signage describing the prohibitions set forth in this policy for County Buildings and where smoking and tobacco use is prohibited by this policy.
3. A written copy of this policy shall be provided to all employees.
4. Employees who smoke or use tobacco prohibited areas are in violation of New York State Law and/or County policy and will be subject to appropriate disciplinary actions.
5. Each department head and/or his/her designee shall be responsible for the following:
  - provide copies of this policy to all new and current employees;
  - take disciplinary action against employees who violate this policy;

- make a good faith effort to ensure that the "general public" complies with this policy within their department's work locations.

6. Employees who witness a violation of this policy should notify their supervisor/ department head. If the violation persists, employees may contact the County Administrator directly at 761-6539.

**C. EXCEPTIONS**

To the extent that any of the terms of the existing smoking and tobacco use policies in place on the effective date of this policy at the Westmount Health Facility or Countryside Adult Home conflict with any terms of this policy, the terms of the existing smoking and tobacco use policies that are in place at the Westmount Health Facility or Countryside Adult Home shall control. Otherwise, this policy shall be applicable to the Westmount Health Facility and Countryside Adult Home.

**D. EFFECTIVE DATE**

This policy to be effective \_\_\_\_\_ by Warren County Board of Supervisors  
Resolution No. \_\_\_\_\_ of \_\_\_\_\_.

# ***RESOLUTION REQUEST FORM NO. 20***

## ***MISCELLANEOUS***

***\*Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.  
Please attach any backup information available and be as detailed as possible.***

**DEPARTMENT NAME: Self-Insurance**

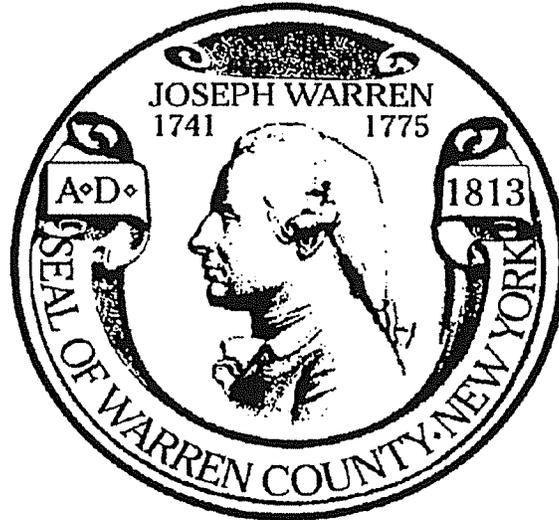
**DATE: 4-26-13**

- (a) Purpose of Request: Approving the attached Plan and Program on Workplace Harassment.
  
- (b) Details: The former 1994 policy on Sexual Harassment has become out dated and incomplete. The attached Plan and Program on Workplace Harassment defines several types of harassment and bullying and includes a process for reporting and investigating complaints.
  
- (c) Previous Resolution Number: R339-1994
  
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: not applicable.

**Sample: A.8021 470 Planning & Community Development – Contract**

\* as listed in budget and LOGOS

Draft 4/5/13



**WARREN COUNTY**  
**PLAN AND PROGRAM**  
**ON**  
**WORKPLACE HARASSMENT**

Adopted by Resolution #\_\_\_\_ of 2013

# WARREN COUNTY PLAN AND PROGRAM ON WORKPLACE HARASSMENT

## I. Program Statement:

Warren County reaffirms its policy to provide equal opportunity in employment and a safe work environment through its commitment to ensure an environment for all employees which is fair, humane and respectful. In furtherance of this policy, Warren County hereby states that workplace harassment is unacceptable and adopts this Workplace Harassment Policy with which all County officers, employees and volunteers must comply.

## II. Definitions:

“Workplace harassment” includes harassment, sexual harassment, discrimination, intimidation and bullying, whether verbal or physical, occurring on County property or occurring during the performance of County duties or operations.

“Harassment” is defined as including, but not limited to:

- Slurs, inappropriate jokes, derogatory remarks, or any physical aggression related to another person’s race, age, disability, religion, national origin, gender, or sexual preferences;
- Threatening, intimidating, coercing, using abusive or vulgar language, or interfering with the performance of other employees; or
- Any other conduct which creates a hostile or offensive work environment.

“Discrimination” means any gesture, any written, verbal or physical act, or any electronic communication, whether it be a single incident or a series of incidents, that is reasonably perceived as being motivated either by any actual or perceived characteristic such as race, color, religion, ancestry, national origin, gender, sexual orientation, gender identify and expression, or a mental, physical or sensory disability, or by any other distinguishing characteristic.

“Intimidation or bullying” is repeated, health-harming mistreatment of one or more persons by one or more perpetrators that takes one or more of the following forms:

- Exploitation of a known psychological or physical vulnerability.
- Direct or indirect verbal comments, actions, behaviors or tactics such as verbal abuse or psychological manipulations that are used to harm an individual or to attempt to harm an individual including but not limited to, attempts to destroy or harm a person’s self-esteem or confidence; constant and repeated negative remarks, criticism or sarcasm; isolating or systematically isolating the individual; spreading false information or rumors; tasks that are ambiguous, contradictory or that are deprived of purpose; false insinuations, attacks to the individual’s dignity, integrity or self-image; attempts to humiliate or public humiliation.

“Sexual harassment” is specifically defined as unwelcome verbal or physical sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature in which (1) submission to such conduct is made either explicitly or implicitly a term or a condition of an individual’s employment; (2) submission to or rejection of such

conduct by and individual is used as the basis for employment or promotion; or (3) such conduct has the purpose or effect of substantially interfering with an individual's work or creating an intimidating, hostile or offensive working environment.

As an unsolicited, offensive behavior that inappropriately asserts sexuality over status as an employee, sexual harassment often engenders a feeling of powerlessness and can threaten a person's economic livelihood.

Examples of sexual harassment include:

Verbal

- Sexual innuendos and comments or remarks about clothing, body or sexual activities
- Suggestive or insulting sounds
- Sexual propositions, invitations, or other pressure for sex
- Implied or overt threats

Physical

- Unnecessary touching
- Brushing the body
- Coerced sexual relations
- Assault

Non-Verbal

- Leering/prolonged staring
- Obscene gestures

**III. Workplace Harassment Prohibited:**

Workplace Harassment as defined above and occurring on County property, or occurring during the performance of County duties or operations, that substantially disrupt or interfere with the orderly operation of the County or the rights of other employees, visitors, volunteers, clients, or community members, and that all department heads and department supervisors are expected to adhere to this policy and enforce any prohibitions against unlawful workplace harassment. Any department head or department supervisor who becomes aware of a violation of this policy is required to investigate the complaint as provided for in V herein.

Department heads will provide all employees within their department with a copy of this policy. Employees are required to attend and participate in any training provided by the County. Employees are responsible for reporting any violations of the policy to their department supervisor, department head, or to the Warren County Personnel Officer.

**IV: Process for Reporting Harassment Complaints:**

Employees that believe that they have been subjected to workplace harassment should report it to their immediate supervisor. If the employee's immediate supervisor is the person who is the cause of the complaint, the employee should speak to their department head or to the Warren County Personnel Officer. Complaints may be made verbally, however it is recommended that the employee submit a statement in writing.

**V: Investigation of Complaints:**

Allegations of workplace harassment are treated seriously by the County and will be promptly investigated. The investigation will be conducted in such a way as to maintain confidentiality to the extent practicable under the circumstances.

Department supervisors, department heads or the Warren County Personnel Officer will be responsible for initiating an investigation as soon as possible from receipt of the complaint but not longer than 5 business days after receipt. Whenever possible, investigation and an attempt to resolve the problem area will begin as soon as possible.

In the event that they are asked, employees and management are expected to cooperate fully with any ongoing investigation. Where possible, investigations will be conducted by the department head. The Warren County Personnel Officer may also be involved in the investigation to provide assistance and support.

If the complaint is not resolved, or an employee wishes to appeal a decision made by the department supervisor, department head or Warren County Personnel Officer the complaint will be referred to the Warren County Administrator's Office. The Warren County Administrator's Office reserves the right to refer the complaint to the Personnel Committee of the Warren County Board of Supervisors at their next regularly scheduled meeting for discussion or resolution.

In the event that a complaint is referred to the Personnel Committee of the Warren County Board of Supervisors, employees will be notified within seven (7) days of the final decision and if the employee is still dissatisfied, the complaint will be presented to a mutually agreed upon representative, who will review the employees concerns and respond within thirty (30) days.

All questions regarding this policy should be directed to the Personnel Officer at the Warren County Civil Service Office.

## CHARGE OF WORKPLACE HARASSMENT

This form is to be used to file a charge of inappropriate conduct based on workplace harassment.

Please print or type:

Your name: \_\_\_\_\_ Phone: \_\_\_\_\_

Current position and department: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

a. Have you filed this charge with a federal or state government agency?  Yes  No

If yes, when: \_\_\_\_\_  
Month Day Year

b. Have you instituted a suit or court action on this charge?  Yes  No

If yes, when: \_\_\_\_\_  
Month Day Year

Harassment took place on or about: \_\_\_\_\_  
Month Day Year

Check here if workplace harassment is continuing:

Describe briefly the act which occurred and your reason for concluding that it was workplace harassment (use extra sheets if necessary):

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

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

Signature \_\_\_\_\_

Date \_\_\_\_\_