

Human Services Committee
Veterans' Services Office
AGENDA
May 22, 2015

Action Agenda/New Business:

1. Request to...Accept and approve Telehealth Service Agreement & MOA between Albany VAMC and Warren County Veterans' Services.
Rationale: Allow Telehealth Services for Veterans Justice Outreach in Warren Co.
2. Request to...Travel: CVSOA Annual Conference & Advanced Training for Accredited Representatives.
Rationale: Training for American Legion/VFW Service Officer Accreditation.
3. Request to...Change Keyboard Specialist position from P/T to F/T status.
Rationale: Continuity of Community Service to Warren County Veterans.

Referral/Pending Items:

None

Information for Discussion/Review:

(List here budget reports, annual reports, project reports, business activity, updates, photos of projects, etc. - whatever you normally report on to Committee)

Since there are new committee members I will be bringing a one-year overview of information regarding the department functions and statics.

Additional items:

Attachments: (List attachments by number relating to the above cited regular items)

Telehealth Service Agreement and MOA
(2) Schedule A with supporting documentation
Res. Request Form No. 20 Miscellaneous

TELEHEALTH SERVICE AGREEMENT
CVT into Non-VA Agency
(VJO, Warren County Veteran Service Officer &
Telehealth Service)

PURPOSE:

The Telehealth Service Agreement specifies and governs the clinical, business, and technical details of operations of the Telehealth services between the Telehealth service and specialty service performing Clinical Video Telehealth (CVT) into the Warren County Veteran Service Officer's (VSO) Office.

VARIABLES AND RESPONSIBILITIES:

A. Telehealth clinical application/service: **Veterans Justice Outreach Program (VJO)**

B. Telehealth Service: Primary Contact: **Thor Patterson-Ritz, FTC**

C. Specialty Service: Primary Contact: Courtney Slade, LCSW

NOTE: See Attachment 1 thru 3 of this agreement for a listing of all key personnel for this Telehealth' service & assigned responsibilities.

D. The following Telehealth modalities will be employed with this program:

Clinical Video Telehealth, (Synchronous) into the Warren County Veteran Service Officer's Office

E. Scope of services to be provided to the patient(s):

Telemental service:

F. Telehealth care providers are credentialed and privileged to provide the above noted clinical service(s) at the Provider Facility location into the patient's home location.

NOTE: See Attachment 1 of this agreement for a current listing of privileged providers for this telehealth service and Attachment 2 of this agreement for a list of provider performance indicators to be monitored for this Telehealth service.

G. Admission criteria for this service:

Per discretion of the VJO Program staff. Will be based upon clinician evaluation, need, and available internet access and computer hardware of veterans. Veteran must have available emergency resources that can be summoned in case of emergency. The veteran has to be willing to provide verbal consent for CVT to the

Warren County VSO Office. Warren County VSO computer must meet the minimum technical requirements. In addition, the following are initial admission criteria:

- Veterans who are eligible for the VJO program.
- Veteran is willing to participate in Telehealth Services and not reject telehealth informed consent process.
- Participating site must sign waiver release-for installing of jabber software
- Veteran acknowledges and accepts limits of confidentiality.
- Veteran has adequate sensory abilities to participate.
- Veteran able to enlist support from their local Clinical Technical support staff.

H. Discharge criteria from this service:

Veteran no longer wishes to use CVT at the Warren County VSO, veteran meets discharge criteria or clinician determines different level of care is indicated.

I. Methods of communication between the 2 services:

1. For questions/issues that are not directly related to patient care: **call between the two services**
2. For questions about care or scheduling: **call**
3. For immediate needs/urgent care situations: **Call provider immediately or face to face contact required**
4. For last minute cancellations:

The VJO Program will contact the non-VA agency to notify them of cancellation and offer alternative dates and times for scheduling. The VJO program will also notify the Telehealth Service as needed and address Anywhere Scheduling system, so modifications can be made in a timely manner.

J. Clinical information require prior to the consultation visit: **None**

- Specific clinical history:
- Labs:
- Imaging:
- Studies:
- Screenings:
- Other:

K. Expected time frame for a response to the request: (From time of request sent to Telehealth using formal response)

1. Routine consultations: 36 business hours (3 business days)
2. STAT/urgent: To be based upon provider availability

L. Telehealth Variables

1. For CVT Clinic frequency
 - a. Days/times: specialty availability
 - b. Length of new (initial) patient appointment (minutes): 60 minutes
 - c. Length of established (returning) patient appointment (minutes): 30 - 60 minutes

M. Defining duties and responsibilities:

Telehealth Service staff will:

- i. arrange for "Jabber" to be installed on providers workstation when:
 1. Web camera is available & pc unit has speakers
- ii. assist service in setting up correct CVT to Non-VA Agency
- iii. Telehealth service staff or VJO program contact will create a Video AnyWhere appointment between veteran and provider. The non-VA agency will receive an appointment link via a secure email. The veteran and non-VA agency contact will utilize the link to establish installation of the Jabber software (if not otherwise installed) and initiate the appointment between social worker and veteran.
- iv. Telehealth will provide basic technical support (limited).
- v. Telehealth will provide technical review and support to providers.

Provider (VJO Program) Service will

- (i) Complete all required training and be credentialed before submitting CVT to home request.
- (ii) Agree to the service agreement
- (iii) Work in conjunction with Telehealth Service Provider
- (iv) Will use the specific provider CVT to Non-VA Agency clinic when documenting these episodes and will complete the encounter within 24 hours of call.
- (v) Documentation Requirements:
 - a. Prior to initiating session or at the very beginning the clinician should confirm with non va site emergency contact information.
 - b. Local emergency numbers should be maintained by both sides for quick access.
 - i. If the clinician needs additional professional assistance in handling an acute emergency, the clinician may choose to contact their local medical

- / telehealth emergency resources for back-up (e.g. local ED, local Telehealth staff and/or support staff, local suicide prevention coordinator).
- ii. Confirmation with non-VA agency staff will be necessary also as these contacts will be available for assistance during the session as well.
- iii. If they are unable to obtain necessary professional assistance locally, the clinician may choose to contact the National Veterans Crisis Line (VCL) at 1-800-273-8255 (1-800-273-TALK) for additional assistance. The VCL Responder can assist the clinician in obtaining emergency services. The VCL Responder can also take the information and call the Veteran directly to assess for Suicide Risk, engaging emergency services, if necessary, and provide referral to Suicide Prevention Coordinator or POC, if appropriate
- c. Prior to initiating any Veteran into a CVT session in a non-VA agency, the clinician should obtain detailed contact information from the Veteran with particular attention to who could be contacted in the event of an emergency.
 - i. As mentioned above, the first point of contact would be the identified person located within the non-VA agency.
 - ii. A phone will be made available to the veteran as well should he/she need to contact an emergency resource (i.e. 911) outside of the non-VA agency.
- d. The Veteran's routine address, local emergency number, and available contacts should be documented in a readily retrievable place in the medical record (e.g. in the initial CVT note and/or on the top of each visit note).
- e. Each progress note can begin with:
 - i. **PROGRESS NOTE**
 1. **Address of Veteran During this Session:**
 2. **Emergency Number for that Address:**
 3. **Any Other Individuals Present in the Home During This Session:**
 4. **Any Relevant Contact Information (e.g. For Any Other Individuals Present in the CVT into Non-VA setting)**
- f. At the time of the appointment, the clinician should establish telephone contact with the Veteran & supervising personnel in the event of a technical disruption.

N. Specific Procedure for identified Non-VA Agency: Warren County VSO

1. Screening-all established probationers and persons referred for pre-sentencing investigations or supervision will be screened for having served in the military by the Warren County VSO Office. All positive in this screening process will be given the option to sign a Release of Information for the Veterans Health Administration and Veterans Justice Outreach program.
2. The VJO (Courtney Slade 518-626-5368) is then notified of the Veteran's status with a faxed (518-626-5381) copy of the Release of Information as well as the DD-214 request. The VJO will determine

eligibility of the veteran and status of benefits and communicate status with Warren County VSO. If veteran is not enrolled in VHA care, but is eligible, the VJO will assist in having a 1010EZ completed for enrollment of the veteran.

3. A clinic time will be arranged between the Albany VA Medical Center VJO and the Warren County VSO Office for veterans to be seen via CVT.
4. Warren County Veteran Service Agency has agreed to furnish the Veteran with a desktop computer, webcam and secure room. The Albany VA Medical Center will furnish the software needed to conduct the session.
5. The veteran will be placed in a secure environment for all interviews with the VJO program. During the session, veteran's will be provided resources on available programs and any forms that might need completion to facilitate referrals and/or disclosure of information.
6. Depending on services needed, the VJO will communicate with the veteran directly as well as the probation officer. Future appointments will be scheduled at the facility as clinically indicated.

O. Quality Management/Patient Safety:

1. Urgent/Emergent events: **See documentation requirements above**
2. Service-specific emergency plan, (In the event that a patient medical or behavioral emergency occurs during a Telehealth visit, what actions/activities are expected to be performed by the provider site staff and by the patient site staff):

NOTE: Administrative reporting contacts for urgent/emergent events are listed in tables below

1. **Indicators to monitor/measure the effectiveness of this specific service agreement:**
 - **Encounters closed out on provider sides.**
 - **Periodic patient and non-VA agency surveys asking for satisfaction and feedback**

Telehealth Service (Provider Side): Albany VA Hospital

Freida M. Klein
Director

1/20/2015
Date

[Signature]
Chief of Staff

1-16-15
Date

Non-VA Side Location: Warren County VSO Office

[Signature Box]

Supervisor (Provider Service)

Date

[Signature Box]

Non-VA Information Systems Contact

Date

Warren County VSO Office – Contact List

| Staff Function | Name/Title | Phone/Pager | Notes |
|----------------|------------|-------------|-------|
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MEMORANDUM OF AGREEMENT
Albany VA Medical Center / Warren County Veteran Service Agency

1. Purpose and Goals

The of this Memorandum of Agreement (MOA) is to establish a working relationship between the Albany VA Medical Center (VAMC) and the Warren County Veteran Service Agency. This agreement, developed in partnership with the Albany VA, VISN 2 and Warren County Veteran Service Agency will allow the VA to conduct screening and initial assessment of eligible Veterans in the Warren County Veteran Service Agency.

The overall goal of this initiative is to support shared Social Service processes and resources to bridge gaps between where providers are available and where the need of consumers is greatest. More specifically this includes:

- *Collaborative VAMC Social Service Veteran Justice Outreach (VJO) and Warren County Veteran Service Agency to coordinate a Tele-Social Services access point.*
- *Shared resources to provide ongoing, cross-organizational tele-health social services.*
- *Technical, clinical, and business processes for the effective implementation of allowing more rapid and easier access of our nations veterans who utilizing the Warren County VSO services, access to VA VJO services.*

2. Background

The Albany VAMC VJO and Warren County Veteran Service Agency have relied upon physical ability of the Albany VA VJO service to travel to the Warren County location(s) in order to provide needed assessment and assistance. This requirement incurs large amount of non-productive time driving back and forth as well as less timely interventions and collaborative work between the two sites.

3. Scope

This MOA covers the Albany VA and Warren County Veteran Service Agency as follows:

The Tele-VA VJO Service will provide initial screening and assessment to veterans under the direct care of the Warren County Veteran Service Agency by conducting secure, encrypted video Telehealth conferencing between the Albany VA VJO services and agreed upon locations within the Warren County Veteran Service Agency.

This program is designed to allow timely access to the VA social services thru leveraging technology. Veterans and Warren County Veteran Service Agency will be able to meet more frequently and with more ease thru the use of video Telehealth technologies.

The focus will be to provide recommendations for the patients' treatment & care coordination upon while the veteran is at the Warren County Veteran Service Agency. Outcome measures will include qualitative assessments by providers, patients, and project managers as to overall success as well as quantitative assessments of provider and patient satisfaction. Eligibility will be limited to those veterans in the care of the Warren County Veteran Service Agency with continued Veterans eligibility status.

The remainder of this MOA will focus on details specifying rules of engagement for this project including Credentialing and Privileging, Quality Management and Security, Financial Remuneration, Emergency Procedures and Safety, Medical Documentation, Informed Consent, Privacy, and General Roles and Responsibilities.

4. Credentialing and Privileging

The Centers for Medicare and Medicaid Services (CMS) and accrediting organizations such as The Joint Commission (TJC) recently modified requirements to reduce the burdens associated with privileging telehealth care providers by permitting patient-end facilities to accept the privileging decisions of provider-end facilities. These modifications are colloquially known as "privileging by proxy". The entity providing the telemedicine services must ensure that all services provided by individuals who are licensed independent practitioners will be within the scope of the licensed independent practitioner's privileges. The entity providing the services as well as the facility receiving the services must confirm in this agreement that the resources to support the telemedicine services are adequate and appropriate. The Accreditation Association for Ambulatory Health Care (AAAHC) has provided written notification of concurrence with these standards (Appendix 1).

Signature of this MOA demonstrates approval for the above referenced "privileging by proxy" agreement such that the Warren County Veteran Service Agency will accept the privileging decision of the Albany VAMC providers. This decision assumes that following criteria are followed and maintained for the duration of the initiative.

- a) Albany VAMC is accredited by TJC or other appropriate accrediting entity designated by the Chief Medical Officer.

- b) The distant site: Warren County Veteran Services staff are trained and certified to handle emergencies that may arise during a Telehealth visit.
- c) The distant site provides/holds a license recognized under VA and VA rules as sufficient for purposes of receiving telemedicine services.

5. Clinical Procedures, Informed Consent, and Privacy

Albany VA VJO Service will provide professional screening, assessment and therapeutic recommendations related to patients located at the Warren County Veteran Service Agency with respect to VA health care services that may be offered to the veteran. All diagnostic, therapeutic, and consultative services will be provided to the Warren County Veteran Service Agency will be documented in the Albany VA medical record system utilizing our local CPRS (see Medical Documentation below) and other appropriate medical record applications/tools consistent with the policies and procedures of Albany VA Medical Center. Assessment results will be shared, as appropriate with the Warren County Veteran Service Agency staff when appropriate consent and VHA health information release forms signed.

Authorized originating and distant sites, and providers, for this pilot must also have the following capabilities.

- a) Provide patients with a secure and private setting.
- b) Provide appropriate clinical support, including access by local emergency services should the need arise.
- c) Meet currently accepted Telemental health industry practice standards as highlighted in the Department of Defense's Telemental Health Guidebook, the Veterans Health Administration Telemental Health Operations Manual, and the American Telemedicine Association's Practice Guidelines for Videoconferencing-based Telemental Health.
- d) Provide basic technical troubleshooting and other assistance.
- e) Meet any other capability requirements established by the Chief Medical Officer.

Informed Consent. Warren County Veteran Service Agency patients must give verbal consent prior to initiating telehealth services. Informed consent will be verified again by the Albany VA provider and documented on the initial note within the medical record that veteran gave consent. There are no absolute contraindications for telehealth and patient refusal is generally considered the primary exclusion criteria and will be determined during the informed consent process. However, the providing clinician should also consider the following criteria for exclusionary immediate need for hospitalization, acutely violent or unstable patients with poor impulse control, active suicidal or homicidal ideation, currently severe decompensation, active dementia, current psychotic disorders that may be exacerbated by telehealth technologies, current untreated substance abuse/dependence, multiple medical problems that may significantly affect cognitive/behavioral states, and environmental emergencies in setting that necessitate evacuation.

Scheduling. Services will be scheduled between Warren County Veteran Service Agency and the consulting telehealth provider at the Albany VAMC. The process for scheduling will be developed as a collaborative effort. Either party may contact the other when there is a need for the services of the Albany VA. This will be done thru email or phone. Acknowledgement will occur within 48hours or two business days of the request email being sent or phone call received.

The Albany VA will then conduct one of the following actions: perform the services with respect to requested care, advise Warren County Veteran Service Agency via email that additional patient history/information or other information is required to perform the Services, decline to provide services within timeliness standards and provide rationale in email format, or indicate that services cannot be provided (with reason). Warren County Veteran Service Agency will monitor when the service request has been submitted to ensure services meet agreed upon standards. It is expected thatservices will be provided, unless otherwise agreed or cancelled, within 10 business days. Eitherparty may modify scheduled services with written notification provided 48 hours or two business days in advance. Timelines to deliver care and reasons for not providing care will be documented as success measures.

6. Quality Management and Security

Effectiveness in meeting health care needs will be determined by extent to which the care provided meets timeliness, quality, and satisfaction evaluation standards established by VAMC. VAMC and Warren County Veteran Service Agency will comply with all applicable laws and regulations including laws and regulations concerning patient records, and the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Both parties will have responsibility to notify the other by telephone or secure email when there are issues, concerns or problems related to data/information transmissions, patient identification questions, confidentiality, incomplete information, or patient safety.

Reviews will be conducted by the Albany VA to assess any deficiencies in professional performance following procedures defined by VAMC and Warren County Veteran Service Agency. This should include a review of any collected timeliness, quality, and satisfaction measures by already established performance improvement committees at both facilities. Use of already established committees promotes the bidirectional sharing of information, discussion of performance monitors, review of incidents and complications, and identification of process deficiencies. Systemic discrepancies will be documented and may result in corrective action. All incidents leading to serious adverse event or outcome will be reported to the review committees within 24 hours. Reviews may be used to support the provider's continued competency and granting of privileges.

7. Financial Remuneration

It is anticipated that no financial remuneration will be required. Modifications to this will require negotiations of services and agreement by both parties.

Active Veterans that are eligible will not be billed for these services.

8. Emergency Procedures and Safety

Warren County Veteran Service Agency will provide the Albany VA with points of contact to immediately contact Warren County Veteran Service Agency personnel for communicating patient safety concerns (i.e. suicide risk, medical) and or problematic findings that require urgent or emergent local intervention. The (GA)Emergency response will be the first line of contact, with a back-up point of contact also provided. Warren County Veteran Service Agency will follow all local emergency and safety procedures in the event of an emergent situation.

9. Medical Documentation

All required medical record documentation will occur in the CPRS electronic medical records system. However, it is anticipated that a manual transfer of information via scan and email or fax will be required from Warren County Veteran Service Agency for documentation into patient record.

10. Additional Roles and Responsibilities

a. Albany VAMC:

- Confirm that Albany VAMC has all appropriate and necessary resources to support the agreed upon provision of services including space, staffing, equipment, support services, and clearly identified emergency response processes and personnel,
- Comply with all applicable laws, regulations, and IT security mandates,
- Assure proper privileging and credentialing of all telemedicine providers including verification that privileges include the care to be delivered via telemedicine,
- Provide Warren County Veteran Service Agency with the provider's contact information,
- Validate that each encounter is documented and recorded in the patient's medical record and that documentation meets all health information requirements, and
- Be responsible and accountable for meeting the VHA Office of Telehealth Services Conditions of Participation, Joint Commission and AAAHC standards for the provision

of relevant services and is responsible for addressing all Joint Commission and AAAHC standards for the provision of care,

- Assist Warren County Veteran Service Agency with coordination of all relevant VA procedures and policies necessary for care delivery including, but not limited to, provider credentialing and privileging, health records integration, and Comply with all requirements such as HIPAA included and any other reasonable requirements not included in this agreement.
- Provide necessary staff to support the delivery of these services.

b. Warren County Veteran Service Agency will:

- Identify an appropriate site to include patients to participate in the process,
- Consult with the Albany VAMC for technical support and technology considerations,
- Assure availability of all necessary space, equipment, staffing, support services, and other resources needed to provide requested services via telemedicine prior to the initiation of these services.
- Assure clear and appropriate transmissions that are of sufficient quality to allow telemedicine providers to perform the agreed upon Services.
- Comply with all requirements such as HIPAA included and any other reasonable requirements not included in this agreement.

11. Other

- Resources: Albany VAMC and Warren County Veteran Service Agency points of contact will confirm that all pilot sites have appropriate and necessary resources to support the agreed upon provision of services, including but not limited to: space, staffing, equipment, support services, clearly identified emergency response processes and personnel.
- IT: Albany VAMC and Warren County Veteran Service Agency points of contact will coordinate regarding IT connectivity, identifying a Telehealth/IT point of contact at each site to establish and test connectivity. Each site will comply with all applicable laws, regulations, and IT security mandates.

12. Points of Contact

(VSIN 2Telehealth Director)

Name: LaRock, Michelle

Title: Network Health System Specialist,

Mailing Address: Holland Ave, Albany NY

Phone: +1 (518) 626-7380

Email: Michelle.Larock@va.gov

(Albany VAMC Director)

Name: Weiss, Linda (SES)

Title: Director

Mailing Address: Holland Ave, Albany NY 12208

Phone: +1 (518) 626-6732

Email: Linda.Weiss@va.gov

(Chief of Staff Albany VAMC)

Name: Irizarry, Lourdes

Title: Chief of Staff, VHA

Mailing Address: Holland Ave, Albany NY 12208

Phone: +1 (518) 626-6730

E-mail: Lourdes.Irizarry2@va.gov

(Albany Telehealth Lead)

Name: Thor Patterson-Ritz

Title: FTC

Mailing Address: Holland Ave, Albany NY 12208

Phone: 518-626-5501

Email: Thor.PattersonRitz@va.gov

(Warren County Veteran Service Agency Director)

Name:

Title:

Mailing Address:

Phone:

Fax:

Email:

13. Effective Date

This MOA is effective for 2 years following the date of final signature, or until completion of the agreed upon number of patient evaluations, whichever occurs soonest. This MOA may be modified upon the mutual written consent of the parties and will remain in effect for 1 year following modifications unless terminated by either party. Either party, upon 30 days written notice to the other party, may terminate this MOA. Should it be determined that this service will continue after the pilot program concludes, an addendum to this agreement will delineate any future activity.

14. Signatures

Franklin D. Davis 1/20/2015

NAME **DATE**
Director
Albany VAMC

NAME **DATE**
Director
Warren County Veteran Service Agency

Approved by ECMS committee 01.2015

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

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

The Human Services Committee hereby authorizes Denise A. DiResta
(Supervisory Committee) (Employee Name)

to attend County Veterans Service Officers Assoc. of NYS Annual Conference
(Name of meeting or organization)

at American Legion Post #230 in Sherrill NY
(Address)

on August 14th, 2015. Mode of transportation to be used County Vehicle
(Dates) (County Vehicle or Mass Transportation)

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

N/A

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 \$ N/A GSA* Rate \$ N/A
- Meal costs - GSA* per diem rate \$ 66

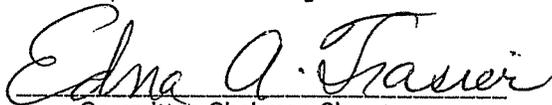
*www.gsa.gov

Date: 5/20/2015



Department Head Signature

Date: 5/22/15



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 County Administrator if credit card will be used.



County Veterans Service Officers Association Of The State Of New York, Inc.



Samuel J. Hall, President

c/o Washington County Veterans Service Agency, Municipal Center, 383 Broadway, Ft. Edward, NY 12828

Email: shall@co.washington.ny.us – Telephone: (518) 746-2470 – Fax: (518) 746-2473

Tentative Agenda

2015 Annual Conference
Friday, August 14th, 2015
American Legion Post #230, Sherrill, NY

- 8:30am Arrival/Sign-In/Refreshments
- 10:00am Pledge Of Allegiance, CVSOA President's Greeting
- 10:05am General Business Meeting, Statewide & Regional Elections
- 10:45am New York State Veterans' Homes
 - John Leahy, NYS Veterans' Homes Finance Officer
- 11:05am Syracuse University College Of Law, Veterans Legal Clinic
 - Joseph Lamendola, Esq., Director External Relations
- 11:25am NYS OGS Division Of Service-Disabled Veterans' Business Development
 - Kenneth Williams, Division Director
- 11:45am Veterans Benefits Administration - Buffalo/NYC Regional Offices & PMC:
 - Buffalo RO - Donna Malia, Director
 - NYC RO -- Sue Malley, Director
- 12:30pm NYS Division Of Veterans Affairs:
 -
- 12:50pm Q&A, Comments, Meeting Wrap-Up, Return To Pavilion
- 1:00pm Steak Bake Lunch
- 2:30pm Raffle Drawing & Conclusion Of 2015 Annual Conference

Eastern Region:

Vice President – Dawn MacDougall
 Phone (518) 746-2470
 Email: dmacdougall@co.washington.ny.us
 Second Vice – Denise DiResta
 Phone (518) 761-6342
 Email: direstad@warrencountyny.gov

Treasurer – Donna Kestner

(315) 591-9100 ~ dkestner@oswegocounty.com

Executive Director – Ellen Andros

(315) 366-2397 ~ cvsoa@madisoncounty.ny.gov

Western Region:

Vice President – Bill Wilkinson
 Phone (585) 786-8860
 Email: bwilkinson@wyomingco.net
 Second Vice – Denis Oliver
 Phone (607) 664-2528
 Email: deniso@co.stcuben.ny.us

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

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

The Human Services Committee hereby authorizes Denise A. DiResta
(Supervisory Committee) (Employee Name)

to attend Advanced Training for Accredited Representatives
(Name of meeting or organization)

at Genesee Grande, Syracuse NY
(Address)

on September 13 - 18, 2015. Mode of transportation to be used County Vehicle
(Dates) (County Vehicle or Mass Transportation)

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

N/A

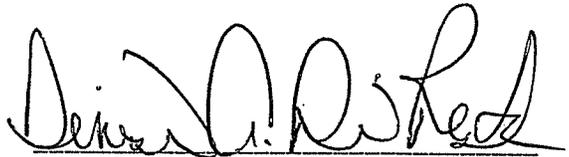
Proper documentation must be attached when submitting for approval.
(Please check documents attached)

- Notice of meeting or convention including cost.

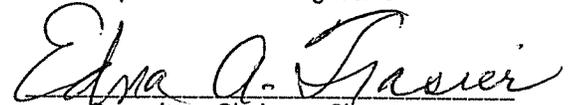
For Overnight Travel

- Room rate \$ 96.00 GSA * Rate \$ 101.00
- Meal costs - GSA * per diem rate \$ 66
* www.gsa.gov

Date: 5/20/2015


Department Head Signature

Date: 5/22/15


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.
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4. Copy to Purchasing with Purchase Order, If required.
5. Copy to County Administrator if credit card will be used.

ADVANCED TRAINING FOR ACCREDITED REPRESENTATIVES

September 14-18, 2015
At the Genesee Grande, Syracuse, NY

NOTE: All reservations must be made on or before August 7, 2015
No reservations will be accepted after this date! NO Exceptions
Training will begin at 08:30 on Monday, September 14, 2015

Legion Registration: Mail your reservation and registration fee of \$175.00 *check or money order only*
Payable to: The American Legion Department of New York

Mail to: Daniel Morea, Veterans Service, 120 New Main St., Yonkers, NY 10701 (914) 885-4064
Note: Must be mailed to this address. No exceptions.

Hotel Reservations: You must make your room reservations directly with the Genesee GrandeHotel before August 7, 2015. Phone (800) 365-4663. All participants must stay at the Genesee Grande Hotel.

It is recommended you arrive on Sunday, September 13, 2015

Room rate \$96.00 per night single or double (Free Parking)
You must indicate American Legion Training Rate.

You must bring a Current NY Tax Exempt Form ST 119.5 & Certificate ST 119
No meals are provided by the school. All meals are own your own.

For additional information or questions contact:

Dan Morea Email "daniel.morea@yonkersny.gov"
Phone (914) 377-6700 or (914) 885-4064 Fax (914) 377-6703

LEGION REGISTRATION FOR ADVANCED TRAINING
DEADLINE FOR REGISTRATION August 7, 2015

No reservations will be accepted after this date!

I will attend the Advanced Training September 14-18, 2015. I have enclosed a check for the registration fee of \$175.00 payable to the American Legion Department of New York.

NAME DENISE A. DiRESTA
ADDRESS WARREN County VETERANS' SERVICES, 1340 State Rt
CITY LAKE GEORGE NY ZIP 12845
WORK PHONE 518/761-6342 FAX 518/761-7683
EMAIL direstad@warrencountyny.gov
HOME or CELL PHONE 518/307-8237

Mail to: Daniel Morea, Veterans Service, 120 New Main St., Yonkers, NY 10701
Note: Must be mailed to this address. No exceptions.

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: Veterans' Services Department

DATE: 05/22/2015

- (a) Purpose of Request:
Change current Keyboard Specialist position from P/T (28 hrs./week) to F/T (40 hrs./week).

- (b) Details:
A reconsideration to increase hours to full-time for the current KBS position.

- (c) Previous Resolution Number:

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount:
Current remaining amount in Salaries - Part Time A6510.130 would be transferred to Salaries - Regular A6510.110. This account would then need to be increased (for remaining 2015) along with fringe benefit accounts.

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

* as listed in budget and LOGOS