

SOCIAL SERVICES COMMITTEE
COUNTRYSIDE ADULT HOME
AGENDA
1/23/15

Committee Members: Simpson, Wood, Sokol, Frasier, Strough, Vanselow, Seeber

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of prior Committee meeting
- III. Action Agenda/New Business
 1. Request to...Delete Full Time Leisure Time Activity Aide position 40hours/week.
Rationale: See Item #2.
 2. Request to...Create Part Time Leisure Time Activity Aide position 24hours/week and 16hours/week.
Rationale: The current Leisure Time Activity Aide is retiring after 30+ years of service. We have had no internal interest in her position as it stands. The retiring staff person has expressed an interest in coming back part time (16hours/week).
 3. Request to...Delete Part Time Institutional Aide/P #1, 8hours/week.
Rationale: See Item #5
 4. Request to...Delete Part Time Institutional Aide/P #4, 32 hours/week.
Rationale: See Item #5
 5. Request to...Create Full Time Institutional Aide, 40hours/week position.
Rationale: The current employee in the Institutional Aide/P #4 position lost her health benefits in 2010. We would use the benefit package from the Leisure Time Activity Aide position and the hours from the Institutional Aide/P #1 position to make this position full time again. Overall, this would have a beneficial impact on the morale of the facility and would not cost any additional monies.
Overall, all of the above changes would create a cost savings of approximately \$6,927/year.
 6. Request to...Enter into contract with Dr. Shannon Gould for Psychological services at Countryside Adult Home.
Rationale: We currently have a contract with Adirondack Neuropsychological Associates, and they have sent a notice that they will no longer be providing services as of January 31, 2015. There is no fee charged to Countryside for either of the services, and it is the same psychologist providing the services.
- IV. Referral/Pending Items
- V. Information for Discussion/Review

1. Overtime Report for 2014 & 2015

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

VI. Privilege of the Floor to discuss any additional items to come before the Committee

VI. Motion to adjourn

Attachments

Overtime Reports for 2014 & 2015

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

Countryside Adult Home - Overtime Report

Week Ending	2014 OT Hours	2013 OT Hours	2012 OT Hours	2011 OT Hours	2010 OT Hours	Includes Holiday	Net Difference from 2014	Difference to Date from 2014	1st Shift Hours [OT]	2nd Shift Hours [OT]	3rd Shift Hours [OT]
01/12/14	99.5	97.5	75.5	91.5	101.7	New Years	2.0	2.0	1344[39.5]	356[26]	255[30]
01/27/14	95.0	87	4.5	12.5	10.9	Martin Luther King	8.0	10.0	1309[56.5]	343[19.5]	236[19]
02/10/14	17.0	6	81.4	84.6	126.5		11.0	21.0	1270.5	392.5[17]	257
02/24/14	92.8	113.2	0	3	27.8	Presidents Day	-20.4	0.6	1209.5[45.8]	389.3[25.5]	295[21.5]
03/10/14	0.0	15.5	80.5	89	169.1		-15.5	-14.9	1316	313	248
03/24/14	12.0	0	0	8	4.5		12.0	-2.9	1263[6]	286.5[6]	274
04/07/14	7.0	14.15	12.5	7	34.3		-7.2	-10.1	1169[6]	295.5	281[1]
04/21/14	15.5	0	0	0.9	11.5		15.5	5.4	1136[4]	277[11.5]	266
05/05/14	0.0	8	14	13	23		-8.0	-2.6	1144	307.5	248
05/19/14	0.0	4	16	10.4	9.5		-4.0	-6.6	1136	340	280
06/02/14	79.0	82	5.5	0.4	13	Memorial Day	-3	-9.6	1169.5[38]	274.5[23]	262[18]
06/16/14	1.5	4	97	95	118.3		-2.5	-12.1	1208[1.5]	341	334
06/30/14	0.0	3	0	3.5	55		-3.0	-15.1	1279.5	317.2	251
07/14/14	76.5	81.5	8.5	9.5	95.5	Independence Day	-5.0	-20.1	1235.5[35.5]	324[23]	257[18]
07/28/14	0.0	8	93	114	56		-8	-28.1	1203	324	257
08/11/14	0.0	2	29.4	8	4.9		-2.0	-30.1	1256.5	335	267
08/25/14	0.0	3.5	8	12.5	13.5		-3.5	-33.6	1322.9	324	258
09/08/14	82.0	86.5	0	41.9	39.5	Labor Day	-4.5	-38.1	1334.6[41]	330.5[23]	297[18]
09/22/14	4.0	8.5	93.5	114.3	102.5		-4.5	-42.6	1357	294.5[4]	282
10/06/14	0.0	0	0	0	10.5		0	-42.6	1240	296.5	267
10/20/14	82.0	82.5	8	0	22	Columbus Day	-0.5	-43.1	1364[40.5]	280.5[23.5]	270[18]
11/03/14	0.0	0	80.5	89.9	89.5		0	-43.1	1324.5	285	266
11/17/14	78.0	85	26	23.5	15	Veteran's Day	-7	-50.1	1409.8[37]	291[23]	182[18]
12/01/14	86.0	81	93	88.2	122	Thanksgiving	5	-45.1	1377.8[49]	331.5[19]	314[18]
12/15/14	0.0	3	107	101	129.8		-3	-48.1	1323.4	312.5	254
12/29/14	85.0	79	2	0	70.3	Christmas	6	-42.1	1300.6[48]	365.5[19]	272[18]
	86.0	95.5	99.5	99.5	128.5		-9.5	-51.6	1335[44.5]	222[23.5]	313.7[18]
TOTAL	998.8	1050	1035	1121	1605						

Countryside Adult Home - Overtime Report

Week Ending	2015 OT Hours	2014 OT Hours	2013 OT Hours	2012 OT Hours	2011 OT Hours	2010 OT Hours	Includes Holiday	Net Difference from 2015	Difference to Date from 2015	1st Shift Hours [OT]	2nd Shift Hours [OT]	3rd Shift Hours [OT]
01/12/15	86	99.5	97.5	75.5	91.5	102	New Years	-13.5	-13.5	1335[44.5]	222[23.5]	313.7[18]
01/27/15		95.0	87	4.5	12.5	10.9	Martin Luther King					
02/10/15		17.0	6	81.4	84.6	127						
02/24/15		92.8	113	0	3	27.8	Presidents Day					
03/10/15		0.0	15.5	80.5	89	169						
03/24/15		12.0	0	0	8	4.5						
04/07/15		7.0	14.2	12.5	7	34.3						
04/21/15		15.5	0	0	0.9	11.5						
05/05/15		0.0	8	14	13	23						
05/19/15		0.0	4	16	10.4	9.5						
06/02/15		79.0	82	5.5	0.4	13	Memorial Day					
06/16/15		1.5	4	97	95	118						
06/30/15		0.0	3	0	3.5	55						
07/14/15		76.5	81.5	8.5	9.5	95.5	Independence Day					
07/28/15		0.0	8	93	114	56						
08/11/15		0.0	2	29.4	8	4.9						
08/25/15		0.0	3.5	8	12.5	13.5						
09/08/15		82.0	86.5	0	41.9	39.5	Labor Day					
09/22/15		4.0	8.5	93.5	114	103						
10/06/15		0.0	0	0	0	10.5						
10/20/15		82.0	82.5	8	0	22	Columbus Day					
11/03/15		0.0	0	80.5	89.9	89.5						
11/17/15		78.0	85	26	23.5	15	Veteran's Day					
12/01/15		86.0	81	93	88.2	122	Thanksgiving					
12/15/15		0.0	3	107	101	130						
12/29/15		85.0	79	2	0	70.3	Christmas					
		86.0	95.5	99.5	99.5	129						
TOTAL	86	998.8	1050	1035	1121	1605						

RESOLUTION REQUEST FORM NO. 11

Request to Create New Position

DEPARTMENT NAME: COUNTRYSIDE ADULT HOME

DATE: 1/23/2015

- (a) Title of Requested Position: **LEISURE TIME ACTIVITY AIDE PT(16hrs/week)**
- (b) Annual Base Salary (and Grade if Applicable): **\$24,664 (not to exceed 16hrs/week)**
- (c) Effective Date for New Position:* **2/10/2015**
*Please do not backdate unless the purpose is to correct an error.
- (d) List Any Position in the Department's Table of Organization Being Deleted as a Result of this Request: (Include annual salary and grade if applicable):
LEISURE TIME ACTIVITY AIDE (Grade 3) FT
- (e) Where are Funds in the Budget for this Position? List Budget Code, Object Code, Full Title and Amount:
A6030.130 Part Time Salaries
- (f) Has Personnel Officer Reviewed and Approved of the New Position Title? (This is necessary **BEFORE** bringing the request to committees.)
YES
- (g) Is this a mandated position? If so, please explain:
NO
- (h) Is there expected revenue from this position? If so, please explain:
NO

RESOLUTION REQUEST FORM NO. 11

Request to Create New Position

DEPARTMENT NAME: COUNTRYSIDE ADULT HOME

DATE: 1/23/2015

- (a) Title of Requested Position: **LEISURE TIME ACTIVITY AIDE PT(24hrs/week)**
- (b) Annual Base Salary (and Grade if Applicable): **\$24,664 (not to exceed 24hrs/week)**
- (c) Effective Date for New Position:* **2/10/2015**
*Please do not backdate unless the purpose is to correct an error.
- (d) List Any Position in the Department's Table of Organization Being Deleted as a Result of this Request: (Include annual salary and grade if applicable):
LEISURE TIME ACTIVITY AIDE (Grade 3) FT
- (e) Where are Funds in the Budget for this Position? List Budget Code, Object Code, Full Title and Amount:
A6030.130 Part Time Salaries
- (f) Has Personnel Officer Reviewed and Approved of the New Position Title?
(This is necessary **BEFORE** bringing the request to committees.)
YES
- (g) Is this a mandated position? If so, please explain:
NO
- (h) Is there expected revenue from this position? If so, please explain:
NO

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, termination or promotion. 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: **COUNTRYSIDE ADULT HOME**

Payroll Dept. No: **6030**

Title of Position: **LEISURE TIME ACTIVITY AIDE** Annual Salary: \$24,664(16HRS/WEEK) Grade: **3**

Budget code and title: **A.6030.130 PART TIME SALARIES** Union Non-Union

This position is vacated due to: Retirement Resignation Termination Promotion Other

Employee No.: **4891** Is this position mandated? Yes No Is the position reimbursable? Yes No

Source of reimbursement: Federal % State 50 % Other % **Savings of \$8,907/yr**

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (*hiring would be provisional*) Non-Competitive Other

Actual Impact to Budget Report will be provided monthly by Human Resources Director.

Candidate's qualifications must be approved by Personnel Officer prior to hiring.

Human Resources Director has approved this form when initialed. _____

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

Name of Committee _____ Date _____

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

The Administrator objects to the filling of the vacancy.

Administrator Signature _____

BUDGET OFFICER COMPLETES THIS SECTION

Date _____

The Budget Officer has no objection to the filling of the vacancy.

The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____ Date _____

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

The committee objects to the filling of the vacancy.

In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.

In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature _____

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, termination or promotion. 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: **COUNTRYSIDE ADULT HOME**

Payroll Dept. No: **6030**

Title of Position: **LEISURE TIME ACTIVITY AIDE** Annual Salary: \$24,664(24HRS/WEEK) Grade: **3**

Budget code and title: **A.6030.130 PART TIME SALARIES** Union Non-Union

This position is vacated due to: Retirement Resignation Termination Promotion Other

Employee No.: **4891** Is this position mandated? Yes No Is the position reimbursable? Yes No

Source of reimbursement: Federal % State 50 % Other % **Savings of \$8,907/yr**

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (*hiring would be provisional*) Non-Competitive Other

Actual Impact to Budget Report will be provided monthly by Human Resources Director.

Candidate's qualifications must be approved by Personnel Officer prior to hiring.

Human Resources Director has approved this form when initialed. _____

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

Name of Committee _____ Date _____

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

The Administrator objects to the filling of the vacancy.

Administrator Signature _____

BUDGET OFFICER COMPLETES THIS SECTION

Date _____

The Budget Officer has no objection to the filling of the vacancy.

The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____ Date _____

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

The committee objects to the filling of the vacancy.

In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.

In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature _____

RESOLUTION REQUEST FORM NO. 11

Request to Create New Position

DEPARTMENT NAME: COUNTRYSIDE ADULT HOME

DATE: 1/23/2015

- (a) Title of Requested Position: **INSTITUTIONAL AIDE FT**
- (b) Annual Base Salary (and Grade if Applicable): **\$24,664 (GRADE 3)**
- (c) Effective Date for New Position:* **2/9/2015**
*Please do not backdate unless the purpose is to correct an error.
- (d) List Any Position in the Department's Table of Organization Being Deleted as a Result of this Request: (Include annual salary and grade if applicable):
INSTITUTIONAL AIDE/P #1 (Grade 3) & INSTITUTIONAL AIDE/P #4(Grade 3)
- (e) Where are Funds in the Budget for this Position? List Budget Code, Object Code, Full Title and Amount:
A6030.110 Full Time Salaries
- (f) Has Personnel Officer Reviewed and Approved of the New Position Title? (This is necessary **BEFORE** bringing the request to committees.)
YES
- (g) Is this a mandated position? If so, please explain:
YES - DEPARTMENT OF HEALTH REGULATIONS
- (h) Is there expected revenue from this position? If so, please explain:
NO

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, termination or promotion. 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: **COUNTRYSIDE ADULT HOME**

Payroll Dept. No: **6030**

Title of Position: **INSTITUTIONAL AIDE**

Annual Salary: **\$24,664**

Grade: **3**

Budget code and title: **A.6030.110 FULL TIME SALARIES**

Union

Non-Union

This position is vacated due to: Retirement Resignation Termination Promotion Other

Employee No.:

Is this position mandated? Yes No

Is the position reimbursable? Yes No

Source of reimbursement: Federal

% State

50 % Other

% Additional cost of \$6,920/yr

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (*hiring would be provisional*) Non-Competitive Other

Actual Impact to Budget Report will be provided monthly by Human Resources Director.

Candidate's qualifications must be approved by Personnel Officer prior to hiring.

Human Resources Director has approved this form when initialed. _____

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

Name of Committee _____ Date _____

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

The Administrator objects to the filling of the vacancy.

Administrator Signature _____

BUDGET OFFICER COMPLETES THIS SECTION

Date _____

The Budget Officer has no objection to the filling of the vacancy.

The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____ Date _____

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

The committee objects to the filling of the vacancy.

In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.

In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature _____

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: COUNTRYSIDE ADULT HOME

DATE: 01/23/2015

- (a) Is this a Result of a Bid or Request for Proposal?
NO
- (b) Purpose of Contract:
Provide psychological services to residents at Countryside.
- (c) Name of Contractor:
Dr. Shannon Gould
- (d) Address of Contractor: **131 Lawrence Street, Saratoga Springs, NY 12866**
- (e) Contractor's Contact Person and Telephone Number:
Dr. Shannon Gould, PH#(518)581-7260
- (f) Has or will the Contract be provided, if so, please attach:
Yes, being reviewed by County Attorney's Office
- (g) Commencement Date of Contract:
1/31/2015
- (h) Termination Date of Contract:
Upon 60 Day Written Notice By Either Party
- (i) Payment Provisions: i) lump sum amount
ii) hourly rate amount
iii) total amount not to exceed
iv) how will payments be made (i.e. monthly, quarterly,
upon completion of the project, etc.
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title*
and Amount: **OR Capital Project OR Capital Reserve Project Number, Title, and
Amount:**

No Fee to Facility

Sample: A.1010 470 Legislative Board – Contract \$xx.xx
Capital Project No. H289.9550 480 – Old Jail Renovations \$xx.xx

*as listed in budget and LOGOS