

CRIMINAL JUSTICE AND PUBLIC SAFETY MEETING

PROBATION AGENDA

1/22/19

- I. **Committee Meeting called to order by Chairman**
- II. **Motion to approve minutes from prior Committee Meeting**

III. **Action Agenda**

Resolution Request – To enter into a contract with Big Brothers and Big Sisters of the Southern Adirondacks for Mentoring Services for Youth under the Age of 18.

Rational – Mentoring is a needed service for this population and is an evidence based practice.

Resolution Request – Authorization for Robert Iusi to attend American Probation and Parole Association 2019 Winter Institute in Miami, FL from 3/9/19 to 3/13/19.

Rational – Excellent opportunity for Director to attend National Conference regarding Probation practices. The New York State Council of Probation Administrators will pay all expenses and there is no cost to the County.

- IV. **Pending Items-** There are no pending items.
- V. **Information and Discussion -** Raise the Age, Bail Reform
- VI. **Attachment** – Resolution Request

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Probation

DATE:

- (a) Is this a Result of a Bid or Request for Proposal? **No**
- (b) Purpose of Contract: **To enter into a contract with Big Brothers and Big Sisters of the Southern Adirondack for Mentoring Services for Youth under the age of 18.**
- (c) Name of Contractor: **Big Brothers and Big Sisters of the Southern Adirondacks**
- (d) Address of Contractor: **14 West Notre Dame Street, Glens Falls, NY 12801**
- (e) Contractor's Contact Person and Telephone Number: **Bill Moon, (518)798-1010X303**
- (f) Has or will the Contract be provided, if so, please attach: **Will be provided**
- (g) Commencement Date of Contract: **ASAP**
- (h) Termination Date of Contract: **Open**
- (i) Payment Provisions:
 - i) lump sum amount **Raise the Age funds will be made available contingent upon DCJS approval as well as funding from any other appropriate source.**
 - 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: **None at this time.****

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

RESOLUTION REQUEST FORM NO. 15

Requesting Approval for Out-of-State Travel*

****If the conference announcement or details are available in writing, please attach.***

DEPARTMENT NAME: Probation Department

DATE: 1/22/19

- (a) Dates of Travel: 3/9/19 to 3/13/19

- (b) Purpose (include complete name of any conference, school, etc.): American Probation and Parole Association 2019 Winter Training Institute

- (c) City/Town & State: Miami, Florida

- (d) Employee(s) Traveling (include title(s): Robert F. Iusi, Jr., Director of Probation

- (e) Is County paying the costs or is another Agency? No cost to County - NYS Council of Probation Administrators is paying all costs.

- (f) Mode of Transportation to be Use: Airplane
(County Vehicle or Mass Transportation)

Please note: If County vehicle use is requested, upon resolution approval, please provide Fleet Manager Frank Morehouse with vehicle request form properly completed.