

HEALTH SERVICES COMMITTEE
OFFICE FOR THE AGING AGENDA
February 25, 2022

Committee Members: Supervisors Frasier, McDevitt, Hogan, Braymer, Conover, Beaty and Geraci - *Chair of the Board shall serve as an Ex-Officio member when needed in accordance with Section C (4) of the Rules of the Board*

- I. Committee meeting called to order by Chairman
- II. Motion to approve the minutes of the prior meeting
- III. Action Agenda/New Business Items:
1. Request: Amend contract for dietitian services to increase hourly rate from \$40 to \$45.
Rationale: The dietitian has not had an increase in over nine years. This will not have an impact on the overall budget, as the not to exceed amount will remain the same.
 2. Request: Delete Typist position, Grade 3, salary \$30,373 due to resignation and create Services Assistant-OFA #4, Grade 7, salary \$36,414.
Rationale: After discussion with both OFA staff and Civil Service, and looking at the tasks needed to be completed, it was felt this would be a better fit for the office, allowing more flexibility and continuity of services for the clients. Due to the years of service the previous individual had with the County, there should be no increase in our budget. However, we can utilize stimulus funds from NYSOFA (New York State Office for the Aging) to cover any additional expenses for 2022 if needed.
 3. Request: Fill Services Assistant-OFA #4, Grade 7, salary \$36,414.
Rationale: See above.
 4. Request: Fill Meal Site Cook #7-Long Lake, Grade 2, 25/hours week, salary \$18,584, due to resignation.
Rationale: The person who took the job started in October, 2021 and decided she did not like it. This position is 100% reimbursable due to it being Hamilton County.
 5. Request: Enter into contract with RSVP (Tri County United Way) to provide medical transportation to residents of Warren County in an amount not to exceed \$5,000/year. We will reimburse each them \$20/each one way trip less than 25 miles or less, and \$35/each one way trip between 26-50 miles. With option for one year renews.
Rationale: This will assist us with meeting the transportation need of seniors in Warren County and is 75% reimbursable from NYSOFA.
- IV. Discussion Items:
- a. Authorization Deanna Park to attend the Association on Aging Leadership Institute April 5-7, 202, in the amount of \$287 including hotel & conference fees.
- V. Referrals/Pending Items:
- a. Referral from the Personnel, Administration & Higher Education Committee requesting that Dee Park, *Director, Office for the Aging*, prepare a plan to address staffing issues at meal sites to present for review at a future Committee meeting. (09.01.21) Update: Ms. Park indicated she had advertised the vacant meal site positions on social media and a campaign with The Chronicle was

planned, as well as a campaign with local radio stations. (09.20.21) Update: Ms. Park informed she hoped meal delivery would return to five days a week with volunteers in January.

VI. Privilege of the Floor and Public Comment (please allow for 15 second delay on live stream meetings)

VII. Motion to adjourn

Attachments:

1. 04 Amend Existing Contract – Catherine Keating
2. 11 Request to Create New Position – Services Assistant-OFA #4
3. 12 Notice of Intent to Fill – Services Assistant-OFA #4
4. 12 Notice of Intent to Fill – Meal Site Cook #7
5. 03 New Contract – RSVP (Tri-County United Way), Medical Transportation

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: OFA

DATE: February 1, 2022

- (a) Purpose of Contract Change: **Amend contract with Catherine Keating-Stauch to increase hourly rate from \$40 to \$45.**
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: **272 of 2014; 59 of 2019**
- (c) Name of Contractor: **Catherine Keating-Stauch**
- (d) Address of Contractor: **11 Waterview Drive, Saratoga Springs, NY 12866**
- (e) Contractor's Contact Person and Telephone Number: **Catherine Keating-Stauch, PH#(518)260-8808**
- (f) Commencement Date of Extension: **5/1/2022**
- (g) Termination Date of Extension: **4/30/2023, with one year extensions as long as there are no changes to the terms**
- (h) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount **\$45**
 - iii) total amount not to exceed **\$27,300**
 - 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, Object Code, Full Title* and Amount: **OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: A.6772.470 Warren County Contracts (\$16,000) and A.6771.470 Hamilton County Contracts (\$11,300)**

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

*as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 11

Request to Create New Position

DEPARTMENT NAME: Warren/Hamilton Counties Office for the Aging

DATE: 2/9/2022

- (a) Title of Requested Position: **Services Assistant - Office for the Aging #4**
- (b) Annual Base Salary (and Grade if Applicable): **\$36,414; Grade 7**
- (c) Effective Date for New Position:* **2/22/2022**
*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):
Typist; Grade 3; \$30,373
- (e) Where are Funds in the Budget for this Position? List Budget Code, Object Code, Full Title and Amount:
A6772.110
- (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: Office for the Aging Payroll Dept. No: 57.01
Title of Position: Services Assistant-Office for the Aging #4 Base Salary of Position: \$36,414 Grade: 7
Filling at Step # (If Known): _____
Budget code and title: A6772.110 Warren - Salaries FT Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No./Last Name: _____ Date of Vacancy: 03/22/2022
Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal _____% State 90% Other _____%

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

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

Administrator Signature _____ Date _____

BUDGET OFFICER COMPLETES THIS SECTION

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 _____ Date _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____
 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 _____ Date _____

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: Office for the Aging Payroll Dept. No: 57.01
Title of Position: Meal Site Cook #7 Base Salary of Position: \$18,584(25hr/wceck) Grade: 2
Filling at Step # (If Known): _____
Budget code and title: A6771.110 Nutrition Program Hamilton - Salaries PT Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No./Last Name: 13594/Burnett Date of Vacancy: 2/11/2022
Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal _____% State 75% Other 25% Hamilton County

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

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

Administrator Signature _____ Date _____

BUDGET OFFICER COMPLETES THIS SECTION

- 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 _____ Date _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____
 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 _____ Date _____

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Office for the Aging

DATE: 02/11/2022

- (a) Is this a Result of a Bid or Request for Proposal? No
- (b) Purpose of Contract: Provide medical transportation to residents of Warren County who are 60(+) years of age under our CSE (Commuinty Services for the Eldery) program in an amount not to exceed \$5,000.
- (c) Name of Contractor: RSVP, Tri County United Way
- (d) Address of Contractor: 696 Upper Glen Street, Queensbury, NY 12804
- (e) Contractor's Contact Person and Telephone Number: Brian Bearor, PH#(519)793-3136, bbearor@tricityunitedway.org
- (f) Has or will the Contract be provided, if so, please attach: Will be provided by County Attorney's Office
- (g) Commencement Date of Contract: 4/1/2022
- (h) Termination Date of Contract: 3/31/2023, with option of one year renewals, as long as terms of contract do not change
- (i) Payment Provisions: i) lump sum amount
ii) hourly rate amount \$20/each one way trip 25miles or less; \$30/each one way trip between 26-50miles
iii) total amount not to exceed \$5,000
iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Quarterly
- (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: A6772.470 Warren County Contracts \$5,000