

Criminal Justice and Public Safety Committee  
Office of Emergency Services  
February 22, 2023

COMMITTEE MEMBERS: GERACI, Conover, McDevitt, Driscoll, Magowan, Leggett, Vacant

- I. Committee meeting called to order by Chair
- II. Approval of minutes of prior Committee Meeting
- III. Privilege of the floor and public comment
- III. Action Agenda/New Business Items:
  1. Request: Request to approve the Warren County Domestic Terrorism Prevention Plan. **Attachment #1**  
Rationale: Executive Order No. 18 entitled “Preventing and Responding to Domestic Terrorism” was signed by Governor Hochul on May 18, 2022. Subsequent to, and in accordance with EO 18, every County and the City of New York must develop a domestic terrorism prevention plan. The Warren County Domestic Terrorism Prevention Plan details actions taken to identify and mitigate acts of terrorism or targeted violence. The Plan will serve as a guide to the Warren-Washington County Threat Assessment Coordination Team. Warren County OES submitted the draft plan which was not adopted by the Board of Supervisors. We are requesting the support of this committee to move the DTP Plan to the full board for consideration.
  2. Request: Resolution request to increase the 2023 salary of the Deputy EMS Coordinator from \$8,223 to \$8,233 effective January 1, 2023. **Attachment #2**  
Rationale: Resolution needed to correct an error in the salary adopted in the 2023 budget.
  3. Request: Resolution request to increase the 2023 salary of the 2<sup>nd</sup> Deputy EMS Coordinator from \$8,223 to \$8,233 effective January 1, 2023. **Attachment #3**  
Rationale: Resolution needed to correct an error in the salary adopted in the 2023 budget.
  4. Request: Resolution request to increase the 2023 salary of the 3<sup>rd</sup> Deputy EMS Coordinator from \$8,223 to \$8,233 effective January 1, 2023. **Attachment #4**  
Rationale: Resolution needed to correct an error in the salary adopted in the 2023 budget.
  5. Request: Resolution request to apply for the FY23 State Homeland Security Program grant in an amount not to exceed \$100,000. **Attachment #5**  
Rationale: There is no local match requirement with this grant. Guidance is typically released in March or April and we anticipate a short application period.
  6. Request: Resolution request to apply for the FY23 Local Emergency Management Performance grant in an amount not to exceed \$35,000. **Attachment #6**  
Rationale: This is a 50/50 matching grant that utilizes existing salary and fringe expenses to satisfy the match requirement.
  7. Request: Resolution request to apply for the FY23 Hazardous Materials Emergency Preparedness grant in an amount not to exceed \$25,000. **Attachment #7**  
Rationale: The purpose of this grant is to conduct hazardous materials planning and training. There is a 25% local match requirement in which existing budgetary items can be used (salaries, travel, supplies, etc.). Warren County OES will apply on behalf of the seven-county Adirondack Regional Hazmat Consortium.
  8. Request: Resolution request to apply for the FY21 Hazmat Grant Program in an amount not to exceed \$180,000. **Attachment #8**  
Rationale: The purpose of this grant is to build and sustain hazmat capabilities within the Adirondack Regional Hazmat Consortium. There is no local contribution to this grant and Warren County will act as the fiduciary agency.

- IV. Discussion Items:
    - 1. NYSEMA Conference – February 13-16, 2023 *Attachment #9*
    - 2. Closing Policy *Attachment #10*
    - 3. Regroup Mass Notifications
  
  - V. Referrals/Pending Items:
    - 1. It was the consensus of the Committee for a Draft Domestic Terrorism Prevention Plan to be distributed to all members of the Board of Supervisors to review and comment, following which the Draft Plan would be brought back before Committee, including any comments submitted, to be approved for the March 17th Board Meeting. (01.23.23)
  
  - VII. Privilege of the floor and public comment
  
  - VIII. Motion to adjourn
- 

Attachments:

- 1. Resolution Request Form #20 – *Domestic Terrorism Prevention Plan is a separate attachment*
- 2. Resolution Request Form #13 and supporting documentation
- 3. Resolution Request Form #13
- 4. Resolution Request Form #13
- 5. Resolution Request Form #05
- 6. Resolution Request Form #05
- 7. Resolution Request Form #05
- 8. Resolution Request Form #05
- 9. Authorization to Attend Meeting or Convention – *Executed Form*
- 10. Warren County Closing Policy - DRAFT

# **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: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Purpose of Request:  
**To approve the draft Warren County Domestic Terrorism Prevention Plan.**
  
- (b) Details:  
**The Warren County Domestic Terrorism Prevention Plan details actions taken to identify and mitigate acts of terrorism or targeted violence. The Plan will serve as a guide to the Warren-Washington County Threat Assessment Coordination Team.**
  
- (c) Previous Resolution Number:
  
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount:

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

\* as listed in budget and LOGOS

## ***RESOLUTION REQUEST FORM NO. 13***

### ***Request to Increase or Decrease Salary of Non-Union Position***

**DEPARTMENT NAME: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Employee Name, Title and Employee No.:  
**John Tims, Deputy EMS Coordinator Employee No. 13025**
- (b) Current Annual **Base** Salary (and Grade if Applicable):  
**\$8,233**
- (c) Former Annual **Base** Salary (and Grade if Applicable):  
**\$8,223**
- (d) Effective Date for Salary Change\*:  
*\*Please do not backdate request unless the purpose is to correct an error*  
**January 1, 2023**
- (e) If This is a Request for a Salary Increase, Where are Funds in the Budget for this Position?  
List Budget Code (with title), Object Code (with title), and Amount:  
**A.4022 130 Emergency Medical Services - Salaries Part Time \$10.00**
- (f) Is a Budget Transfer needed?  YES  NO  
If yes, please complete Resolution Request Form No. 10 – Transfer of Funds  
If no, please provide details on how the increase will be funded within the current budget:  
**Due to vacancies in the first two weeks of the year, funding is available in the existing budget.**
- (g) Is there expected revenue from this position?  YES  NO  
If yes, please complete Resolution Request Form No. 07 – Amend County Budget to recognize revenue
- (h) Justification of Request:  
**The salary increase of \$10 is needed to correct an error in the salary as adopted in the 2023 Warren County budget.**

# Warren County Board of Supervisors

## RESOLUTION NO. 417 OF 2022

**RESOLUTION INTRODUCED BY SUPERVISORS THOMAS, CONOVER, BEATY, FRASIER, WILD, BRAYMER AND RUNYON**

### **AMENDING TABLES OF ORGANIZATION AND WARREN COUNTY SALARY AND COMPENSATION PLAN FOR 2022 TO PROVIDE INTERIM SALARY INCREASES FOR NON-BARGAINING UNIT EMPLOYEES**

WHEREAS, the Personnel, Administration & Higher Education Committee has considered a request to authorize interim salary increases for non-bargaining unit employees to match those previously authorized for CSEA employees, effective retroactive to August 1, 2022, and has recommended same to the Board of Supervisors, now, therefore, be it

RESOLVED, that the Tables of Organization and Warren County Salary and Compensation Plan for 2022 are hereby amended in accordance with the attached "Schedule A" and "Schedule B" documents, effective retroactive to August 1, 2022.



# Salary Schedule

## Budget Year 2023

Budget Year	2023			
Position Title	Departmental Request	Budget Officer's Recommendation	Tentative Budget	Adopted County Budget
<b>A.4022 - General.Emergency Medical Service</b>				
2nd Deputy EMS Coordinator	6803.00	8223.00	8223.00	8223.00
3rd Deputy EMS Coordinator	6803.00	8223.00	8223.00	8223.00
Deputy EMS Coordinator	6803.00	8223.00	8223.00	8223.00
EMS Coordinator	11845.00	13275.00	13275.00	13275.00
<b>SubTotal</b>	<b>32254</b>	<b>37944</b>	<b>37944</b>	<b>37944</b>

*slb \$8,233.*

## ***RESOLUTION REQUEST FORM NO. 13***

### ***Request to Increase or Decrease Salary of Non-Union Position***

**DEPARTMENT NAME: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Employee Name, Title and Employee No.:  
**Scott Stone, 2nd Deputy EMS Coordinator Employee No. 13759**
- (b) Current Annual **Base** Salary (and Grade if Applicable):  
**\$8,233**
- (c) Former Annual **Base** Salary (and Grade if Applicable):  
**\$8,223**
- (d) Effective Date for Salary Change\*:  
*\*Please do not backdate request unless the purpose is to correct an error*  
**January 1, 2023**
- (e) If This is a Request for a Salary Increase, Where are Funds in the Budget for this Position?  
List Budget Code (with title), Object Code (with title), and Amount:  
**A.4022 130 Emergency Medical Services - Salaries Part Time \$10.00**
- (f) Is a Budget Transfer needed?  YES  NO  
If yes, please complete Resolution Request Form No. 10 – Transfer of Funds  
If no, please provide details on how the increase will be funded within the current budget:  
**Due to vacancies in the first two weeks of the year, funding is available in the existing budget.**
- (g) Is there expected revenue from this position?  YES  NO  
If yes, please complete Resolution Request Form No. 07 – Amend County Budget to recognize revenue
- (h) Justification of Request:  
**The salary increase of \$10 is needed to correct an error in the salary as adopted in the 2023 Warren County budget.**

## ***RESOLUTION REQUEST FORM NO. 13***

### ***Request to Increase or Decrease Salary of Non-Union Position***

**DEPARTMENT NAME: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Employee Name, Title and Employee No.:  
**Mark DeSimone, 3rd Deputy EMS Coordinator Employee No. 13760**
- (b) Current Annual **Base** Salary (and Grade if Applicable):  
**\$8,233**
- (c) Former Annual **Base** Salary (and Grade if Applicable):  
**\$8,223**
- (d) Effective Date for Salary Change\*:  
*\*Please do not backdate request unless the purpose is to correct an error*  
**January 1, 2023**
- (e) If This is a Request for a Salary Increase, Where are Funds in the Budget for this Position?  
List Budget Code (with title), Object Code (with title), and Amount:  
**A.4022 130 Emergency Medical Services - Salaries Part Time \$10.00**
- (f) Is a Budget Transfer needed?  YES  NO  
If yes, please complete Resolution Request Form No. 10 – Transfer of Funds  
If no, please provide details on how the increase will be funded within the current budget:  
**Due to vacancies in the first two weeks of the year, funding is available in the existing budget.**
- (g) Is there expected revenue from this position?  YES  NO  
If yes, please complete Resolution Request Form No. 07 – Amend County Budget to recognize revenue
- (h) Justification of Request:  
**The salary increase of \$10 is needed to correct an error in the salary as adopted in the 2023 Warren County budget.**

## ***RESOLUTION REQUEST FORM NO. 5***

### ***Request to Apply for a Grant Application and Grant Agreement***

**DEPARTMENT NAME: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Purpose of Grant:  
**FY23 State Homeland Security Program Grant**
  
- (b) Name of Grantor:  
**NYS Division of Homeland Security and Emergency Services**
  
- (c) Address of Contractor: **1220 Washington Ave, Building 7A, 6th Floor, Albany, NY  
12242**
  
- (d) Grantor's Contact Person and Telephone Number:  
**Michael Tomaso, Public Safety Grants Representative 518-242-8293**
  
- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach? **To be provided**
  
- (f) Effective Date of Grant: **To be determined**
  
- (g) Termination Date of Grant: **To be determined**
  
- (h) Total Dollar Amount Involved (not to exceed): **\$100,000**
  
- (i) Deadline to Submit Grant Application and/or Grant Agreement:  
**To be determined**
  
- (j) Is a Budget amendment required? **No** If yes, also complete and submit Form No. 7.
  
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? **No** If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
  
- (i) Is a Local Share Required? **No** If Yes, Where are the Funds? List Budget Code, Object Code, Full Title\* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

**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. 5***

### ***Request to Apply for a Grant Application and Grant Agreement***

**DEPARTMENT NAME: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Purpose of Grant:  
**FY23 Local Emergency Management Performance Grant**
  
- (b) Name of Grantor:  
**NYS Division of Homeland Security and Emergency Services**
  
- (c) Address of Contractor: **1220 Washington Ave, Building 7A, 6th Floor, Albany, NY  
12242**
  
- (d) Grantor's Contact Person and Telephone Number:  
**Michael Tomaso, Public Safety Grants Representative 518-242-8293**
  
- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach? **To be provided**
  
- (f) Effective Date of Grant: **To be determined**
  
- (g) Termination Date of Grant: **To be determined**
  
- (h) Total Dollar Amount Involved (not to exceed): **\$35,000**
  
- (i) Deadline to Submit Grant Application and/or Grant Agreement:  
**To be determined**
  
- (j) Is a Budget amendment required? **No** If yes, also complete and submit Form No. 7.
  
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? **No** If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
  
- (i) Is a Local Share Required? **Yes** If Yes, Where are the Funds? List Budget Code, Object Code, Full Title\* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

#### **Various budget codes**

**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. 5***

### ***Request to Apply for a Grant Application and Grant Agreement***

**DEPARTMENT NAME: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Purpose of Grant:  
**FY 2023 Hazardous Materials Emergency Preparedness grant**
  
- (b) Name of Grantor:  
**NYS Division of Homeland Security and Emergency Services**
  
- (c) Address of Contractor: **1220 Washington Avenue  
State Campus, Building 7A  
Albany, NY 12242**
  
- (d) Grantor's Contact Person and Telephone Number:  
**Michael Tomaso, Public Safety Grants Representative 518-242-8293**
  
- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach? **To be provided**
  
- (f) Effective Date of Grant: **To be determined**
  
- (g) Termination Date of Grant: **To be determined**
  
- (h) Total Dollar Amount Involved (not to exceed): **\$25,000**
  
- (i) Deadline to Submit Grant Application and/or Grant Agreement:  
**To be determined**
  
- (j) Is a Budget amendment required? **No** If yes, also complete and submit Form No. 7.
  
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? **No** If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
  
- (i) Is a Local Share Required? **Yes** If Yes, Where are the Funds? List Budget Code, Object Code, Full Title\* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

#### **Various budget codes**

**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. 5***

### ***Request to Apply for a Grant Application and Grant Agreement***

**DEPARTMENT NAME: Office of Emergency Services**

**DATE: February 22, 2023**

- (a) Purpose of Grant:  
**FY21 Hazmat Grant Program**
  
- (b) Name of Grantor:  
**NYS Division of Homeland Security and Emergency Services**
  
- (c) Address of Contractor: **1220 Washington Ave, Building 7A, 6th Floor, Albany, NY  
12242**
  
- (d) Grantor's Contact Person and Telephone Number:  
**Michael Tomaso, Public Safety Grants Representative 518-242-8293**
  
- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach? **To be provided**
  
- (f) Effective Date of Grant: **To be determined**
  
- (g) Termination Date of Grant: **To be determined**
  
- (h) Total Dollar Amount Involved (not to exceed): **\$180,000**
  
- (i) Deadline to Submit Grant Application and/or Grant Agreement:  
**To be determined**
  
- (j) Is a Budget amendment required? **No** If yes, also complete and submit Form No. 7.
  
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? **No** If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
  
- (i) Is a Local Share Required? **No** If Yes, Where are the Funds? List Budget Code, Object Code, Full Title\* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

**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

SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (Must be approved by Department Head, County Administrator & Committee Chair)
Out-of-State (Must be approved by Department Head, County Administrator & Committee Chair)
On-Line (Must be approved by Department Head, County Administrator & Committee Chair)

The Criminal Justice & Public Safety Committee hereby authorizes Ann Marie Mason, Ashley Rivers, Jennifer Ramsey (Supervisory Committee) (Employee Name)

to attend New York State Emergency Management Association (NYSEMA) Conference (Name of meeting or organization)

at Syracuse, NY on February 13-16, 2023 (Address) (Dates)

Meeting/Convention/Training Cost: \$175pp Mode of transportation to be used: County Vehicle (County Vehicle or Mass Transportation)

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

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

Notice of meeting/convention/training including cost. Total Cost \$ No to exceed \$1,191.00 (Include travel costs)

For Overnight Travel

Room rate \$ 101.00 GSA\* Rate \$ 101.00 Funding in Budget? Y N

Meal costs \$ GSA rate Not to exceed GSA\* per diem rate \$ 64/pp/day Budget Code: A.3640 444 \* www.gsa.gov

Date: 1/9/2023

Department Head Signature

Date: 1/16/2023

County Administrator Signature

Date: 01/20/23

Committee Chair 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 Buildings & Grounds if fleet vehicle is needed.
3. Copy to Purchasing with Purchase Order, if required.
4. Copy to Clerk of the Board if credit card will be used.
5. Copy of executed form needs to be included in next agenda for reporting to oversight Committee.

New York State Emergency Management Association (NYSEMA) Conference  
 February 13-16, 2023  
 Ann Marie Mason, Ashley Rivers, Jennifer Ramsey

**Conference Fee \$175.00 pp \$ 525.00**

Hotel: Embassy Suites at Destiny USA, Syracuse, NY

Room Rate \$101/night per room GSA Rate: \$101.00

Room 1 \$101 x 3 nights \$ 303.00

Room 2 \$101 x 3 nights \$ 303.00

Room 3 \$101 x 3 nights \$ 303.00

Total Room Cost \$909.00

Rooms Pd. By NYS 2 Rooms x 3 nights (\$606.00)

**Total Room Cost to County \$ 303.00**

GSA M&IE Rate: \$64.00 per day/\$48.00 First & last day

\$64.00 x 2 days

A. Mason \$48.00 x 2 days \$224.00

\$64.00 x 2 days

A. Rivers \$48.00 x 2 days \$224.00

\$64.00 x 2 days

J. Ramsey \$48.00 x 2 days \$224.00

Total M&IE Cost \$672.00

3 Breakfast (\$14)

Meals included 2 Lunch (\$16)

(Per Person) 1 Dinner (\$29) (\$309.00)

**Total M&IE Cost to County \$363.00**

**Total Cost to County not to exceed: \$ 1,191.00**

## Warren County Closing Policy

It is the goal of Warren County to be open and provide services during normal business hours. However, in order to protect the well-being and safety of its employees, there could be a circumstance which may necessitate a closure.

### **Determination to Close**

The determination to close will be made by chairman of the board of supervisors, upon consultation with the Continuity Management Team, appendix A. Some circumstances that may warrant a closure are adverse weather conditions, hazardous material release, terrorism, utility failure or other emergency, event or threat.

### **Notification**

If the decision to close occurs prior to business hours, the notification will be made via the School Closing Network and will appear on TV news stations, press release, social media, website, Ready Warren County NY app and the Continuity Management Team will activate predetermined phone trees, see appendix B. A variable message board could be placed outside in front of the county buildings.

If the decision to close occurs during business hours, an email will be sent from the County Administrator to department heads and a follow up email to all employees. The following notifications will also occur: School Closing Network, press release, social media, website, and the Ready Warren County NY app. A variable message board could be placed outside in front of the county buildings.

**Special instructions, if any, will be included with the notifications.**

### **Essential Employees**

Essential employees are required to report to work, unless otherwise directed by their supervisor.

## **Appendix A – Continuity Management Team**

Chair of the Board of Supervisors

County Administrator

Director, Office of Emergency Services

Clerk of the Board of Supervisors

Senior Justice of the Courts

**Appendix B – County Telephone Tree**

<b>County Administrator</b>	<b>OES Director</b>	<b>Clerk of the Board</b>	<b>Senior Justice of the Courts</b>
Auditor	Assigned Counsel	Board of Elections	All departments in the courts at the Municipal Center & within Warren County
County Administrator	OES	Board of Supervisors	
County Attorney	Fire Prevention & Building Codes	Employment & Training	
County Clerk	Health Services	Countryside	
DPW(all sub depts.)	Human Resources	Community Services	
District Attorney	IT	Civil Service	
Public Defender	Probation	OFA	
Real Property	Self-Insurance	Planning	
Tourism	Sheriff	Purchasing	
Treasurer		Social Services	
Weights & Measures		Veterans	