

Human Services Committee
Warren County Department of Social Services

COMMITTEE MEETING AGENDA

November 20, 2023

Committee Members: Supervisors DRISCOLL, Frasier, Bruno, McDevitt, Runyon, Geraci and Smith.

Chair of the Board shall serve as an Ex-Officio member when needed in accordance with the Section C(4) of the Rules of the Board.

- I. Committee meeting called to order by Chair
- II. Approval of minutes of prior Committee meeting
- III. Privilege of the floor and public comment
- IV. Action Agenda/New Business Items:

1. Request:

Request for Transfer of Funds: From Salaries – Regular, to Salaries – Overtime, in the amount of \$10,000; From Salaries – Regular, to Salaries – Part-Time, in the amount of \$10,000.

Rationale: This will cover overtime costs and part-time salaries through year-end 2023.

Attachment #1

2. Request:

Request for Transfer of Funds: From Salaries – Part-Time, to Retirement, in the amount of \$746; From Salaries – Part-Time to Social Security, in the amount of \$1,000; and From Salaries-Part-Time, to Medicare, in the amount of \$250.

Rationale: This pertains to the two part-time Community Services Worker positions (Foster Care Unit) previously funded by donations and added to the 2024 DSS Budget. This transfer of funds will cover employee benefits costs until the donated funding is depleted.

Attachment #2

3. Request:

Requesting continuation of the Memorandum of Understanding (MOU) between the Department of Social Services and the Department of Workforce Development (formerly Employment & Training Administration), authorizing the partnership involving referrals, for Temporary Assistance applicants and recipients to attend the *Pathways to Successful Employment Job Search Assistance and Orientation class*; for the term commencing January 1, 2024 and terminating December 31, 2024, for a total amount of \$15,000.

Rationale: The goal of this departmental collaborative effort via referrals, is to increase and support recipients transitioning from public assistance to unsubsidized employment.

Attachment #3

V. Discussion Items:

- 1. Christina Mastrianni, Acting Commissioner
-Commissioner's Report of Activities & Updates; (Previously distributed by Committee Chairman Driscoll)
- 2. Julie Montero, Fiscal Manager, DSS
-Monthly Reports: Revenue, Expenditures and Overtime.
Attachment #4
- 3. Amy McByrne, Director of Countryside Adult Home

VI. Referrals/Pending Items: NONE

VII. Privilege of the Floor and public comment

VII. Motion to Adjourn

ATTACHMENTS:

1. Request for Transfer of Funds
2. Request for Transfer of Funds
3. Request to Renew Agreement between DSS and Workforce Development
4. Monthly Reports and overtime

RESOLUTION REQUEST FORM NO. 10***Request for Transfer of Funds*****TO:** AMANDA ALLEN, CLERK, WARREN COUNTY BOARD OF SUPERVISORS**DEPARTMENT NAME:** Social Services**SIGNED:****DATE:** 11/2/2023

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
6010 110	Salaries - Regular	6010 120	Salaries - Overtime	10,000
6010 110	Salaries - Regular	6010 130	Salries - Part Time	10,000

Please state reason for transfers requested:

To cover overtime and part time costs through year end.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:**Please file original request with Clerk of the Board and retain copy for your records.**

ATTACHMENT #2**RESOLUTION REQUEST FORM NO. 10*****Request for Transfer of Funds*****TO:** AMANDA ALLEN, CLERK, WARREN COUNTY BOARD OF SUPERVISORS**DEPARTMENT NAME:** Social Services**SIGNED:****DATE:** 10/12/2023

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
TE 6010 130	Salaries - Part Time	TE 6010 810	Retirement	746.00
TE 6010 130	Salaries - Part Time	TE 6010 830	Social Security	1000.00
TE 6010 130	Salaries - Part Time	TE 6010 831	Medicare	250.00

Please state reason for transfers requested:

To cover employee benefit costs until this funding is depleted.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:**Please file original request with Clerk of the Board and retain copy for your records.**

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: Social Services

DATE: 11/20/23

- (a) Purpose of Contract Change:
To continue MOU between the Dept of Social Services & Dept of Workforce Development; authorizing referrals for DSS Recipients to attend Pathways to Successful Employment Job Search Assistance & Orientation Class.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract:
Reso. No. 720 of 2022
- (c) Name of Contractor:
WorkForce Development (Formerly Employment & Training Admin)
- (d) Address of Contractor: **333 Glen St, Glens Falls, NY 12801**
- (e) Contractor's Contact Person and Telephone Number:
Liza Ochsendorf
- (f) Commencement Date of Extension: **January 1, 2024**
- (g) Termination Date of Extension: **December 31, 2024**
- (h) Payment Provisions:
 - i) lump sum amount **15,000**
 - 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.
- (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:**

**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

MEMORANDUM OF UNDERSTANDING FOR PURCHASE OF SERVICES

THIS MEMORANDUM OF UNDERSTANDING, by and between the WARREN COUNTY DEPARTMENT OF SOCIAL SERVICES (the "Department") having its principal office at Warren County Human Services Building, 1340 State Route 9, Lake George, New York 12845, and the WARREN COUNTY DEPARTMENT OF WORKFORCE DEVELOPMENT, having its principal office at the 333 Glen Street, Suite 300, Glens Falls, New York 12801 (the "Contractor").

WITNESSETH:

WHEREAS, the Commissioner of Social Services of the County of Warren (the "Commissioner") is an authorized social services official charged with the responsibility, insofar as funds are available for the purpose, to implement the Public Assistance and Supplemental Nutrition Assistance Program (SNAP) Employment Program Requirements in the County of Warren (the "County") at public expense, pursuant to Article 5 of the Social Services Law; and

WHEREAS, the Commissioner requires the services of the Contractor to assist in the operation of the Department's Employment Plan and to make available to Warren County TANF, Safety Net, and SNAP, applicants and recipients employment referrals to assist them in the transition from public assistance to unsubsidized employment; and

WHEREAS, the Department has determined that the compensation to be paid to the Contractor is cost-effective and necessary to assure quality for services and is feasible for the Department to contract with the Contractor for the performance of said services.

NOW, THEREFORE, the parties in consideration of the above, do agree to enter into and agree as follows:

1. TERM & TERMINATION

This Agreement shall commence on January 1, 2024, and will terminate on December 31, 2024. This Agreement may be terminated with or without cause of by either party upon thirty (30) days written notice.

2. SCOPE OF SERVICES

- a. Contractor shall provide services as set forth by Schedule "A", affixed hereto and fully incorporated into this Agreement.
- b. The Contractor shall perform services pursuant to this Agreement under general supervision of and in cooperation with the Department. The Department may have input into the assignment, retention, and reassignment of any staff working under the terms of the Agreement, however, the ultimate authority for staffing remains with the Contractor.

- c. The Department will provide reports, documents and other information that will enable the Contractor to perform its duties under the Agreement.

3. REIMBURSEMENT AND SERVICE FEES

- a. In consideration for the services provided by Contractor, Department shall pay Contractor a total amount not to exceed Fifteen Thousand Dollars (\$15,000). Claims for payment must conform to Warren County claim procedure. The Contractor shall be responsible for submitting claims.
- b. Payment shall be made within thirty (30) days after the services have been completed and an invoice has been received.
- c. The Contractor and Department agree to review the billing process and procedure upon request of either the Contractor or Department.

4. AUDIT

Contractor shall provide to Department, within seven (7) days, upon Department's written demand, during normal business hours, access to and copies of any books, records and papers, including computer tapes, disks, programs or other electronic media, pertinent to performance of the services under this Agreement. Records pertaining to the performance of this Agreement must be kept for seven (7) years.

5. COMPLIANCE WITH ALL LAWS

In performing services required by this Agreement, Contractor and its agents, employees, and contractors shall strictly comply with all Federal, State and local laws, rules and regulations applicable to the performance of the services, including, but not limited to the Civil Rights Act of 1964 as Amended by Executive Order 1 1246, 41 CFR Part 60 and Section 504 of the Rehabilitation Act of 1973 and 45 CFR Parts 84 and 85 and all, laws prohibiting discrimination based on race, creed, color, gender or national origin, and all laws and regulations relating to work place safety and operation including but not limited to requirements of the New York State Labor Law. Furthermore, each and every provision of law required to be inserted in this Agreement shall be deemed so inserted, and this Agreement shall be read and enforced as if such provisions were so inserted. The Contractor will not, on the grounds of race, color or national origin:

- 1. Deny an individual any service(s) or other benefits provided under this Agreement.
- 2. Provide any service(s) or other benefits to an individual which are different, or are provided in a different manner, from those under this Agreement.
- 3. Subject an individual to segregation or separate treatment in any matter related to his receipt of any service(s) or other benefits provided under this Agreement.

4. Restrict an individual in any way in the enjoyments of any advantage or privilege enjoyed by others receiving any service(s) or other benefits provided under this Agreement.

6. SEXUAL HARASSMENT

Any type of Sexual Harassment is against Warren County policy and is unlawful. Contractor acknowledges and agrees that it has read the entirety of the Warren County Sexual Harassment Policy, a copy of which can be found online at <https://warrencountyny.gov/hr/forms.php> under Discrimination and Harassment. This agreement incorporates the entire policy as a material term of this Agreement, Contractor shall follow the policy in its entirety. If a complaint does arise, Contractor is to notify Warren County promptly. To the fullest extent permitted by law, Provider/Contractor shall indemnify, hold harmless and defend Warren County, its boards, officers, employees, and volunteers against any and all losses, claims, actions, demands, damages, liabilities, or expenses, including but not limited to attorney's fees and all other costs to defense, resulting from Provider/Contractor and/or agent's breach of this policy.

7. NOTICES

Any notices required to be given under this Agreement shall be in writing and transmitted by certified mail addressed as follows:

Department: Warren County Department of Social Services
Commissioner's Office
Human Services Building
1340 State Route 9
Lake George, New York 12845

Contractor: Warren County Department of Workforce Development
333 Glen Street, Suite 300
Glens Falls, NY 12801

8. SEVERABILITY

If any provision of this Agreement is held invalid by a Court of law, the remainder of this Agreement shall be valid and enforceable, to the extent that such remainder would then continue to conform to the laws of the State of New York.

9. EXTENT OF AGREEMENT

This Agreement constitutes the entire agreement between the parties, and supersedes any and all prior proposals, negotiations and agreements, whether written or oral. Any modification of or amendment to this Agreement shall be void unless it is in writing and signed by both parties.

10. ASSIGNMENT

The Contractor agrees it shall not assign, transfer, convey, sub-contract or otherwise dispose of this Agreement or its responsibility to perform under this Agreement or its right, title or interest in and/or to the same, not any part thereof, not to any money's which are or will become due and payable to it thereunder, nor the power to execute such contract to any person, company or corporation without the prior express written consent of the County of Warren.

11. DUTY TO MAINTAIN CONFIDENTIALITY

The parties agree that all case information is confidential and will be used only for the intended purpose of this Agreement. The Contractor, its employees, agents, or servants, agrees not to disclose any data, facts or information concerning services performed under this Agreement or obtained while performing such services, except as authorized by County, in writing, or as may be required by law.

Disclosure of confidential HIV-Related information shall be accompanied by a written statement as follows: This information has been disclosed to you from confidential records which are protected by State law. State law prohibits you from making any further disclosure of this information without specific written consent of the person to whom it pertains, or as otherwise permitted by law. Any unauthorized further disclosure in violation of State law may result in a fine or jail sentence or both. A general authorization for the release of medical or other information is not sufficient authorization for further disclosure.

12. E-SIGNATURE

This Agreement may be executed and delivered in any number of counterparts, each of which so executed and delivered shall be deemed to be an original and all of which shall constitute one and the same instrument. Documents executed, scanned and transmitted electronically and electronic signatures shall be deemed original signatures for purposes of this Agreement and all matters related thereto, with such facsimile, scanned and electronic signatures having the same legal effect as original signatures.

13. APPROPRIATIONS

This Agreement shall be deemed executory only to the extent of moneys available to the Department for the performance of the terms hereof and no liability on account thereof shall be incurred by the Department beyond moneys available to or appropriated by the Department for the purpose of the Agreement and, if applicable, that this Agreement shall automatically terminate upon the termination of State or Federal funding available for such contract purposes.

IN WITNESS WHEREOF, this agreement has been executed by the duly authorized officers of the respective parties.

Date

Liza Ochsendorf, Director
Warren County Department of Workforce Development

Date

Christina Mastrianni, Acting Commissioner
Warren County Department of Social Services

Date

Chairperson
Warren County Board of Supervisors

Approved as to Form:

Social Services Attorney

Warren County Attorney

Schedule "A"

1. It is understood and agreed by both parties that this Agreement is subject to and contingent upon the availability of state and federal funding (Welfare to Work program) and upon sufficient appropriations in the Warren County Department of Social Services (DSS) Budget.
2. The service levels and results expected by DSS of Warren County Department of Workforce Development (WFD) under this Agreement shall be same as those set forth in 18NYCRR Part 385 of the Official Codes, Rules and Regulations of the State of New York.
3. DSS shall identify and refer to Contractor, Supplemental Nutrition Assistance Program (SNAP), Safety Net (SN) applicants and recipients and adult applicants and recipients with children in Temporary Assistance for Needy Families (TANF), NCP and eligible 200% cases, unless the applicant or recipients is exempt by definition according 18NYCPRR 385.2. All referrals shall identify any known limitations of employment activities the individual has.
4. WFD will assist DSS in identifying Work Experience Program sites. DSS and WFD agrees to comply with 18 NYCRR 385.9(d) concerning the implementation of work experience programs for recipients of SNAP, TANF, and SN.
5. WFD will develop and maintain curriculum for a job search assistance class, Pathways to Successful Employment. WFD and DSS will collaborate through designated staff to conduct the orientation and job search assistance class. This class will be held at least monthly for all new and/or returning SNAP, SN and TANF applicants.
6. DSS will enroll employable case referrals for Orientation and Job Search Assistance Class, Pathways to Successful Employment.
7. DSS will provide referrals to WFD as a WIOA partner and in accordance with 18 NYCRR 385.10 to align and improve access to employment, training, and supportive services for DSS referrals. Referrals will be made in conjunction with enrolled participants in the Orientation and Job Search Assistance Class.
8. All clients enrolling in an education and/or training activity must be approved by DSS. For a client to enter a second activity both E&T and DSS must approve.
9. With approval, DSS agrees to pay for childcare, tuition, and transportation allowances and other related expenses, when necessary, as allowed by Social Service regulations, to accommodate a client's Employment Plan.
10. WFD agrees to advise DSS of client activity that may have an effect upon the client's social service benefits no later than one (1) week after the date such activity is known by WFD.
11. WFD will advised DSS within 10 days of referral of a participant not being a good fit for a program. The notification must include the reason for DSS to make a provider determination and notify the participant.

BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR OCTOBER 2023

FUND(S): A

CODE(S): 6010, 6030, 6050, 6055, 6070, 6100, 6109, 6119, 6140, 6141, 6142, 7311, 7312, 7313

EXPENSES		2023 BUDGETED		OCT 2023 EXP		OCT 22 EXP		2023 YTD ACTUAL		2022 Prior Year Totals	
110	Salaries - Regular	\$9,117,811.00		\$650,078.24		\$613,126.61		\$6,792,128.62		\$7,534,865.59	
120	Salaries - Overtime	\$75,222.00		\$12,579.40		\$18,556.10		\$149,796.54		\$217,988.58	
130	Salaries - Part Time	\$289,852.00		\$23,551.57		\$22,087.64		\$193,778.53		\$234,266.89	
100's PERSONAL SERVICES Total		\$9,482,885.00		\$686,209.21		\$653,770.35		\$7,135,703.69		\$7,987,121.06	
200's EQUIPMENT		\$145,500.00		\$89,690.40		\$379.98		\$148,910.14		\$75,366.60	
400's CONTRACTUAL		\$24,547,381.67		\$2,153,583.65		\$2,049,472.65		\$19,440,889.63		\$23,910,855.29	
800's EMPLOYEE BENEFITS		\$3,827,655.00		\$234,777.44		\$223,820.85		\$2,781,457.05		\$3,269,048.66	
TOTALS		\$38,003,421.67		\$3,164,260.70		\$2,927,443.83		\$29,506,960.51		\$35,242,391.61	

REVENUE		2023 BUDGETED		OCT 2023 REVENUE		OCT 2022 REVENUE		2023 YTD ACTUAL		2022 Prior Year Totals	
		\$18,968,199.00		\$1,927,932.54		\$1,257,657.76		\$15,194,504.15		\$16,409,413.40	

ATTACHMENT #4

Expense Budget Performance Report

Fiscal Year to Date 10/31/23

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year Total
Fund A - General										
Department 6010 - Social Services										
EXPENSE										
<i>Personal Services</i>										
110	Salaries - Regular	7,949,319.00	(43,584.00)	7,905,735.00	557,305.89	.00	5,882,580.71	2,023,154.29	74	6,606,459.80
120	Salaries - Overtime	49,222.00	50,000.00	99,222.00	4,712.69	.00	86,003.46	13,218.54	87	129,896.32
130	Salaries - Part Time	131,127.00	.00	131,127.00	15,881.78	.00	114,479.31	16,647.69	87	111,217.46
<i>Personal Services Totals</i>		\$8,129,668.00	\$6,416.00	\$8,136,084.00	\$577,900.36	\$0.00	\$6,083,063.48	\$2,053,020.52	75%	\$6,847,573.58
<i>Equipment</i>										
210	Furniture/Furnishings	20,000.00	.00	20,000.00	357.00	(899.95)	18,764.15	2,135.80	89	2,612.24
220	Office Equipment	15,000.00	.00	15,000.00	744.96	21.94	5,835.30	9,142.76	39	20,476.84
230										
230	Automotive Equipment	.00	33,003.00	33,003.00	33,003.00	.00	33,003.00	.00	100	.00
230.1	Automotive Equipment - Reserve	.00	11,497.00	11,497.00	11,497.00	.00	11,497.00	.00	100	.00
230 - Totals		\$0.00	\$44,500.00	\$44,500.00	\$44,500.00	\$0.00	\$44,500.00	\$0.00	100%	\$0.00
260	Other Equipment	.00	.00	.00	.00	.00	.00	.00	+++	330.24
<i>Equipment Totals</i>		\$35,000.00	\$44,500.00	\$79,500.00	\$45,601.96	(\$878.01)	\$69,099.45	\$11,278.56	86%	\$23,419.32
<i>Contractual Expense</i>										
410	Supplies	75,000.00	.00	75,000.00	737.89	9,015.03	40,460.98	25,523.99	66	53,536.43
411	Rent-Building/Property	1,196,701.00	.00	1,196,701.00	99,725.04	.00	997,250.33	199,450.67	83	1,043,145.40
418	Ins-General Liability	56,444.00	(28,598.00)	27,846.00	.00	.00	27,845.09	.91	100	49,182.56
423	Telephone	25,000.00	.00	25,000.00	901.79	.00	14,862.81	10,137.19	59	15,130.90
424	Postage	30,000.00	.00	30,000.00	300.00	.00	18,390.81	11,609.19	61	31,184.07
427	Memberships & Dues	6,000.00	.00	6,000.00	.00	.00	5,424.00	576.00	90	5,266.00
428	Data Processing & Internet Fees	5,000.00	.00	5,000.00	305.98	.00	3,287.80	1,712.20	66	4,061.76
432	Special Project Supply	100,000.00	.00	100,000.00	.00	.00	5,393.00	94,607.00	5	200,494.00
435	Medical Fees	1,000.00	2,500.00	3,500.00	(81.62)	.00	3,120.45	379.55	89	5,999.83
436	Advertising Fees	250.00	1,500.00	1,750.00	120.98	.00	738.44	1,011.56	42	.00
439	Misc Fees & Expenses	30,000.00	(81.00)	29,919.00	1,082.88	.00	11,800.96	18,118.04	39	16,910.46
440	Legal/Transcript Fees	10,000.00	.00	10,000.00	.00	.00	2,429.26	7,570.74	24	4,869.00
441	Auto-Supplies & Repair	6,000.00	1,600.00	7,600.00	140.92	.00	6,702.95	897.05	88	5,628.80
442	Automotive - Gas & Oil	8,000.00	4,000.00	12,000.00	.00	.00	7,491.20	4,508.80	62	14,358.48
444										
444	Travel/Education/Conference	12,000.00	3,754.57	15,754.57	104.03	500.00	14,437.79	816.78	95	7,082.44
444.01	Job Related Courses	.00	1,745.43	1,745.43	.00	.00	1,745.43	.00	100	.00
444 - Totals		\$12,000.00	\$5,500.00	\$17,500.00	\$104.03	\$500.00	\$16,183.22	\$816.78	95%	\$7,082.44
469	Other Payments/Contributions	3,000.00	.00	3,000.00	.00	1,500.00	350.00	1,150.00	62	1,000.00
470	Contract	456,000.00	31,746.00	487,746.00	19,810.49	40,923.59	351,319.73	95,502.68	80	504,239.66
471	Administration	.00	123,174.00	123,174.00	395.00	.00	18,390.00	104,784.00	15	11,815.32
<i>Contractual Expense Totals</i>		\$2,020,395.00	\$141,341.00	\$2,161,736.00	\$123,543.38	\$51,938.62	\$1,531,441.03	\$578,356.35	73%	\$1,973,905.11

Expense Budget Performance Report

Fiscal Year to Date 10/31/23
Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year Total
Fund A - General										
Department 6010 - Social Services										
	EXPENSE									
	Employee Benefits									
810	Retirement	901,793.00	848.89	902,641.89	63,829.31	.00	629,754.45	272,887.44	70	674,001.14
830	Social Security	504,041.00	397.79	504,438.79	33,430.29	.00	355,255.55	149,183.24	70	397,138.86
831	Medicare Contribution	117,879.00	93.03	117,972.03	7,818.41	.00	83,083.99	34,888.04	70	92,879.26
860	Hospitalization	1,386,420.00	.00	1,386,420.00	96,876.72	.00	1,059,786.30	326,633.70	76	1,300,836.84
865	Dental Insurance	23,088.00	.00	23,088.00	1,657.01	.00	17,920.25	5,167.75	78	21,640.34
	Employee Benefits Totals	\$2,933,221.00	\$1,339.71	\$2,934,560.71	\$203,611.74	\$0.00	\$2,145,800.54	\$788,760.17	73%	\$2,486,496.44
	Other Benefits									
840	Workmen's Compensation	34,533.00	.00	34,533.00	.00	.00	34,533.00	.00	100	30,332.00
850	Unemployment Insurance	10,000.00	(1,500.00)	8,500.00	.00	.00	.00	8,500.00	0	.00
855	Disability	5,000.00	.00	5,000.00	.00	.00	385.22	4,614.78	8	1,696.54
861	Retirees Hospitalization	264,560.00	.00	264,560.00	.00	.00	207,336.11	57,223.89	78	262,676.24
862	Health Insurance Cost Reimbursement	3,000.00	1,500.00	4,500.00	40.29	.00	4,562.99	(62.99)	101	2,338.20
	Other Benefits Totals	\$317,093.00	\$0.00	\$317,093.00	\$40.29	\$0.00	\$246,817.32	\$70,275.68	78%	\$297,042.98
	EXPENSE TOTALS	\$13,435,377.00	\$193,596.71	\$13,628,973.71	\$950,697.73	\$51,060.61	\$10,076,221.82	\$3,501,691.28	74%	\$11,628,437.43
Department 6010 - Social Services										
	6010 - Social Services Totals	(\$13,435,377.00)	(\$193,596.71)	(\$13,628,973.71)	(\$950,697.73)	(\$51,060.61)	(\$10,076,221.82)	(\$3,501,691.28)	74%	(\$11,628,437.43)
Department 6030 - Countryside Adult Home										
	EXPENSE									
	Personal Services									
110	Salaries - Regular	1,168,492.00	785.72	1,169,277.72	92,772.35	.00	909,547.91	259,729.81	78	932,956.62
120	Salaries - Overtime	26,000.00	50,000.00	76,000.00	7,866.71	.00	63,793.08	12,206.92	84	88,092.26
130	Salaries - Part Time	158,725.00	(50,000.00)	108,725.00	7,669.79	.00	79,299.22	29,425.78	73	123,049.43
	Personal Services Totals	\$1,353,217.00	\$785.72	\$1,354,002.72	\$108,308.85	\$0.00	\$1,052,640.21	\$301,362.51	78%	\$1,144,098.31
	Equipment									
210	Furniture/Furnishings	100,000.00	1,868.52	101,868.52	32,027.99	21,500.73	65,774.16	14,593.63	86	11,795.68
220	Office Equipment	2,000.00	.00	2,000.00	80.91	.00	531.62	1,468.38	27	681.03
260	Other Equipment	7,500.00	13,958.96	21,458.96	11,979.54	147.60	15,428.27	5,883.09	73	39,470.57
270	Lawn & Landscaping	1,000.00	(1,000.00)	.00	.00	.00	.00	.00	+++	.00
	Equipment Totals	\$110,500.00	\$14,827.48	\$125,327.48	\$44,088.44	\$21,648.33	\$81,734.05	\$21,945.10	82%	\$51,947.28
	Contractual Expense									
410	Supplies	43,000.00	6,074.57	49,074.57	505.60	17,550.06	30,076.87	1,447.64	97	38,883.11
413	Repair & Maint.-Bldg/Property	20,000.00	22,628.00	42,628.00	403.32	17,517.36	24,253.67	856.97	98	15,042.02
415	Electricity	31,000.00	.00	31,000.00	2,404.56	.00	21,488.79	9,511.21	69	26,468.17
416	Oil & Gas-Heating	45,000.00	.00	45,000.00	.00	6,144.62	23,246.84	15,608.54	65	32,034.74
417	Water/Sewer/Taxes	10,000.00	3,500.00	13,500.00	3,499.15	.00	12,914.70	585.30	96	11,475.34
418	Ins-General Liability	11,000.00	.00	11,000.00	.00	.00	10,860.77	139.23	99	9,829.42
422	Repair/Maint-Equipment	5,000.00	.00	5,000.00	.00	1,044.10	1,078.49	2,877.41	42	1,801.09
423	Telephone	2,000.00	.00	2,000.00	81.60	.00	1,182.53	817.47	59	688.25

Expense Budget Performance Report

Fiscal Year to Date 10/31/23

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year Total
Fund	A - General									
Department	6030 - Countryside Adult Home									
	EXPENSE									
	Contractual Expense									
424	Postage	250.00	.00	250.00	.00	.00	108.72	141.28	43	195.67
426	Subscriptions	650.00	.00	650.00	.00	.00	.00	650.00	0	474.00
427	Memberships & Dues	1,500.00	(156.00)	1,344.00	.00	.00	1,344.00	.00	100	1,344.00
428	Data Processing & Internet Fees	3,000.00	750.00	3,750.00	312.93	.00	2,493.44	1,256.56	66	3,638.44
434	Allowances	22,800.00	(6,000.00)	16,800.00	1,000.00	.00	10,750.00	6,050.00	64	14,750.00
435	Medical Fees	500.00	.00	500.00	.00	.00	.00	500.00	0	195.00
436	Advertising Fees	500.00	(500.00)	.00	.00	.00	.00	.00	+++	460.00
437	Consulting Fees	2,000.00	(2,000.00)	.00	.00	.00	.00	.00	+++	.00
439	Misc Fees & Expenses	1,500.00	179.99	1,679.99	.00	.00	809.14	870.85	48	1,032.25
441	Auto-Supplies & Repair	3,000.00	3,313.81	6,313.81	.00	.00	5,639.50	674.31	89	7,602.41
442	Automotive - Gas & Oil	2,500.00	.00	2,500.00	.00	.00	1,807.40	692.60	72	3,991.89
444	Travel/Education/Conference	1,500.00	2,156.00	3,656.00	74.00	899.00	1,987.00	770.00	79	1,666.27
445	Foods	225,000.00	(750.00)	224,250.00	6,377.82	34,953.82	129,701.32	59,594.86	73	168,454.98
451	Medical Supply Expense	5,500.00	.00	5,500.00	427.36	1,114.71	2,168.22	2,217.07	60	2,678.73
453	Uniforms & Clothing	200.00	.00	200.00	.00	.00	.00	200.00	0	7,136.15
470	Contract	45,000.00	(14,000.00)	31,000.00	834.12	9,486.85	12,579.77	8,933.38	71	30,289.16
	Contractual Expense Totals	\$482,400.00	\$15,196.37	\$497,596.37	\$15,920.46	\$88,710.52	\$294,491.17	\$114,394.68	77%	\$380,131.09
	Employee Benefits									
810	Retirement	139,150.00	116.29	139,266.29	11,103.36	.00	104,532.22	34,734.07	75	107,804.45
830	Social Security	83,904.00	48.71	83,952.71	6,440.24	.00	62,670.93	21,281.78	75	67,724.62
831	Medicare Contribution	19,619.00	11.39	19,630.39	1,506.25	.00	14,656.94	4,973.45	75	15,838.83
860	Hospitalization	184,198.00	.00	184,198.00	11,844.68	.00	133,145.48	51,052.52	72	163,445.23
865	Dental Insurance	3,504.00	.00	3,504.00	230.88	.00	2,599.66	904.34	74	3,133.42
	Employee Benefits Totals	\$430,375.00	\$176.39	\$430,551.39	\$31,125.41	\$0.00	\$317,605.23	\$112,946.16	74%	\$357,946.55
	Other Benefits									
840	Workmen's Compensation	23,688.00	.00	23,688.00	.00	.00	23,688.00	.00	100	19,254.00
850	Unemployment Insurance	9,000.00	.00	9,000.00	.00	.00	.00	9,000.00	0	.00
855	Disability	1,500.00	.00	1,500.00	.00	.00	.00	1,500.00	0	(269.33)
861	Retirees Hospitalization	102,740.00	.00	102,740.00	.00	.00	75,067.62	27,672.38	73	100,615.08
862	Health Insurance Cost Reimbursement	2,250.00	.00	2,250.00	.00	.00	.00	2,250.00	0	750.00
	Other Benefits Totals	\$139,178.00	\$0.00	\$139,178.00	\$0.00	\$0.00	\$98,755.62	\$40,422.38	71%	\$120,349.75
	EXPENSE TOTALS	\$2,515,670.00	\$30,985.96	\$2,546,655.96	\$199,443.16	\$110,358.85	\$1,845,226.28	\$591,070.83	77%	\$2,054,472.98
Department	6030 - Countryside Adult Home									
Department	6050 - Public Facil. For Children									
	EXPENSE									
	Contractual Expense									
	EXPENSE TOTALS	\$2,515,670.00	\$30,985.96	\$2,546,655.96	\$199,443.16	\$110,358.85	\$1,845,226.28	\$591,070.83	77%	\$2,054,472.98

Expense Budget Performance Report

Fiscal Year to Date 10/31/23

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	↓		YTD	↓		Budget - YTD	% Used/
					Current Month	Transactions	Encumbrances	Transactions	Transactions		
Fund	A - General										Prior Year Total
Department 6050 - Public Facil. For Children											
EXPENSE											
Contractual Expense											
469	Other Payments/Contributions	43,556.00	75,000.00	118,556.00	15,960.00		.00	95,098.53	23,457.47	80	126,856.58
	Contractual Expense Totals	\$43,556.00	\$75,000.00	\$118,556.00	\$15,960.00		\$0.00	\$95,098.53	\$23,457.47	80%	\$126,856.58
	EXPENSE TOTALS	\$43,556.00	\$75,000.00	\$118,556.00	\$15,960.00		\$0.00	\$95,098.53	\$23,457.47	80%	\$126,856.58
	Department 6050 - Public Facil. For Children Totals	(\$43,556.00)	(\$75,000.00)	(\$118,556.00)	(\$15,960.00)		\$0.00	(\$95,098.53)	(\$23,457.47)	80%	(\$126,856.58)
Department 6055 - Daycare											
EXPENSE											
Contractual Expense											
470	Contract	1,082,811.00	.00	1,082,811.00	116,924.36		.00	936,690.29	146,120.71	87	782,775.96
	Contractual Expense Totals	\$1,082,811.00	\$0.00	\$1,082,811.00	\$116,924.36		\$0.00	\$936,690.29	\$146,120.71	87%	\$782,775.96
	EXPENSE TOTALS	\$1,082,811.00	\$0.00	\$1,082,811.00	\$116,924.36		\$0.00	\$936,690.29	\$146,120.71	87%	\$782,775.96
	Department 6055 - Daycare Totals	(\$1,082,811.00)	\$0.00	(\$1,082,811.00)	(\$116,924.36)		\$0.00	(\$936,690.29)	(\$146,120.71)	87%	(\$782,775.96)
Department 6070 - Services for Recipients											
EXPENSE											
Contractual Expense											
470	Contract	250,000.00	.00	250,000.00	27,081.76		.00	183,379.83	66,620.17	73	321,017.69
	Contractual Expense Totals	\$250,000.00	\$0.00	\$250,000.00	\$27,081.76		\$0.00	\$183,379.83	\$66,620.17	73%	\$321,017.69
	EXPENSE TOTALS	\$250,000.00	\$0.00	\$250,000.00	\$27,081.76		\$0.00	\$183,379.83	\$66,620.17	73%	\$321,017.69
	Department 6070 - Services for Recipients Totals	(\$250,000.00)	\$0.00	(\$250,000.00)	(\$27,081.76)		\$0.00	(\$183,379.83)	(\$66,620.17)	73%	(\$321,017.69)
Department 6100 - Medicaid											
EXPENSE											
Contractual Expense											
470	Contract	11,245,936.00	(225,000.00)	11,020,936.00	1,178,931.00		.00	8,999,276.00	2,021,660.00	82	10,199,189.00
	Contractual Expense Totals	\$11,245,936.00	(\$225,000.00)	\$11,020,936.00	\$1,178,931.00		\$0.00	\$8,999,276.00	\$2,021,660.00	82%	\$10,199,189.00
	EXPENSE TOTALS	\$11,245,936.00	(\$225,000.00)	\$11,020,936.00	\$1,178,931.00		\$0.00	\$8,999,276.00	\$2,021,660.00	82%	\$10,199,189.00
	Department 6100 - Medicaid Totals	(\$11,245,936.00)	\$225,000.00	(\$11,020,936.00)	(\$1,178,931.00)		\$0.00	(\$8,999,276.00)	(\$2,021,660.00)	82%	(\$10,199,189.00)
Department 6101 - Medical Assistance											
EXPENSE											
Contractual Expense											
470	Contract	1,000.00	.00	1,000.00	800.00		.00	800.00	200.00	80	163.08
	Contractual Expense Totals	\$1,000.00	\$0.00	\$1,000.00	\$800.00		\$0.00	\$800.00	\$200.00	80%	\$163.08
	EXPENSE TOTALS	\$1,000.00	\$0.00	\$1,000.00	\$800.00		\$0.00	\$800.00	\$200.00	80%	\$163.08
	Department 6101 - Medical Assistance Totals	(\$1,000.00)	\$0.00	(\$1,000.00)	(\$800.00)		\$0.00	(\$800.00)	(\$200.00)	80%	(\$163.08)

Expense Budget Performance Report

Fiscal Year to Date 10/31/23

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/Rec'd	Prior Year Total
Fund	A - General									
Department	6109 - Aid To Dependent Children									
	EXPENSE									
	Contractual Expense									
470	Contract	1,925,000.00	200,000.00	2,125,000.00	333,187.89	.00	2,036,653.72	88,346.28	96	2,872,972.48
	Contractual Expense Totals	\$1,925,000.00	\$200,000.00	\$2,125,000.00	\$333,187.89	\$0.00	\$2,036,653.72	\$88,346.28	96%	\$2,872,972.48
	EXPENSE TOTALS	\$1,925,000.00	\$200,000.00	\$2,125,000.00	\$333,187.89	\$0.00	\$2,036,653.72	\$88,346.28	96%	\$2,872,972.48
	Department 6109 - Aid To Dependent Children Totals	(\$1,925,000.00)	(\$200,000.00)	(\$2,125,000.00)	(\$333,187.89)	\$0.00	(\$2,036,653.72)	(\$88,346.28)	96%	(\$2,872,972.48)
Department	6119 - Child Care									
	EXPENSE									
	Contractual Expense									
470	Contract	5,150,000.00	.00	5,150,000.00	212,455.74	.00	4,023,496.43	1,126,503.57	78	5,746,733.43
	Contractual Expense Totals	\$5,150,000.00	\$0.00	\$5,150,000.00	\$212,455.74	\$0.00	\$4,023,496.43	\$1,126,503.57	78%	\$5,746,733.43
	EXPENSE TOTALS	\$5,150,000.00	\$0.00	\$5,150,000.00	\$212,455.74	\$0.00	\$4,023,496.43	\$1,126,503.57	78%	\$5,746,733.43
	Department 6119 - Child Care Totals	(\$5,150,000.00)	\$0.00	(\$5,150,000.00)	(\$212,455.74)	\$0.00	(\$4,023,496.43)	(\$1,126,503.57)	78%	(\$5,746,733.43)
Department	6123 - Juvenile Delinquent Care									
	EXPENSE									
	Contractual Expense									
470	Contract	5,000.00	.00	5,000.00	.00	.00	277.02	4,722.98	6	971.28
	Contractual Expense Totals	\$5,000.00	\$0.00	\$5,000.00	\$0.00	\$0.00	\$277.02	\$4,722.98	6%	\$971.28
	EXPENSE TOTALS	\$5,000.00	\$0.00	\$5,000.00	\$0.00	\$0.00	\$277.02	\$4,722.98	6%	\$971.28
	Department 6123 - Juvenile Delinquent Care Totals	(\$5,000.00)	\$0.00	(\$5,000.00)	\$0.00	\$0.00	(\$277.02)	(\$4,722.98)	6%	(\$971.28)
Department	6129 - State Training School									
	EXPENSE									
	Contractual Expense									
470	Contract	350,000.00	.00	350,000.00	.00	.00	.00	350,000.00	0	.00
	Contractual Expense Totals	\$350,000.00	\$0.00	\$350,000.00	\$0.00	\$0.00	\$0.00	\$350,000.00	0%	\$0.00
	EXPENSE TOTALS	\$350,000.00	\$0.00	\$350,000.00	\$0.00	\$0.00	\$0.00	\$350,000.00	0%	\$0.00
	Department 6129 - State Training School Totals	(\$350,000.00)	\$0.00	(\$350,000.00)	\$0.00	\$0.00	\$0.00	(\$350,000.00)	0%	\$0.00
Department	6140 - Home Relief									
	EXPENSE									
	Contractual Expense									
470	Contract	1,500,000.00	.00	1,500,000.00	128,737.06	.00	1,198,137.08	301,862.92	80	1,325,044.68
	Contractual Expense Totals	\$1,500,000.00	\$0.00	\$1,500,000.00	\$128,737.06	\$0.00	\$1,198,137.08	\$301,862.92	80%	\$1,325,044.68
	EXPENSE TOTALS	\$1,500,000.00	\$0.00	\$1,500,000.00	\$128,737.06	\$0.00	\$1,198,137.08	\$301,862.92	80%	\$1,325,044.68
	Department 6140 - Home Relief Totals	(\$1,500,000.00)	\$0.00	(\$1,500,000.00)	(\$128,737.06)	\$0.00	(\$1,198,137.08)	(\$301,862.92)	80%	(\$1,325,044.68)
Department	6141 - Fuel Crisis Assistance									
	EXPENSE									
	Contractual Expense									
470	Contract	30,000.00	.00	30,000.00	42.00	.00	24,477.60	5,522.40	82	.00

Expense Budget Performance Report

Fiscal Year to Date 10/31/23

Include Rollup Account and Rollup to Account

Account		Account Description		↓		↓		↓		↓		↓	
Fund	A - General	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year Total			
Department 6141 - Fuel Crisis Assistance													
EXPENSE													
Contractual Expense Totals													
EXPENSE TOTALS		\$30,000.00	\$0.00	\$30,000.00	\$42.00	\$0.00	\$24,477.60	\$5,522.40	82%	\$0.00			
Department 6141 - Fuel Crisis Assistance Totals		\$30,000.00	\$0.00	\$30,000.00	\$42.00	\$0.00	\$24,477.60	\$5,522.40	82%	\$0.00			
Department 6142 - Emergency Aid For Adults		(\$30,000.00)	\$0.00	(\$30,000.00)	(\$42.00)	\$0.00	(\$24,477.60)	(\$5,522.40)	82%	\$0.00			
EXPENSE													
Contractual Expense													
Contract		20,000.00	.00	20,000.00	.00	.00	3,201.00	16,799.00	16	9,494.94			
EXPENSE TOTALS		\$20,000.00	\$0.00	\$20,000.00	\$0.00	\$0.00	\$3,201.00	\$16,799.00	16%	\$9,494.94			
Department 6142 - Emergency Aid For Adults Totals		\$20,000.00	\$0.00	\$20,000.00	\$0.00	\$0.00	\$3,201.00	\$16,799.00	16%	\$9,494.94			
Department 7311 - Youth Bureau		(\$20,000.00)	\$0.00	(\$20,000.00)	\$0.00	\$0.00	(\$3,201.00)	(\$16,799.00)	16%	(\$9,494.94)			
EXPENSE													
Other Benefits													
Retirees Hospitalization		7,788.00	.00	7,788.00	.00	.00	5,840.91	1,947.09	75	7,561.08			
EXPENSE TOTALS		\$7,788.00	\$0.00	\$7,788.00	\$0.00	\$0.00	\$5,840.91	\$1,947.09	75%	\$7,561.08			
Department 7311 - Youth Bureau Totals		\$7,788.00	\$0.00	\$7,788.00	\$0.00	\$0.00	\$5,840.91	\$1,947.09	75%	\$7,561.08			
Department 7312 - Special Delinquency Prev.		(\$7,788.00)	\$0.00	(\$7,788.00)	\$0.00	\$0.00	(\$5,840.91)	(\$1,947.09)	75%	(\$7,561.08)			
EXPENSE													
Contractual Expense													
Contract		166,701.00	.00	166,701.00	.00	87,584.00	78,184.00	933.00	99	166,701.00			
EXPENSE TOTALS		\$166,701.00	\$0.00	\$166,701.00	\$0.00	\$87,584.00	\$78,184.00	\$933.00	99%	\$166,701.00			
Department 7312 - Special Delinquency Prev. Totals		\$166,701.00	\$0.00	\$166,701.00	\$0.00	\$87,584.00	\$78,184.00	\$933.00	99%	\$166,701.00			
Fund A - General Totals		\$37,728,839.00	\$274,582.67	\$38,003,421.67	\$3,164,260.70	\$249,003.46	\$29,506,960.51	\$8,247,457.70		\$35,242,391.61			
Grand Totals		\$37,728,839.00	\$274,582.67	\$38,003,421.67	\$3,164,260.70	\$249,003.46	\$29,506,960.51	\$8,247,457.70		\$35,242,391.61			

WARREN COUNTY

Receipts by G/L Distribution Report - Summary

From Date: 10/01/2023 - To Date: 10/31/2023

G/L Account Number	G/L Date	Due To/From Fund	Project	Transactions	Debit Amount	Credit Amount
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Fund: A - General

Account: 400.00 - State&Federal,Social Services

10/03/2023				3	\$0.00	\$284,655.00 ✓
10/04/2023				2	\$0.00	\$110,928.00 ✓
10/13/2023				1	\$0.00	\$1,430,918.00 ✓
10/17/2023				1	\$0.00	\$2,572.00 ✓
Account Total: State&Federal,Social Services					7	\$0.00
						\$1,829,073.00

Fund Total: General

Grand Total:

3287
213,138
68,230
284,655

90,759
20,169
110,928

Fed & State

Local

TOTAL Oct 23 = 1,927,932.54

Revenue

98,859.54

WARREN COUNTY

Receipts by G/L Distribution Report - Summary

From Date: 10/01/2023 - To Date: 10/31/2023

G/L Account Number	G/L Date	Due To/From Fund	Project	Transactions	Debit Amount	Credit Amount
	10/03/2023			1	\$0.00	\$3,125.82
	10/04/2023			1	\$0.00	\$4,265.38
	10/27/2023			1	\$0.00	\$1,914.31
Account Total: Repay of Home Relief				3	\$0.00	\$9,305.51
Department Total: Home Relief					\$0.00	\$9,305.51
Fund Total: General					\$0.00	\$98,859.54
Grand Total:				17	\$0.00	\$98,859.54

Social Services - Overtime Report - Comparison 2022/2023

[illegible]

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

****If this is the result of a grant award, also complete and submit Form No. 5 or 6***

DEPARTMENT NAME: Social Services

DATE: 11/20/23

- (a) Purpose of Amendment: **To increase expenses and revenue based on approval of Code Blue budget from NYS Office of Temporary & Disability Assistance (OTDA), expenses to be reimbursed 100%**
- (b) Appropriation Code, Object Code, Full Title and Amount:
A.6010 470 Contracts \$62,556
- (c) Revenue Code (with title), and Amount: **A.6010 3610 State Aid Admin \$62,556**