

Human Services Committee Meeting
Countryside Adult Home
September 24th 2024

COMMITTEE MEMBERS: Supervisors: DRISCOLL, Bruno, Patchett, Turner, Wild, Strainer and Runyon,
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:

Request: To extend dietitian service agreement with Jennifer Linehan, RD, CDN

Rationale: Dietitian services are mandatory per DOH regulations.

Request: To extend pharmacy services agreement with Omnicare with no changes in pricing.

Rationale: 50% of the agreement is reimbursable.

- V. Discussion Items:
 1. Census
 2. Overtime Report
 3. 2025 Budget Requests and Salary Schedules
- VI. Referrals/Pending Items:
- VII. Privilege of the floor and public comment
- VIII. Motion to adjourn

Attachments:

1. Resolution Request No. 4
2. Resolution Request No. 4
3. Census
4. Overtime Report
5. Jennifer Linehan, RD, CDN Salary Proposal
6. 2025 Budget Packet (included with DSS Agenda/Budget)

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: Countryside Adult Home

DATE: 9/24/2024

- (a) Purpose of Contract Change: **Extending agreement with a change to contract amounts.**
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: **142 of 2023**
- (c) Name of Contractor: **Jennifer Linehan**
- (d) Address of Contractor: **196 Circular St.
Saratoga Springs, NY 12866**
- (e) Contractor's Contact Person and Telephone Number:
Jennifer Linehan 518-222-6835
- (f) Commencement Date of Extension: **9/1/24**
- (g) Termination Date of Extension: **3/31/2023**
- (h) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed **\$33,672**
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. **After each provided service**)
- (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.6030 470-Contracts**

**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

Jennifer Linehan

Registered Dietitian

Contact

196 Circular St.
Saratoga Springs, NY 12866
518-222-6835
jlinehan321@gmail.com

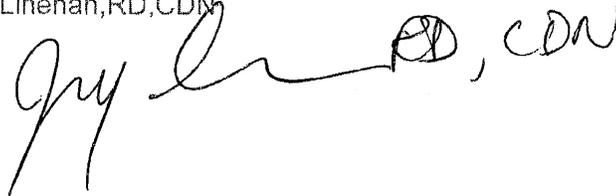
Dear Director McByrne,

My proposal to continue as the registered dietitian at the Countryside Adult will be a 5-year, 6-month term that will commence on September 1st 2024 and terminate on March 31st 2030.

- My salary request is an increase of \$2.00 per hour each year through the term of the agreement.
- The hourly rate will be as follows:
 - 2024-\$46.00
 - 2025-\$48.00
 - 2026-\$50.00
 - 2027-\$52.00
 - 2028-\$54.00
 - 2029-\$56.00
 - 2030-\$58.00

Sincerely,

Jennifer Linehan, RD, CDN



RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: Countryside Adult Home

DATE: 9/24/2024

- (a) Purpose of Contract Change: **Extending the current agreement for another 3 years**
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: **201 of 2023**
- (c) Name of Contractor: **Omnicare Pharmacy**
- (d) Address of Contractor: **P.O. Box 1430 Saratoga Rd. Ballston Spa, NY 12020**
- (e) Contractor's Contact Person and Telephone Number:
Betsy Ciufu 516-672-5989
- (f) Commencement Date of Extension: **November 1st 2024**
- (g) Termination Date of Extension: **October 31st 2027**
- (h) Payment Provisions:
 - i) lump sum amount **\$2000.00 per year**
 - ii) hourly rate amount
 - iii) total amount not to exceed **\$6000.00**
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. **Monthly**)
- (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.6030 470-Contracts**

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

**COUNTRYSIDE ADULT HOME
CENSUS REPORT
2024**

MONTH	1ST DAY OF MONTH	ADMISSIONS	DISCHARGES	LAST DAY OF MONTH
JANUARY	27	2	1	28
FEBRUARY	28	1	0	29
MARCH	29	3	0	32
APRIL	32	1	0	33
MAY	33	2	0	35
JUNE	35	1	0	36
JULY	36	2	2	36
AUGUST	36	1	0	37
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				

Countryside Adult Home - Overtime Report - Comparison 2023/24

Week End	2023	2024	Reason
01/14/24	243.59	98.94	Holiday Snowstorm
01/28/24	66.78	133.89	Holiday, Staff Shortage, Illness
02/11/24	102.86	26.98	Snowstorm, Illness
02/25/24	25.47	114.00	Holiday, Illness, Snowstorm
03/10/24	124.91	12.44	Building Maint.
03/24/24	13.25	21.75	Snowstorm, Staff Shortage
04/07/24	41.26	9.31	Snowstorm
04/21/24	35.20	45.58	Staff training Staff Shortage
05/05/24	40.73	39.81	Staff Shortage Due to Medical Leave
05/19/24	139.30	21.88	Staff Training
06/03/24	103.61	107.60	Holiday, Building Maintenance
06/17/24	176.61	20.04	Staff Training, Building Maintenance
06/30/24	30.00	119.87	Holiday Staff Shortage Late Appointments Late Activities
07/14/24	96.28	162.67	Holiday Staff Shortages Extra Staff Needed Due to Covid
07/28/24	139.14	83.39	Staff Shortages Extra Staff Needed Due to Covid
08/11/24	13.70	43.12	Storm 2 Open Essential Positions
08/25/24	48.94	68.09	2 Open Essential Positions
09/08/24	90.81	116.53	Holiday Open Essential Positions
YTD	1532.44	1245.89	
	149.45		
	77.01		
	91.07		
	145.19		
	29.73		
	85.59		
	100.97		
	44.77		
	109.12		