

County of Albany

112 State Street
Albany, NY 12207



Meeting Agenda

Wednesday, October 28, 2020

5:30 PM

Held Remotely

Elder Care Committee

PREVIOUS BUSINESS:

1. APPROVING PREVIOUS MEETING MINUTES

CURRENT BUSINESS:

2. AUTHORIZING AN AGREEMENT WITH ACCESS TRANSIT, INC. REGARDING TRANSPORTATION SERVICES FOR ELIGIBLE SENIORS
3. AUTHORIZING AN AGREEMENT WITH LIFE PATH REGARDING ADULT DAY SERVICES FOR SENIORS
4. AUTHORIZING AN AGREEMENT WITH CORNELL COOPERATIVE EXTENSION REGARDING DIETICIAN SERVICES

County of Albany

*112 State Street
Albany, NY 12207*



Meeting Minutes

Wednesday, September 30, 2020

5:30 PM

Held Remotely

Elder Care Committee

PREVIOUS BUSINESS:

Present: Carolyn McLaughlin, Bill L. Ricard, Robert J. Beston, Frank J. Commisso, Norma J. Chapman, Gary W. Domalewicz, Joanne Cunningham, Jeff S. Perlee and Jennifer A. Whalen

1. APPROVING PREVIOUS MEETING MINUTES

A motion was made that the previous meeting minutes be approved. The motion carried by a unanimous vote.

CURRENT BUSINESS:

2. AUTHORIZING AN AGREEMENT WITH BRAWN MEDIA REGARDING MEDIA AND CONSULTING SERVICES FOR THE SHAKER PLACE REHABILITATION AND NURSING CENTER

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

3. AUTHORIZING AN AGREEMENT WITH THE NEW YORK STATE OFFICE FOR THE AGING REGARDING AGING AND DISABILITY RESOURCE CENTER COVID-19 PANDEMIC RESPONSE FUNDING AND AMENDING THE 2020 DEPARTMENT FOR AGING BUDGET

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT FOR AGING
162 WASHINGTON AVENUE
ALBANY, NEW YORK 12210
ADMINISTRATION: (518) 447-7198
GENERAL INFORMATION: (518) 447-7177
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WWW.ALBANYCOUNTY.COM

DEBORAH C. RIITANO
COMMISSIONER

September 28, 2020

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Room 710
Albany, NY 12207

Dear Chairman Joyce:

The Department for Aging (DFA) requests legislative approval to enter into an Agreement with Assess Transit, Inc. (CDTA) to provide brokerage services for human services transportation and provide non-emergency medical transportation and prioritized transportation to vital services for program eligible seniors living in Albany County. Transportation to vital services includes; Medical Appointments, Pharmacy, Grocery Shopping and/or Food Pantry, Adult Day Care, and Congregate Meal Sites. The Contractor shall also provide education on fare products to seniors that qualify for CDTA STAR Services.

The brokerage services will include receipt and disposition of transportation requests, transportation vendor network management, and coordination of transportation services to deliver quality services at the lowest cost and analysis and reporting of transportation services utilization.

The Department for Aging offers a limited number of prioritized transportation trips to vital destinations for program eligible seniors. Due to limited funding, we will ensure that available resources are prioritized to provide vital transportation services to seniors that do not have access to other means of transportation.

Grant Award Amount – \$630,000
Funding Source – 75% - State, 25% - County,
Revenue Account – Aging -AA6772, 03782, 03787, 04773

Grant Term – 1/1/2021 – 12/31/2021
Budget Amendment – No

Respectfully Submitted,

Deborah C. Riitano
Commissioner

cc: Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



Legislation Text

File #: TMP-1950, Version: 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Contract authorization with Access Transit, Inc. (CDTA) to provide transportation services to older adults in Albany County.

Date: 9/28/2020
 Submitted By: Patrick Dillon
 Department: Aging
 Title: Contract Administration
 Phone: 518 447 7733
 Department Rep.
 Attending Meeting: Deborah C. Riitano, Commissioner

Purpose of Request:

- Adopting of Local Law
- Amendment of Prior Legislation
- Approval/Adoption of Plan/Procedure
- Bond Approval
- Budget Amendment
- Contract Authorization
- Countywide Services
- Environmental Impact/SEQR
- Home Rule Request
- Property Conveyance
- Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- Contractual
- Equipment
- Fringe
- Personnel

- Personnel Non-Individual
- Revenue

Increase Account/Line No.: Click or tap here to enter text.
Source of Funds: Click or tap here to enter text.
Title Change: Click or tap here to enter text.

CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:

- Change Order/Contract Amendment
- Purchase (Equipment/Supplies)
- Lease (Equipment/Supplies)
- Requirements
- Professional Services
- Education/Training
- Grant

Choose an item.

Submission Date Deadline Click or tap to enter a date.

- Settlement of a Claim
- Release of Liability
- Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):

Access Transit, Inc. (CDTA)
85 Watervliet Avenue, Albany, New York 12206

Additional Parties (Names/addresses):

Amount/Raise Schedule/Fee: \$630,000.00

Scope of Services: Access Transit shall provide the following services to ACDFa in providing transportation to eligible older adults 60 years and older; 1) Receipt and disposition of all appropriate transportation requests for eligible individuals using a reservation, scheduling and routing system. 2) Management of all designated transportation services, including functions associated with recruiting and entering into subcontracts with transportation vendors. 3) Financial negotiations, reconciliation and reimbursement of trips related to ACDFa transportation and vendors. 4) Coordination of services designed to deliver quality transportation at the most appropriate level of need and most economical cost. 5) Analysis and report of transportation service utilization trends and factors, including utilization by geographic zones and by mode of transportation.

Bond Res. No.: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes No
If Mandated Cite Authority: Click or tap here to enter text.

Is there a Fiscal Impact: Yes No
Anticipated in Current Budget: Yes No

County Budget Accounts:

Revenue Account and Line: A36772, 03782, 03787, 04773
Revenue Amount: \$401,575.00, \$16,926.00, 55,000.00

Appropriation Account and Line: A96772, 44046
Appropriation Amount: \$630,000.00

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.
State: 75%
County: 25%
Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/1/2021 - 12/31/2021
Length of Contract: 12 months

Impact on Pending Litigation

Yes No
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: 459
Date of Adoption: 11/12/2019

Justification: (state briefly why legislative action is requested)

Click or tap here to enter text.

The Department for Aging (DFA) requests legislative approval to enter into an Agreement with Assess Transit, Inc. (CDTA) to provide brokerage services for human services transportation and provide non-emergency medical transportation and prioritized transportation to vital services for program eligible seniors living in Albany County. Transportation to vital services includes; Medical Appointments, Pharmacy, Grocery Shopping and/or Food Pantry, Adult Day Care, and Congregate Meal Sites. The Contractor shall also provide education on fare products to seniors that qualify for CDTA STAR Services.

The brokerage services will include receipt and disposition of transportation requests, transportation vendor network management, and coordination of transportation services to deliver quality services at the lowest cost and analysis and reporting of transportation services utilization.

The Department for Aging offers a limited number of prioritized transportation trips to vital destinations for program eligible seniors. Due to limited funding, we will ensure that available resources are prioritized to provide vital transportation services to seniors that do not have access to other means of transportation.

RESOLUTION NO. 459**AUTHORIZING AN AGREEMENT WITH ACCESS TRANSIT, INC.
REGARDING TRANSPORTATION SERVICES FOR ELIGIBLE SENIORS**

Introduced: 11/12/19

By Elder Care Committee:

WHEREAS, The Commissioner of the Albany County Department for Aging has requested authorization to enter into an agreement with Access Transit, Inc. (CDTA) regarding transportation services for eligible seniors in Albany County in the amount of \$580,000 for the term commencing January 1, 2020 and ending December 31, 2020, and

WHEREAS, The Commissioner indicated that Access Transit, Inc. will provide brokerage services for human services transportation, provide non-emergency medical transportation and prioritized transportation to vital services for eligible seniors, and provide education on fare products to seniors that qualify for CDTA STAR Services, now, therefore be it

RESOLVED, By the Albany County Legislature that the County Executive is authorized to enter into an agreement with Access Transit, Inc., Albany, NY 12206 regarding transportation services for eligible seniors in Albany County in an amount not to exceed \$580,000 for the term commencing January 1, 2020 and ending December 31, 2020, and, be it further

RESOLVED, That the County Attorney is authorized to approve said agreement as to form and content, and, be it further

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.

Adopted by unanimous vote - 11/12/19

State of New York
County of Albany

This is to certify that I, the undersigned, Clerk of the Albany County Legislature, have compared the foregoing copy of the resolution and/or local law with the original resolution and/or local law now on file in the office, and which was passed by the Legislature of said County on the 12th day of November 2019, a majority of all members elected to the Legislature voting in favor thereof, and that the same is a correct and true transcript of such original resolution and/or local law and the whole thereof.



IN WITNESS THEREOF, I have hereunto set my hand and the official seal of the County Legislature this 14th day of November, 2019.

A handwritten signature in cursive script, appearing to read "Paul J. Dennis".

Clerk, Albany County Legislature

NOTIFICATION OF GRANT AWARD UNDER TITLE III-B OF THE OLDER AMERICANS ACT

Name and Address of Area Agency: Albany County Department for Aging 162 Washington Avenue, 6th Floor Albany, NY 12210-2304		Name and Address of Sponsoring Agency/Payee Albany County																																					
Program Year - Beginning: 1/1/2020 Ending: 12/31/2020																																							
Fiscal Year from which funds are awarded:	2020	Federal CFDA No. - 93.044	This award is New																																				
Section I - Cost Categories <table border="0"> <tr> <td></td> <td style="text-align: right;">Amount</td> </tr> <tr> <td>Personnel</td> <td style="text-align: right;">\$80,086.00</td> </tr> <tr> <td>Fringe Benefits</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Equipment</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Travel</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Maint. & Operations</td> <td style="text-align: right;">19,400.00</td> </tr> <tr> <td>Other Expenses</td> <td style="text-align: right;">9,250.00</td> </tr> <tr> <td>Subcontracts</td> <td style="text-align: right;">358,859.00</td> </tr> <tr> <td>Approved Costs</td> <td style="text-align: right;"><u>\$467,595.00</u></td> </tr> <tr> <td>Less:</td> <td></td> </tr> <tr> <td>Anticipated Income</td> <td style="text-align: right;"><u>9,000.00</u></td> </tr> <tr> <td>Net Cost</td> <td style="text-align: right;"><u><u>\$458,595.00</u></u></td> </tr> </table>			Amount	Personnel	\$80,086.00	Fringe Benefits	0.00	Equipment	0.00	Travel	0.00	Maint. & Operations	19,400.00	Other Expenses	9,250.00	Subcontracts	358,859.00	Approved Costs	<u>\$467,595.00</u>	Less:		Anticipated Income	<u>9,000.00</u>	Net Cost	<u><u>\$458,595.00</u></u>	Section II - Grantee Budget - Federal and Matching Funds: <table border="0"> <tr> <td>1. Federal Share (see remark 1)</td> <td style="text-align: right;">\$265,418.00</td> </tr> <tr> <td>2. Combined matching Share</td> <td></td> </tr> <tr> <td> A. In-Kind</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td> B. Cash</td> <td style="text-align: right;">193,177.00</td> </tr> <tr> <td> C. Volunteer Match</td> <td style="text-align: right;"><u>\$0.00</u></td> </tr> <tr> <td>3. Net Cost</td> <td style="text-align: right;">\$458,595.00</td> </tr> </table>		1. Federal Share (see remark 1)	\$265,418.00	2. Combined matching Share		A. In-Kind	\$0.00	B. Cash	193,177.00	C. Volunteer Match	<u>\$0.00</u>	3. Net Cost	\$458,595.00
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		Section III - Federal Funds Ceiling <table border="0"> <tr> <td>A. Carryover</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>B. Base Allocation</td> <td style="text-align: right;">252,651.00</td> </tr> <tr> <td>C. III-C-1 Transfer</td> <td style="text-align: right;">92,446.00</td> </tr> <tr> <td>D. III-C-2 Transfer</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>E. Supplement</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>* Federal Funds Ceiling (see remark 1)</td> <td style="text-align: right;"><u>\$345,097.00</u></td> </tr> </table>		A. Carryover	\$0.00	B. Base Allocation	252,651.00	C. III-C-1 Transfer	92,446.00	D. III-C-2 Transfer	0.00	E. Supplement	0.00	* Federal Funds Ceiling (see remark 1)	<u>\$345,097.00</u>																								
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* Federal Funds Ceiling (see remark 1)	<u>\$345,097.00</u>																																						
<p>Remarks: In addition to the conditions contained in the Four Year Plan, Annual Implementation Plan and Application for Funding, the conditions checked below apply to this award:</p> <p>(XX) 1. Federal reimbursement is limited to the <u>higher</u> of the "Federal Share" in Section II or the "Federal Funds Ceiling" in Section III of this award notice.</p> <p>(XX) 2. Receipt of federal funds (either through advance or reimbursement) does not constitute earning of these funds. The federal share of the project cost is earned only when allowable costs have been incurred and paid; and the non-federal share of the costs has been contributed.</p> <p>(XX) 3. The federal share will not exceed 75% of the cost of Area Agency Administrative Activities and the federal share will not exceed 90% of the cost of Supportive Services.</p> <p>(XX) 4. Federal funds carried over from the prior year are estimated. Actual carryover depends on prior year closeout and will be confirmed upon closeout.</p> <p>() 5. This award authorizes the payment of advances only. The award is conditional upon the approval of the Annual Implementation Plan and application referenced above, and the initial advance must be repaid if such plan and application do not receive final approval after appropriate modifications, if any.</p>																																							
Name and Title of Authorizing Official: Karen Jackuback Deputy Director		Signature: 	Date: July 8, 2020																																				

NOTIFICATION OF GRANT AWARD
COMMUNITY SERVICES FOR THE ELDERLY PROGRAM

<p>Name and Address of Area Agency:</p> <p>Albany County Department for Aging 162 Washington Avenue, 6th Floor Albany, NY 12210-2304</p>	<p>Name and Address of Sponsoring Agency/Payee:</p> <p>Albany County</p>
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Program Year - Beginning: 4/1/2020 Ending: 3/31/2021

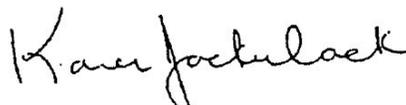
Fiscal Year from which funds are awarded: 2020

This award is New

<u>Section I - Grantee Budget</u>	<u>Amount</u>	<u>Section II - Grantee Budget - State and Matching Funds:</u>	
Personnel	\$52,982.00	1. State Share (see remark 1)	\$529,813.00
Fringe Benefits	0.00	2. Matching Share of Net Cost	
Equipment	0.00	A. In-Kind	0.00
Travel	0.00	B. Cash	158,944.00
Maint. & Operations	0.00	C. Volunteer Match	0.00
Other Expenses	0.00		<hr/>
Subcontracts	710,074.00	3. Net Cost	\$688,757.00
Food:	0.00		
Approved Costs	<hr/> \$763,056.00	<u>Section III - State Funds Ceiling:</u>	
Less:		A. CSE Planning and Implementation	\$60,195.00
Anticipated Income	24,313.00	B. CSE Project - 75%	426,953.00
NSIP	49,986.00	C. CSE Supplemental Award	56,735.00
Net Cost	<hr/> <hr/> \$688,757.00	State Funds Ceiling (see remark 1)	<hr/> \$543,883.00
		Maintenance of Effort 1985/86 Expenditure Level	\$341,650.64

Remarks: In addition to the conditions contained in the Four Year Plan, Annual Update and Application for Funding, the conditions checked below apply to this award:

- 1. State reimbursement is limited to the lower of the "State Share" in Section II or the "State Funds Ceiling" in Section III of this award notice.
- 2. Receipt of State funds (either through advance or reimbursement) does not constitute earning of these funds. The State share of the project cost is earned only when allowable costs have been incurred and paid; and the local share of the costs has been contributed.
- 3. The funds herein awarded are to be expended in accordance with Section 214 of the New York State Elder Law and the applicable State Regulations.
- 4. Other:

<p>Name and Title of Authorizing Official:</p> <p>Karen Jackuback Deputy Director</p>	<p>Signature:</p> 	<p>Date:</p> <p>July 8, 2020</p>
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NOTIFICATION OF GRANT AWARD
AAA TRANSPORTATION PROGRAM

Name and Address of Area Agency: Albany County Department for Aging 162 Washington Avenue, 6th Floor Albany, NY 12210-2304	Name and Address of Sponsoring Agency/Payee: Albany County
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Program Year - Beginning: 4/1/2020 Ending: 3/31/2021

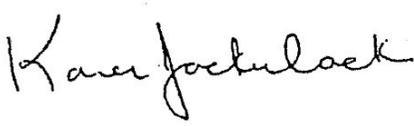
Fiscal Year from which funds are awarded: 2020

This award is New

<u>Section I - Grantee Budget</u>	<u>Amount</u>	<u>Section II - Grantee Budget - State Funds:</u>	
Personnel	\$0.00		
Fringe Benefits	0.00		
Equipment	0.00	State Share (see remark 1)	\$16,926.00
Travel	0.00		
Maint. & Operations	0.00	Other Resources	0.00
Other Expenses	0.00		
Subcontracts	16,926.00	Total	\$16,926.00
Approved Costs	\$16,926.00		
Less:		<u>Section III - State Funds Ceiling:</u>	
Anticipated Income	0.00	State Funds Ceiling (see remark 1)	\$16,926.00
Net Cost	\$16,926.00		

Remarks: In addition to the conditions contained in the Four Year Plan, Annual Implementation Plan and Application for Funding, the conditions checked below apply to this award:

- (XX) 1. State reimbursement is limited to the lower of the "State Share" in Section II or the "State Funds Ceiling" in Section III of this award notice.
- (XX) 2. Receipt of state funds (either through advance or reimbursement) does not constitute earning of these funds. The State share of the project cost is earned only when allowable costs have been incurred and paid.
- (XX) 3. The funds herein awarded are to be expended in accordance with Article II of the New York Elder Law and any applicable State Regulations.
- (XX) 4. AAA Transportation funds may not be used for Administration.
- (XX) 5. AAA Transportation funds may not be used to purchase vehicles.
- () 6. Other:

Name and Title of Authorizing Official: Karen Jackuback Deputy Director	Signature: 	Date: July 8, 2020
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DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT FOR AGING
162 WASHINGTON AVENUE
ALBANY, NEW YORK 12210
ADMINISTRATION: (518) 447-7198
GENERAL INFORMATION: (518) 447-7177
FAX: (518) 447-7722
WWW.ALBANYCOUNTY.COM

DEBORAH C. RIITANO
COMMISSIONER

September 25, 2020

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Room 710
Albany, NY 12207

Dear Chairman Joyce:

The Department for Aging (DFA) requests legislative approval to enter into a contract with Life Path, formerly Senior Services of Albany (SSA), to provide Adult Day Services to eligible older adults within Albany County. Life Path will provide access to adult day services to the highest quality, enabling older adults to maintain an independent lifestyle for as long as possible. They are contracted to provide 13,950 hours of adult day services at their two locations.

Life Path provides day care services that include structured, comprehensive programming that provides functionally – impaired older adults with components including socialization, supervision, monitoring, personal care and nutrition, provided in a protective setting during the day, less than 24-hour period.

Grant Award Amount – \$131,827.50
Funding Source – 10% - County, 90% - Federal
Revenue Account – Aging -AA6772, 04773

Grant Term – 1/1/2021 – 12/31/2021
Budget Amendment – No

Respectfully Submitted,

Deborah C. Riitano
Commissioner

cc: Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



Legislation Text

File #: TMP-1953, Version: 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Contract authorization with Life Path (Senior Services of Albany) to provide adult day services to eligible older adults in Albany County.

Date: 9/28/2020
 Submitted By: Patrick Dillon
 Department: Aging
 Title: Contract Administrator
 Phone: 518 447 7733
 Department Rep.
 Attending Meeting: Deborah C. Riitano, Commissioner

Purpose of Request:

- Adopting of Local Law
- Amendment of Prior Legislation
- Approval/Adoption of Plan/Procedure
- Bond Approval
- Budget Amendment
- Contract Authorization
- Countywide Services
- Environmental Impact/SEQR
- Home Rule Request
- Property Conveyance
- Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- Contractual
- Equipment
- Fringe
- Personnel

- Personnel Non-Individual
- Revenue

Increase Account/Line No.: Click or tap here to enter text.
Source of Funds: Click or tap here to enter text.
Title Change: Click or tap here to enter text.

CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:

- Change Order/Contract Amendment
- Purchase (Equipment/Supplies)
- Lease (Equipment/Supplies)
- Requirements
- Professional Services
- Education/Training
- Grant

Choose an item.

Submission Date Deadline Click or tap to enter a date.

- Settlement of a Claim
- Release of Liability
- Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):

Life Path (Senior Services of Albany)
28 Colvin Avenue Albany, New York 12206

Additional Parties (Names/addresses):

Click or tap here to enter text.

Amount/Raise Schedule/Fee: \$131,827.50

Scope of Services: Life Path shall provide day care services that include structured comprehensive programming that provides functionally impaired older adults with components including socialization, supervision, monitoring, personal care and nutrition, provided in a protective setting during the day, less than 24 hour period.

Bond Res. No.: Click or tap here to enter text.

Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes No
If Mandated Cite Authority: Click or tap here to enter text.

Is there a Fiscal Impact: Yes No
Anticipated in Current Budget: Yes No

County Budget Accounts:

Revenue Account and Line: A46772, 04773
Revenue Amount: \$118,644.75

Appropriation Account and Line: A96772, 44046
Appropriation Amount: \$131,827.50

Source of Funding - (Percentages)

Federal: 90%
State: Click or tap here to enter text.
County: 10%
Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/1/2021 - 12/31/2021
Length of Contract: 12 months

Impact on Pending Litigation

If yes, explain: Yes No
Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: 458
Date of Adoption: 11/12/2019

Justification: (state briefly why legislative action is requested)

Click or tap here to enter text.

The Department for Aging (DFA) requests legislative approval to enter into a contract with Life Path, formerly Senior Services of Albany (SSA), to provide Adult Day Services to eligible older adults within Albany County. Life Path shall provide access to adult day services to the highest quality, enabling older adults to maintain an independent lifestyle for as long as possible. Life Path is contracted to provide 13,950 hours of adult day services at their two locations.

RESOLUTION NO. 458

AUTHORIZING AN AGREEMENT WITH LIFE PATH REGARDING ADULT DAY SERVICES FOR SENIORS

Introduced: 11/12/19
By Elder Care Committee:

WHEREAS, The Commissioner of the Albany County Department for Aging has requested authorization to enter into an agreement with Life Path regarding adult day services for seniors in the amount of \$131,828 for the term commencing January 1, 2020 and ending December 31, 2020, and

WHEREAS, The Commissioner indicated that Life Path will provide structured and comprehensive day care services that include socialization, supervision, monitoring, personal care, and nutrition in a protective setting, now, therefore be it

RESOLVED, By the Albany County Legislature that the County Executive is authorized to enter into an agreement with Life Path, Albany, NY 12206 regarding adult day services for seniors in an amount not to exceed \$131,828 for the term commencing January 1, 2020 and ending December 31, 2020, and, be it further

RESOLVED, That the County Attorney is authorized to approve said agreement as to form and content, and, be it further

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.

Adopted by unanimous vote - 11/12/19

State of New York
County of Albany

This is to certify that I, the undersigned, Clerk of the Albany County Legislature, have compared the foregoing copy of the resolution and/or local law with the original resolution and/or local law now on file in the office, and which was passed by the Legislature of said County on the 12th day of November 2019, a majority of all members elected to the Legislature voting in favor thereof, and that the same is a correct and true transcript of such original resolution and/or local law and the whole thereof.



IN WITNESS THEREOF, I have hereunto set my hand and the official seal of the County Legislature this 14th day of November, 2019.

A handwritten signature in cursive script, appearing to read "Paul T. Deane".

Clerk, Albany County Legislature

NOTIFICATION OF GRANT AWARD UNDER TITLE III-B OF THE OLDER AMERICANS ACT

Name and Address of Area Agency: Albany County Department for Aging 162 Washington Avenue, 6th Floor Albany, NY 12210-2304	Name and Address of Sponsoring Agency/Payee Albany County
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Program Year - Beginning: 1/1/2020 Ending: 12/31/2020

Fiscal Year from which funds are awarded:	2020	Federal CFDA No. - 93.044	This award is	New
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Section I - Cost Categories	Section II - Grantee Budget - Federal and Matching Funds:																																																		
<table border="0"> <tr><td>Personnel</td><td style="text-align: right;">\$80,086.00</td></tr> <tr><td>Fringe Benefits</td><td style="text-align: right;">0.00</td></tr> <tr><td>Equipment</td><td style="text-align: right;">0.00</td></tr> <tr><td>Travel</td><td style="text-align: right;">0.00</td></tr> <tr><td>Maint. & Operations</td><td style="text-align: right;">19,400.00</td></tr> <tr><td>Other Expenses</td><td style="text-align: right;">9,250.00</td></tr> <tr><td>Subcontracts</td><td style="text-align: right;">358,859.00</td></tr> <tr><td>Approved Costs</td><td style="text-align: right;"><u>\$467,595.00</u></td></tr> <tr><td>Less:</td><td></td></tr> <tr><td>Anticipated Income</td><td style="text-align: right;"><u>9,000.00</u></td></tr> <tr><td>Net Cost</td><td style="text-align: right;"><u><u>\$458,595.00</u></u></td></tr> </table>	Personnel	\$80,086.00	Fringe Benefits	0.00	Equipment	0.00	Travel	0.00	Maint. & Operations	19,400.00	Other Expenses	9,250.00	Subcontracts	358,859.00	Approved Costs	<u>\$467,595.00</u>	Less:		Anticipated Income	<u>9,000.00</u>	Net Cost	<u><u>\$458,595.00</u></u>	<table border="0"> <tr><td>1. Federal Share (see remark 1)</td><td style="text-align: right;">\$265,418.00</td></tr> <tr><td>2. Combined matching Share</td><td></td></tr> <tr><td> A. In-Kind</td><td style="text-align: right;">\$0.00</td></tr> <tr><td> B. Cash</td><td style="text-align: right;">193,177.00</td></tr> <tr><td> C. Volunteer Match</td><td style="text-align: right;"><u>\$0.00</u></td></tr> <tr><td>3. Net Cost</td><td style="text-align: right;">\$458,595.00</td></tr> <tr><td colspan="2">Section III - Federal Funds Ceiling</td></tr> <tr><td> A. Carryover</td><td style="text-align: right;">\$0.00</td></tr> <tr><td> B. Base Allocation</td><td style="text-align: right;">252,651.00</td></tr> <tr><td> C. III-C-1 Transfer</td><td style="text-align: right;">92,446.00</td></tr> <tr><td> D. III-C-2 Transfer</td><td style="text-align: right;">0.00</td></tr> <tr><td> E. Supplement</td><td style="text-align: right;">0.00</td></tr> <tr><td>* Federal Funds Ceiling</td><td style="text-align: right;"><u>\$345,097.00</u></td></tr> <tr><td>(see remark 1)</td><td></td></tr> </table>	1. Federal Share (see remark 1)	\$265,418.00	2. Combined matching Share		A. In-Kind	\$0.00	B. Cash	193,177.00	C. Volunteer Match	<u>\$0.00</u>	3. Net Cost	\$458,595.00	Section III - Federal Funds Ceiling		A. Carryover	\$0.00	B. Base Allocation	252,651.00	C. III-C-1 Transfer	92,446.00	D. III-C-2 Transfer	0.00	E. Supplement	0.00	* Federal Funds Ceiling	<u>\$345,097.00</u>	(see remark 1)	
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Remarks: In addition to the conditions contained in the Four Year Plan, Annual Implementation Plan and Application for Funding, the conditions checked below apply to this award:

- (XX) 1. Federal reimbursement is limited to the higher of the "Federal Share" in Section II or the "Federal Funds Ceiling" in Section III of this award notice.
- (XX) 2. Receipt of federal funds (either through advance or reimbursement) does not constitute earning of these funds. The federal share of the project cost is earned only when allowable costs have been incurred and paid; and the non-federal share of the costs has been contributed.
- (XX) 3. The federal share will not exceed 75% of the cost of Area Agency Administrative Activities and the federal share will not exceed 90% of the cost of Supportive Services.
- (XX) 4. Federal funds carried over from the prior year are estimated. Actual carryover depends on prior year closeout and will be confirmed upon closeout.
- () 5. This award authorizes the payment of advances only. The award is conditional upon the approval of the Annual Implementation Plan and application referenced above, and the initial advance must be repaid if such plan and application do not receive final approval after appropriate modifications, if any.

Name and Title of Authorizing Official: Karen Jackuback Deputy Director	Signature: 	Date: July 8, 2020
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DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT FOR AGING
162 WASHINGTON AVENUE
ALBANY, NEW YORK 12210
ADMINISTRATION: (518) 447-7198
GENERAL INFORMATION: (518) 447-7177
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WWW.ALBANYCOUNTY.COM

DEBORAH C. RIITANO
COMMISSIONER

September 25, 2020

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Room 710
Albany, NY 12207

Dear Chairman Joyce:

The Department for Aging (DFA) requests legislative approval to enter into a Memorandum of Understanding with Cornell Cooperative Extension, to subcontract Dietician Services for our Congregate and Home Delivered Meal programs in Albany County. It is a NYSOFA regulation that all Aging Departments shall have a full-time staff person or equivalent who directs all activities related to the nutrition program which may include the planning, preparation and delivery of nutritious meals and supportive services. This person is responsible for nutrition oversight and operations; supervision of contractors providing food service and other nutrition services. This person must have requisite knowledge and experience in nutrition and food service.

The services of the subcontracted Registered Dietitian, shall be utilized for an adequate amount of time to perform nutrition related responsibilities. Job responsibilities may include but are not limited to monitoring meal preparation sites, congregate sites, and home delivered meal delivery, menu planning and certification, development of nutrition information and education programs, providing nutrition counseling, diet prescription reviews, participation in case management and participant team reviews, providing technical assistance and training, and administrative activities. A minimum of 16 hours per week. The hours of the registered dietitian employed by the subcontractor will count toward fulfillment of the minimum hours required.

Grant Award Amount – \$38,000.00
Funding Source – 26% - County, 74% - Federal
Revenue Account – Aging -AA6772, 04774, 04775

Grant Term – 11/9/2021 – 12/31/2021
Budget Amendment – No

Respectfully Submitted,

Deborah C. Riitano
Commissioner

cc: Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



Legislation Text

File #: TMP-1954, Version: 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Memorandum of Understanding authorization between Albany County Department for Aging and Cornell Cooperative Extension to provide Dietician nutritional services.

Date: 9/28/2020
 Submitted By: Patrick Dillon
 Department: Aging
 Title: Contract administrator
 Phone: 518 447 7733
 Department Rep.
 Attending Meeting: Deborah C. Riitano, Commissioner

Purpose of Request:

- Adopting of Local Law
- Amendment of Prior Legislation
- Approval/Adoption of Plan/Procedure
- Bond Approval
- Budget Amendment
- Contract Authorization
- Countywide Services
- Environmental Impact/SEQR
- Home Rule Request
- Property Conveyance
- Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- Contractual
- Equipment
- Fringe
- Personnel

- Personnel Non-Individual
- Revenue

Increase Account/Line No.: Click or tap here to enter text.
Source of Funds: Click or tap here to enter text.
Title Change: Click or tap here to enter text.

CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:

- Change Order/Contract Amendment
- Purchase (Equipment/Supplies)
- Lease (Equipment/Supplies)
- Requirements
- Professional Services
- Education/Training
- Grant

Choose an item.

Submission Date Deadline Click or tap to enter a date.

- Settlement of a Claim
- Release of Liability
- Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):

Cornell Cooperative Extension
24 Martin Road, Voorheesville, New York 12186

Additional Parties (Names/addresses):

Amount/Raise Schedule/Fee: \$38,000.00

Scope of Services: The Dietician's job responsibilities shall include but are not limited to monitoring meal preparation sites, congregate sites, and home delivered meal delivery, menu planning and certification, development of nutrition information and education programs, providing nutrition counseling, diet prescription reviews, participation in case management and participant team reviews, providing technical assistance and training, and administrative activities.

Bond Res. No.: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes No

If Mandated Cite Authority: Click or tap here to enter text.

Is there a Fiscal Impact: Yes No

Anticipated in Current Budget: Yes No

County Budget Accounts:

Revenue Account and Line: A46772, 04774, 04775

Revenue Amount: \$5,000.00, \$5,000.00

Appropriation Account and Line: A96772, 44046

Appropriation Amount: \$38,000.00

Source of Funding - (Percentages)

Federal: 26%
State: Click or tap here to enter text.
County: 74%
Local: Click or tap here to enter text.

Term

Term: (Start and end date) 11/9/2020 - 12/31/2021

Length of Contract: 14 months

Impact on Pending Litigation Yes No

If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: NA

Date of Adoption: NA

Justification: (state briefly why legislative action is requested)

The Department for Aging (DFA) requests legislative approval to enter into a Memorandum of Understanding with Cornell Cooperative Extension, to subcontract Dietician Services for our Congregate and Home Delivered Meal programs in Albany County. It is a NYSOFA regulation that all Aging Departments shall have a full-time staff person or equivalent who directs all activities related to the nutrition program which may include the planning, preparation and delivery of nutritious meals and supportive services. This person is responsible for nutrition oversight and operations; supervision of contractors providing food service and other nutrition services. This person must have requisite knowledge and experience in nutrition and food service.

The services of the subcontracted Registered Dietician, shall be utilized for an adequate amount of time to perform nutrition related responsibilities. A minimum of 16 hours per week. The hours of the registered dietitian employed by the subcontractor will count toward fulfillment of the minimum hours required.

NOTIFICATION OF GRANT AWARD UNDER TITLE III-C-2 OF THE OLDER AMERICANS ACT

Name and Address of Area Agency: Albany County Department for Aging 162 Washington Avenue, 6th Floor Albany, NY 12210-2304	Name and Address of Sponsoring Agency/Payee: Albany County
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Program Year - Beginning: 1/1/2020 Ending: 12/31/2020

Fiscal Year from which funds are awarded: 2020	Federal CFDA No. - 93.045	This award is New
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<u>Section I - Cost Categories</u>	<u>Amount</u>	<u>Section II - Grantee Budget - Federal and Matching Funds:</u>	
Personnel	\$20,000.00	1. Federal Share (see remark 1)	\$191,236.00
Fringe Benefits	0.00	2. Combined Matching Share	
Equipment	0.00	A. In-Kind	\$0.00
Travel	0.00	B. Cash	24,582.00
Maint. & Operations	0.00	C. Volunteer Match	\$0.00
Other Expenses	0.00		
Subcontracts	215,448.00	3. Net Cost	\$215,818.00
Food	0.00	<u>Section III - Federal Funds Ceiling:</u>	
Approved Costs	\$235,448.00	A. Carryover	\$0.00
Less:		B. Base Allocation	193,960.00
Anticipated Income	1,500.00	C. III-B Transfer	0.00
NSIP	18,130.00	D. III-C-1 Transfer	92,446.00
Net Cost	\$215,818.00	E. Supplement	0.00
		Federal Funds Ceiling (see remark 1)	\$286,406.00

Remarks: In addition to the conditions contained in the Four Year Plan, Annual Implementation Plan and Application for Funding, the conditions checked below apply to this award:

- (XX) 1. Federal reimbursement is limited to the higher of the "Federal Share" in Section II or the "Federal Funds Ceiling" in Section III of this award notice.
- (XX) 2. Receipt of federal funds (either through advance or reimbursement) does not constitute earning of these funds. The federal share of the project cost is earned only when allowable costs have been incurred and paid; and the non-federal share of the costs has been contributed.
- (XX) 3. The federal share will not exceed 75% of the cost of Area Agency Administrative Activities and the federal share will not exceed 90% of the cost of Home Delivered Nutrition Services.
- (XX) 4. Federal funds carried over from the prior year are estimated. Actual carryover depends on prior year closeout and will be confirmed upon closeout.
- (XX) 5. In accordance with Federal Policy, the funds herein awarded cannot be used to pay the cost for congregate meals.
- () 6. Other.
- () 7. This award authorizes the payment of advances only. The award is conditional upon the approval of the Annual Implementation Plan and application referenced above, and the initial advance must be repaid if such plan and application do not receive final approval after appropriate modifications, if any.

Name and Title of Authorizing Official: Karen Jackuback Deputy Director	Signature: 	Date: July 8, 2020
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NOTIFICATION OF GRANT AWARD UNDER TITLE III-C-1 OF THE OLDER AMERICANS ACT

Name and Address of Area Agency: Albany County Department for Aging 162 Washington Avenue, 6th Floor Albany, NY 12210-2304	Name and Address of Sponsoring Agency/Payee: Albany County
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Program Year - Beginning: 1/1/2020 Ending: 12/31/2020

Fiscal Year from which funds are awarded: 2020 Federal CFDA No. - 93.045 This award is New

<u>Section I - Cost Categories</u>	<u>Amount</u>	<u>Section II - Grantee Budget - Federal and Matching Funds:</u>
Personnel	\$20,000.00	1. Federal Share (see remark 1) \$375,127.00
Fringe Benefits	0.00	2. Combined Matching Share
Equipment	0.00	A. In-Kind 0.00
Travel	0.00	B. Cash 55,085
Maint. & Operations	0.00	C. Volunteer Match 0.00
Other Expenses	0.00	
Subcontracts	495,364.00	3. Net Cost \$430,212.00
Food	0.00	<u>Section III - Federal Funds Ceiling:</u>
Approved Costs	\$515,364.00	A. Carryover \$0.00
Less:		B. Base Allocation 369,785.00
Anticipated Income	51,187.00	C. III-B Transfer -92,446.00
NSIP	33,965.00	D. III-C-2 Transfer -92,446.00
Net Cost	\$430,212.00	E. Supplement 0.00
		Federal Funds Ceiling (see remark 1) \$184,893.00

Remarks: In addition to the conditions contained in the Four Year Plan, Annual Implementation Plan and Application for Funding, the conditions checked below apply to this award:

- (XX) 1. Federal reimbursement is limited to the lower of the "Federal Share" in Section II or the "Federal Funds Ceiling" in Section III of this award notice.
- (XX) 2. Receipt of federal funds (either through advance or reimbursement) does not constitute earning of these funds. The federal share of the project cost is earned only when allowable costs have been incurred and paid; and the non-federal share of the costs has been contributed.
- (XX) 3. The federal share will not exceed 75% of the cost of Area Agency Administrative Activities and the federal share will not exceed 90% of the cost of Congregate Nutrition Services.
- (XX) 4. Federal funds carried over from the prior year are estimated. Actual carryover depends on prior year closeout and will be confirmed upon closeout.
- (XX) 5. In accordance with Federal Policy, the funds herein awarded cannot be used to pay the cost for home delivered meals.
- () 6. Other:

Name and Title of Authorizing Official: Karen Jackuback Deputy Director	Signature: 	Date: July 8, 2020
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