

PUBLIC SAFETY COMMITTEE
June 1, 2021 4:00 p.m.

AGENDA

Chair: John Lant

Members:

Preston Allen
Eric Connolly
Dick Lucia
Jean Raymond
Jon Schopf - VC
Mike Smith

- I. Welcome and Attendance
- II. Approval of the minutes of the May 4, 2021 meeting
- III. Albany Medical Center Contract Renewal – Susan Hayes-Masa, Coroner
- IV. Acceptance of \$250,000 grant from the Dormitory Authority of the State of New York (DASNY) – Carl Zeilman, Emergency Services
- V. Transfer of funds from the STOP DWI program reserve – Steve Bulger, County Administrator
- VI. Acceptance of the Aid to Defense Grant – Andrew Blumenberg, Public Defender
- VII. Other Business
- VIII. Adjournment

Due to public health and safety concerns related to COVID-19, there is limited capacity in the Boardrooms. The public will have an opportunity to hear the meeting live via an audio signal using this call-in number and access code:

Dial: 1-978-990-5145

Access Code: 1840389



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

TO: Steve Bulger, County Administrator
Mike Hartnett, County Attorney
Pam Wright, Clerk of the Board

CC: Jason Kemper, Planning Director
Therese Connolly, Deputy Clerk of the Board
Matt Rose, Management Analyst
Clare Giammusso, Confidential Secretary/County Attorney's Office

FROM: Susan Hayes-Masa, Coroner

DATE: 5/1/2021

RE: Albany Medical Center Contract Renewal

COMMITTEE:

1. Is a Resolution Required: YES or NO
(If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
2. Is a Budget Amendment needed:
(If yes, budget lines and impact must be provided)
Not that I know of.....part of our budget 1-27-000-8125
3. Are there Amendments to the Compensation Schedule:
(If yes, provide details)
No
4. Specific details on what the resolution will authorize:
Will renew our contract with Albany Medical Center to perform autopsies if needed.
5. Does this item require hiring a Vendors/Contractors:
 - a. Were bids/proposals solicited: NO
 - b. Is the vendor/contractor a sole source: YES
 - c. Commencement date of contract term: 1/1/2021
 - d. Termination of contract date: 12/31/21
 - e. Contract renewal and term: 1 YEAR
 - f. Contact information: SARAH LAVISKA, AMC Pathology Dept. (lavisks@amc.edu)
 - g. Is the vendor/contractor an LLS, PLLC or partnership:
 - h. State of vendor/contractor organization: NY
 - i. Is this a renewal agreement: YES or NO
 - j. Vendor/Contractor comment/remarks:



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

6. Is this an annual housekeeping resolution:
(If yes, attach the last approved resolution)
 - a. What were the terms of the prior resolution 1 YEAR, SEE ATTACHED
 - b. Are the terms changing: NO, RENEWAL
 - c. What is the reason for the change in terms:
N/A

7. Is a new position being created:
 - a. Effective date N/A
 - b. Salary and grade N/A

8. Is a new employee being hired:
 - a. Effective date of employment N/A
 - b. Salary and grade N/A
 - c. Appointed position: N/A
 - d. Term:
N/A

9. Is a grant being accepted:
 - a. Source of grant funding:
 - b. Amount of grant:
 - c. Purpose grant will be used for:
 - d. Equipment and/or services being purchased with the grant:
 - e. Time period grant covers:
N/A

10. Remarks/Reasoning (Supporting documentation must be attached to this form):

While Albany Medical Center is rarely used due to their exorbitant pricing and in 2020 only sent one body to AMC due to advanced decomposition. None sent in 2021 to date.

EXHIBIT A
SCHEDULE OF PAYMENTS

The County shall pay the CONTRACTOR and the CONTRACTOR agrees to accept as full payment for the professional services furnished the total sum not to exceed **TWO THOUSAND DOLLARS (\$2,000.00)** for the use of the morgue facility at Albany Medical Center Hospital and includes all onsite histology and microbiology services. Histology and other laboratory services will be billed according to the following Morgue and Laboratory Fee Schedule effective January 1, 2021:

Albany Medical Center
Morgue and Laboratory Fee Schedule

Effective January 1, 2021

Morgue Facility Use (includes onsite histology and microbiology)	\$2,000.00/case
Histology or Laboratory Services Requested But not Performed at AMC (Does not include ANY toxicology services)	Billed at AMC's cost plus a \$25 handling fee
Other Laboratory Testing Performed at AMC (e.g., HIV serology, molecular testing, chemistry procedures)	50% discount of AMC's specific charge schedule in effect at the time of the service
Mirobiology Only (Without morgue facility use)	50% discount of AMC's specific charge schedule in effect at the time of service
Radiology Fee – Global	50% discount of AMC's specific charge schedule in effect at the time of service

Toxicology services will be the sole responsibility of each county to contract for testing for these services at an outside lab of its choice.

RENEWAL AGREEMENT

Renewal to Agreement Dated December 12, 2018.

BY AND BETWEEN,

COUNTY OF SARATOGA, a municipal corporation duly organized under the laws of the State of New York with offices at 40 McMaster Street, Ballston Spa, New York 12020, (COUNTY),

- and -

Albany Medical Center, having a place of business at 43 New Scotland Avenue, Albany, New York 12208-3478, (CONTRACTOR);

RECITALS:

WHEREAS, pursuant to Resolution 259-2018, the COUNTY and CONTRACTOR entered into an agreement dated December 12, 2018 for the use of CONTRACTOR's morgue and laboratory facilities by the Saratoga County Coroners when performing autopsies and other post-mortem activities, and for the provision of laboratory services related thereto, for the term December 1, 2018 through December 31, 2019 at the rates for services set forth in CONTRACTOR's Morgue and Laboratory Fee Schedule for said stated term, at a cost not to exceed \$30,000; and

WHEREAS, COUNTY and CONTRACTOR desire to renew the agreement for the use of CONTRACTOR's morgue facilities, X-ray and laboratory services by Saratoga County Coroners for the term January 1, 2020 through December 31, 2020 at the rates for services set forth in CONTRACTOR's Morgue and Laboratory Fee Schedule effective January 1, 2020, which Fee Schedule includes a fee of \$2,000 per case for morgue facility use, at a cost not to exceed \$30,000; and

WHEREAS, both CONTRACTOR and COUNTY desire to renew the Agreement dated December 12, 2018 accordingly;

NOW, THEREFORE, the parties agree as follows:

1. The Agreement dated December 12, 2018 between CONTRACTOR and COUNTY for the use of CONTRACTOR's morgue facilities, X-ray and laboratory services by Saratoga County Coroners is hereby renewed for the term of January 1, 2020 through December 31, 2020 at the rates for services set forth in CONTRACTOR's Morgue and Laboratory Fee Schedule effective January 1, 2020, which Fee Schedule includes a fee of \$2,000 per case for morgue facility

use, at a cost not to exceed \$30,000, unless and until a higher limit s authorized by COUNTY's Board of Supervisors.

2. All other terms of said Agreement dated December 12, 2018, and any amendments thereto not inconsistent with the provisions of this Renewal and Amendment Agreement shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Renewal Agreement this 8th day of September, 2020.

Date 9/8/20

COUNTY OF SARATOGA

By: Preston Allen
Preston Allen, Chairman
Board of Supervisors
Per Resolution #145-2020

Date 8/28/20

ALBANY MEDICAL CENTER

By: Ferdinand Venditti Jr.
Print Name: Ferdinand Venditti Jr., MD
Federal I.D. # 141338307

APPROVED:

Stephen M. Doney
County Attorney

7/21/20



SARATOGA COUNTY BOARD OF SUPERVISORS

RESOLUTION 145 - 2020

Introduced by Supervisors Peck, Lant, Lawler, O'Connor, Raymond, Veitch and Wright

AUTHORIZING THE CHAIRMAN TO ENTER INTO A RENEWAL AGREEMENT WITH ALBANY MEDICAL CENTER FOR THE USE OF LABORATORY AND MORGUE FACILITIES NEEDED BY THE COUNTY CORONERS WHEN PERFORMING AUTOPSIES AND OTHER POST-MORTEM ACTIVITIES

WHEREAS, pursuant to Resolution 259-2018, the County entered into an agreement with Albany Medical Center ("AMC") for the use of the Medical Center's morgue and laboratory facilities by our County Coroners when performing autopsies and other post-mortem activities, and for the provision of laboratory services related thereto, for the term December 1, 2018 through December 31, 2019 at the rates for services set forth in AMC's Morgue and Laboratory Fee Schedule for said stated term, at a cost not to exceed \$30,000; and

WHEREAS, our Public Safety Committee and the County Coroners have recommended that the County enter into a renewal agreement with Albany Medical Center for the continued use of the Medical Center's morgue facilities, X-Ray and laboratory services for the term January 1, 2020 through December 31, 2020 at the rates for services set forth in AMC's Morgue and Laboratory Fee Schedule effective January 1, 2020, which Fee Schedule includes a fee of \$2,000 per case for morgue facility use, at a cost not to exceed \$30,000; now, therefore, be it

RESOLVED, that the Chair of the Board is authorized to execute a renewal agreement with Albany Medical Center of Albany, New York, for the use of the Medical Center's morgue facilities, X-ray and laboratory services by our County Coroners for the term January 1, 2020 through December 31, 2020 at the rates for services set forth in AMC's Morgue and Laboratory Fee Schedule effective January 1, 2020, which Fee Schedule includes a fee of \$2,000 per case for morgue facility use, at a cost not to exceed \$30,000; with the form and content of such agreement being subject to the approval of the County Attorney.

BUDGET IMPACT STATEMENT: No budget impact.

EXHIBIT A
SCHEDULE OF PAYMENTS

The County shall pay the CONTRACTOR and the CONTRACTOR agrees to accept as full payment for the professional services furnished the total sum not to exceed **TWO THOUSAND DOLLARS (\$2,000.00)** for the use of the morgue facility at Albany Medical Center Hospital and includes all onsite histology and microbiology services. Histology and other laboratory services will be billed according to the following Morgue and Laboratory Fee Schedule effective January 1, 2020:

Albany Medical Center
Morgue and Laboratory Fee Schedule

Effective January 1, 2020

Morgue Facility Use (includes onsite histology and microbiology)	\$2,000.00/case
Histology or Laboratory Services Requested But not Performed at AMC (Does not include ANY toxicology services)	Billed at AMC's cost plus a \$25 handling fee
Other Laboratory Testing Performed at AMC (e.g., HIV serology, molecular testing, chemistry procedures)	50% discount of AMC's specific charge schedule in effect at the time of the service
Mirobiology Only (Without morgue facility use)	50% discount of AMC's specific charge schedule in effect at the time of service
Radiology Fee – Global	50% discount of AMC's specific charge schedule in effect at the time of service

Toxicology services will be the sole responsibility of each county to contract for testing for these services at an outside lab of its choice.



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

TO: Steve Bulger, County Administrator
Mike Hartnett, County Attorney
Pam Wright, Clerk of the Board

CC: Jason Kemper, Planning Director
Therese Connolly, Deputy Clerk of the Board
Matt Rose, Management Analyst
Clare Giammusso, Confidential Secretary/County Attorney's Office

FROM: Carl Zeilman

DATE: 5/21/2021

RE: Dormitory Authority of the State of New York (DASNY) SAM Grant \$250,000

COMMITTEE: Public Safety

1. Is a Resolution Required: YES or NO
(If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
2. Is a Budget Amendment needed:
(If yes, budget lines and impact must be provided)
Yes -- A.36.366-7041 (Cars & Light trucks)
3. Are there Amendments to the Compensation Schedule:
(If yes, provide details)
4. Specific details on what the resolution will authorize:
The Office of Emergency Services to accept a \$250,000 grant from the Dormitory Authority of the State of New York (DASNY) State and Municipal Facilities Program for the procurement of a new mobile communications command vehicle.
5. Does this item require hiring a Vendors/Contractors:
 - a. Were bids/proposals solicited: N/a
 - b. Is the vendor/contractor a sole source:
 - c. Commencement date of contract term:
 - d. Termination of contract date:
 - e. Contract renewal and term:
 - f. Contact information:
 - g. Is the vendor/contractor an LLS, PLLC or partnership:
 - h. State of vendor/contractor organization:
 - i. Is this a renewal agreement: YES or NO
 - j. Vendor/Contractor comment/remarks:



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

6. Is this an annual housekeeping resolution:
(If yes, attach the last approved resolution)
 - a. What were the terms of the prior resolution N/a
 - b. Are the terms changing:
 - c. What is the reason for the change in terms:

7. Is a new position being created:
 - a. Effective date N/a
 - b. Salary and grade

8. Is a new employee being hired:
 - a. Effective date of employment N/a
 - b. Salary and grade
 - c. Appointed position:
 - d. Term:

9. Is a grant being accepted:
 - a. Source of grant funding: SAM Grant
 - b. Amount of grant: \$250,000
 - c. Purpose grant will be used for: Mobile Communications Command vehicle
 - d. Equipment and/or services being purchased with the grant:
 - e. Time period grant covers:
Through December 2023

10. Remarks/Reasoning (Supporting documentation must be attached to this form):
\$250,000 SAM grant will be utilized to secure a new mobile communications command vehicle for use by the Saratoga County Sheriff's Office and the Office of Emergency Services.



DASNY

ANDREW M. CUOMO
Governor

ALFONSO L. CARNEY, JR.
Chair

GERRARD P. BUSHELL, Ph.D.
President & CEO

September 18, 2019

VIA EMAIL

Mr. Carl Zeilman
Commissioner
County of Saratoga
25 West High Street
Ballston Spa, NY 12020

*Re: State and Municipal Facilities Program ("SAM")
Purchase of a Mobile Command Center Vehicle
Project ID: #19232*

Dear Mr. Zeilman:

As you know, the State has awarded the County of Saratoga ("Grantee") a State and Municipal Facilities Program ("SAM") grant for the above-referenced project in the amount of \$250,000 (the "Grant").

DASNY will be undertaking a number of reviews as outlined in the attached Frequently Asked Questions (FAQs). ***Please read the FAQs. They provide information you will need throughout the grant administration process.***

This letter explains the documentation you will need to complete and return to DASNY. ***Please return the completed documentation described below within thirty days or send an email to grants@dasny.org to let us know when you anticipate being able to return the information.***

As part of the legal review of your Grant, DASNY will need you to complete and return the following documents. The documents and their purposes are summarized below.

Note: An Authorized Officer is someone who can bind the Grantee to a contract. Please contact the Grantee's attorney if there are any questions as to who can sign on behalf of the Grantee. By signing these documents, the person signing is certifying that they are authorized to bind the Grantee to the terms of the documents.

CORPORATE HEADQUARTERS
515 Broadway
Albany, NY 12207-2964

T 518-257-3000
F 518-257-3100

NEW YORK CITY OFFICE
One Penn Plaza, 52nd Floor
New York, NY 10119-0098

T 212-273-5000
F 212-273-5121

BUFFALO OFFICE
539 Franklin Street
Buffalo, NY 14202-1109

T 716-884-9780
F 716-884-9787

DORMITORY AUTHORITY STATE OF NEW YORK

**WE FINANCE, BUILD AND
DELIVER.**

www.dasny.org



Grantee Certification

- Certain laws prohibit the use of public funds to finance religious programs or programs that may favor one religion over another. As the issuer of the bonds that will finance the project to be funded with Grant funds, DASNY must verify that it is in compliance with all applicable Federal and State laws and regulations.

Accordingly, please review the attached Grantee Certification (at the end of this letter) to ensure it accurately states the purposes for which the Grant funds will be used. Please arrange for two Authorized Officers of your organization to sign the Grantee Certification.

Project Certification

- As the issuer of the bonds that will finance the project to be funded with Grant funds, DASNY must verify that it is in compliance with all applicable Federal and State laws and regulations. This includes verifying that Grant funds will not be used for a project that was previously funded with Grant proceeds, administered by DASNY, for substantially the same project at the same location as described in a Preliminary Application or Project Information Sheet DASNY processed within the last six (6) years.

Accordingly, please review the attached Project Certification (at the end of this letter) and arrange for an Authorized Officer of your organization to sign the Project Certification.

W-9 Form

- This form is utilized to set up the Grantee as a vendor in the DASNY’s financial system. The Grantee’s Federal Employer Identification Number (FEIN) or Taxpay Identification Number (TIN) is required to make payment. Please be sure that the FEIN number and Legal Organization name (as well as any d/b/a) is accurately reflected on the W-9. The Legal Organization name and FEIN should match the Legal Organization name and FEIN that the Internal Revenue Service has on file for the Grantee which should also correspond with the Grantee’s Incorporation Papers.

Grantee Questionnaire (GQ)

- As the trustee of public funds, DASNY needs to be certain that bond proceeds are paid only to organizations that are deemed to be responsible entities. Full and accurate responses on the GQ will help to achieve this goal. The GQ must be completed, signed by an Authorized Officer of the Grantee, Chair of the Board (or other Authorized Officer) and each signature

must be notarized by a New York State Notary Public before DASNY can process the grant. Please be advised that the GQ will be incorporated into the Grant Disbursement Agreement (the contract between DASNY and the Grantee) and that the submission of false information on the GQ could be a violation of Federal and State Penal Laws.

Evidence of Site Control

- Site control is required to evidence that the Grantee has sufficient authorization and control to undertake the project at the project location. In order to verify the Grantee owns, leases, or otherwise has control over the site where the project will be located, please provide a copy of the deed, lease, or other document evidencing site control by the Grantee. In the case of a vehicle purchase, title and registration will be needed at the time that requisitions for Grant funds are submitted. DASNY will also need to know the location for where the vehicle will be kept.

Financial Documentation

- Please send a copy of quotes, proposals, cost estimates or any other document that will justify the overall project value. As part of DASNY's financial review of the project, we must receive an estimate setting forth the projects costs necessary to complete the project. If the cost estimate is higher than the value of the grant, DASNY will need to see evidence of the other source(s) of funding for the project. Please see the attached checklist as a reference for what is needed for the financial review.

In addition to the above, an Environmental Manager from DASNY's Office of Environmental Affairs (OEA) will be contacting you regarding the environmental review required pursuant to the State Environmental Quality Review Act (SEQRA). If another agency, such as a municipality, has previously undertaken an environmental review for this project, you will be asked to set forth the lead agency for the review and provide a copy of its SEQR determination. If DASNY is the lead agency for the review, or the project to be funded with the grant is a Type II project, OEA will work with you to complete the required documentation.

For your convenience, we have enclosed a form cover letter for you to use when you return the completed documents to DASNY. Emailing your documents to Grants Administration staff will not expedite the process, so please send the package as directed to the address noted in the template cover letter. **Incomplete documents will delay the processing of your Grant application.** You will be contacted during the review process if additional information is needed.

In the meantime, please review the enclosed list of **Frequently Asked Questions**. This list was designed to answer many of the questions that you may have about the Grant process. **Please keep this document to use as a reference during the administration of the Grant.**



Should you have any questions concerning the enclosed documentation, please either call (518) 257-3177 or email grants@dasny.org and someone from Grants Administration will contact you.

Sincerely,

A handwritten signature in blue ink, appearing to read "SR", positioned above the printed name.

Sean Rosney
Grant Program Assistant

PLEASE PRINT ON ORGANIZATIONAL ("GRANTEE") LETTERHEAD

Grants Administration
DASNY
515 Broadway
Albany, NY 12207

*SUBJECT: State and Municipal Facilities Program ("SAM")
Purchase of a Mobile Command Center Vehicle
Project ID: #19232*

Dear Grants Administration:

Enclosed please find the following documents in connection with the SAM Grant awarded to our organization:

1. Completed Grantee Certification signed by two (2) authorized officers;
2. Completed Project Certification signed by an authorized officer;
3. Completed and signed W-9 with correct Legal Organization name and Tax ID Number filled in;
4. Completed Grantee Questionnaire signed by two (2) authorized officers and notarized;
5. Evidence of Site Control;
6. Financial documentation; and
7. SEQRA documentation

If any further information is needed or if you have any questions, please give [Grantee Contact Person] a call at ()_____.

Signature

Print Name

Title

Enclosures

GRANTEE CERTIFICATION

County of Saratoga

Purchase of a Mobile Command Center Vehicle

Project ID: #19232

WE HEREBY WARRANT, REPRESENT AND CERTIFY TO DASNY that:

- The County of Saratoga has applied for a State and Municipal Facilities Program (“SAM”) Grant in the amount of \$250,000. This Grant will be used for the Purchase of a Mobile Command Center Vehicle. We understand that the Grant funds may be used only for certain community improvement purposes as set forth in the enabling legislation and that the Grant Disbursement Agreement to be executed in connection with this Grant contains a provision that states that Grant funds may not be used to finance a program or project that will in any way promote or facilitate religious worship, instruction or proselytizing. We have been informed that this provision exists to ensure compliance with Federal and State law. Therefore, as Authorized Officers of the County of Saratoga, we hereby certify the following in connection with the project to be financed by the Grant:
 - no religious purpose shall be advanced or promoted by the project or program funded by the Grant;
 - the project or program will provide no religious instruction or counseling, conduct no religious worship or services, engage in no religious proselytizing, and exert no other religious influence in the provision of services or the use of facilities or furnishings assisted in any way by public funds;
 - the project or program shall be open to all without regard to religion; and
 - the Grantee shall take affirmative steps to ensure that information is widely disseminated with respect to the following aspects of the project or program:
 - the project or program is publicly funded;
 - the project or program is open to all, regardless of religious affiliation; and
 - the project or program beneficiaries are not limited to any particular sect or group.
 - the Grantee shall exercise care to make sure the facilities and/or services to be supported in whole or in part by grant proceeds are available and accessible to all members of the public by ensuring project location(s) and/or service areas are in proximity to public transportation; sufficient parking; and by choosing project location(s) and/or service areas that do not restrict use to a certain subset of the population defined by religion;
- We understand that the State of New York, DASNY and other entities that may be involved in the Grant process are relying on the above information in making the determination whether to award a SAM Grant to the County of Saratoga.
- We have the authority to submit this certification on behalf of the County of Saratoga.
- By signing these documents, I certify that I am an authorized officer for the Grantee.

Authorized Officer Signature

Printed Name

Date

Title

Authorized Officer Signature

Printed Name

Date

Title

**PROJECT CERTIFICATE OF THE
County of Saratoga
State and Municipal Facilities Program (the "SAM")
For the Purchase of a Mobile Command Center Vehicle
(Project ID: 19232)**

I, the undersigned, an Authorized Officer of County of Saratoga (the "Grantee"), DO HEREBY CERTIFY that:

- All contractors and vendors retained to perform services in connection with the Project shall be authorized to do business in the State of New York and shall possess and maintain all professional licenses and/or certifications required to perform the tasks undertaken in connection with the Project.
- To the extent that SAM Grant proceeds are used to reimburse the Grantee for the cost of any portion of the Project noted above, the Grantee certifies that no other external funding source, including but not limited to, State or Federal restructuring loans, State or Federal grants, or grants, loans, or other funding from any other public or private source (currently or within the last six (6) years), will be used for substantially the same project costs at the same location as described in the Application or Project Information Sheet provided to DASNY.
- If the Project includes removable equipment or furnishings including but not limited to, computer hardware and software, air conditioning units, lab equipment, office furniture and telephone systems, the Grantee will develop, implement and maintain an inventory system for tracking such removable equipment and furnishings.
- The Grantee acknowledges that Grant proceeds cannot be utilized to pay for:
 - Deposits advance payments, or progress payments until work is completed, or goods received by grantee;
 - to pay down long term debt;
 - internal labor costs;
 - rental or leased equipment;
 - stockpiled materials;
 - materials and/or services provided by another entity other than a licensed contractor or vendor.
- The Grantee will maintain accurate books and records through project completion/payout of the Grant as well as for six (6) years from the date the Project is completed and will make those books and records available to DASNY, its agents, officers and employees during the Grantee's business hours upon reasonable request.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____, 20____.

By signing these documents, I certify that I am an authorized officer for the Grantee.

County of Saratoga

By: _____

Name: _____

Title _____



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

TO: Steve Bulger, County Administrator
Mike Hartnett, County Attorney
Pam Wright, Clerk of the Board

CC: Jason Kemper, Planning Director
Therese Connolly, Deputy Clerk of the Board
Matt Rose, Management Analyst
Clare Giammusso, Confidential Secretary/County Attorney's Office

FROM: Wes Carr

DATE: May 25, 2021

RE: STOP DWI Resolution

COMMITTEE: Public Safety

1. Is a Resolution Required: YES or NO
(If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)

2. Is a Budget Amendment needed:
(If yes, budget lines and impact must be provided)

Yes. Appropriations: Increase Acct.#A.33-000-7330.I DWI Grants Internal \$9,000.
Revenues: Increase Acct.: #A.33-2615 STOP DWI Fines and Forfeitures \$15,000

Increase Acct.#A.33-000-7330 DWI Grants \$6,000.

3. Are there Amendments to the Compensation Schedule:
(If yes, provide details)

No

4. Specific details on what the resolution will authorize:

Authorizing the transfer of funds from the STOP DWI program reserve, and amending the 2021 county budget in relation thereto. Se attached markup.

5. Does this item require hiring a Vendors/Contractors:

- a. Were bids/proposals solicited:
- b. Is the vendor/contractor a sole source:
- c. Commencement date of contract term:
- d. Termination of contract date:
- e. Contract renewal and term:
- f. Contact information:
- g. Is the vendor/contractor an LLS, PLLC or partnership:
- h. State of vendor/contractor organization:
- i. Is this a renewal agreement: YES or NO
- j. Vendor/Contractor comment/remarks:



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

6. Is this an annual housekeeping resolution:
(If yes, attach the last approved resolution)
 - a. What were the terms of the prior resolution
 - b. Are the terms changing:
 - c. What is the reason for the change in terms:

7. Is a new position being created:
 - a. Effective date
 - b. Salary and grade

8. Is a new employee being hired:
 - a. Effective date of employment
 - b. Salary and grade
 - c. Appointed position:
 - d. Term:

9. Is a grant being accepted:
 - a. Source of grant funding:
 - b. Amount of grant:
 - c. Purpose grant will be used for:
 - d. Equipment and/or services being purchased with the grant:
 - e. Time period grant covers:

10. Remarks/Reasoning (Supporting documentation must be attached to this form):
Please see attached resolution mark up with additional language.

8/20/19



SARATOGA COUNTY BOARD OF SUPERVISORS

RESOLUTION ~~179-2019~~

PUBLIC SAFETY COMMITTEE

Introduced by Supervisors Peck, Allen, Barrett, Lawler, O'Connor, Ostrander and Szczepaniak

AUTHORIZING THE TRANSFER OF FUNDS FROM THE STOP-DWI PROGRAM RESERVE, AND AMENDING THE ~~2019~~ COUNTY BUDGET IN RELATION THERETO 2021

WHEREAS, unexpended County STOP-DWI Program funds roll over into the County's Reserve for DWI Program at the end of each fiscal year; and

WHEREAS, the Sheriff and the STOP-DWI Coordinator wish to provide funding for ~~three~~ ^{TWO} Saratoga County Sheriff's deputies to attend the Drug Recognition Expert Training program at the ~~2019~~ ²⁰²¹ International Association of Chiefs of Police Annual Conference on Drugs, Alcohol, and Impaired Driving in ~~Anaheim, California~~ ^{ORLANDO, FLORIDA}; and

WHEREAS, the use of funds in the County's Reserve for DWI Program to pay for ~~three~~ ^{TWO} deputies to attend said Drug Recognition Expert Training program is an appropriate use of the Reserve's funds; now, therefore, be it

~~(3) RESOLVED, that the Saratoga County Treasurer is hereby authorized to disburse a sum not to exceed \$6,500 from the Reserve for DWI Program to pay for three (3) Saratoga County Sheriff's deputies to attend the Drug Recognition Expert Training program at the 2019 International Association of Chiefs of Police Annual Conference on Drugs, Alcohol, and Impaired Driving in Anaheim, California; and, be it further~~

RESOLVED, that the ~~2019~~ ²⁰²¹ County Budget is amended as follows:

STOP-DWI

Appropriations:

Increase Acct. #A.33-000-7330.I DWI Grants ~~INTERNAL~~ ^{INTERNAL} ~~\$ 6,500~~ ^{\$ 9,000}
~~INCREASE ACCT. #A. 33-000-7330 DWI GRANTS~~ ^{\$ 6,000}

Revenues:

Increase Acct.: ~~#A.33-2615 STOP-DWI Fines and Forfeitures~~ ^{A-0889 Reserve For DWI Program} ~~\$ 6,500~~ ^{\$ 15,000}

BUDGET IMPACT STATEMENT: This transfer will reduce the balance in the DWI Reserve to \$106,477.86.

~~\$ 92,630~~
\$93,074.87

1. WHEREAS, the COVID-19 pandemic has severely reduced 2021 STOP DWI revenues

2. WHEREAS, the STOP DWI Coordinator, in order to mitigate the impact of reduced revenue, wishes to make use of the Reserve for DWI Program to augment the 2021 STOP DWI revenues

3. RESOLVED, that the Saratoga County Treasurer is hereby authorized to disburse a sum not to exceed \$15,000 from the Reserve for DWI Program to mitigate the impact of reduced revenue and to pay for two (2) Saratoga County Sheriff's deputies to attend the Drug Recognition Expert training program at the 2021 International Association of Chiefs of Police Annual Conference on Drugs, Alcohol, and Impaired Driving in Orlando, Florida; and, be it further



SARATOGA COUNTY SHERIFF'S OFFICE

Sheriff@SaratogaCountyNY.gov

MICHAEL H. ZURLO

Sheriff

Richard L. Castle

Undersheriff

Glenn D. Sheehy

Chief

MEMORANDUM

Date: April 21, 2021
To: Mr. W. Carr
From: [REDACTED]
Reference: 2021 DRE Conference

The 2021 DRE Conference will be held August 13-17 in Orlando, Florida at the Omni Championsgate Convention Center. The Conference is hosted by the International Association of Chief of Police, the governing body for the Drug Recognition Expert program throughout the world. This Conference brings experts in Toxicology, Pharmacology, Traffic Safety, and Drug Impairment where the latest research and techniques are taught. The Conference includes Drug Recognition Experts, Toxicologist, Physicians and Prosecutors from all over the US and Canada. The value of attending is huge for the continuing education of a DRE. With legalization of Cannabis here, keeping sharp is instrumental to traffic safety. I've listed a cost break down below:

Registration:

[REDACTED] \$575
[REDACTED] ⁶⁷⁵₄₇₅ \$375 – discount for being a member of the IACP

Airfare: Approximately - \$650 - attached are quotes from Southwest (baggage included) and JetBlue (no bags included)

Lodging- - \$450 - Price to stay at location of the Conference is \$96 plus tax per night

Meals- - \$600 – Federal per diem of \$66 daily and \$49.50 on 1st and last day of travel

Transportation- - \$200 - Estimated cost provided by IACP for taxi to and from Airport

Total- - \$2,850

Respectfully Submitted

[REDACTED]

Led by Sheriff Michael H. Zurlo (R,I) the Saratoga County Sheriff's Office, with more than 240 personnel provides law-enforcement protection and community services across Saratoga County, an area that covers more than 815 square miles. For more information visit: www.SaratogaCountySheriff.org

6012 County Farm Rd.
Ballston Spa, New York 12020
(518) 885-6761



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

TO: Steve Bulger, County Administrator
Mike Hartnett, County Attorney
Pam Wright, Clerk of the Board

CC: Jason Kemper, Planning Director
Therese Connolly, Deputy Clerk of the Board
Matt Rose, Management Analyst
Clare Giammusso, Confidential Secretary/County Attorney's Office

FROM: Andrew Blumenberg, Esq.

DATE: 5/27/21

RE: Accepting the Aid to Defense Grant

COMMITTEE: Public Safety

1. Is a Resolution Required: YES or NO
(If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
2. Is a Budget Amendment needed:
(If yes, budget lines and impact must be provided)
NO
3. Are there Amendments to the Compensation Schedule:
(If yes, provide details)
No
4. Specific details on what the resolution will authorize:
The resolution will be authorizing the acceptance of the Aid to Defense Grant of \$14,656.00, for the term of April 1, 2021- March 31, 2022
5. Does this item require hiring a Vendors/Contractors: **NO**
 - a. Were bids/proposals solicited:
 - b. Is the vendor/contractor a sole source:
 - c. Commencement date of contract term:
 - d. Termination of contract date:
 - e. Contract renewal and term:
 - f. Contact information:
 - g. Is the vendor/contractor an LLS, PLLC or partnership:
 - h. State of vendor/contractor organization:
 - i. Is this a renewal agreement: YES or NO
 - j. Vendor/Contractor comment/remarks:



SARATOGA COUNTY

AGENDA ITEM REQUEST FORM

6. Is this an annual housekeeping resolution: **YES**
(If yes, attach the last approved resolution)
- What were the terms of the prior resolution 10/1/19-3/31/21
 - Are the terms changing: Yes to 1 year
 - What is the reason for the change in terms:
The State has changed it to 1 year grants
7. Is a new position being created: **NO**
- Effective date
 - Salary and grade
8. Is a new employee being hired: **NO**
- Effective date of employment
 - Salary and grade
 - Appointed position:
 - Term:
9. Is a grant being accepted: **YES**
- Source of grant funding: Aid to Defense Grant
 - Amount of grant: \$14,656.00
 - Purpose grant will be used for: To pay a portion toward the Attorneys Salary
 - Equipment and/or services being purchased with the grant: none
 - Time period grant covers:
April 1, 2021 - March 31, 2022
10. Remarks/Reasoning (Supporting documentation must be attached to this form):
- We have been successful in our applications for this grant and it has been awarded to us since 2015. This grant is in addition to our grants from the NYS Office of Indigent Legal Services.



**Division of Criminal
Justice Services**

ANDREW M. CUOMO
Governor

MICHAEL C. GREEN
Executive Deputy Commissioner

JEFFREY P. BENDER
Deputy Commissioner

Grant Award Notice

Grantee/Contractor: Saratoga County Public Defender	Date: May 5, 2021
Program Name: 2021-22 Aid to Defense	Award Amount: \$14,656
Agency Head Name and Title: Andrew Blumenberg, Public Defender	Term Dates: 4/1/21-3/31/22
Email: ablumenberg@saratogacountyny.gov	Project ID No.: AD21-1020-D00
	Contract No.: T445311

Additional Information:

This award is provided for the Aid to Defense grant program. The award amount listed above is contingent upon the availability of appropriations, as well as execution of the grant contract by the Attorney General and the Office of the State Comptroller.

A DCJS Public Safety Grants Representative will contact your office to assist with the development of the grant contract. Please see the attached Contract Instruction Sheet for additional contract information and note that items are required within 30 days of receiving this letter.

If you have any questions on this award, please contact the grant representative listed below:

Contract Questions

Jason Tillou
Criminal Justice Program Representative 2
NYS Division of Criminal Justice Services
Office of Program Development and Funding
(518)485-2729 or jason.tillou@dcjs.ny.gov

Congratulations on your award. DCJS looks forward to working with you on this important project.
Attachment (1)



**Division of Criminal
Justice Services**

ANDREW M. CUOMO
Governor

MICHAEL C. GREEN
Executive Deputy Commissioner

JEFFREY P. BENDER
Deputy Commissioner

December 4, 2020

Mr. Andrew Blumenberg
Saratoga County Public Defender
40 McMaster St.
Ballston Spa, NY 12020

Dear Mr. Blumenberg:

Thank you for your continued partnership with the NYS Division of Criminal Justice Services (DCJS) in administering the Aid to Defense Program. Please be advised that the enacted state budget for State Fiscal Year (SFY) 2020-21 included an appropriation for the Aid to Defense program for \$7,658,000.00.

In order to allow you flexibility to accommodate changes in spending due to the COVID-19 pandemic and in planning for future contracts, we will be extending your existing Aid to Defense contract period by six months, meaning it will now have a contract end date of March 31, 2021, and increasing the award amount from the newly appropriated SFY 2020-21 funds. Therefore, your total award amount will be increased to \$21,562, to cover the new 18-month contract period of October 1, 2019 – March 31, 2021. Annual contracts are expected to resume for the period April 1, 2021 through March 31, 2022, with the contract period corresponding with the state fiscal year. We hope you agree that this will benefit the management of future contracts, as awards will no longer be split funded between two fiscal years, and the entire award amount will be known at the time of award.

Please be advised that your award amount of \$21,562 is contingent upon the availability of appropriations, which may be reduced during the contract period pursuant to language included in the SFY 2020-21 enacted state budget, as well as approval and execution of the grant contract by the Attorney General and the Office of the State Comptroller.

We recognize that the unprecedented events of this past year have been challenging. It is our hope that the contract term changes described above will assist with administering the contract going forward. Please contact Katelyn Mallick, Public Safety Grants Representative at (518) 457-3776 or by email at katelyn.mallick@dcjs.ny.gov if you have any questions. Thank you for all the work you do. We look forward to working with you in our continued efforts to safeguard the health and safety of all New York residents and visitors.

Sincerely,

Jeffrey P. Bender
Deputy Commissioner

10/15/19



SARATOGA COUNTY BOARD OF SUPERVISORS

RESOLUTION 211 - 2019

Introduced by Supervisors Peck, Allen, Barrett, Lawler, O'Connor, Ostrander and Szczepaniak

ACCEPTING AN AID TO DEFENSE GRANT FOR THE PUBLIC DEFENDER'S OFFICE

WHEREAS, the State Division of Criminal Justice Services (DCJS) has awarded an Aid to Defense Grant to the Public Defender's Office to provide salary support for attorneys in the Public Defender's Office defending individuals charged with felonies; and

WHEREAS, the State DCJS requests County approval and acceptance of this grant for the contract period ~~October 1, 2019 through September 30, 2020~~; now, therefore, be it
April 1, 2021 *March 31, 2022*

RESOLVED, that the Chair of the Board of Supervisors and/or the County Administrator is authorized, on behalf of the Office of the Public Defender, to execute all necessary documents with the State Division of Criminal Justice Services for the acceptance of a ~~2019-2020~~ Aid to Defense grant in the amount of \$14,234, with the form and content of such documents being subject to the approval of the County Attorney.
14,056

BUDGET IMPACT STATEMENT: None. 100% State Aid.