

Public Safety Committee

Wednesday, October 4, 2023 2:30PM 40 McMaster Street, Ballston Spa, NY

Chair: John Lant

Members: C. Eric Butler, Joe Grasso, Mark Hammond (vc), Jean

Raymond, Kevin Tollisen, Kevin Veitch

Agenda

- I. Welcome and Attendance
- I. Approval of the minutes of the September 6, 2023 meeting.
- II. Authorizing an agreement with the New York State Division of Homeland Security and Emergency Services to accept a 2023 Emergency Management Performance Grant and amending the 2023 budget in relation thereto André Delvaux, Emergency Services
- III. Authorizing an agreement with Public Safety Psychology, PLLC to provide evaluations of Public Safety employees Michael Zurlo, Sheriff
- IV. Other Business
- V. Adjournment



SARATOGA COUNTY

AGENDA ITEM REOUEST FORM

TO: Steve Bulger, County Administrator Ridge Harris, Deputy County Administrator Michelle Granger, County Attorney Therese Connolly, Clerk of the Board Stephanie Hodgson, Director of Budget

CC: John Warmt, Director of Purchasing
Jason Kemper, Director of Planning and Economic Development
Bridget Rider, Deputy Clerk of the Board
Matt Rose, Management Analyst
Audra Hedden, County Administrator's Office

DEPARTMENT: Office of Emergency Management

DATE: 09/22/2023

COMMITTEE: Public Safety

1. Is a Resolution Required:

Yes, Grant Acceptance

2. Proposed Resolution Title:

Authorizing an agreement with the New York State Division of Homeland Security and Emergency Services to accept a 2023 Emergency Management Performance (EMPG) Grant and amending the 2023 budget in relation thereto

3. Specific Details on what the resolution will authorize:

Authorizing the Chairman of the Board of Supervisors to accept the New York State Division of Homeland Secuirty and Emergency Services - 2023 EMPG grant in the amount of \$87,906.00. The performance period for this grant is from October 1, 2022 - September 30, 2025 This column must be completed prior to submission of the request.

County Attorney's Office
Consulted Yes

| Please see attachments for impacted budget lines. (Use ONLY when more than four lines are impacted.) Revenue Account Number Account Name Amount A.36-4306 Homeland Security - Federal Aid \$87,906.00 Expense Account Number Account Name Amount A.36.000-7051 Equipment Maintenance \$87,906.00 Fund Balance (if applicable): (Increase = additional revenue, Decrease = additional expense) Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | If yes, budget lines and i | needed: YES or NO NO mpact must be provided. must have equal and offsetting entri | County Administrator's Of Consulted No |
|---|----------------------------|--|--|
| Account Number Account Name Amount A.36-4306 Homeland Security - Federal Aid \$87,906.00 Expense Account Number Account Name Amount A.36.000-7051 Equipment Maintenance \$87,906.00 Fund Balance (if applicable): (Increase = additional revenue, Decrease = additional expenses) Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | | | |
| A.36-4306 Homeland Security - Federal Aid \$87,906.00 Expense Account Number Account Name Amount A.36.000-7051 Equipment Maintenance \$87,906.00 Fund Balance (if applicable): (Increase = additional revenue, Decrease = additional expense) Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | Revenue | | |
| Expense Account Number Account Name Amount A.36.000-7051 Equipment Maintenance \$87,906.00 Fund Balance (if applicable): (Increase = additional revenue, Decrease = additional expense) Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | Account Number | Account Name | Amount |
| Account Number Account Name Amount A.36.000-7051 Equipment Maintenance \$87,906.00 Fund Balance (if applicable): (Increase = additional revenue, Decrease = additional expenses Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | A.36-4306 | Homeland Security - Federal Aid | \$87,906.00 |
| A.36.000-7051 Equipment Maintenance \$87,906.00 Fund Balance (if applicable): (Increase = additional revenue, Decrease = additional expense Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | Expense | | |
| Fund Balance (if applicable): (Increase = additional revenue, Decrease = additional expens Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | Account Number | Account Name | Amount |
| Amount: Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | | | · , |
| Identify Budget Impact (Required): The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | Fund Balance (if applicat | ole): (Increase = additional revenue, l | Decrease = additional expenses) |
| The budget will be amended to accept these funds and authorize the related expenses a. G/L line impacted b. Budget year impacted 2023 - 2025 | Amount: | | |
| a. G/L line impacted b. Budget year impacted 2023 - 2025 | Identify Budget Impact | (Required): | |
| b. Budget year impacted 2023 - 2025 | The budget will be amend | ded to accept these funds and authorize | the related expenses |
| | a. G/L line impac | ted | |
| D 4 3 | b. Budget year im | pacted 2023 - 2025 | |
| c. Details | c. Details | | |

| 6. | YI | e Amendments to the Compensation Schedule? ES or NO (If yes, provide details) Is a new position being created? Y NO | Human Resources Consulted N/A |
|-----|---------|---|----------------------------------|
| | | Effective date | |
| | | Salary and grade | |
| | b.] | Is a new employee being hired? Y N | |
| | | Effective date of employment | |
| | | Salary and grade | |
| | | Appointed position: | |
| | | Term | |
| | c. I | s this a reclassification? Y N | |
| | | Is this position currently vacant? Y N | |
| | | Is this position in the current year compensation plan? | Y N |
| 7. | Does th | nis item require the awarding of a contract: Y N | |
| , • | a. | Type of Solicitation | Purchasing Office Consulted N/A |
| | b. | Specification # (BID/RFP/RFQ/OTHER CONTRACT #) | |
| | c. | If a sole source, appropriate documentation, including an up submitted and approved by Purchasing Department? | dated letter, has been Y N N/A |
| | d. | Vendor information (including contact name): | |
| | | | |
| | e. | Is the vendor/contractor an LLC, PLLC, or partnership: | |
| | f. | State of vendor/contractor organization: | |
| | g. | Commencement date of contract term: | |
| | h. | Termination of contract date: | |
| | i. | Contract renewal date and term: | |
| | k. | Is this a renewal agreement: Y N | |
| | 1. | Vendor/Contractor comment/remarks: | |

| 8. | Is a g | rant being accepted: VES or NO County Administrator's Office Consulted Yes | | | |
|--|---|--|--|--|--|
| | a. | Source of grant funding: | | | |
| | | Federal | | | |
| | b. | Agency granting funds: | | | |
| U.S. Department of Homeland Security (DHS) and Federal Emergency Management Ager | | | | | |
| | c. | Amount of grant: | | | |
| | | \$87,906.00 | | | |
| | d. | Purpose grant will be used for: | | | |
| Equipment Maintenance on CAD E911 system, 800MHz, Microwave and PS | | | | | |
| | e. Equipment and/or services being purchased with the grant: Equipment maintenance | | | | |
| | | | | | |
| | f. | Time period grant covers: | | | |
| | | 10/01/2022 - 09/30/2025 | | | |
| | g. | Amount of county matching funds: | | | |
| | \$87,906.00 | | | | |
| | h. | Administrative fee to County: | | | |
| | | | | | |
| 9. | Suppor | rting Documentation: | | | |
| | ~ | Marked-up previous resolution | | | |
| | | No Markup, per consultation with County Attorney | | | |
| | | Information summary memo | | | |
| | | Copy of proposal or estimate | | | |
| | <u>~</u> | Copy of grant award notification and information | | | |
| | | Other | | | |
| 10. | D | narks: | | | |
| 10. | Kell | IdIKS. | | | |

г

KATHY HOCHULGovernor

JACKIE BRAY Commissioner

September 13, 2023

The Honorable Theodore Kusnierz Chair, Saratoga County Board of Supervisors 40 McMaster Street Ballston Spa, NY 12020

Dear Mr. Kusnierz:

I am pleased to inform you that Saratoga County is awarded \$87,906 under the FY2023 Emergency Management Performance Grant (EMPG). Funding for this grant is provided by the U.S. Department of Homeland Security (DHS), Federal Emergency Management Agency (FEMA). The New York State Division of Homeland Security and Emergency Services (DHSES) will administer this funding on behalf of FEMA.

The performance period for this grant is from October 1, 2022 through September 30, 2025. DHSES grants management staff will work with your designated EMPG program point of contact to provide additional administrative guidance in executing this award.

Thank you for your continued support of New York State's homeland security efforts. DHSES remains committed to providing you with outstanding support in the administration of your homeland security programs. If you have any questions, please contact me at (518) 242-5000 or my Director of Grants Program Administration, Eric Abramson, at (518) 402-2123.

Sincerely,

Jackie Bray Commissioner

sequeline Broy

Please see other Resolution marked-y.
RESOLUTION 57-11

Introduced by Supervisors Wormuth, Barrett, Grattidge, Hargrave, Jenkins, Kinowski and Veitch

AUTHORIZING ACCEPTANCE OF AN EMERGENCY MANAGEMENT PERFORMANCE GRANT FROM THE NEW YORK STATE EMERGENCY MANAGEMENT OFFICE

WHEREAS, an Emergency Management Performance Grant is available from New York State Emergency Management Office under its Homeland Security Program; and

WHEREAS, these funds can be used to offset administrative expenses related to the operation of the Office of Emergency Services; now, therefore, be it

RESOLVED, that the Chair of the Board is authorized to execute any and all documents necessary to apply for and accept a Emergency Management Performance Grant in the amount of \$83,186 from the New York State Emergency Management Office, the form and substance of such documents being subject to the approval of the County Attorney.

BUDGET IMPACT STATEMENT: No budget impact.

PSAP



SARATOGA COUNTY BOARD OF SUPERVISORS

RESOLUTION 110 - 2023

Introduced by Public Safety: Supervisors Lant, Butler, Grasso, Hammond, Raymond, Tollisen and K. Veitch

AUTHORIZING AN AGREEMENT WITH THE NEW YORK STATE DIVISION OF
HOMELAND SECURITY AND EMERGENCY SERVICES TO ACCEPT A 2022 2023
HOMELAND SECURITY PROGRAM GRANT AND AMENDING THE 2023 BUDGET
IN RELATION THERETO

Lange Management Reformance Grant (Emps)

WHEREAS, funds are available from the New York State Division of Homeland Security and Emergency Services for a 2022 State Homeland Security Program (SHSP) grant in the amount of \$148,535; and \$23 Englished Particles of the Shape of the Sh

WHEREAS, said funds are available to pay for communications equipment, disposable medical equipment (Cyano Kits), maintenance costs for DHSES equipment, renewal of the "I-Am Responding" (IAR) contract; and too, (north maintenance on Pro Eq. 1) System of 800 MHz, Nierable)

WHEREAS, the approval of this Board is needed to accept the 2022 SHSP grant funds; now, therefore, be it

RESOLVED, that the Saratoga County Board of Supervisors hereby accepts the New York State Division of Homeland Security and Emergency Services – 2022 SHSP grant in the amount of \$145,535; and it is further

RESOLVED, that the Chair of the Board and/or the Director of Emergency Management is hereby authorized to execute any and all agreements or documents necessary to accept the \$145,535 SHSP grant, with the form and content of such agreements and documents to be approved by the County Attorney; and it is further

RESOLVED, that the 2023 County Budget is amended as follows:

UNDER DEPARTMENT OF EMERGENCY MANAGEMENT

Increase Revenues

A.36-3306

A.36-4306

Increase Appropriations

A.36.366-7051

Communications Equip.

A.36.000-7051

Equipment Mankerence

\$7,906

| A.36.366-8241 | Prescription Drugs and Supplies \$ 10,000 |
|----------------|---|
| A.36.366-8293 | Equipment/Maint. Cost \$ 10,000 |
| -A.36.366-8190 | Other Professional Services \$ 65,000 |
| A.36.366-8520 | Software \$ 21,000 |
| | \$148,535 |

and, it is further;

RESOLVED, that this Resolution shall take effect immediately.

<u>BUDGET IMPACT STATEMENT</u>: The budget will be amended to accept these funds and authorize the related expenses.

April 18, 2023 Regular Meeting

Motion to Adopt: Supervisor Hammond

Second: Supervisor Lant

AYES (194259): Eric Connolly (11831), Joseph Grasso (4328), Philip C. Barrett (19014.5), Jonathon Schopf (19014.5), Eric Butler (6500), Diana Edwards (819), Kevin Veitch (8004), Arthur M. Wright (1976), Kevin Tollisen (25662), Mark Hammond (17130), Thomas Richardson (5163), Scott Ostrander (18800), Theodore Kusnierz (16202), Matthew E. Veitch (14245.5), John Lawler (8208), John Lant (17361).

ABSENT (41251): Jean Raymond (1333), Michael Smith (3525), Willard H. Peck (5242), Sandra Winney (2075), Thomas N. Wood, III (5808), Tara N. Gaston (14245.5), Edward D. Kinowski (9022).



SARATOGA COUNTY

AGENDA ITEM REOUEST FORM

TO: Steve Bulger, County Administrator Ridge Harris, Deputy County Administrator Michelle Granger, County Attorney Therese Connolly, Clerk of the Board Stephanie Hodgson, Director of Budget

CC: John Warmt, Director of Purchasing
Jason Kemper, Director of Planning and Economic Development
Bridget Rider, Deputy Clerk of the Board
Matt Rose, Management Analyst
Audra Hedden, County Administrator's Office

DEPARTMENT: Sheriff's Office

DATE: 09/26/2023

COMMITTEE: Public Safety

1. Is a Resolution Required:

Yes, Contract Approval

2. Proposed Resolution Title:

Authorizing the Chairman of the Board to enter into a contract with Public Safety Psychology, PLLC to provide services to the Sheriff's Office.

3. Specific Details on what the resolution will authorize:

Authorizing the Chairman of the Board to enter into a contract with Public Safety Psychology, PLLC of Albany, NY to provide psychology services for the Sheriff's Office. These services will cover the required testing to hire new employees as well as any services that may be needed for current employees who are required to have a fit for duty evaluation by a psychologist completed.

This column must be completed prior to submission of the request.

County Attorney's Office
Consulted Yes

| 4. | If yes, budget lines an | ent needed: YES or dimpact must be provided. The provided of | Consulted Yes | Office |
|----|---|---|---------------------------------------|--------|
| | | ments for impacted budget lines n more than four lines are impac | | |
| | Revenue | | | |
| | Account Number | Account Name | Amount | |
| | | | | |
| | _ | | | |
| | Expense | | | |
| | Account Number | Account Name | Amount | |
| | Fund Balance (if appli | cable): (Increase = additional re- | venue, Decrease = additional expenses | s) |
| | Amount: | | | |
| 5. | Identify Budget Impact (Required): | | | |
| | No Budget Impact. Funds are included in the Department Budget | | | |
| | a. G/L line imp | acted 8517 | | |
| | b. Budget year | impacted 2023 and 2024 | | |
| | c. Details | | | |
| | Currently u | se 8517 L. We will have to use | 2 8517 for the vendor | |

| 6. | | Human Resources Consulted | |
|----|------|---|--|
| | ; | YES or NO (If yes, provide details) | |
| | a. | Is a new position being created? Y N | |
| | | Effective date | |
| | | Salary and grade | |
| | b. | Is a new employee being hired? Y N | |
| | | Effective date of employment | |
| | | Salary and grade | |
| | | Appointed position: | |
| | | Term | |
| | c. | Is this a reclassification? Y N | |
| | | Is this position currently vacant? Y N | |
| | | Is this position in the current year compensation plan? Y N | |
| 7. | Does | this item require the awarding of a contract: Y Purchasing Office Consulted | |
| | a. | Type of Solicitation Professional Service Yes Yes | |
| | b. | Specification # (BID/RFP/RFQ/OTHER CONTRACT #) | |
| | | | |
| | c. | If a sole source, appropriate documentation, including an updated letter, has been submitted and approved by Purchasing Department? Y N/A N/A | |
| | d. | Vendor information (including contact name): | |
| | | Public Safety Psychology, LLC 18 Corporate Woods Blvd. Suite 120 Albany, NY 12211 | |
| | | David J. Kelley, Ph.D ABPP 518-432-4678 | |
| | e. | Is the vendor/contractor an LLC, PLLC, or partnership: Yes, LLC. | |
| | f. | State of vendor/contractor organization: | |
| | g. | Commencement date of contract term: 11/01/2023 | |
| | h. | Termination of contract date: 10/31/2024 | |
| | i. | Contract renewal date and term: | |
| | k. | Is this a renewal agreement: Y V N | |
| | 1. | Vendor/Contractor comment/remarks: | |
| | | This vendor is used by several local municipalities for this service. | |

| 8. | Is a gr | ant being accepted: YES or NO | County Administrator's Office Consulted |
|----|----------|---|--|
| | a. | Source of grant funding: | |
| | | | |
| | b. | Agency granting funds: | |
| | c. | Amount of grant: | |
| | d. | Purpose grant will be used for: | |
| | e. | Equipment and/or services being purchased with the grant: | |
| | f. | Time period grant covers: | |
| | g. | Amount of county matching funds: | |
| | h. | Administrative fee to County: | |
| | G. | | |
| 9. | Support | ting Documentation: | |
| | | Marked-up previous resolution | |
| | <u>~</u> | No Markup, per consultation with County Attorney | |
| | | Information summary memo | |
| | | Copy of proposal or estimate | |
| | | Copy of grant award notification and information | |
| | | Other | |
| | | | |

10. Remarks:

The Sheriff's Office currently has some of these services provided by Doctor Michael Prezioso. The quantity and timeline now required by the Sheriff's Office has led to seeking an outside vendor for these services. The amount budgeted for these services will not change. Per the proposed contract there will be a \$325.00 charge for pre-employment evaluations and a \$250.00 charge for fit for duty evaluations. The cost will not exceed \$54,750.00.