

Robert P. Astorino  
County Executive

Department of Social Services

Kevin M. McGuire  
Commissioner

Philippe Gille  
First Deputy Commissioner

46237

**Date:** May 18, 2015

**To:** Board of Acquisition and Contract

**From:** Kevin M. McGuire, Commissioner  
Department of Social Services

**Subject:** Resolution authorizing the County of Westchester to amend an agreement with West-H.E.L.P., Inc. for the purpose of managing and providing services to homeless families housed at the Mount Vernon West-H.E.L.P. Family Shelter, a New York State Licensed Tier II Family Shelter located at 240 Franklin Avenue, Mount Vernon, New York for a five year period commencing October 1, 2011 and terminating September 30, 2016 for a total amount not-to-exceed \$8,962,350 to be paid monthly pursuant to an approved budget and subject to appropriations in the annual amounts and per diems by deleting language in the contract referring to West-H.E.L.P., Inc. as a New York State Licensed Tier II Family Shelter.

On or about January 12, 2011, the County of Westchester entered into an agreement with West-H.E.L.P., Inc. to manage and provide services to homeless families housed at the Mount Vernon West-H.E.L.P. Family Shelter, located at 240 Franklin Avenue, Mount Vernon, New York for a five year period commencing October 1, 2011 and terminating September 30, 2016 for a total amount not- to-exceed \$8,962,350 (the "Agreement") to be paid monthly pursuant to an approved budget and subject to appropriations in the annual amounts and per diems.

The Department inadvertently referred to the above shelter as a New York State Licensed Tier II Family Shelter in its agreement with the contractor. Therefore, authority is now requested for the County of Westchester, acting by and through the Department of Social Services, to amend the agreement with West-H.E.L.P, Inc. by deleting language in the contract referring to West-H.E.L.P., Inc. as a New York State Licensed Tier II Family Shelter, effective as of October 1, 2011.

The services to be provided pursuant to the proposed agreement **serve a public purpose** by assisting the County to provide services and housing to the eligible homeless population. These services are aimed at improving the quality of life of the homeless population in the County by assisting the population served in achieving a successful transition from welfare to self-sufficiency.

The **goals and objectives** of the proposed agreement are to provide 24- hour supervision, shelter to homeless residents; and supportive services to include family and group counseling,

family mental health assessment, daycare services, assistance in finding permanent housing, and casework services.

The goals and objectives of this program are in **the best interests of the County in terms of public health and public safety** as they are aimed at enhancing and ensuring the health and safety of the targeted population. The program enhances and ensures safety by providing 24-hour supervision and housing. This program creates a safe haven for the targeted population. Providing appropriate shelter for Westchester's homeless population will reduce the risk of them becoming victims of crime and developing general health related issues that result from not having shelter.

The goals and objectives are in the County's **best interests in terms of fiscal responsibility** as the services provided assist the targeted population with finding permanent housing, thereby decreasing the cost associated with providing emergency housing.

**The goals and objectives will be tracked and monitored** through performance measurement indicators developed by the Department. The tracking and monitoring measures include the submission of monthly statistics and quarterly reports as well as through direct contact with the D.S.S. staff in order to swiftly address any impediments to the program's successes.

The **Department is able to report that the vendor's Performance Measurement Indicators** reflect that the Mount Vernon West-H.E.L.P. Family Shelter program met its goal of housing eligible customers referred by the Department. The program operates at over 100% contract capacity. This program effectively provided shelter and supportive services for approximately 198 program participants for the period of 10/1/2013 through 12/31/2014, achieving the following outcomes:

- 78 customers secured permanent housing
- 45 customers secured transitional housing

Except as specifically amended hereby, all other terms and conditions of the original agreement shall remain the same.

Accordingly, the County of Westchester is hereby requesting permission to amend an agreement with West-H.E.L.P., Inc. for the aforesaid purpose.

A resolution requesting the same is attached for your Honorable Board's approval.

## RESOLUTION

Upon a communication from the Commissioner of Social Services, be it hereby

**RESOLVED**, that the County of Westchester is hereby authorized to amend a contract with West-H.E.L.P, Inc. dated on or about January 12, 2011 to manage and provide services to homeless families housed at the Mount Vernon West-H.E.L.P. Family Shelter, located at 240 Franklin Avenue, Mount Vernon, New York for a five year period commencing October 1, 2011 and terminating September 30, 2016 in the total amount not to exceed \$8,962,350 (the "Agreement") to be paid monthly pursuant to an approved budget and subject to appropriations in the annual amounts and per diems by deleting language in the contract referring to West-H.E.L.P., Inc. as a New York State Licensed Tier II Family Shelter, effective as of October 1, 2011; and be it further

**RESOLVED**, that except as specifically amended hereby, all other terms and conditions of the Agreement shall remain the same; and be it further

**RESOLVED**, that the County Executive or his authorized designee is empowered to execute any document necessary to implement this Resolution.

APPROVED BOARD OF ACQUISITION & CONTRACTS 06/18/2011 - DOMINICK SECRETARY

Account to be  
Charged/Credited

	Fund	Dept	Major Program, Program & Phase Or Unit	Object/ Sub-Object	Trust Account	Dollars
N/A	N/A	N/A	N/A	N/A	N/A	N/A

Budget Funding Year(s):N/A  
(must match resolution)

Start Date: N/A End Date: N/A

Funding Source

Tax Dollars: N/A  
State Aid: N/A  
Federal Aid: N/A  
Other:

**\$N/A**  
(must match resolution)

APPROVED BOARD OF ACQUISITION & CONTRACT - 06/18/2015 - JOMARY VIEIRA, SECRETARY