

42080

To: Board of Acquisition and Contract

From: Kevin M. Cheverko
Commissioner, Department of Correction

Date: September 4, 2014

Re: Authorization to enter into an Agreement with Sullivan County whereby Westchester County would maintain Sullivan County Inmates at the Westchester County Jail, at a rate of \$160.00 per day for each Sullivan County inmate housed and whereby Sullivan County would maintain Westchester County Inmates at the Sullivan County Jail at the rate of \$130 per day per Westchester County Inmate housed, for the period January 1, 2015 through December 31, 2016, each on a space-available basis, plus reimbursement for transportation, medical and incidental expenses.

Pursuant to Section 504 of the New York Correction Law, the State Commission of Correction, upon application by the County, has the authority to designate a substitute jail for the County for use by the County in the event that the County jail is unfit or unsafe for the confinement of some or all of the inmates. The State Commission of Correction has designated the Sullivan County Jail as the substitute jail for the County and the County Jail as the substitute jail for Sullivan County.

Authority is being requested for your Honorable Board to permit the County to enter into an agreement with Sullivan County for the County to house Sullivan County inmates on a space-available basis at the rate of \$160.00 per inmate per day for Sullivan County inmates housed in Westchester and for Sullivan County to house Westchester County inmates on a space-available basis at a cost of \$130 per Westchester County inmate housed in the Sullivan County Jail per day January 1, 2015 through December 31, 2016, plus reimbursement for transportation, medical and incidental expenses incurred in connection with the maintenance and detention of the inmates by each County.

This agreement is necessary for the County to carry out its duty to maintain the safety of inmates in the event that the County Jail is filled to capacity and to assure the safety of a prisoner, if necessary, by housing the inmate outside of Westchester County. The goal of maintaining the safety of the public and prisoners while prisoners are being

maintained in substitute jails will be tracked and monitored by the Department of Correction through booking records and monthly invoices.

The approval of this contract will assure the public safety of County residents and will permit the use of substitute jails where necessary pursuant to Section 504 of the Correction Law. The proposed agreement is in the best interests of the County, because the County has obtained a favorable and realistic rate for housing inmates in both the Westchester and Sullivan County Jails.

A resolution for your consideration is annexed hereto which I recommend for your favorable consideration.

KMC/DI
Att.

APPROVED BOARD OF ACQUISITION & CONTRACT - 10/02/2015 JOMARQUEER SECRETARY

RESOLUTION

Based on a communication from the Commissioner of Correction, be it hereby

RESOLVED, that the County of Westchester is hereby authorized to enter into an agreement with Sullivan County whereby Westchester County would maintain Sullivan County inmates on a space-available basis at the rate of \$160.00 per day for each Sullivan County inmate maintained and Sullivan County would maintain Westchester County inmates at a cost of \$130 per day for each Westchester County inmate maintained in the Sullivan County Jail for the period January 1, 2015 through December 31, 2016, plus the cost of reimbursement for transportation, medical and incidental expenses incurred in connection with the maintenance and detention of the inmates; and be it further

RESOLVED, that the County Executive or his duly authorized designee, be and hereby is authorized and empowered to execute any and all documents necessary or appropriate to effectuate the purposes hereof.

Account to be Charged/credited	Fund	Agency	Capital Project Or Org	Object/ Sub Object	Trust Account	Activity	Dollars
	101	35	1000	9077		3000	TBD
	101	35	1000	4380		3000	TBD

Budget Funding Year(s) 2015/2016 Start Date 1/1/15 End Date 12/31/16
 (must match resolution)
 Funding Source Tax Dollars _____
 State Aid _____
 \$ _____ Federal Aid _____
 (must match resolution) Other _____