

56177

DATE: March 28, 2017

TO: Board of Acquisition and Contract

FROM: Sherlita Amler, M.D.
Commissioner of Health

RE: Authorization to Enter into a Two (2) Year Contract with the New York State Department of Health to accept funding for the Rabies Program (Human Rabies Treatment, Specimen Collection, and Pet Vaccination) Grant as follows:

Contract Period:	4/1/17 – 3/31/19
Contract Amount:	Not-To-Exceed \$259,260

The Westchester County Department of Health seeks authorization to enter into a two (2) year contract with the New York State Department of Health to accept funding for the Rabies Program (Human Rabies Treatment, Specimen Collection, and Pet Vaccination) Grant for the contract period 4/1/17 – 3/31/19, in the not-to-exceed amount of \$259,260, based on reimbursement rates established by the New York State Department of Health.

The Rabies Program will promote the public health and general welfare of the County by investigating incidents regarding people or pets potentially exposed to suspect rabid animals. The goals and objectives of the program are to ensure that there are no cases of human rabies in the County by testing suspect animals for the presence of rabies, by making available no-cost pet clinics so that pets may be given current vaccinations against rabies, and where indicated, by providing preventive treatment (vaccinations) to County residents who were or may have been exposed to a suspect rabid animal. All potential rabies incidents are investigated to determine if there is a need for treatment to prevent the onset of rabies upon exposure to a suspect animal.

The program is tracked and monitored through monthly reports and supervisory review of each case investigation. On an annual basis, approximately 600 to 800 animals are rabies tested, approximately 400 animals are rabies vaccinated, 1300 to 1500 bite reports are received, and 250 to 350 Westchester County residents receive a preventive course of treatment.

The agreement requires the County to indemnify the New York State Department of Health as follows:

The Contractor shall be solely responsible and answerable in damages for any and all accidents and/or injuries to persons (including death) or property arising out of or related to the services to be rendered by the Contractor or its subcontractors pursuant to this Master Contract. The Contractor shall indemnify and hold harmless the State and its officers and employees from claims, suits, actions, damages and cost of every nature arising out of the provision of services pursuant to the Master Contract.

I certify that my department, a.) has copies of, or access to, all applicable laws, rules, regulations, grant applications, and grant agreements (including any master grant agreement), as well as any guidance or instructions received from the agency making the grant (the "Grant Terms"), b.) has reviewed the Grant Terms, c.) is aware of and understands all of the Grant Terms, and d.) can and will comply with all of the Grant Terms

Your approval of the attached resolution is respectfully requested.

/md
Attachment

RESOLUTION

UPON A COMMUNICATION FROM THE COMMISSIONER OF HEALTH, be it hereby

RESOLVED, that the County of Westchester, acting by and through its Department of Health (“WCDH”), is authorized to enter into a two (2) year contract with the New York State Department of Health (the “NYSDOH”) to accept funding for the Rabies Program (Human Rabies Treatment, Specimen Collection, and Pet Vaccination) Grant based on reimbursement rates established by the NYSDOH as follows:

Contract Period: 4/1/17 – 3/31/19
 Contract Amount: Not-To-Exceed \$259,260;

and, be it further

RESOLVED, that the Contractor shall be solely responsible and answerable in damages for any and all accidents and/or injuries to persons (including death) or property arising out of or related to the services to be rendered by the Contractor or its subcontractors pursuant to this Master Contract. The Contractor shall indemnify and hold harmless the State and its officers and employees from claims, suits, actions, damages and cost of every nature arising out of the provision of services pursuant to the Master Contract;

and, be it further

RESOLVED, that the County Executive or his duly authorized designee be and hereby is authorized and empowered to execute all appropriate contracts or documents necessary to effectuate the purposes of this resolution in the manner prescribed by law.

Department of Health
 County of Westchester
 10 County Center Road, 2nd Floor
 White Plains, New York 10607
 March 28, 2017

Original Agreement \$
 First Amendment \$
 Second Amendment \$
This Amendment \$ _____
 TOTAL \$
 Agreement #

Account to be Charged/Credited	Fund	Dept	Major Program, Program & Phase or Unit	Object/ Sub-Object	Budget Year	Dollars
	101	27	0010	9734	17- 18	\$129,630
	101	27	0010	9734	18-19	\$129,630

Budget Funding Year(s) (must match resolution) 2017-2019 Start Date 4/1/17 End Date 3/31/19

Funding Source Tax Dollars _____
 State Aid 100%
\$259,260 Federal Aid _____
 (must match resolution) Other _____