

71375

Date: August 28, 2019

To: The Honorable Board of Acquisition and Contract

From: Mae Carpenter, Commissioner
Department of Senior Programs and Services

Re: Request for authority to amend a certain resolution approved on June 27, 2019, which authorized the County of Westchester to enter into an Affiliation Agreement with Wellness Workdays Dietetic Internship, Inc., pursuant to which a student of said entity will be referred to the County's Department of Senior Programs and Services, Nutrition Division, as a dietetic intern to fulfill a portion of its educational requirements for registration as a dietitian, for the period from July 1, 2019 through June 30, 2020, in order to add Sensible Nutrition, Inc. as a party to said Affiliation Agreement.

By resolution approved on June 27, 2019 (the "June 27th Resolution"), your Honorable Board authorized the County of Westchester (the "County"), acting by and through its Department of Senior Programs and Services, Nutrition Division (the "Department"), to enter into an Affiliation Agreement ("Agreement") with Wellness Workdays Dietetic Internship, Inc. ("WWDI"), pursuant to which the County will participate in a Dietetic Internship Program, wherein a student from WWDI will be referred to the Department as a dietetic intern to fulfill a portion of its educational requirements for registration as a dietitian, for the period from July 1, 2019 through June 30, 2020. The June 27th Resolution also stipulated that there will be no monetary compensation paid to the County for its participation in this internship program. The Agreement has not been executed.

The owner of WWDI recently notified the Department that WWDI does not carry professional liability insurance, as required by the Agreement but that Sensible Nutrition, Inc., a company affiliated with or related to WWDI, carries said insurance, and, as such, WWDI has requested that Sensible Nutrition, Inc. be added as a party to the Agreement, in order to satisfy said insurance requirement. Therefore, the County now seeks the further authority from your Honorable Board to amend the June 27th Resolution for the limited purposes of adding Sensible Nutrition, Inc. as a party to the Agreement in order to fulfill the professional liability insurance coverage required under the Agreement.

Except as specifically amended herein, all other terms and conditions of the June 27th Resolution shall remain in full force and effect.

Accordingly, I most respectfully recommend the adoption of the annexed Resolution.

MC/CMC

APPROVED BOARD OF ACQUISITION & CONTRACT - 09/19/2019 - LISA MRIJAJ, SECRETARY

RESOLUTION

Upon a communication from the Commissioner of the Westchester County Department of Senior Programs & Services, be it hereby

RESOLVED, that the County of Westchester (the “County”), acting by and through its Department of Senior Programs and Services, Nutrition Division (the “Department”), is hereby authorized to amend a resolution approved on June 27, 2019 (the “June 27th Resolution”), which authorized the County to enter into an Affiliation Agreement (“Agreement”) with the Wellness Workdays Dietetic Internship, Inc. (the “WWDI”), pursuant to which a student from WWDI will be referred to the Department as a dietetic intern to fulfill a portion of its educational requirements for registration as a dietitian, for the period from July 1, 2019 through June 30, 2020, in order to add Sensible Nutrition Inc. as a party to the Agreement; and be it further

RESOLVED, that except as specifically amended hereunder, all other remaining terms and conditions of the June 27th Resolution shall remain in full force and effect; and be it further

RESOLVED, that the County Executive, or his duly authorized designee, is hereby authorized to execute any documents and take any actions reasonably necessary and appropriate to effectuate the purposes of this Resolution.

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

Budget Funding Year(s) ___ Start Date ___ End Date ___
(must match resolution)

Funding Source Tax Dollars _____
 State Aid _____
 \$ _____ Federal Aid _____
 (must match resolution) Other _____