

By Legislators Hasman and Maffucci

Intro. No. ____

RESOLUTION NO. ____ OF 2024

**ACCEPTING GRANT FROM NEW YORK STATE DEPARTMENT OF HEALTH FOR
SUPPORT OF MONROE COUNTY NURSE-FAMILY PARTNERSHIP PROGRAM**

BE IT RESOLVED BY THE LEGISLATURE OF THE COUNTY OF MONROE, as follows:

Section 1. The County Executive, or his designee, is hereby authorized to accept a five-year grant in an amount not to exceed \$4,857,840 from, and to execute a contract and any amendments thereto with, the New York State Department of Health for support of the Monroe County Nurse-Family Partnership Program for the period of October 1, 2024 through September 30, 2029.

Section 2. The 2024 operating budget of the Department of Public Health is hereby amended by appropriating the sum of \$971,568 into general fund 9300, funds center 5803050000, Nurse-Family Partnership.

Section 3. The County Executive is hereby authorized to appropriate any subsequent years of the grant award in accordance with the grant terms, to reappropriate any unencumbered balances during the grant period according to the grantor requirements, to make any necessary funding modifications within grant guidelines to meet contractual commitments, and to enter into any amendments to extend the time period of the grant.

Section 4. Should funding of this program be modified or terminated for any reason, the County Executive is hereby authorized to terminate or modify the program and, where applicable, to terminate or abolish some or all positions funded under such program. Any termination or abolishment of positions shall be in accordance with New York State Civil Service Law and, when applicable, the terms of any labor agreement affecting such positions.

Section 5. This resolution shall take effect in accordance with Section C2-7 of the Monroe County Charter.

Human Services Committee; November 26, 2024 – CV: 8-0

Ways and Means Committee; December 5, 2024 - CV: 10-0

File No. 24-0387

ADOPTION: Date: _____ Vote: _____

ACTION BY THE COUNTY EXECUTIVE

APPROVED: _____ VETOED: _____

SIGNATURE: _____ DATE: _____

EFFECTIVE DATE OF RESOLUTION: _____