

AGENDA

GOVERNMENT OPERATIONS COMMITTEE

October 6th, 2016

Supervisors: Crane, Manktelow, Spickerman, Verkey and Chatfield

8:30 a.m. [Approve minutes from previous meeting](#)

8:30 a.m. [Transmittals Referred to Committee](#)

8:40 a.m. [County Administrator, Rick House](#)

MONTHLY REPORT

8:50 a.m. [Board of Elections, Marjorie Bridson & Mark Alquist](#)

NO BUSINESS

8:50 a.m. [County Attorney, Dan Connors](#)

OFFICE ACTIVITIES REPORT [CA Monthly Report.pdf](#)

9:00 a.m. [County Clerk, Michael Jankowski](#)

TRANSMITTAL:

- Authorization to seek RFP for scanning services [cc10res1 RFP for Back Scanning scanning.doc](#)

2017 Budget Presentation

9:15 a.m. [Human Resources, Charles Dye](#)

MONTHLY REPORT

TRANSMITTAL:

- Authorization to renew contract with NCA Comp [HR10Res4 Renew Contract with NCA Comp.doc](#)
- Authorization to Address Salary and Wage Issues Relating to Changes in the Fair Labor Standards Act [HR10Res1 Authorization to Address Salary and Wage Issues Under the FLSA.doc](#)
- Authorization to Address Salary and Wage Issues Relating to Changes in the Fair Labor Standards Act [HR10RES2 FLSA Historian.docx](#)
- Authorization to Conduct Analysis of Managerial and Confidential Employee Group for 2017 [HR10Res3 Authorization to Conduct Analysis of Managerial and Confidential Employee Group.doc](#)

**COUNTY OF WAYNE
OFFICE OF THE COUNTY ATTORNEY**

WAYNE COUNTY COURTHOUSE
26 CHURCH ST, LYONS, NY 14489
FAX: (315) 946-5942

DANIEL C. CONNORS, ESQ.
COUNTY ATTORNEY
(315) 946-7442

ERIN M. HAMMOND, ESQ.
ASSISTANT COUNTY ATTORNEY
(315) 946-7444

The County Attorney's Office monthly report for September 2016 is as follows:

Contracts Drafted and/or Reviewed	8
Insurance Certificates	62
Notice of Claim	1
Accidents	2
Disciplines/Grievances	1
Human Rights Complaints	0
Subpoenas	4
Freedom of Information Requests (FOIL)	16
FOIL Money Collected	\$5.00
Juvenile Delinquent's (JD's)	2
Persons In Need of Supervision (PINS)	2
Habeas Corpus	0
Poor Person Applications	5
Pistol Permit Hearings	1
Unemployment Hearings	1
Total Amount of Bills Paid from A1420(CA)	\$905.39
Total Amount Paid from A1930 (Judgment & Claims)	\$5,121.64
Total Amount Paid from A1931 (Liability & Casualty)	\$7,394.02
Total Amount Paid for 207c Claims	\$3,360.50
Total Amount Paid for Union Negotiations	\$0.00

Respectfully submitted,



Daniel C. Connors, Esq.
County Attorney

RESOLUTION TRANSMITTAL

Committee No . 5

Date: October 8, 2016

Committee Chairperson: Laurie Crane

Department Head: Mike Jankowski

Request for proposal Document Back Scanning Services

Brief Explanation:

Whereas: The Office of the County Clerk is attempting to expand the scope of vital county records available in a digital format, and:

Whereas: There is a large volume of deeds and mortgages that need to be digitized, ;

Therefore be it resolved that the County Clerk is authorized to issue a Request for Proposal Document Back Scanning Services.

Budgeted: yes X ___no ___ Proposed Cost: _____ Reimbursed Amount _____ County cost _0_____

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator Approval: yes ___ no ___ by: _____

Fiscal Manager Approval: yes ___ no ___ by: _____

Personnel Office Review & Approval: yes ___ no ___ by: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Committees referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

Committee No. 5

Date: October 6, 2016

Committee Chairperson: Laurie Crane
Department Head: Charles A. Dye
Lindsey Burgess

Transmittal Title: Authorization to Renew Contract with NCA Comp Inc. to Administer Workers' Compensation and Disability Claims

WHEREAS, the County utilizes the services of a Third-Party Administrator (TPA) for administration of the Wayne County Self-Insured Plan for Workers' Compensation and of Wayne County Self-Insured Disability Claims; and

WHEREAS, NCA Comp Inc. has demonstrated the ability to provide satisfactory third-party claims administration services; and

WHEREAS, NCA Comp Inc. has presented the County with the following fee schedule for the dates January 1, 2017 – December 31, 2017:

Workers' Compensation: \$105,000, plus applicable allocated expenses

Disability: \$ 10,000

with two annual options to renew the contract with the following fee schedules:

Workers' Compensation 1/1/18-12/31/18: \$107,100, plus applicable allocated expenses

Disability 1/1/18-12/31/18: \$ 10,300

Workers' Compensation 1/1/19-12/31/19: \$109,242, plus applicable allocated expenses

Disability 1/1/19-12/31/19: \$ 10,609

now, therefore, be it

RESOLVED, that the Chairman of the Wayne County Board of Supervisors is hereby authorized and directed to execute a contract on behalf of the County of Wayne, subject to the County Attorney's approval as to form and content, with NCA Comp Inc., 14 Lafayette Square, Suite 700, Buffalo, NY 14203 to administer the Wayne County Self-Insured Workers' Compensation Plan and Self-Insured Disability Plan for a period commencing January 1, 2016, through December 31, 2016 for the contract amounts specified above.

Budgeted: yes no Proposed Cost: _____ Reimbursed Amount \$ _____ County cost (Paid from Self-Ins. WComp Plan)

Departmental transfer \$ _____ from Account No. _____ to Account No. _____

County Administrator Approval: yes no by: _____

Fiscal Manager Approval: yes no by: _____

Personnel Office Review & Approval: yes no by: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Committees referred to:

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

HR10RES1
Committee No.5 October 6, 2016

Committee Chair: Laurie Crane
Department Head: Charles A. Dye

AUTHORIZATION TO ADDRESS SALARY AND WAGE ISSUES RELATING TO CHANGES IN THE FAIR LABOR STANDARDS ACT

WHEREAS, the public employees have been covered by the provisions of the Fair Labor Standards Act (FLSA) since 1974; and

WHEREAS, the FLSA includes specific duties tests and a salary basis test that must be met for employees to be considered "exempt" from the payment of overtime at the rate of time and a half for hours worked beyond forty in a week; and

WHEREAS, employees in the Managerial/Confidential (M/C) employee group pay grades 5 through 13 have been reviewed against the duties tests to determine that employees in these grades are correctly treated as exempt from the payment of overtime, and

WHEREAS, M/C pay grades 1 through 4 were established as hourly rates (resolution 383-14) and the employees in these grades paid as "non-exempt", and therefore eligible for the payment of overtime under the FLSA, and

WHEREAS, the FLSA annual salary basis test amount will be increased from the current amount of \$23,660 to \$47,476 effective December 1, 2016, and

WHEREAS, the FLSA annual salary basis amount will be adjusted periodically in the future in response to cost of living increases, and

WHEREAS, the salaries of some M/C employees in pay grades 4, 5, and 6 fall below this new minimum salary basis amount, and

WHEREAS, to comply with the FLSA, these employees must be treated as hourly employees until such time as their non-discretionary compensation (base pay plus longevity) rises above the salary basis amount, and

WHEREAS, it is cumbersome to petition the Board of Supervisors to make these individual adjustments whenever an individual's compensation rises above the salary basis amount; now, therefore be it

RESOLVED, that the Board of Supervisors hereby authorizes the Director of Human Resources to change non-bargaining unit employees whose non-discretionary compensation falls below the salary basis amount from salaried to hourly and to return these employees to salaried once their compensation rises above the established salary basis amount, and be it further

RESOLVED, that a change from salaried to hourly and back under this resolution will not increase or decrease the base rate of compensation authorized for any affected employee.

Budgeted: yes ___ no Proposed Cost: \$0.00 Reimbursed Amount \$0.00 County cost \$0.00

County Administrator's Review \$ Approval: yes ___ no ___ by: _____

Human Resources Office Review & Approval: yes ___ no ___ by: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:
Committee: ___ Ayes ___ Nays ___ Date: _____ Signature: _____

Committee: ___ Ayes ___ Nays ___ Date: _____ Signature: _____

RESOLUTION TRANSMITTAL

HR10RES2

Committee No.5

October 6, 2016

Committee Chair: Laurie Crane
Department Head: Charles A. Dye

AUTHORIZATION TO ADDRESS SALARY AND WAGE ISSUES RELATING TO CHANGES IN THE FAIR LABOR STANDARDS ACT

WHEREAS, the public employees have been covered by the provisions of the Fair Labor Standards Act (FLSA) since 1974; and

WHEREAS, the FLSA includes specific duties tests and a salary basis test that must be met for employees to be considered "exempt" from the payment of overtime at the rate of time and a half for hours worked beyond forty in a week; and

WHEREAS, M/C pay grades 1 through 4 were established as hourly rates (resolution 383-14) and the employees in these grades paid as "non-exempt", and therefore eligible for the payment of overtime under the FLSA, and

WHEREAS, Resolution 560-14 placed the County Historian (M/C pay grade 4) in a salary, rather than an hourly rate, and

WHEREAS, the FLSA annual salary basis test amount will be increased from the current amount of \$23,660 to \$47,476 effective December 1, 2016, and

WHEREAS, the salary of the Historian falls below this new minimum salary basis amount, and

WHEREAS, to comply with the FLSA, this employee must be treated as non-exempt until such time as his non-discretionary salary compensation (base pay plus longevity) rises above the salary basis amount; now, therefore be it

RESOLVED, that Resolution 560-14 is hereby rescinded, and the County Historian returned to an hourly rate of pay, and be it further

RESOLVED, that this change will not result in an increase or decrease in the Historian's base rate of compensation.

Budgeted: yes ___ no Proposed Cost: \$0.00 Reimbursed Amount \$0.00 County cost \$0.00

County Administrator's Review \$ Approval: yes ___ no ___ by: _____

Human Resources Office Review & Approval: yes ___ no ___ by: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

RESOLUTION TRANSMITTAL

HR10RES3

Committee No.5

October 6, 2016

Committee Chair: Laurie Crane

Department Head: Charles A. Dye

AUTHORIZATION TO CONDUCT ANALYSIS OF MANAGERIAL AND CONFIDENTIAL EMPLOYEE GROUP FOR 2017

WHEREAS, the County implemented a wage and salary plan (M/C Plan) for the Managerial and Confidential Employees Group effective June 14, 2014; and

WHEREAS, the M/C Plan established wage and salary grades with minimum, midpoint, and maximum rates and assigned positions to those grades; and

WHEREAS, issues of pay equity within the established pay ranges were reviewed in 2015 for employees with long-term service, and

WHEREAS, questions of equity continue to be raised by employees within the M/C employee Group, and

WHEREAS, only additional analysis of the M/C Employee Group will provide the data necessary to determine whether pay inequities continue to exist within the M/C Employee Group; now, therefore be it

RESOLVED, that the Director of Human Resources is hereby directed and authorized to analyze the M/C Employee Group base compensation effective January 1, 2017 and make recommendations to the Board of Supervisors to be considered for implementation after January 1, 2017.

Budgeted: yes ___ no Proposed Cost: \$0.00 Reimbursed Amount \$0.00 County cost \$0.00

County Administrator's Review \$ Approval: yes ___ no ___ by: _____

Human Resources Office Review & Approval: yes ___ no ___ by: _____

Standing Committee: Ayes _____ Nays _____ Date: _____ Signature: _____

Signature/Date Rec'd: _____ Clerk, Board of Supervisors

Referred to:
Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____

Committee: _____ Ayes _____ Nays _____ Date: _____ Signature: _____