

**Tuesday,
November 14, 2017
4:00 p.m.**

HUMAN SERVICES BOARD

*Door County Government Center
Chambers Room (C102), 1st floor
421 Nebraska Street, Sturgeon Bay, WI*

Oversight Board for the Department of Human Services

AGENDA

PUBLIC HEARING FOR PROPOSED 2018 - 8521 Elderly/Disabled Transportation Plan (SRC Bus & Van) & 5311

Public Transit Plan

1. Call the Public Hearing to order at 4:00 p.m.
2. Introductions
3. Ground Rules for the Public Hearing
4. Proposed Changes to the System for 2018
5. Public Comments
6. Adjourn the Public Hearing

HUMAN SERVICES BOARD MEETING

1. Call Meeting to Order
2. Roll Call – Establishing Quorum
3. **Adopt** Agenda
4. **Approve** Minutes – October 10, 2017 Human Services Board Meeting
5. Correspondence
6. Public Comment
7. Discussion of Public Participation Meeting
8. Program Reports
 - a. Written Collective Unit Report
9. Continuing /Pending Business
 - a. Resource Center Building Update
 - Acoustic Panel Review
 - b. Staff Recruitment Updates
 - c. Vouchers
10. Topics To Be Referred to the Legislative Committee
11. New Business
 - a. Change in Psychiatric Services
 - b. Billing / Collection Policy
 - c. Request to Refill AODA Counselor position
 - d. Completion of Introductory Period – Nicole Kahler
12. Matters to be Placed on a Future Agenda or Referred to a Committee, Official or Employee
13. Set Next Meeting Date – Tuesday, December 12, 2017 or January 9, 2018
14. **Adjourn** Meeting

Deviation from the order shown may occur

DOOR COUNTY HUMAN SERVICES BOARD MINUTES

Tuesday, October 10, 2017

These minutes have not been reviewed by the oversight board and are subject to approval or revision at the next regular meeting.

1. **Call to Order-**

Chair Mark Moeller called the October 10, 2017 meeting of the Door County Human Services Board to order at 8:30am in the Government Center's Chambers Room.

2. **Roll Call / Establishing a Quorum-**

Present: Chair Mark Moeller, Helen Bacon, Tom Leist, Megan Lundahl, Robert Rau and Laura Vlies Wotachek

Excused: Roy Englebert, Wayne Kudick, Joe Miller

Staff Present: Cori McFarlane-Deputy Director; Ken Pabich-Door County Administrator; JoAnn Bauman-Department Accountant / Finance; Sheryl Flores, Community Support Program and Adult Protective Services (CSP & APS) Manager and staff: Taylor Jandrin, APS Case Manager; Nicole Kahler, CSP Case Manager; Kim Kramer, APS Social Worker; Carol Lenius, APS Social Worker; Mary Simac, CSP Intern and Shawn Barlament-Office Manager/Recording Secretary.

Others Present: No others present.

Board members present established a quorum.

3. **Adopt Agenda-**

A motion was made by Helen Bacon and seconded by Tom Leist to adopt the agenda. All were in favor.

4. **Approve Minutes-**

Robert Rau motioned to approve minutes of the regular Human Services Board meeting held on September 12th, 2017. This was seconded by Megan Lundahl. All approved. A spelling error was corrected.

5. **Correspondence-**

None

6. **Public Comment-**

None

7. **Program Reports-**

a. **Unit Oral Report – Community Support Program-Sheryl Flores**

Sheryl introduced staff members and shared their role within the Community Support Program (CSP) and the Adult Protective Service (APS) Program. The number of clients within CSP has had a slight decline from 57 in 2016 to 50 in 2017. There are currently 3 full time CSP case managers. Sheryl no longer provides direct services to clients with the additional management responsibilities of APS and our department's crisis services. Last year, CSP began contracting a Peer Specialist who provides 14 hours of assistance with groups, meeting with individual CSP participants and transportation of program participants. The APS Program accepts and assesses reports of abuse and neglect, including self-neglect, financial exploitation, and physical/emotional/sexual abuse, and caregiver neglect for individuals 60 years or older and for physically and developmentally disabled adults between the ages of 18-59 plus ongoing case management for elders at risk and in need of protection.

- b. Written Collective Unit Report –**
No questions were asked of the information shared.
- c. Year-To-Date Program Statistical Report**
No questions at this time.

8. Continuing / Pending Business-

a. Resource Center Building Updates

Progress continues to be ahead of schedule. Furniture will be delivered the first week in December. Asphalt is being laid this week. Other organizations are asking about space at the new building. A use policy will need to be developed and brought to this committee before it is addressed at the Property Committee.

b. Staff Recruitment Updates

- Currently there are two applicants for the Behavioral Health Therapist position and one applicant for the Behavioral Health Manager position.
- Jennifer Fitzgerald accepted the Assistant ADRC/Aging Director position and began this past Monday. Jennifer had held the position of the part-time Activities Assistant. This vacancy will be addressed under New Business.
- Taylor Jandrin accepted the position of Long-Term Support/Outreach Case Manager and Cari Wild accepted the CCS Case Manager position with our Behavioral Health team. They both began September 25th.
- Shannon Lauder began as our department's Administrative Assistant-Receptionist on October 9th.

c. Bus Purchase Update

The department has accepted a bid for a Ford. The purchase price is \$69,539.00 well below the budgeted amount of \$90,000.00. Signage will be added at an additional cost. The department will take possession in 4-6 months.

d. Economic Support Drug Test Status

Income Maintenance agencies continue to voice concern about proposed Administrative Rule 38, a proposal to drug screen, test, and provide drug treatment when needed to able bodied adults without dependent children who participate in the Foodshare program. There are concerns about the impact this legislation will have on Foodshare recipients and families. There are also concerns about the potential fiscal and workload impact on counties on both our Behavioral Health and Economic Support programs. The Income Maintenance Policy Advisory Committee will be discussing this issue with the DHS Secretary at the end of this month.

e. Vouchers

No questions were asked.

9. Topics To Be Referred to the Legislative Committee-

None at this time.

10. New Business-

a. Resolution No. 2017- ____ Provision of Targeted Case Management Services By Human Services Department and Medical Assistance (MA) or Medicaid Reimbursement

A previous resolution authorizing targeted case management of certain populations was covered prior to the merger of the Social Services and Community Programs Departments. This resolution will cover all targeted case management for the Department of Human Services. Robert Rau motioned to accept the resolution and Laura Vlies Wotachek seconded the motion. The vote passed unanimously.

b. Request to Refill & Expand Hours for Activities Assistant Position

As mentioned previously Jenny Fitzgerald accepted the Assistant ADRC-Aging Director position vacating the part-time Activities Assistant position at the ADRC. Cori McFarlane explained that the request to move this position to full-time effective January 1, 2018 is included in the 2018 budget. Due to the current vacancy and the need to be prepared for increased programming needs upon opening the new building, the Department is requesting to increase this position to full-time early. Cost would be minimal (\$2,000). Funding is available due to previous vacancy in the ADRC Director position and new grant funding. Robert

Rau motioned to recommend refilling this position and moving it to full-time status. Helen Bacon seconded the motion and all were in favor.

c. Brighter Futures Grant

Our department is pursuing the Wisconsin Department of Children & Families Brighter Futures grant for juvenile delinquency prevention and/or substance abuse prevention to develop a Day Report Center as an alternative to secure detention for juveniles.

d. Dementia/Crisis Community Meeting FYI

On September 28th many representatives from hospitals, assisted living facilities, CBRF's, human services, and law enforcement joined together to address a community concern of gaps in services for dementia crisis situations. While the community continues to work towards solutions there have been several positive outcomes. One mental health facility has agreed to limited time non-crisis APS emergency protective placements and an adult family home is considering keeping a bed open for emergency crisis situations with a bed hold monthly stipend. We also have contracted with a firm for mental health/dementia transportation.

e. Crisis Services Request for Proposal (RFP)

The department has not received any bids for evening and weekend mobile crisis services. The Department continues to explore alternative options.

f. Completion of Introductory Periods

Elizabeth Secrest and Timothy Headrick have moved to regular status employees.

11. Matters to Be Placed on a Future Agenda or Referred to a Committee, Official or Employee-

Other suggestions are welcome prior to the next meeting. Please notify the Chair of this Committee or the Director of the Human Services Department.

12. Next Meeting Date-

Tuesday, November 14, 2017 beginning at 4:00pm in the Chambers Room of the Government Center, 421 Nebraska Street, Sturgeon Bay.

13. Meeting Per Diem Code-

272

14. Adjourn the Meeting:

Tom Leist motioned and Megan Lundahl seconded to adjourn the meeting. The motion carried. The meeting adjourned at 9:25am.

Respectfully submitted,
Shawn M. Barlament, Recording Secretary



DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

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Human Services Board Written Agency Updates – November 2017

I. Program Changes and Highlights

- A.** The **Community Support Program** is thrilled to add Karen Sullivan as a contracted Mental Health Tech providing in-home support for CSP consumers on Wednesdays and Fridays between 8:30 and noon. This position is being contracted through Specialized Services starting November 1st to assist the three full time CSP case managers provide additional in-home support to five identified consumers. Taylor Jandrin, Long-term Care/Outreach Case Manager and Cari Wild, Adult CCS Case Manager will be completing their 40 hours of crisis training by mid-November and will then be scheduled to shadow our senior crisis staff. They will then be worked into the 2018 **Crisis On-Call** rotation schedule. Mary Simac, the CSP Intern, is also going to complete the 40 hours of Crisis Training and has expressed interest in working in county human services upon graduation.
- B.** The **Adult Protective Services** staff has successfully transitioned two homeless clients off the streets of Sturgeon Bay. One client was reconnected with a sister who was willing to take her in until staff can assist with locating permanent housing. The other case took a small village of concerned citizens involving the County Veteran Service Officer, Law Enforcement and APS to finally get our Veteran into the hospital for the medical attention that he desperately needed. APS will continue to work with the court to get a permanent guardian and protective placement so that this gentleman will have all of his basic needs met and prevent him from returning to the street.
- C.** The Children and Families Manager Dori Goddard who oversees **Child Protection and Juvenile Justice** and Deputy Director Cori McFarlane met recently with the four mainland school districts to address the impact of Act 161 passed in 2015. This Act expands on the information able to be shared between child welfare agencies and schools. Act 161 also allows child welfare workers to access educational records without parental consent in situations when it is not possible to get parental consent. The Act requires certain information to be shared with the school by child welfare agencies in situations where a child is placed outside their home. An Education Passport is the form used in the eWISACWIS child welfare technology system for this purpose. This Educational Passport contains critical information on the child that supports the school in planning for these children. It is a means to notify the school of the change in the child's living situation and also includes information to promote school success for the child.

Act 161 also addresses the sharing of transportation costs when children placed in out of home care are moved to a location outside their home school district. Based on educational considerations, when a school-age child is removed from the home, efforts are always made to place the child in an available foster home within the child's home school district. If that is not possible, we consider the transportation needs that would allow the child to commute to his/her home school. As a last resort, a child may need to attend a new school in the district where the foster home is located. Historically transportation costs were covered by the child welfare agency. With the new Act, the child's new current school and their home school district share 50% of the costs, and the child welfare agency is responsible for the other 50%. Policy will reflect timeliness of

getting the information to the schools within one day and a follow up meeting with the school within five days to address the best interest of the child and ensure educational stability.

State Permanency Consultants were here on October 26 to lead Children and Families staff through the Permanency Roundtable (PRT) process on three challenging cases. Permanency roundtables are a process that are structured, professional case consultations designed to expedite permanency for children and youth in care through innovative thinking, the application of best practice, and the “busting” of systemic barriers. Many great ideas were generated in these sessions.

- D.** The **Economic Support** team began taking applications for the Wisconsin Home Energy Assistance Program for the new 2018 year on October 1st. To increase awareness of the Energy Assistance program, Kathy Fairchild presented information on WDOR’s radio show on Friday October 20th. The agency began receiving healthcare applications from the Federally Facilitated Marketplace on November 1st. The application time period is scaled back to 6 weeks this year, from November 1 – December 15th. In the first week, the volume of applications is higher than anticipated.
- E.** The **Birth to Three Program** completed its annual WDOR radio spot with Sturgeon Bay schools to promote child find efforts and the partnership we share in preschool screening. Screening with the schools or on our own are essential strategies to reach families throughout the county who have questions and concerns about child development. Sometimes screening can provide the reassurance a first time parent needs about their infant’s early development. It can also be a first-hand look that encourages further evaluation and assessment for possible services.
- F.** The **Children and Families Support Services** team received the report from the state review of our Children’s Long Term Support Program, which was conducted the week of September 25. The majority of findings included consistent messaging to families and providers around incident reporting. The state DHS requires assurance in writing that parents receive information about incident reporting, understand what constitutes an incident, who to call, and understand what will happen when a call is made to report an incident. The Department will incorporate this brochure with the other intake handouts provided to families at the initial meeting. Training is also an essential ingredient in providing quality care to our clients. Careful documentation of that training and the annual requirement of ongoing training must continue. We will look to enhance our tracking of this information similar to our CCS Program going forward. A heartfelt thanks to all the staff who assisted in preparing for this intense review and the success of that review.
- G.** Our **Behavioral Health** team is doing a good job of treating patients despite continued vacancies in the Manager and Co-Occurring Therapist positions. We currently have no waiting list for mental health and very few for AODA services. While no-shows are a perpetual problem in community mental health, staff remain busy responding to unplanned “quasi-crisis” situations that pop up each day, triaging situations and fitting in clients as needed. Our new CCS Case Manager for adults has taken on several cases, freeing up the therapists’ time to focus more fully on therapy.
- H.** News from the **Aging and Disability Resource Center** (ADRC): Medicare Part C & D open enrollment is here, having officially begun on October 15 and running through December 7. During this open enrollment period, Elder Benefit Specialist Mary Bink will assist a steady stream of individuals in exploring their options for Medicare health and drug plans. People with Medicare health or prescription drug plans should regularly review their plans.

November is National Caregiver Month. To celebrate our Door County caregivers and all the fantastic work they do to care for their loved ones, we are holding our Annual Caregiver

Appreciation Luncheon on Friday, November 10th from 11:30am-2:00pm at Stone Harbor, featuring keynote speaker Dr. Rolf Luloff. Dr. Luloff will help caregivers understand what their afflicted family member deals with and also learn how to help them minimize their symptoms and indeed use their brain's potential to overcome some of those problems. The day will also feature a delicious lunch, an opportunity for relaxing, healing meditation, and door prizes!

II. Noteworthy Events

- A.** November is **Youth Mental Health Awareness month** and several projects are underway to promote education and resource sharing. CCS has been one of our programs that is instrumental in offering an array of services for our youth and adults. This is a time for promotion of those services in a positive, affirming and educational manner with the entire community. Keep an eye out for what's happening, sponsored by Human Services!
- B.** Mary Simac, the UWGB Masters Level CSP Intern, will be conducting four **psychoeducational classes** at JAK's Place. On November 7th she will be presenting Facts about Anxiety followed by a class on Symptoms of Anxiety on 11/28/17 at 3:30. In December on 12/12 at 3:30 she will have a class on Mindfulness followed by a final class on 12/19 on Self- Affirmations to control symptoms of anxiety. Anyone is welcome to attend these free classes at the mental health resource center.
- C.** Come and visit the **ADRC** sometime in October for one or all of the following scheduled events:
- Monday, November 6th Day Trip: Bargains Unlimited
 - Tuesday, November 7th at 12:45pm Door County Historical Museum & Society present: "History of Downtown Sturgeon Bay: West Side"
 - Wednesday, November 8th at 11:30am Tasty Tidbits with Carmen Schroeder
 - Thursday, November 9th at Noon Veteran's Day Celebration & Music with Ken
 - Monday, November 13th at 12:45pm Healthy Cents with NWTC "Getting the Most for Your Food Dollars"
 - Thursday, November 16th at 12:15pm Music with George Swayne
 - Thursday, November 16th at 12:45pm Healthcare Decisions Presentation
 - Friday, November 17th at Noon Thanksgiving Feast with Musician Ben Larson
 - Tuesday, November 28th at 12:45pm Public Health Presents "QPR Suicide Prevention"
 - Thursday, November 30th from 8:30am-Noon Free Foot Care Clinic
- D.** Also at the ADRC, on Thursday, November 16th from 9am-2pm, we are providing free **Memory Screens**. If you or someone you know are interested, please call (920)746-2372 to sign up for an appointment.

III. High-Cost Placements & Other Fiscal Updates

- A.** The court hearing for our resident who has been placed in Mendota Mental Health Institute since March has been postponed until mid-December. Therefore, Human Services continues to be responsible for the cost of his placement.

IV. Training & Staff Development

- A.** One of our Economic Support staff attended a one day training in WI Dells for Fraud. The conference was provided by WAPAF (WI Association for Public Assistance Fraud). Another ES worker attended a three day training in Green Bay on Child Care eligibility.
- B.** Several managers attended the Supervisory Training entitled "Discipline, Performance Evaluations and Dealing with Injured/Disabled Employees" provided by Door County through CVMIC on October 18th.

V. Agency & Community Collaboration

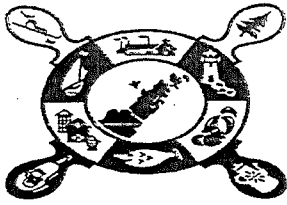
- A.** The Sevastopol School District invited us to partner with them and other community agencies on a transitional fair—educating families about the various resources and options for their special needs child once he/she prepares to graduate. This kind of partnership and community sharing is great outreach for our department.
- B.** Staff from our ADRC participated in the YMCA Community Healthy Living Fair on October 24.

VI. Sharing our Successes

- A.** One of our newest Children’s Case Managers, Laura Hall, received this personal message of thanks from the mother of one of her clients: “I want you to know, first of all, that one of the things I really value in having you as our case manager is that you are a motivated, caring, problem solver, and that you contact me before I call you...You are a breath of fresh air in your department...Thank you so, so much! I cannot tell you how much good you have already done in our lives. Getting that first appointment with Dr. Sayers changed our lives in so many positive ways. [My son’s] diagnosis and treatment so far have opened so many doors for him and for our family. There are still very difficult moments and things that I stay up all night worrying about, but I can see SO much improvement. His medication is working well, and even more importantly, I actually know what disorder to research when I want to help him!” We are grateful to have Laura on the team!
- B.** Through our Coordinated Services Team initiative, our Children and Families staff shared an amazing opportunity this fall with several of our youth through an 8-week pilot project with Spirit of the Horse and Heart (owner Leslie Leline). Several of our female youth engaged in a weekly equine coaching experience. This nontraditional treatment modality helped build self-regulation skills, social interaction skills, problem solving, and reflective abilities for these youth. The stories of personal growth were truly inspirational. We hope to engage others in this program in the near future as we explore ongoing funding sources and opportunities for others.

As we move toward Thanksgiving we wish to extend to you, our Board, a message of thanks for your support and unyielding commitment to the clients we support and staff here at Human Services. We appreciate your dedication to the task of human service program oversight and your commitment to building an agency that provides excellent services. Happy Thanksgiving!

*Providing help for today and hope for tomorrow
By fostering a safe community that values
Your voice, Your Choice, Your Future.*



DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

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MEMO

To: Human Services Committee
From: Ashley LaLuzerne
Date: 11.14.2017
Re: Request for Expenditure Approval

Expenditures since the last committee meeting held 10.10.2017

\$	693.35	Wal-Mart Credit Card September-October 2017
\$	15,966.24	September 2017 Foster / Kinship Care Payments #259584
\$	16,659.59	

Departmental journal entries not included on the attached voucher list:

\$	282.82	Maintenance Dept. September 2017 gas usage - Fleet
\$	35.46	Maintenance Dept. - office supplies
\$	318.28	

Total Expenditures and Vouchers for the Human Services since the last meeting are

\$	52,784.01	Monthly Vouchers - Batch 1 Totals (Oct) #259559
\$	117,026.16	Monthly Vouchers - Batch 2 Totals (Oct) 259576
\$	31,286.73	Monthly Vouchers - Batch 1 Totals (Nov) #259604
\$	16,659.59	Expenditures since the last committee meeting held 10.10.2017
\$	318.28	Amounts paid to other County Departments as per above
\$	218,074.77	

Total Expenditures and Vouchers for the Senior Resource Center/ADRC since the last meeting are

\$	13,786.35	Monthly Vouchers - Batch 1 (Oct) #259570
\$	54,720.15	Monthly Vouchers - Batch 2 (Oct) #259583
\$	13,225.79	Monthly Vouchers - Batch 1 (Nov) #259624
\$	758.78	Walmart Card September-October 2017
\$	444.61	Elan Credit Card August-September 2017
\$	82,935.68	

\$	301,010.45	Total Expenditures and Vouchers
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* S U M M A R Y *
SCHEDULE OF VOUCHERS

COUNTY OF DOOR
STATE OF WISCONSIN
STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

*** S U M M A R Y F O R C O M M I T T E E R E V I E W O N L Y ***

FOSTER CARE CHECK DATE: OCTOBER 31, 2017

G/L DATE: 10/2017 Batch Nbr: 259584

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	22343	01808 100917	EWISACWIS 10/09/2017 0008016750	30.93
ADVOCATES FOR HEALTHY	17929	01808 100917	EWISACWIS 10/09/2017 0008038182	1,966.80
[REDACTED]	21818	01808 100917	EWISACWIS 10/09/2017 0008063756	1,141.40
COMMUNITY CARE RESOURCES, INC	401	01808 100917	EWISACWIS 10/09/2017 0000022566	630.18
[REDACTED]	22501	01808 100917	EWISACWIS 10/09/2017 0008009779	1,887.00
[REDACTED]	8116	01808 100917	EWISACWIS 10/09/2017 0008017407	464.00
[REDACTED]	9479	01808 100917	EWISACWIS 10/09/2017 0008000379	1,609.00
[REDACTED]	13963	01808 100917	EWISACWIS 10/09/2017 0006910123	232.00
[REDACTED]	21744	01808 100917	EWISACWIS 10/09/2017 0008063868	720.00
[REDACTED]	22551	01808 100917	EWISACWIS 10/09/2017 0008079241	232.00
[REDACTED]	18813	01808 100917	EWISACWIS 10/09/2017 0008043242	835.20
[REDACTED]	13223	01808 100917	EWISACWIS 10/09/2017 0008034652	232.00
[REDACTED]	21729	01808 100917	EWISACWIS 10/09/2017 0008064158	384.00
[REDACTED]	22478	01808 100917	EWISACWIS 10/09/2017 0008080114	232.00
[REDACTED]	22265	01808 100917	EWISACWIS 10/09/2017 0008039144	232.00
[REDACTED]	22022	01808 100917	EWISACWIS 10/09/2017 0008067102	232.00
[REDACTED]	20836	01808 100917	EWISACWIS 10/09/2017 0008057128	232.00
[REDACTED]	22502	01808 100917	EWISACWIS 10/09/2017 0008080393	232.00
[REDACTED]	17937	01808 100917	EWISACWIS 10/09/2017 0008040115	464.00
[REDACTED]	22563	01808 100917	EWISACWIS 10/09/2017 0008038636	514.20
[REDACTED]	22153	01808 100917	EWISACWIS 10/09/2017 0008067949	464.00

10/10/17
G/L DATE: 10/2017

Batch Nbr: 259584

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	16915	01808 100917	EWISACWIS 10/09/2017 0008042309	1,339.53
[REDACTED]	22316	01808 100917	EWISACWIS 10/09/2017 0008079501	232.00
[REDACTED]	242	01808 100917	EWISACWIS 10/09/2017 0008015044	1,428.00
Batch Total:				\$15,966.24 **** =====

* SUMMARY *
SCHEDULE OF VOUCHERS

COUNTY OF DOOR
STATE OF WISCONSIN
MURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

*** SUMMARY FOR COMMITTEE REVIEW ONLY ***

3/L DATE: 10/2017 Batch Nbr: 259559

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
ADVOCATES-INDEPENDENT LIVINGII	13325	13325 09-2017	SEP 2017 CCS ADMIN 15.25 HRS	347.70
[REDACTED]	2435	2435 SEP2017	SEP 2017 EMP MILEAGE REIM 190 MI	101.65
[REDACTED]	22222	22222 SEP2017	SEP/OCT 2017 EMP MILEAGE REIM	147.66
BAY COUNSELING CLINIC, LLP	21177	21177 SEP2017	SEP 2017 CCS SERVICES 1.3 HRS	169.00
COUNSELING ASSOCIATES OF DOOR	6361	6361 AUG2017	AUG 2017 CCS SERVICES 17.4 HRS	1,774.80
WI DEPT OF JUSTICE CRIME INFO	4331	4331 SEP2017	SEP 2017 BACKGROUND CHECKS (3)	30.00
[REDACTED]	8060	8060 SEP2017	SEP 2017 EMP MILEAGE/MEAL REIM	164.25
[REDACTED]	11999	11999 SEP2017	AUG-SEP 2017 CST PURCHASES	87.88
[REDACTED]	22483	22483 09-2017	SEP 2017 17.5HR 103.99 RESP	262.50
DC PRINTING LLC	5245	5245 AUG2017	SEP 2017 HS OFFICE SUPPLIES	761.20
DOOR COUNTY MEMORIAL HOSPITAL	8770	8770 AUG2017	AUG 2017 B3 OT/PT THERAPY/MILEAGE	6,282.87
[REDACTED]	20081	20081 SEP2017	SEP 2017 EMP MILEAGE REIM 110 MI	58.85
[REDACTED]	22233	22233 SEP2017	SEP 2017 EMP MILEAGE/MEAL/FEE REIM	630.14
FAMILY SERVICES	3841	3841 AU-2017	JAN/AUG 2017 SELF/CCS SERVICES	382.70
GLACIER CANYON LODGE, LLC	15665	15665 OCT2017	NOV 2017 CCF CONFER HOTEL ROOMS	656.00
[REDACTED]	1740	1740 SEP2017	JUN-AUG 2017 CCOP PURCHASES	351.25
[REDACTED]	2006	2006 SEP2017	SEP 2017 EMP MILEAGE/MEAL REIM	196.71
HIRN MENTAL HEALTH COUNSELING	17401	17401 SEP2017	AUG-SEP 2017 AODA/WASH ISLAND OUTPT	3,060.00
[REDACTED]	22015	22015 SEP2017	SEP 2017 EMP MILEAGE REIM 89 MI	47.62
[REDACTED]	22482	22482 09-2017	SEP 2017 19.5HR 103.99 RESP	292.50
[REDACTED]	22295	22295 SEP2017	SEP 2017 EMP MILEAGE/PARKING/MEALS	36.57
SALLY LAURENT	8394	8394 OCT2017	OCT 2017 AFH CARE	900.00

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
PRO ED	14861	14861 OCT2017	OCT 2017 B3 SUPPLIES	92.29
WENDY RAY	13022	13022 SEP2017	SEP 2017 B3 THERAPY/MILEAGE	5,061.58
[REDACTED]	22245	22245 09-2017	AUG-DEC 17 103.99 RESPITE/403.01 REC	851.00
MICHAEL P SAYERS PHD	8169	8169 SEP2017	SEP 2017 PYSCH SERVICES 36 HRS	2,565.00
SPECIALIZED SERVICES LLC	7694	7694 AUG2017	AUG 2017 CCS/CCOP SERVICES	7,620.38
STAPLES ADVANTAGE	15069	15069 SEP2017	AUG/SEP 2017 HS OFFICE CHAIRS/SUPP	3,954.42
TIMOTHY HICKEY	3823	3823 SEP2017	SEP 2017 OWI ASSESS/NO SHOWS	385.00
JULIE TOYNE	5555	5555 SEP2017	SEP 2017 B3 SL SERVICES & PURCHASE	4,339.85
UNITED WAY OF DOOR COUNTY	502	502 SEP2017	SEP 22 2017 CRUCIAL CONV TRAINING	200.00
UNLIMITED POSSIBILITIES	22349	22349 SEP2017	SEP 2017 CBRD 30 DAYS	10,200.00
WISCONSIN DOCUMENT IMAGING	5999	5999 SEP2017	SEP 2017 HS 2ND FLOOR COPIES	62.03
WISCONSIN FAMILY TIES	16706	16706 OCT2017	NOV 2017 CCF CONFERENCE REG FEE	495.00
[REDACTED]	39571	39571 SEP2017	SEP 2017 EMP MILEAGE REIM 403 MI	215.61

Batch Total: \$52,784.01 ****
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* S U M M A R Y *
SCHEDULE OF VOUCHERS

COUNTY OF DOOR
STATE OF WISCONSIN
STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

*** S U M M A R Y F O R C O M M I T T E E R E V I E W O N L Y ***

G/L DATE: 10/2017 Batch Nbr: 259576

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	21869	21869 AUG2017	AUG 2017 403.01 REC	146.72
[REDACTED]	21173	21173 SEP2017	SEP 2017 EMP MILAGE/MEAL REIM	120.10
ADVOCATES FOR HEALTHY	17929	17929 JUN2017	JUN, JUL, AUG 17 403.01 REC	7,242.00
BAY COUNSELING CLINIC, LLP	21177	21177 09-2017	SEP 2017 CCS SERVICES	1,725.40
BROTOLOC HEALTH CARE SYSTEM IN	3640	3640 SEP2017	SEPT 2017 CBRF 30 DAYS	5,295.00
BROWN CO COMUNITY TREATMNT CNT	16015	16015 OCT2017	OCT 2017 INPATIENT CARE	14,257.75
[REDACTED]	22587	22587 OCT2017	OCT 18-19 2017 RESP	60.00
CORPORATE GUARDIANS OF NEW	17122	17122 SEP2017	SEPT/OCT 2017 GUARDIANSHIP SERVICES	400.00
COUNSELING ASSOCIATES OF DOOR	6361	6361 SEP2017	SEP 2017 CCS SERVICES	4,508.40
WI DEPT OF JUSTICE CRIME INFO	4331	4331 SEP2017	AUG/SEP 2017 FINGERPRINTING	150.00
[REDACTED]	20518	20518 OCT2017	OCT 2017 CHILDCARE COSTS	250.00
[REDACTED]	22483	22483 OCT2017	OCT 17 103.99 RESP 20HRS	300.00
[REDACTED]	6876	6876 SEP2017	SEP 2017 EMP MILEAGE REIM 173 MI	92.56
DEPARTMENT OF CORRECTIONS	3213	3213 AUG2017	JUL/AUG 2017 YA CORRECTIONS	18,104.00
DEPARTMENT OF CORRECTIONS	3213	3213 SEP2017	SEP 2017 YA CORRECTIONS	9,446.00
Vendor Total:				27,550.00 **
DYNAMIC FAMILY SOLUTIONS	21410	21410 SEP2017	MAY-SEP 2017 CCS SERVICES	2,737.00
ECONO FOODS	9674	9674 SEP2017	SEPT 2017 HS ECONO CHARGES	351.70
FAMILY SERVICES	3841	3841 SEP2017	SEP 2017 CCS/SELF SERVICES/CRISIS	11,915.20
HELP OF DOOR COUNTY INC	13420	13420 SEP2017	SEP 17 FAS SUPERVISED VISITS 101.25HRS	2,531.25
HIRN MENTAL HEALTH COUNSELING	17401	17401 09-2017	SEP/OCT 2017 AODA/WASH ISLAND OUTPT	1,380.00
INNOVATIVE SERVICES, INC.	5078	5078 SEP 2017	SEP 2017 CCS SERVICES	4,642.20

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	18129	18129 AUG2017	AUG 2017 403.01 REC	220.00
[REDACTED]	22586	22586 OCT2017	OCT 2017 RESPITE	150.00
JUSTICEPOINT, INC	21360	21360 SEP2017	SEP 2017 ELEC MONITORING 30 DAYS	148.50
[REDACTED]	22482	22482 OCT2017	OCT 17 103.99 RESP 20HRS	300.00
LAKESHORE CAP, INC.	17200	17200 SEP2017	SEPT 2017 JUV REST/CSP TECH/PEER SPEC	2,788.60
LANGUAGE LINE SERVICES	14606	14606 SEP2017	SEP 2017 INTER SERVICES 357 MIN	259.35
[REDACTED]	21771	21771 SEP2017	SEP 2017 EMP MILEAGE REIM 100 MI	53.50
OPTIONS LAB, INC	17788	17788 SEP2017	SEP 2017 DRUG SCREENS	318.00
PHOENIX BEHAVIORAL HEALTH SVC	17442	17442 SEP2017	SEP 2017 CCS SERVICES	2,427.60
PROFESSIONAL GUARDIANSHIPS INC	5008	5008 SEP2017	SEP 2017 GUARDIANSHIP SERVICES	218.00
[REDACTED]	22506	22506 OCT2017	OCT 2017 CARE FOR FOSTER CHILD	200.00
SHERRY PESCH	3394	3394 SEP2017	SEP 2017 DD/CSP BKPING SERVICES 45 HRS	945.00
[REDACTED]	22245	22245 OCT2017	SEP-DEC 2017 403.01 REC	67.00
SAINTA, INC	21993	21993 OCT2017	MAY-AUGUST 2017 CCS SERVICES	7,140.00
SHEBOYGAN COUNTY TREASURER	29071	29071 SEP2017	SEP 2017 JUVENILE BOARDERS	570.00
SKILLPATH SEMINARS	11413	11413 SEP2017	OCT/NOV 2017 REGISTRATION FEES	378.00
SPECIALIZED SERVICES LLC	7694	7694 SEP2017	AUG/SEP 2017 CCS/PCW SERVICES	14,219.68
STAPLES ADVANTAGE	15069	15069 OCT2017	SEP/OCT 2017 HS OFFICE SUPPLIES	497.56
STREUS PHARMACY INC	9617	9617 SEP2017	SEPT 2017 MEDICAL SUPPLIES	13.92
[REDACTED]	22562	22562 SEP2017	SEP 2017 EMP MILEAGE REIM 200 MI	107.00
[REDACTED]	22555	22555 SEP2017	SEP 2017 EMP MILEAGE REIM 19 MI	10.17
[REDACTED]	22588	22588 OCT2017	OCT 2017 REFUND FOR AODA	225.00
1 ANYTIME RIDE LLC	22580	22580 SEP2017	SEP 2017 TRANSPORTATION OF CLIENT	114.00

Batch Total: \$117,026.16 *****
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VOUCHER

STATE OF WISCONSIN

2017

Door County

VENDOR # _____

New Vendor (Please Assign New #)
 One Time Vendor (Please Assign New #)

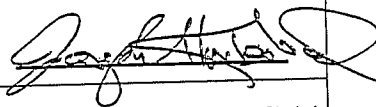
VENDOR NAME: Door County Dept of Human Services

VENDOR ADDRESS: c/o Dept Human Services

VENDOR ADDRESS: MONTHLY MEETING VOUCHERS

VENDOR ADDRESS: 421 Nebraska Street

Submitted By:
alaluzerne 11.01.2017

Approved by: Department Head:


Approved by: Committee Chair /
 County Administrator

Added to Voucher Listing

Voucher Listing Signed / Approved
 Meeting Date _____

Hold For Approval / Documentation
 After Processing

PAID BY _____
 CHECK # _____

↓ This Area to be Completed by Finance Department

Fund	Dept	Sub Dept	Account Number	Detail	Description	@ Cost/Ea	Total Amount	Invoice Date	Vendor Invoice Number	
240	47				SUBMITTED FOR PAYMENT, BATCH 259604, November 2017-1st Batch Processing		\$31,286.73		various - as attached	
VOUCHER TOTAL							\$ 31,286.73	VOUCHER TOTAL		

* S U M M A R Y *
SCHEDULE OF VOUCHERS

MEETING DATE

Dept Human Services
DEPARTMENT

*** S U M M A R Y F O R C O M M I T T E E R E V I E W O N L Y ***

G/L DATE: 11/2017 Batch Nbr: 259604

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
ADVOCATES FOR HEALTHY	17929	17929 SEP2017	SEPT 2017 CCS SERVICES	9,544.50
[REDACTED]	17383	17383 AUG2017	JUN, JUL, AUG 2017 RESPITE	780.00
AMERICAN FOUNDATION OF CNSLNG	7857	7857 SEP2017	SEP 8,10 2017 RESPITE	260.00
BAETEN COUNSELING	20427	20427 MAY2017	APRIL/MAY 2017 CCS SERVICES	652.80
BAY HILL APARTMENTS	12501	12501 OCT2017	OCT 2017 ASSISTANCE W/ RENT	65.00
BROWN COUNTY HUMAN SERVICES	3680	3680 NOV2017	Q1-Q3 2017 FRAUD PREVENT & INVESTIG	3,598.84
BROWN COUNTY HUMAN SERVICES	3680	3680 OCT2017	JUL/AUG/SEP 2017 CHILD CARE CERT	387.59
			Vendor Total:	3,986.43 **
[REDACTED]	35360	35360 OCT2017	OCT 2017 EMP MILEAGE REIM 65 MI	34.78
CELLCOM WISCONSIN RSA 10	4818	4818 OCT2017	OCT 2017 CCS/WHEAP/HS CELL PHONES	748.96
CESA 5	22595	22595 OCT2017	OCT 6,17 PORTAGE 3 REG FEE	179.00
COMFORT INN	22594	22594 NOV2017	NOV 2017 LODGING FOSTERING FUTURES	410.00
[REDACTED]	22483	22483 10-2017	OCT 17 103.99 RESP 20 HRS	300.00
FAMILY SERVICES	3841	3841 SEP2017	SEP 17 .6HRS 113.01 SUPP TRNING	25.80
[REDACTED]	2006	2006 OCT2017	OCT 2017 EMP MILEAGE REIM 458 MI	245.03
HIPAA COW	16408	16408 OCT2017	OCT 2017 HIPAA COW CONF FEE	150.00
IPAT INC	13103	13103 OCT2017	OCT 2017 PSYCH EVAL PERSONALITY TEST	41.50
[REDACTED]	21031	21031 OCT2017	OCT 17 112.47 ADAP AID	500.00
[REDACTED]	22591	22591 OCT2017	OCT 2017 EMP PARKING FEE REIM	17.25
[REDACTED]	11277	11277 AUG2017	JUL/AUG 2017 EMP MILEAGE REIM	62.06
[REDACTED]	22482	22482 10-2017	OCT 17 103.99 RESP 14 HRS	210.00
[REDACTED]	22478	22478 AUG2017	AUG 2017 SCHOOL REG/ATHLETIC FEES	100.00

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
L.K. ANDERSON CONSULTING LLC	22549	22459 OCT2017	SEP/OCT 2017 CCS CLINICAL SUPERVISION	1,801.25
SALLY LAURENT	8394	8394 NOV 2017	NOV 2017 AFH CARE 30 DAYS	900.00
WENDY RAY	13022	13022 OCT2017	OCT 2017 B3 THERAPY/MILEAGE	6,272.28
[REDACTED]	22245	22245 10-2017	SEP/OCT 17 CCOP RESP/MENTORING	1,206.00
SPIRIT OF THE HORSE AND HEART	22583	22583 OCT2017	SEP/OCT 2017 EQUINE GUIDED COACHING	720.00
[REDACTED]	9257	9257 OCT2017	OCT 2017 INTERPRETOR SERVICES/TRAVEL	74.25
STAPLES ADVANTAGE	15069	15069 10-2017	OCT 2017 HS OFFICE SUPPLIES	268.51
TIMOTHY HICKEY	3823	3823 OCT2017	OCT 2017 OWI ASSESSMENTS/REASSESSMENT	685.00
[REDACTED]	22555	22555 OCT2017	OCT 2017 EMP MILEAGE REIM 124 MI	66.34
THE CHANGE COMPANIES	14752	14752 OCT2017	OCT 2017 AODA WORKBOOKS	459.56
UW MADISON	10018	10018 DEC2017	DEC 2017 IDP TRAINING REG FEE	350.00
[REDACTED]	4788	4788 SEP2017	AUG/SEP 2017 EMP MILEAGE REIM	65.81
WISCONSIN DOCUMENT IMAGING	5999	5999 OCT2017	OCT 2017 HS 2ND FLOOR COPIES	81.94
WISCONSIN MEDIA	13278	13278 SEP2017	AUG/SEP 2017 CRISIS RFP	22.68

Batch Total: \$31,286.73 ****
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COUNTY OF DOOR
STATE OF WISCONSIN
STURGEON BAY, WI

* S U M M A R Y *
SCHEDULE OF VOUCHERS

ADRC/SRC, 1st batch, Oct. 2017

MEETING DATE

HS Resource Center
DEPARTMENT

*** S U M M A R Y F O R C O M M I T T E E R E V I E W O N L Y ***

G/L DATE: 10/2017 Batch Nbr: 259570

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	18248	18248 SEP2017	21.5 SEP MOW MILEAGE REIMB	11.50
ADVOCATES-INDEPENDENT LIVINGII	13325	13325 SEP2017	SEP RSP	480.34
BEST WESTERN MARITIME INN	2974	2974 72352	ROOM CHGE-VS	450.00
BROTHERS DAIRY	257	257 SEP2017	RAW FOOD	711.00
[REDACTED]	19268	19268 SEP2017	28 SEP MOW MILEAGE REIMB	14.98
DOOR-TRAN	16496	16496 SEP2017	SEP STAFF HOURS	600.00
ECONO FOODS	9674	9674 SEP2017	RAW FOOD	1,087.31
[REDACTED]	17474	17474 SEP2017	25 SEP MOW MILEAGE REIMB	13.40
[REDACTED]	19080	19080 SEP2017	15 SEP MOW MILEAGE REIMB	8.04
GORDON FOOD SERVICE, INC	22145	22145 SEP2017	RAW FOOD	6,245.04
[REDACTED]	5354	5354 SEP2017	27 SEP MOW MILEAGE REIMB	14.46
[REDACTED]	20934	20934 SEP2017	MEAL EXP-JB	25.98
[REDACTED]	19650	19650 SEP2017	MEAL EXP-JH	24.13
[REDACTED]	18116	18116 SEP2017	19.4 SEP MOW MILEAGE REIMB	10.38
[REDACTED]	17906	17906 SEP2017	724.10 SEP EMPY MILEAGE REIMB	387.40
[REDACTED]	19378	19378 SEP2017	16.20 SEP MOW MILEAGE REIMB	8.67
[REDACTED]	19673	19673 SEP2017	8 SEP EMPY MILEAGE REIMB	4.28
[REDACTED]	7092	7092 SEP2017	47 SEP MOW MILEAGE REIMB	25.16
[REDACTED]	20119	20119 SEP2017	MEAL EXP-LV	41.08
TOWN OF LIBERTY GROVE	33170	33170 SEP2017	MEAL SITE 8 DAYS @ \$9/DAY	72.00
[REDACTED]	22496	22496 SEP2017	19 SEP MOW MILEAGE REIMB	10.17
PRINCE OF PEACE	12015	12015 SEP2017	DEMENTIAL CRISIS PROVIDER CONV DONATION	45.00

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	25789	25789 SEP2017	116 AUG/SEP MOW MILEAGE REIMB	62.05
[REDACTED]	20044	20044 SEP2017	67.50 SEP EMPLY MILEAG REIMB	36.01
[REDACTED]	21501	21501 SEP2017	MEAL SITE 8 DAYS @ \$8/DAY	64.00
[REDACTED]	26890	26890 SEP2017	76 SEP EMPLY MEALSITE MILEAGE REIMB-LG	40.66
STAPLES ADVANTAGE	15069	15069 SEPADRC	SEP ADRC/SRC OFFICE SUPPLIES	66.85
STURGEON BAY UTILITIES	30820	30820 SEPSRC	SEP UTILITIES SRC	1,318.35
TIP TOP CLEANERS	10942	10942 SEP2017	SEP LAUNDRY/KITCHEN	112.50
UNITED HOME HEALTH SERVICIS,LLC	20955	20955 SEP17	SEP RSP	1,009.29
WARNER-WEXEL WHOLESALE & POOL	36120	36120 SEP2017	NUTRITIONAL SUPPLIES	477.57
TOWN OF WASHINGTON	33570	33570 SEP2017	SEP MEALSITE 9 DAYS @ \$8/DAY	72.00
WISCONSIN DOCUMENT IMAGING	5999	5999 SEPAPS	APS COPIER CHARGE	80.00
WIL KIL PEST CONTROL	6359	6359 SEP2017	SEP PEST CNTRL SRC	36.75
WISCONSIN AIRS	2990	2990 SEP2017	AIRS CONFERENCE-JB	120.00

Batch Total: \$13,786.35 ****
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COUNTY OF DOOR
STATE OF WISCONSIN
STURGEON BAY, WI

ADRC SRC, 2nd Batch, Oct. 2017

MEETING DATE

HS Resource Center
DEPARTMENT

*** SUMMARY FOR COMMITTEE REVIEW ONLY ***

G/L DATE: 10/2017 Batch Nbr: 259583

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	18248	18248 101817	51 OCT MOW MILEAGE REIMB	27.28
[REDACTED]	20950	20950 SEP2017	112 SEP EMPLY MILEAGE REIMB	59.92
ABBY VANS INC	16735	16735 SEP2017	D2D TAXI-SEP 2017	47,797.55
ADVANCED DISPOSAL SERVICES	18928	18928 OCT2017	OCT DISPOSAL SVC-SRC	208.14
[REDACTED]	19077	19077 OCT2017	OCT CAREGIVER SUPPORT	37.50
CALUMET CNTY HEALTH & HS	19657	19657 NOV2017	REGISTRATION FEES-SRC X 5	65.00
[REDACTED]	4168	4168 SEP2017	19.80 SEP EMPLY MILEAGE REIMB	10.62
CELLCOM WISCONSIN RSA 10	4818	4818 OCT2017	OCT ADRC/SRC CELL CHARGES (10/06-11/05)	513.52
[REDACTED]	12614	12614 SEP2017	150 SEP EMPLY MILEAGE REIMB	95.18
[REDACTED]	20119	20119 SEP17B	160 SEP EMPLY MILEAGE REIMB	85.62
MANNS STORE	18770	18770 SEP2017	RAW FOOD	812.10
OLIVER PRODUCTS	9189	9189 OCT2017	TRAY-3COMP-DEEP 560/CSE COEX	1,640.00
[REDACTED]	22496	22496 OCT2017	12 OCT MOW MILEAGE REIMB	6.42
[REDACTED]	14091	14091 SEP2017	417 SEP EMPLY MILEAGE REIMB	223.10
GOOD SAMARITAN, SCANDIA VILLAGE	27395	27395 SEP2017	SEP MOW	388.00
STAPLES ADVANTAGE	15069	15069 SEP17B	3355270377-SRC/ADRC SEP OFFICE SUPPLIES	85.84
STURGEON BAY UTILITIES	30820	30820 OCT2017	SRC UTILITIES	1,044.91
UNITED HOME HEALTH SERVICs, LLC	20955	20955 OCT2017	OCT RSP	752.02
WDOR AM & FM	129	129 SEP2017	SEP SRC MARKETING	174.00
WISCONSIN MEDIA	13278	13278 AUG2017	LEGAL NOTICE-BUS RFQ	20.88
WISCONSIN PUBLIC SERVICE	11363	11363 SEP2017	SEP UTILITIES SRC	672.55

Batch Total: \$54,720.15 ****
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ADRC/SRC, 15th Batch, Nov. 2017

MEETING DATE _____

HS Resource Center
DEPARTMENT

*** S U M M A R Y F O R C O M M I T T E E R E V I E W O N L Y ***

G/L DATE: 11/2017 Batch Nbr: 259624

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
[REDACTED]	20950	20950 OCT2017	281 OCT EMPLY MILEAGE REIMB	150.34
BROTHERS DAIRY	257	257 OCT2017	RAW FOOD	696.00
[REDACTED]	18153	18153 OCT2017	OCT NEWSLETTER ARTICLE	217.50
[REDACTED]	19268	19268 OCT2017	20 OCT MOW MILEAGE REIMB	10.70
CANDLEWORKS OF DOOR COUNTY INC	1961	1961 071933	CAREGIVER LUNCHEON GIFTS	1,078.15
CURATIVE CONNECTIONS, INC	21234	21234 3Q17	3Q17 SR. AIDE	375.00
ECONO FOODS	9674	9674 OCT2017	RAW FOOD	1,122.22
THE FRANK & BARBARA BROYLES	22601	22601 1036	CAREGIVER LUNCHEON GIFTS	300.00
[REDACTED]	19080	19080 OCT2017	23 OCT MOW MILEAGE REIMB	12.32
GORDON FOOD SERVICE, INC	22145	22145 OCT2017	NUTRITIONAL SUPPLIES/RAW FOOD	6,553.04
[REDACTED]	5354	5354 OCT2017	21 OCT MOW MILEAGE REIMB	11.25
[REDACTED]	18116	18116 OCT2017	9.7 OCT MOW MILEAGE REIMB	5.19
[REDACTED]	17906	17906 OCT2017	714.1 OCT MILEAGE REIMB	382.05
JIM OLSON FORD LINCOLN, LLC	20492	20492 SRCBUS	O/C SRC BUS	47.36
JOURNEYWORKS PUBLISHING	3168	3168 123423A	CAREGIVER LUNCHEON GIFTS	191.95
[REDACTED]	19673	19673 OCT2017	10 OCT EMPLY MILEAGE REIMB	5.35
MEAT PROCESSORS INC	6544	6544 OCT2017	RAW FOOD	410.98
[REDACTED]	25789	25789 OCT2017	41.20 OCT MOW MILEAGE REIMB	22.04
[REDACTED]	20044	20044 OCT2017	84.80 OCT MILEAGE REIMB	45.37
STAPLES ADVANTAGE	15069	15069BOCT2017	ADRC/SRC OFFICE SUPPLIES	282.21
UNITED HOME HEALTH SERVICES, LLC	20955	20955BOCT2017	RSP/HOMEMAKER/CHORES-HN	633.28
[REDACTED]	374	374 OCT2017	33 OCT MOW MILEAGE REIMB	17.67

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
WARNER-WEXEL WHOLESALE & POOL	36120	36120 OCT2017	NUTRITIONAL SUPPLIES	619.07
WIL KIL PEST CONTROL	6359	6359 OCT2017	SRC PEST CNTRL	36.75

Batch Total: \$13,225.79 ****
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Door County Department of Human Services

Billing and Collection

Approach to Billing and Collections

All billing and collection efforts shall strive toward what is fair and equitable treatment for both clients who receive service and taxpayers who bear unmet costs.

Billing and collection activity shall consider the rights, dignity, and physical and mental condition of the client and other responsible parties. Responsible parties with no ability to pay and without applicable insurance shall not be pursued for payment.

All billing and collection activity shall be pursued in a forthright and timely manner in accordance to DHS1.03.

1. Patient Accounts Specialist Responsibilities

- a. All clients receiving services from the Door County Department of Human Services will meet with an agency representative to complete the Financial Information Form or agree in writing to refuse an ability-to-pay determination. During this interview all third party payer information will be collected and an ability to pay determination will be offered to the client. Any client refusal to have a determination must be signed by the client and client billing will include the department's usual and customary fees.
- b. The billing specialist will then bill services to all appropriate third party payers (private insurance companies, HMOs, Medical Assistance & Medicare) within 60 days from the date of services, record the respective payments and will write-off any charges mandated to be written-off by either the Medical Assistance or the Medicare Program. The department's Business Manager will regularly review all write-offs.
- c. The billing specialist will then bill all remaining patient responsibility and outstanding charges to the respective client. If a client has a "zero ability-to-pay" as determined by the financial means test, the billing specialist will confirm that the ability-to-pay determination is properly calculated and documented before writing off any remaining liability and no billing will occur. The department's Business Manager will regularly review all write-offs.
- d. If no response is received within 30 days of the initial billing, a second billing will be sent to the client with a **30** day letter/notation reminding them that they should contact the billing specialist to arrange for an ability-to-pay determination (if one was not originally completed) or to establish a mutually acceptable written repayment agreement (agreement not exceed 3 years) to satisfy account obligation.
- e. If no response is received within 30 days of the second billing, an attempt will be made to reach the client by phone to try to obtain payment or establish a repayment agreement and a **60** day reminder letter will be sent.
- f. If all previous efforts are unsuccessful in collecting the debt within **90** days from the initial billing, a final letter will be sent to the client or responsible party with a copy to the Business Manager, informing the responsible party that they have **10** days to contact the Department of Human Services to make arrangements to pay the bill otherwise the account will be turned over for collection.
- g. If no response or agreement is reached within 30 days from the date of the final letter, the billing specialist will:

1. Route the bill to the Business Manager and Director to obtain approval to turn the balance over to the Department's third party collector (TRIP or State Collections).
 2. Turn all accounts over to third party collection with balances in excess of \$20.00
 3. If it is known that a client's source of income includes funds from ES, SSI, in a Medical Assistance program or if collection efforts would interfere with treatment (documented by clinical request), then the bill should not be turned over to collections. Place this bill in the "pending" status file and be reviewed for write-off.
 4. Review all accounts with balances less than \$20.00 with the department's Business Manager to determine if they should be pursued in small claims court, placed in pending status (*), sent to third party collection, or be written-off. (See following appropriate section for further information.)
- 2. Collection Agency Responsibilities**
- The Door County Department of Human Services has contracted with third party collection agencies to handle past due accounts. For all accounts that are referred for collection, the responsible parties will be notified in writing at the time of referral. Procedures related to the collection agency's practices are found in the contract agreement. Clients who are currently receiving services through the Department will not be sent to collections until they are closed.
- 3. Pending Accounts**
- a. All accounts returned from the collection agency for reasons other than bankruptcy, full payment, or mutually agreed upon settlement will be placed in a pending status (*) and will be reviewed annually for further action.
 - b. Accounts will remain in pending status (*) until full payment, a settlement, or the statute of limitations on action expires (10 years from the date of last service).
- 4. Write-Off Accounts**
- a. All accounts, where bankruptcy has been officially documented, will be written-off. If timely notice is received and if applicable, balances will be claimed in bankruptcy proceedings. The department's Business Manager will regularly review all write-offs.
 - b. All accounts exceeding the statute of limitations (10 years from the date of last service or payment), will be written-off the county books.
 - c. All accounts with balances less than \$200.00 can be written-off with prior approval from the department's Business Manager.
 - d. All other accounts to be written-off will require the approval of the Door County Department of Human Services Director on a quarterly basis.
- 5. Documentation**
- a. Financial documentation on client accounts that are paid-in-full, settled by mutual agreement or are written-off because of bankruptcy will be retained for a period of 7 years from the date of last payment or legal bankruptcy. After the 7 years has expired, all service documentation will be shredded with the exception of a summary history of the account charges and payments.

- b. Financial documentation on client accounts that are written-off because of the statute of limitations on **action** is expiring (10 years from date of service or last payment), the statute of limitations on **collection** is expiring (20 years from the date of service or last payment), or for other prior approved write-off reasons will be retained for a period of 7 years from the date of the write-off. After the 7 years has expired, all service documentation will be shredded with the exception of summary history of the charges and payments.
- c. Documents sent to Third Party Collectors will include a minimum of the following:
 - 1. Statement of Charges
 - 2. A summary of correspondence and actions taken
 - 3. Information relating to Ability to Pay
 - 4. Notice to responsible parties that account has been referred for collection.
- d. Files for all accounts sent to collections will include a minimum of the following:
 - 1. Copies of financial information forms for all responsible parties who elect to be billed according to their ability to pay.
 - 2. Updated information after each year (6 months for Human service clients) concerning the family's ability to pay when billing extends for more than one year (6 months for Human service clients).
 - 3. Copies of all statements sent to responsible parties.
 - 4. Copies of all claims sent to third-party payers.
 - 5. Copies of all correspondence.
 - 6. Documentation of all other actions taken on the account.

Document Name: Human Services/ Billing and Collection Procedure
Author: Timothy Headrick
Owner: Support Team- DC Department of Human Services
Last Revision: 10.16.17 Tim Headrick, Business Manager

Request to Refill Position

Must follow the process in the Administrative Manual, Section 2.04 – Creation and Classification of Positions.

DEPT. HEAD TO COMPLETE:

Department Human Services Position Title: Alcohol and Drug Abuse Counselor

Position Status: Currently vacant Will be vacant Date Vacant: November 29, 2017

Full Time Part Time Limited Term Project Hours per week: 40

Reason for Vacancy: Separation Transfer Retirement Resignation Death

Discuss turnover with the department in the previous 18-24 months: Steady turnover

Transfer: why is the new position more attractive to employee than current one? _____

Name of Current / Most Recent Incumbent: Brenda Franko

Is office space, furniture, and office equipment available? Yes No

If not, explain plan to obtain: _____

Reviewed, updated, and submitted to Human Resources:

Job Analysis Questionnaire

Job Description

Completed by: Joe Krebsbach Date 11-8-17

Financial Information:

Salary Range: I Is the Position Budgeted: Yes No

Funding Source: Levy % 80 Grant Funded % _____ Other Some revenue generated % 20

Fiscal Impact, from Finance Department, completed and attached

HR TO COMPLETE:

EEO 02-Professionals FLSA Status Exempt

Human Resources has performed a position review? AKH (HR initial)

The Job Analysis and Job Description have both been updated and signed? AKH (HR initial)

Approvals:

County Administrator [Signature] Date 11-8-17

Oversight Committee Chair _____ Date _____

I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.

I want to participate I do not wish to participate

Administrative Committee Chair _____ Date _____

I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.

I want to participate I do not wish to participate



County of Door
DEPARTMENT OF COMMUNITY PROGRAMS
County Government Center
421 Nebraska Street
Sturgeon Bay, WI 54235

Joseph Krebsbach
Program Director
(920) 746-2345
Fax: (920) 746-2439

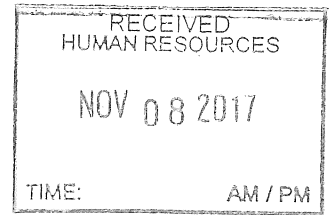
Memo

To: Human Services Board
From: Joe Krebsbach
CC: Administrative Committee
Date: November 8, 2017
Re: Request to Refill Alcohol and Drug Abuse Counselor

The AODA Counselor position will be vacated by Brenda Franco on November 29th, 2017. She currently has a case load of 35 patients, eight who are in an Intensive Outpatient Program that meets three days per week. We currently have a waiting list for services. We also have a part time AODA Counselor who intends to retire in Feb. of next year.

I am respectfully requesting permission to refill the position as soon as possible.

Joe



11/8/17

County of Door;

Today I am giving my notice to leave my position here with Human Services. My last day will be November 29, 2017. In this time I will work extremely hard to get all clients reconnected with AODA services, complete those that are ready, and have all my documentation in.

I am sad knowing that I am leaving Door County. Joe and Cori it has been a pleasure to work for you both. What you are doing to bring TIC to the agency, staff, and consumer is amazing. I apologize for giving the short notice. Please let me know if there is anything I can do for the agency and or community before I leave.

Thank you for the wonderful opportunity I have had here. Again, it has been a pleasure to work for you both and the community.

A handwritten signature in cursive script, appearing to read "B. Franco".

In Service

Brenda Franco CSAC

County of Door
AODA Counselor

Job Title	AODA Counselor	Last Revision	10/26/2015
Department	Human Services	HR Reviewed	01/01/2017
Division	Behavioral Health	Employee Group	General Municipal Employee
Report To	Behavioral Health Program Manager	FLSA Status	Exempt
Pay Grade	I	EEO Code	02 – Professionals

General Summary

The Alcohol and Other Drug Abuse (AODA) Counselor reports directly to the Behavioral Health Program Manager and is responsible for conducting effective and professional direct service counseling for the county’s alcohol and drug affected population. Provides community education services as requested by supervisory staff.

Duties and Responsibilities

Essential Job Functions

1. Provide screening, intake, orientation, assessment, diagnosis, and treatment recommendations of AODA population.
2. Provide direct service therapy to AODA clients and their families. This will include individual, group, couples and family therapy.
3. Facilitate Intensive Out-Patient Program groups.
4. Develop and maintain accurate case records of assessment, treatment and current status/condition. Comply with DHS Chapter 35, 75 standards.
5. Identify and assess specific needs of clients and make recommendations for appropriate services, i.e. inpatient treatment, special living arrangements, etc. Make arrangements, monitor all placements and provide aftercare planning and aftercare services.
6. Provide consultation to community regarding AODA issues.
7. Provide AODA educational information to community groups and individuals, as needed.

General Job Functions

1. Assist in developing and providing ancillary groups or special services to other community programs relative to special needs populations, i.e., youth, elderly, FAE/FAS, women, minorities and others as deemed necessary.
2. Provide after-hours emergency “On Call” services on rotating basis with other clinical staff.
3. Represent the Department of Human Services Behavioral Health Program at community meetings and events.

Requirements

Training and Experience

1. Wisconsin Certification as a Substance Abuse Counselor is required.
2. Bachelor of Social Work or Psychology related study desired.
3. 3-5 years AODA counseling experience preferred.
4. Current valid Wisconsin driver’s license required.

**County of Door
AODA Counselor**

Knowledge, Skills and Abilities Required

1. Knowledge of physiological, psychological, pharmacological and sociological aspects of chemical abuse and dependency.
2. Knowledge of and experience with prevention, intervention, assessment and treatment modalities.
3. Ability to read, comprehend, and communicate, both verbally and in writing as well as effectively administer by written, and verbal communications.
4. Ability to effectively conduct interviews and counsel AODA clients with secondary mental health issues/diagnosis.
5. Capable of conducting successful crisis intervention assessment and disposition.
6. Ability to use tact and courtesy in maintaining an effective working relationship with department employees, county supervisors, county officials, and general public.
7. Possess emotional maturity, sound judgment and capable of working with limited supervision.

Physical & Working Conditions

Nearly 100% of time work is performed in a normal office setting with little or no discomfort from temperature, dust or noise. Interacting with other employees, general public, whether walking in or on the telephone may be encountered.

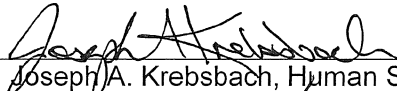
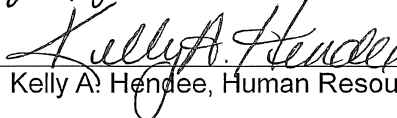
Over 75% of work is performed seated at a desk, working on a computer keyboard and/or telephone with about 10% of work performed standing and walking. Over 75% of the work is performed by talking, hearing, and using both far and near vision. Occasional lifting is required up to 10 lbs. (i.e. paper and equipment).

Observing clients is approximately 25% to 50% of the time. Over 75% of work is performed inside the Department of Human Services and work is done outside about 10% of the time. Occasional inebriated client contact and occasional contact with unpredictable, volatile, or psychotic persons. Very infrequent occasions where clients behavior may require physical restraint or defensive restraint to avoid injury to employee and/or others. Periodic on-call status may disrupt domestic activities and will not allow for travel outside of the 50 minute response time during on-call hours.

In an effort to provide for continuity of County government and to cope with the problems of the emergency, you may be required to work during a proclaimed state of emergency, consistent with Sec 323.14 Wis. Stats. and County emergency management plans and programs.

The above is intended to describe the general content of the requirements for the performance of this job. It is not to be construed as an exhaustive statement of duties, responsibilities or requirements. They may be subject to change at any time due to reasonable accommodation or other reasons.

Approvals:

 _____ Joseph A. Krebsbach, Human Services Director	10/26/15 _____ Date
 _____ Kelly A. Hendee, Human Resources Director	12/8/15 _____ Date

Door County Human Resources Form #: 2015-05		Title: Job Analysis Questionnaire
Date Created 04/2015	Date Revised 10/2015	Admin. Manual or Handbook Reference: Administrative Manual, Section 2.04 – Creation & Classification of Positions

Current Position Title: AODA Counselor

Department Human Services Division Behavioral Health

Report to: (position title): Reports to the Behavioral Health Program Manager.

A. Job Summary (Purpose): Use two or three brief, **specific** statements to summarize the overall purpose of the job.

Help facilitate change in client's behaviors. Instill and propagate self awareness and desire to change in areas of alcohol and drug abuse use. Assess client's need for services through assessment/interview process. Provide education, run group treatment programs as well as individual therapy.

B. Fundamental duties of the position

- Write one duty per numbered space.
- Rank the duties in order of importance. The most important duty should be number one.
- After listing the specific duties, enter the percentage of time spent on each.
- Indicate which of the items are essential, which is determined considering the following:
 - Does the position exist to perform this function? OR
 - Are there a limited number of employees who can do this duty? Particularly, to the extent that if this position did not perform this duty, it would not get done? OR
 - Does the function require highly specialized skills or expertise that most other employees do not possess? Would the person be hired specifically because of their skill or expertise in performing the function? (i.e. A draftsman is hired because of their skill in precision drawing).

If "yes" can be answered to any of the above, mark "yes" in the "essential function" column.
- Indicate whether other employees in the department perform this function.

Item No.	Duty	% of Total Time	Essential		Do Others Perform the Same Duty?	
			Yes	No	Yes	No
1.	Alcohol and drug abuse assessment/includes court ordered and follow-up.	15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	Intensive outpatient treatment prep.	28	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.	Adolescent treatment group and prep.	7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	Skills group and prep.	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	Family therapy sessions.	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	Individual therapy sessions.	30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	Case management/staffing.	7	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.	Planning and department meetings.	5	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.	Urine screens.	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Supervisory Responsibility: Write the position titles of all employees who report directly to you. Also, indicate the number of employees who in turn report to them. Write "none" if this is not applicable.

Position Title	# of Employees who in turn report to them	Position Title	# of Employees who in turn report to them
None			

Check below those supervisory responsibilities that are a part of your job:

- | | | |
|---|--|---|
| <input type="checkbox"/> Instruct / train | <input type="checkbox"/> Assign Work | <input checked="" type="checkbox"/> Coordinate Activities |
| <input type="checkbox"/> Review Work | <input checked="" type="checkbox"/> Maintain Standards | <input type="checkbox"/> Plan Work of Others |
| <input type="checkbox"/> Act on Employee problems | <input type="checkbox"/> Schedule/allocate personnel | <input type="checkbox"/> Schedule work of others |
| <input type="checkbox"/> Select new employees | | |
| <input type="checkbox"/> Transfer / promote? | <input type="checkbox"/> (Recommend?) | <input type="checkbox"/> (Approve?) |
| <input type="checkbox"/> Performance Evaluations | <input type="checkbox"/> (Recommend?) | <input type="checkbox"/> (Conduct?) |
| <input type="checkbox"/> Discipline | <input type="checkbox"/> (Recommend?) | <input type="checkbox"/> (Approve?) |
| <input type="checkbox"/> Discharge | <input type="checkbox"/> (Recommend?) | <input type="checkbox"/> (Conduct?) |
| <input type="checkbox"/> Salary Increases | <input type="checkbox"/> (Recommend?) | <input type="checkbox"/> (Approve?) |

C. Work Relationships: For any of the contacts listed below that you have regarding company business, indicate the frequency (e.g. daily, weekly, monthly, etc.) and nature or purpose (e.g. obtain /provide information, negotiate contracts, etc.) of the contact.

CONTACT	PURPOSE OF CONTACT	FREQUENCY
<u>Employees</u> in same or other department(s) Behavioral Health Manager, CSP Coordinator, other therapists, case managers, social workers, psychiatrist, psychologist	Coordination of care, clinical supervision, referrals	Daily
Other <u>Departments</u> (list other departments) Public Health	Collaboration of AODA issues	Monthly
Customers – General Public (list all) Consumers seeking AODA services	Service delivery/treatment	Daily
Suppliers/Vendors		
Community / Trade / Professional Law Enforcement, hospitals, community counseling agencies Community groups seeking education	Facilitation of emergency detentions, assessment of crisis cases, consultation Education	Weekly Monthly
Federal / State Gov't =. / Regulatory DHS/Division of Mental Health & Substance Abuse Services, Division of Quality Assurance	Regulatory oversight Technical Assistance	As needed
Other (specify):		

D. Minimum Education , Experience and Certification Requirements

Education: Check the statement below which indicates the educational requirements for the job (not necessarily your educational background). If a higher degree of education is preferred, please check the appropriate column.

Required	Preferred:		
<input type="checkbox"/>	<input type="checkbox"/>	No formal education	
<input type="checkbox"/>	<input type="checkbox"/>	Less than high school education	
<input type="checkbox"/>	<input type="checkbox"/>	High School Diploma or equivalent	
<input type="checkbox"/>	<input type="checkbox"/>	Associate's degree or equivalent	Major:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Bachelor's degree or equivalent	Major: Social Work or Psychology related study
<input type="checkbox"/>	<input type="checkbox"/>	Graduate work or advance degree	Specify:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Professional license required (list below under certification) SAC-IT/SAC	

Experience: Check the amount of experience needed to perform this job (not the experience you brought to the job)

<input type="checkbox"/>	No previous experience required.
<input type="checkbox"/>	Up to one year of experience required.
<input type="checkbox"/>	One to at least three years' experience required.
<input checked="" type="checkbox"/>	Over three years and up to and including six years' experience required.
<input type="checkbox"/>	Over six years and up to and including nine years' experience required.
<input type="checkbox"/>	Over ten (10) years of experience required.
<input type="checkbox"/>	Experience in related field
<input type="checkbox"/>	Experience in (specify):

Certification: List any licenses, certifications, statutory requirements or registrations required for this position. Use the exact name of license, certification, etc.

1.	Substance Abuse Counselor-In Training		
2.	Substance Abuse Counselor preferred		
3.			
4.			
5.			
6.	Valid State of Wisconsin Driver's License Required?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Type: <input type="checkbox"/> Regular <input type="checkbox"/> CDL	Endorsement Required:	

E. Equipment and Machinery: Indicate equipment and/or machinery that is necessary to accomplish the job, and the amount of time per week which involves using each piece of equipment.

No.	Equipment Used	Freq.	Daily	Weekly	Monthly	As Needed
1.	No equipment used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Basic office equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. Typewriter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Computer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Copy machine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Calculator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Fax machine	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Hand Tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. Hammers, wrenches, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Electrical power tools: saws, drills, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Gas power tools: weed-eater, chain-saw, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Yard/Garden tools: shovel, rake, broom, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Weapons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. Handguns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Rifle/Shotgun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Baton	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Communication Equipment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. Telephone	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Cell Phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Mobile data terminal (MDT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Pager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Vehicles:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. Automobiles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Light truck (pick-up)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Heavy truck (dump truck, fire truck, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Construction/heavy equipment (loader, tractor, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Bus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Motorcycle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. Boat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	h. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Medical Apparatus/Equipment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. First aid equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Oxygen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Electronic monitoring equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Patient transport apparatus (spine board, stretcher, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Miscellaneous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Other: PBT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

F. Physical Demands: For each of the activities, please answer the questions asked regarding the intensity, precision and frequency of the listed items.

	Not Required	Required only in unusual situations	Required for 1 hour or less per shift	Required for approx. 2 hours per shift	Required for approx. 4 hours per shift	Required for 6 or more hours per shift
Activity: Lifting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very light lifting: 10# max and occasional lifting of small articles	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Light lifting: 20# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medium lifting: 50# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medium lifting: 60# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heavy lifting: 100# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very heavy lifting: in excess of 100#	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Carrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very light carrying: 10# max	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Light carrying: 20# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medium carrying: 50# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medium carrying: 60# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heavy carrying: 100# max	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very heavy carrying: in excess of 100#	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Standing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Walking	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Sitting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Activity: Stooping	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Crawling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Running	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Swimming	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Physically controlling another person	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Climbing stairs or ladders up or down	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing stairs/routine non-emergency	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing stairs emergency – i.e. pursuit of suspect	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing ladders – routine – i.e. changing light bulbs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing ladders – emergency – i.e. Fire truck aerial ladders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing while carrying – i.e. carrying parts, stretcher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Reaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaching up (to high shelf)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaching across (work bench)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaching down (to floor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G. Working Conditions – Environmental Conditions: Check any conditions encountered on an annual basis

Condition	Rarely	Occasionally	Constantly	Seasonally
Dirt	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dust	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cold	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fumes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Odors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wetness/humidity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vibrations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sudden temp. changes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Darkness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health and Safety: Check any of the following encountered on the job and note the frequency each is encountered				
Electrical hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosives	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heights above 10 ft.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bodily Injury – physical attack	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moving vehicles/traffic	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (allergies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

H. Additional Physical Requirements: List any additional physical activities, not previously listed, which are required in the position. Also list the frequency with which the activity is performed.

I. Location: Check the location where the majority of the work is performed.

- Office / indoors
- Shop / warehouse
- Vehicle
- Outdoors
- Other:

Supervisor Review:

- I. Your signature below indicates that you have reviewed this questionnaire. If you want to make revisions, please enter them in the margins in the appropriate spaces. Use extra paper if you need to, numbering your comments to match the items in question. These items will be reviewed with you before a final position description is prepared.
- II. How many employees under your supervisor perform the same job described above by this employee? _____
- III. Supervisor Comments _____

Signature Approvals

Supervisor _____

Dept. Head Joseph A. Trabasso Title Director Date 10/2/15

REQUEST FOR FISCAL IMPACT INFORMATION

RECLASSIFICATION

FTE/Hours

Job Class

Step

Rate

CHANGE FTE/Hours
From _____ TO _____
CHANGE JOB CLASS/STEP
From _____ TO _____

Position Title AODA Counselor
Effective Date _____ 6 Mo _____
Department Human Services Sub Dept _____

FTE/Hrs	@ Rate	2017 TOTAL SALARY	2017 TOTAL BENEFITS	TOTAL SALARY and Benefits
Human Services AODA Counselor pay Range I; step 1				
1.00	\$24.39	50,731	32,686	83,417
Human Services AODA Counselor Budget				
1.00	\$24.39	50,731	18,913	69,644
Total Salary and Benefit Increase				13,773
FTE/Hrs	@ Rate	2017 TOTAL SALARY	2017 TOTAL BENEFITS	TOTAL SALARY and Benefits
Human Services AODA Counselor Pay Range I; Control Point				
1.00	\$27.87	57,970	34,070	92,040
Human Services AODA Counselor Budget				
1.00	\$24.39	50,731	18,913	69,644
Total Salary and Benefit Increase				22,396

Dept Head Signature Mark E. Janich Finance Director
Date 11/8/2017

Disclaimer: This Fiscal Impact does not include Step 2 \$25.08, Step 3 \$25.78, Step 4 \$26.48, and Step 5 \$27.17.

This Fiscal Impact is an example illustration of what the costs would be for this position/position change. It is based on estimates and assumptions provided by the Human Resources Department and/or the department in which this position works. Because these estimates and assumptions may change, or may be different than the actual circumstances at the time that this position is filled or this position change takes place, there may be a difference between the costs projected in this Fiscal Impact and the actual costs.

M:\Budget County 2017\2017 Fiscal Impacts\2017 Fiscal Impact - AODA



DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

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Sturgeon Bay WI 54235
Main Line: 920-746-7155

Joseph Krebsbach, Director
1st Floor Fax: 920-746-2355
2nd Floor Fax: 920-746-2349
dhs@co.door.wi.us

11/10/2017

Human Services Board
Chairman: Mark Moeller
421 Nebraska St.
Sturgeon Bay, WI 54235

RE: Completion on Introductory Period

Employee Name: Nicole Kahler

Position: Community Support Program Case Manager

Start Date: April 17, 2017

Nicole Kahler successfully met her necessary training goals for the 90 day probation period and completed all of her Crisis Services and State AODA/MH Functional Screen training by the six month introductory period. She has transitioned very well from her previous job as a full time Crisis On-Call worker for Family Services to a contributing member of DCDHS Crisis Team and assumed full responsibility of a CSP caseload.

Nicole has fit in nicely with the multidisciplinary team in the clinic and has been able to coordinate services with case managers in Child Protective Services and Children CCS Care Manager to coordinate services for one of her very difficult cases. It is without reservation that I recommend that Nicole move to regular status.

Sincerely,

Sheryl Flores, LCSW

Sheryl Flores, LCSQ
Community Services Manager
Department of Human Services

CC: Administrative Committee
Human Resources Department

