

Rock County Human Services Department P. O. Box 1649, 3530 N. County Trunk F Janesville, Wisconsin 53547-1649

> Phone: 608/757-5271 Fax: 608/757-5374

ROCK COUNTY HUMAN SERVICES BOARD Monday, December 20, 2010 – 4:30 p.m.

Rock County Health Care Center - 3rd Floor Conference Room, Janesville

AGENDA

- 1. Call Meeting to Order
- 2. Approval of Agenda
- 3. Approval of Minutes of Human Services Board Meeting of December 8, 2010 *
- 4. Citizen Participation
- 5. Resolution to Recognize Ms Bernice Kedrowski For Service To Rock County Human Services * Ms. Sutton
- 6. Questions and Answers on Draft ADRC Report Ms. Thompson
- 7. Status of Juvenile Justice Report Mr. Horozewski
- 8. Approval of Contracts, Transfers, and/or Encumbrances Ms. Mooren
- 9. Approval of Bills Mr. Zuehlke
- 10. Director's Report *
 - W2 / ES Caseload
- 11. Committee Requests for Future Agenda Items
- 12. Next Meeting: Wednesday, January 12, 2011 at 4:30 p.m. at the Rock County Health Care Center, 3rd Floor Conference Room, Janesville, Wisconsin.
- 13. Adjourn

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AGEN	1 ACH	NO.

RESOLUTION ROCK COUNTY BOARD OF SUPERVISORS

Charmian J. Klyve, Director INITIATED BY

Human Services Board SUBMITTED BY



Cindy Sutton DRAFTED BY

December 2, 2010 DATE DRAFTED

TO RECOGNIZE MS. BERNICE KEDROWSKI FOR SERVICE TO ROCK COUNTY HUMAN SERVICES

WHEREAS, Ms. Bernice Kedrowski has served the citizens of Rock County for more than 1 2 thirty (30) years, as a dedicated and valued employee of Rock County; and, 3 WHEREAS, Ms. Kedrowski began her career in August of 1980 as a Clerk/Receptionist for 4 the Rock County Health Care Center and Rock Haven. In March of 1987, Ms Kedrowski was 5 6 promoted to communications clerk with Rock County Human Services. Ms Kedrowski moved to the Job Center when it opened in 1998 and assumed the duties of Job Center receptionist/switchboard operator. Her position was upgraded to Job Center Specialist on 8 9 January 1, 2001. Ms Kedrowski has served in this position until her retirement on December 10 3, 2010; and, 11 12 WHEREAS, Ms. Kedrowski has been performing duties as a receptionist, greeting and 13 directing customers to the appropriate program agencies. She also monitored the switchboard, answering customer calls and inquiries from the general public and directing those to the 14 appropriate staff. She has also served a critical role for Economic Support staff by 15 maintaining intake logs and reporting to staff when appointments arrive. Ms Kedrowski has 16 17 always been respectful when greeting customers and visitors. This has been especially important over the last few years when the Job Center became exceedingly busy due to the 18 economic situation; and, 19 20 21 WHEREAS, the Rock County Human Services Board wishes to recognize Ms. Bernice 22 Kedrowski for her significant contributions to the citizens of Rock County and her 30 years of 23 24 NOW THEREFORE BE IT RESOLVED that the Rock County Board of Supervisors, duly 25 assembled this day of , 2010, does hereby recognize Ms. Bernice 26 27 Kedrowski for her many years of service and extend their best wishes to her in her future endeavors; and, 28 29 BE IT FURTHER RESOLVED that the County Clerk be authorized and directed to furnish

a copy of this resolution to Ms. Bernice Kedrowski.

TO RECOGNIZE MS. BERNICE KEDROWSKI FOR SERVICE TO ROCK COUNTY HUMAN SERVICES Page 2

Respectfully Submitted,

Rock County Human Services Board	County Board Staff Committee
Brian Knudson, Chair	J. Russell Podzilni, Chair
Jennifer Bishop, Vice Chair	Sandra Kraft, Vice Chair
Phillip Owens	Eva Arnold
Minnie Murry	Henry Brill
Sally Jean Weaver-Landers	Betty Jo Bussie
Terry Thomas	Ivan Collins
Robert Fizzell	Marilynn Jensen
Marv Wopat	Louis Peer
Kathy Kelm	Kurtis L. Yankee

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process.

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11-053 New Contract:	⊠ or,		or,		
(check box if ye			1	N	
		Amendment to Contri	act#	Addendum t	o Contract #
Human Services	Department		Sara Mooren	x <u>s</u>	3431
Originat	ing Departmen	t	Contact Person		Phone
Contract with: (Name of entity)	Maria Amador				
Contract Period:	Start D	ate: <u>1/01/2011</u>	Exp	iration Date: 1	2/31/2011
Contract Amount	Rate x numb	er of approved clients	Rate		Change
	•	age Interpretation	\$20.00/hr		Change
N	linimum Trip C	harge	\$10.00/hr		0% 0%
	lileage ocument Trans	slation	Prevailing Fe \$20.00/page		0%
Expenditure/ Reve	enue Account I	Numbers:			
	-digit object co				
36-3634-0	000-62503 Ch	ild Protective Services			
36-3646-0	000-62503 Ju\	enile Justice Services			
36-3689-0	000-62503 Cri	sis Intervention			
36-3690-0	000-62503 Me	ntal Health/AODA			
36-3704-0	000-62503 Into	xicated Driver Progran	า		
36-3706-0	000-62503 Cor	nmunity Support Progr	am		
Executive Summar	v: Pook Count	, Lluman Canda - Day			
interpretation service	es This is on	e of several providers t	artment has developed	contracts with	several providers
Rate is the same as		e or several providers i	rom which Rock Count	ty clients may o	noose for such se
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EW 🖾 11-053	AMENDME	NT TO:	ADDEN	NĐỰM TO:	
DMINISTRATION C	ONTRACT RE	EVIEW ,	NO	SS689	<u> </u>
ntract between	Rock Co. H	man Services Dep	t. and Maria Amoà	or for inte	rpretation se
r period of 1/1 ntract Amount:	/11 - 12/31 Rate x no.	/11. of approved clien	nts.		
orporation Counsel h	as reviewed th to be proper, a	ls s to form.	Total Fiscal Imp	act & Source of	Funds:
Mun S.K	uput	12/14/10) Aner	i cok	<u>K 688</u>
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Reviewed by Pur	chasing for co	mpliance:	Firlance Director		/2//4// Date
11100	n'in .	1	<u></u>		

White -General Services

Instructions: Departments are required to complete to General Services. Review the County Policy and Review Process. 10-044	e this form and send with two copies of the contract d Procedure Manual for specifics on the Contract
New Contract: Or,	_ or,
(check box if yes) Amendment to Contract #	" Addendum to Contract #
	•
Human Services Sara Moor	<u>x8431</u>
Originating Department Co	entact Person Phone
Contract with: Beloit Meals on Wheels, Inc (Name of entity)	<u> </u>
Contract Period: Start Date: 01/01/10	Expiration Date: 12/31/10
Contract Amount: Rate x number of approved clients	;
Expenditure/ Revenue Account Numbers (provide 9-digit obje 36-3666-0000-64604 Long Term Support 36-3668-0000-64604 Community Options 36-3674-0000-64604 COP Waiver 36-3678-0000-64604 Community Integration	Program (COP) on Program (CIP-II)
36-3706-0000-64604 Community Support Executive Summary: Rock County Human Services Department has devel supportive home care services. This is one of sever may choose for such services.	eloped contracts with several providers for
NEW 10-044 AMENDMENT TO:	ADDENDUM TO:
ADMINISTRATION CONTRACT REVIEW	NO. SS671
Contract between Rock Co. Human Services Dept. a	and Beloit Meals on Wheels Inc. for supportive
home care services for period of 1/1/10 - 12/31/ Contract Amount: Rate x no. of approved clients.	/10.
Corporation Counsel has reviewed this Dodument and finds it to be proper, as to form. Signature (Date D	Total Fiscal Impact & Source of Funds:
Reviewed by Purchasing for compliance:	Finance Director Date

White –General Services Yellow- Originating Department

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process.

(check box if yes)	<u>11-013</u> or,		
,		Amendment to Contract #	Addendum to Contract #
Human Se	ervices	Sara Mooren	X8431
Originating I	Department	Contact Person	Phone
Contract with:	CSCo		
(Name of entity)			
Contract Period:	Start Date:	: <u>1/1/2011</u> Ex	piration Date: <u>12/31/2012</u>
Contract Amount:	Rate x number	of approved clients	
		• •	
Expenditure/ Rever		nbers (provide 9-digit object : Term Support	codes):
36-3668-000	•	munity Options Program (C0)P)
36-3674-000		Waiver	,
36-3675-000		munity Relocation Initiative	
36-3678-000		munity Integration Program (CIP-II)
36-3706-000		munity Support Program (CS	
Executive Summary		rtment has developed contra	
Rock County Huma supportive home ca may choose for suc	in Services Depa ire services. This ih services.	s is one of several providers	acts with several providers for from which Rock County clients
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Pink - County Clerk

11-027 New Contract (check box if yes)	·	or,		•
(Check box ii yes)	Amendment to Contract #	₹#	Addendum to Contract#	
Human Services Department	Sa	a Mooren	x8431	
Originating Departmen	: 0	ontact Person	Phone	,
Contract with: <u>Edgerton Coa</u> (Name of entity)	ition for a Healthy Communit	у		
Contract Period: Start D	ate:1/01/2011 .	Expi	ration Date: <u>12/31/2011</u>	
Contract Amount: \$7,580				
Expenditure/ Revenue Account (provide 9-digit object codes)	Numbers: <u>36-3634-0000-460</u>	002 Other Grant	s and Contracts	
Executive Summary: This mem	orandum of understanding p	rovides approxima	ately 4 hours a week of support	
by the Prevention Specialist to	the Edgerton Coalition for a	Healthy Commu	nity (ECHC). The Prevention	
Specialist will provide technical			with helping to build capacity	
and sustainability for ECHC. EC	HC will compensate RCHSD	for this time.		
Were Bids or Quotations	s Solicited?		⊠ No	
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ADMINISTRATION CONTRACT RE	EVIEW ,	NO	58674	
Contract between Rock Co. Hu				
for Memorandum of Understand the Edgerton Coalition for a	ing to provide 4-hrs. Health Community for	/wk of suppor	t the the Prevention Sp 1/11 - 12/31/11.	ecialist to
Contract Amount: \$7,580.00 Corporation Counsel has reviewed th	s	Total Fiscal Impa	ct & Source of Funds:	
Pocument and finds it to be proper, a		Included in	1201 Refer a. an	udel
Signature /	7 () () Date	Rene 11	nd solliet when	e asto
X Reviewed by Purchasing for co.) ' '	Lan	L 12/18	10
adi R Millia	12/7/10	Finance Director	Date	
-0		Yellow	–General Services - Originating Department County Clerk	

11-054 New Contract. 🕅 or.		or ·	
New Contract		or,	
	Amendment to Contra	ct #	Addendum to Contract #
Human Services Department		Sara Mooren	x8431
Originating Departme	nt	Contact Person	Phone
Contract with: <u>HealthNet of</u> (Name of entity)	Janesville, INC.		
Contract Period: Start	Date:1/1/2011	Expi	ration Date: <u>12/31/2011</u>
Contract Amount: \$57,867(09	% from 2010)		
Expenditure/ Revenue Accour	t Numbers:		
(provide 9-digit object codes)			
36-3624-0000-62119	nterim Assistance		
these services, but rather services. But rather services, but rather ser	es as a partial offset to the	eir operating costs. The swithout children, who	ontracts is not intended to cover the full cost of the intent is to provide services to the former of are unable to obtain medical care through
ADMINISTRATION CONTRACT R			SS690
Contract between Rock Co. 1	uman Services Dept	and HealthNet o	f Janesville Inc. to provice free
Contract Amount: \$57,867.00	ocumentation servi	ces for period or	1/1/11 - 12/31/11.
Corporation Counsel has reviewed to Document and finds it to be proper,		Total Fiscal Impac	ct & Source of Funds:
Reviewed by Purchasing for co	ompliance:	Finance Director	12/1/20/10
Jods & Welles	1713/10		-General Services - Originating Department

Instructions: Departments are required to complet the contract to General Services. Review the Cou specifics on the Contract Review Process.	
New Contract: 11-012 or, (check box if yes) Amendment	or, ————————————————————————————————————
Human Services Sara Mo Originating Department Contact	poren X8431 t Person Phone
Contract with: Independent Disability Services (Name of entity)	
Contract Period: Start Date: 1/1/2011	Expiration Date: <u>12/31/2012</u> .
Contract Amount: Rate x number of approved clie	ents
Expenditure/ Revenue Account Numbers (provide 9 36-3666-0000-64604 Long Term Support	
36-3668-0000-64604 Community Options	
36-3674-0000-64604 COP Waiver	· · · · · · · · · · · · · · · · · · ·
36-3675-0000-64604 Community Relocat	ion Initiative
36-3678-0000-64604 Community Integrati	ion Program (CIP-II)
36-3706-0000-64604 Community Support	Program (CSP)
Executive Summary: Rock County Human Services Department has dev supportive home care services. This is one of seve may choose for such services.	
	ানাজনক্ষেত্ৰকৰ বিষয়ে সাজুনিকৰ বিশেষকৰিছিল প্ৰস্থানকৰিছি স্থায় উত্তৰ্গনক নাৰ্ক, কৰি চলক্ষিকাৰীক কোনে একেছে একৰ সংগ্ৰাম
EW	ADDENDUM TO:
MINISTRATION CONTRACT REVIEW	NO. SS665
ntract between Rock Co. Human Services Dept. a	nd Independent Disability Services for Suppor-
ve Home Care Services for period of 1/1/11 - 1:	2/31/12.
reporation Counsel has reviewed this cument and finds it to be proper, as to form.	Total Fiscal Impact & Source of Funds:
nature Date	12/9/10
Reviewed by Purchasing for compliance:	Finance Director Date
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White -General Services Yellow- Originating Department

Instructions: Departments are req the contract to General Services. specifics on the Contract Review I	Review the County Policy and	nd send with two copies of I Procedure Manual for
New Contract: 11-040 or, (check box if yes)	Amendment to Contract #	or, ————————————————————————————————————
Human Services Originating Department	Sara Mooren Contact Person	X8431 Phone
Contract with: Janesville Meals (Name of entity)	on Wheels	
Contract Period: Start Date	e: <u>1/1/2011</u> Ex	piration Date: <u>12/31/2012</u>
Contract Amount: Rate x number	of approved clients	
Expenditure/ Revenue Account Nui 36-3666-0000-64604 Lond	mbers (provide 9-digit object og g Term Support	codes):
•	nmunity Options Program (CC)P)
	P Waiver	• ,
	nmunity Integration Program (nmunity Support Program (CS	
Executive Summary: Rock County Human Services Depa supportive home care services. Thi may choose for such services.	artment has developed contra s is one of several providers	cts with several providers for from which Rock County clients
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NEW X 11-027 AMENDMENT TO:	ADDE	NDUM TO:
ADMINISTRATION CONTRACT REVIEW	NO	SS669
Contract between Rock Co. Human Se home care services for period of 1 Contract Amount: Rate x no. of app	/1/11 - 12/31/12.	e Meals on Wheels for supportive
Gorporation Counsel has reviewed this Document and finds it to be proper, as to form. Signature	7 10 10 Total Fiscal Im	pact & Source of Funds: 1 int for samuelle 50'5 2011 ludges
Reviewed by Purchasing for compliance	Firiance Director	Date
V	Yel	ite –General Services low- Originating Department <- County Clerk

Instructions: Departments are required to complete the contract to General Services. Review the Courspecifics on the Contract Review Process.	
New Contract: 11-048 or, (check box if yes) Amendment	or, ————————————————————————————————————
Human Services Sara Mo Originating Department Contact	Person X8431 Phone
Contract with: Kandu Industries, Inc. (Name of entity)	:
Contract Period: Start Date: 1/1/2011	Expiration Date: <u>12/31/2012</u>
Contract Amount: Rate x number of approved clie	ents
36-3706-0000-64604 Community Support	Program (COP)
Executive Summary: Rock County Human Services Department has dev prevocational, and supported employment services vocational barriers.	for persons with disabilities and other
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EW X 11-048 AMENDMENT TO:	ADDENDUM TO:
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ontract between Rock Co. Human Services Dept. a revocational and supported employment services ocational barriers. Contract Amount: Rate x no	for persons with disabilities and other
proporation Counsel has reviewed this occument and finds it to be proper, as to form. Why	Sufficient funds are avalabilin HSD's 2011 Suly +
Reviewed by Purchasing for compliance: Asst. 1 Aug. R. Mulles 12/9/10	Finafice Director Date
V	White –General Services Yellow- Originating Department Pink - County Clerk

Addendum to Contract #

Phone

Contract Review Cover Sheet

Lutheran Social Services of Wisconsin and Upper Michigan, Inc.

Amendment to Contract #

Start Date: 01/01/11

New Contract:

Contract Period:

Human Services

11-014

X

Originating Department

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process.

Sara Mooren

Contact Person

Expiration Date: 12/31/11

				4
Contract Amount \$ Based upon to	ne number of referrals, tir	mes the contracted rate).	
: Expenditure/ Revenue Account Num (provide 9-digit object codes)	bers:			
36-3692-0000-62119	IV Drug	Standard AODA Outpat		207 00/
36-3700-0000-62119 36-3704-0000-62119	AODA Block Grant IDP	Individual Counseling Urinalysis	\$25.00/Hour \$30.00/Hour \$10.00/Each	+20.0%
Rock County Human Services Program funds to purchase AO available for eligible clients to o limits of available Federal, State	DA treatment service hoose from. AODA	es. This provider is treatment services	one of ma	any providers ed within the
EW [X 11-014 AMENDMENT]	FO:	ADDENDUM'	то:	
	r	, , , , , , , , , , , , , , , , , , , ,		
DMINISTRATION CONTRACT REVIE	М	NO5866	56	G TIT C TIME DET
DMINISTRATION CONTRACT REVIES ontract between Rock Co. Human of AODA Treatment services for ontract Amount: Rate x no. of	W Services Dept. and provided the provided to the provided of 1/1/11	NO. SS60	56	s of WI & Upper MI
ontract between Rock Co. Human ic AODA Treatment services for intract Amount: Rate x no. of	W Services Dept. and period of 1/1/11 approved clients.	NO. SS60	Services	
intract between Rock Co. Human	Services Dept. and period of 1/1/11 sporoved clients.	NOSS66 Ind Lutheran Social 12/31/11,	Services	

Instructions: Departments are requirented the contract to General Services. Respectifies on the Contract Review Pr	eview the County Policy ar	
New Contract: 11-042 or, (check box if yes)	Amendment to Contract	or, # Addendum to Contract #
	Í4	
Human Services Originating Department	Sara Mooren Contact Person	X8431 Phone
Contract with: Merry Maids (Name of entity)		
Contract Period: Start Date:	<u>1/1/2011</u> E	xpiration Date: <u>12/31/2012</u>
Contract Amount: Rate x number of	f approved clients	
Expenditure/ Revenue Account Num 36-3666-0000-64604 Long	oers (provide 9-digit objec Term Support	t codes):
	nunity Options Program (C	OP)
36-3674-0000-64604 COP	Naiver	
	nunity Integration Program nunity Support Program (C	
Executive Summary: Rock County Human Services Depar supportive home care services. This may choose for such services.	is one of several providers	s from which Rock County clients
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NEW 🗵 11-042 AMENDMENT TO:	ADD	ENDUM TO:
ADMINISTRATION CONTRACT REVIEW	NO.	
Contract between Rock Co. Human Services for period of 1/1/11 - 12/2 Contract Amount: Rate x no. of appre	31/12.	aids for supportive nome care
Corporation Counsel has reviewed this Document and finds it to be proper, as to form. Leafurth 12 Signature	lake Silvier	mpact & Source of Funds: Furbar avaloble 10's 2011 below
Reviewed by Purchasing for compliance:	Assi Finance Direct	or Date
godi & Milles 12/91	•	White —General Services fellow- Originating Department Pink - County Clerk

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process.

New Contract: (check box if yes)	□ or,	09-056 (10993)	•	or,		J
(ontook box ii yoo)		Amendment to Co	ntract#		Addendum to Contract #	
Human Services I	epartment	· · · · · · · · · · · · · · · · · · ·	Sara Moor	en	x8431	
Originatin) Department		Contact I	Person	Phone	
Contract with: P	ro Tech Moni	toring Inc.				
Contract Period:	Start Da	ate: <u>01/01/2009</u>		Expi	ration Date: <u>12/31/2011</u>	
Contract Amount:	Based on n	umber of units activ	ated and numbe	r of servic	e days:	
Ä	imart One P active assive	iece (WMTD)		ce 50/Day 50/Day		
Ā	mart Two Pi ctive assive	ece (MTD)		<u>ce</u> 95/Day 50/Day		
year. This contract The initial term of the	s for active a contract wa	nd passive electroni s for two years with	c monitoring of j an option to ren	uvenile of ew with a	ch Monitoring Inc for one additior fenders who are on supervision negotiated price increase prior to nird year, the service will be re-bio	
					ring was the successful proposer	•
w Ø		ENT TO: 10993	09-056	ADDEN	NDUM TO:	in andt Children
MINISTRATION CO	ONTRACT R	EVIEW		NO	కో 8867 భ	
endment to cont tend contract po ntract Amount:	eriod one	additional year	for period	of 1/1/	ind Pro Tech Monitoring I 09 - 12/31/11. service days.	nc. to
rporation Counsel had been countried to the countried to			Total	Fiscal Imp	act & Source of Funds:	2
Reviewed by Pur	chasing for co	ompliance:	Financ	e Dirèctor	Date	T/K
and # 2N	9.0%					

White -- General Services

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process.

New Contract: 11-043	or,	OR	
· 		nt to Contract#	Addendum to Contract #
Human Services		Sara Mooren	X8431
Originating Department		Contact Person	Phone
Contract with: Rock Valley C	Community Progra	ms.	
Contract Period. Start Date	e: <u>01/01/11</u>	Expiration Date:	12/31/11
Contract Amount: \$ Based upon	the number of ref	errals, times the contracted	rate.
Expenditure/ Revenue Account Nui (provide 9-digit object codes)	mbers:	Standard AODA Outp	
,		Group Counseling Individual Counseling	\$25.00/Hour +25.0% \$30.00/Hour +20.0%
36-3692-0000-62119	IV Drug	Urinalysis	\$10.00/Each +0.0%
36-3700-0000-62119	AODA Block	Grant	
36-3704-0000-62119	IDP		
limits of available Federal, Sta		venues. Waiting lists a ∕es ⊠	are established if necessary.
	A salametrical samilar 186 and one	er er en i de en de de en	ki sasasa paga ngaga ata pang panggang ng mang pangan tanihat, makant itu. Mang mbanda mat bidambar s
NEW AMENDMEN	Г ТО:	ADDENI	DUM TO:
ADMINISTRATION CONTRACT REV	i i i IEW	NO.	SS688
Contract between Rock Co. Hum	an Services D	ept. and Rock Valley	
Treatment services for period contract Amount: Rate x no. o	of 1/1/11 - 12	2/31/11.	
Corporation Counsel has reviewed this Document and finds it to be proper, as t		Total Fiscal Impac	t & Source of Funds:
Document and finds it to be proper, as to	o form.	Sufficient	Linds Balblein
Signature () Kingditude	Date	450's Don	1. Confessor
/		124	Intella
Reviewed by Purchasing for comp	oliance:	Finance-Director	Date
Jodi & Milles	14/13/10	-	
			General Services Originating Department

Pink - County Clerk

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process. New Contract: 11-041 or. Amendment to Contract # Addendum to Contract # **Human Services** Sara Mooren Originating Department Contact Person Phone Contract with: Rock Valley Community Programs. Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/11 Contract Amount: \$ 306,435 Expenditure/Revenue Account Numbers: (provide 9-digit object codes) 36-3696-0000-42100 Treatment Alternative Program - Federal Aid 36-3696-0000-62119 Treatment Alternative Program - Other Contracted Services **Executive Summary:** This contract is for the provision of the Treatment Alternative Program, which has historically been administered by Rock Valley Community Programs. The Treatment Alternative Program serves as an alternative to prison for a Rock County citizens who are involved in the criminal justice system either as a defendant or a party to a diversion agreement; or a person who is or has previously been drug dependent. Were Bids or Quotations Solicited? ADDENDUM TO: ADMINISTRATION CONTRACT REVIEW NO. SS670 between Rock Co. Human Services Dept. and Rock Valley Community Programs for the Treatment Alternative Program for period of 1/1/11 - 12/31/11. Contract Amount: \$306.435.00 Corporation Counsel has reviewed this Total Fiscal Impact & Source of Funds: Document and finds it to be proper, as to form.

Reviewed by Purchasing for compliance

White —General Services Yellow- Originating Department Pink - County Clerk

Instructions: Departments are required to complete this form and send with two copies of the contract to General Services. Review the County Policy and Procedure Manual for specifics on the Contract Review Process.

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((cneck	box if yes)			Amendme	ent to Contr	act#		Ac	idendum i	to Contra	act#		
<u>. I</u>	Human	Services I	Depar	ment	-		Sara Mo	oren		X	8431			
		Originatin	g Dep	artment			Contac	ct Person			Phone	e		
-		ot with: Sof entity)	Sebast	ian Mend	dez				·····		··· ••································			
C	ontrac	t Period:		Start Da	te: <u>1/0</u>	1/2011	-	Ex	piratio	n Date: <u>1</u>	2/31/201	11		
C	ontrac	t Amount	Rate	x numbe	r of approv	ed clients								
E	xpendi	iture/ Reve	nue A	ccount N	lumbers:				 ;					
		(provide 9-	digit c	bject co	des)									
		36-3634-0	000-62	2503 Chi	ld Protectiv	ve Services	;							
	;	36-3646-00	000-62	2503 Juv	enile Justic	ce Services	;			*				
	;	36-3689 - 00	000-62	2503 Cris	sis Interven	ntion								
	;	36-3690 -0 0	00-62	503 Mer	ntal Health	/AODA								
	3	36-3704-00	00-62	503 Into	xicated Dri	iver Progra	m							
	3	36-3706-00	00-62	503 Con	nmunity Su	ipport Prog	ram							
Ex	ecutive	e Summan	/: Roc	k County	/ Human S	ervices De	nartment ha	s develon	ed cor	ntracts wif	h severa	l provid	ers for	
						al providers							·-	
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NĘW	X	11-617	AM	ENDME	NT TO:	·		ADDE	NDUI	и то:				
ADMI	NISTR	ATION CO	ONTR	ACT RE	VIEW ,			NO	SS	663				
							t. and S	<u>ebastian</u>	Men	dez to	provide	inte	rpretation	
		for péri Amount:				1/11. ved_clie	nts	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			:	,	
Corpo Docum Signatu	ment ar	Counsel hand finds it t	s revi	ewed this roper, as	s to form.	2/8/10 Date	Tota	office A	pact &	Source of	f Funds:	2/9/	lible To	
M I	^	ved by Pur	- C - C		npliance		Fina	nce Director	n.		<u> </u>	Date		

White –General Services Yellow- Originating Department Pink – County Clerk

(check have it was)		.
(check box if yes)	mendment to Contract #	or,
	· · · · · · · · · · · · · · · · · · ·	Addendum to Contract #
Human Services		•
Originating Department	Sara Mooren Contact Person	X8431
		Phone
Contract with: Swifthaven Community A. (Name of entity)	ssisted Living -Edgerton	
Contract Period: Start Date: 01/01/11	1 Expiration Date	: <u>12/31/12</u>
Contract Amount. Rate x number of appr		
Expenditure/ Revenue Account Numbers (provice 36-3666-0000-64604 Long Towns	do O diatractica	
LUIN FEI	m Support	
30-3668-0000-64604 Commun	ity Options Program (CO	- ,
36-3674-0000-64604 COP Wai	ivor	7)
36-3678-0000-64604 Communi		
26 0700 0000	ity Integration Program (C	IP-II)
South Community	ity Support Program (CSF)
Executive Summary: Rock County Human Services Department Community Based Residential Facility ser	nt has developed contract rvices. This is one of seve	s with several providers for
Rock County Human Services Departmer Community Based Residential Facility ser County clients may choose for such services.	Ces.	eral providers from which Rock
Rock County Human Services Departmer Community Based Residential Facility ser County clients may choose for such service	Ces.	eral providers from which Rock
Rock County Human Services Department Community Based Residential Facility ser County clients may choose for such services W 11-049 AMENDMENT TO:	ADDEN	DUM TO: SS681
Rock County Human Services Department Community Based Residential Facility ser County clients may choose for such services W I 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW attract between Rock Co. Human Services	ADDEN NO s Dept. and Swifthayen	DUM TO: SS681 Community Assisted Living-
Rock County Human Services Departmer Community Based Residential Facility ser County clients may choose for such services W I 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW ntract between Rock Co. Human Services gerton for Community Based Residential	ADDEN NO B Dept. and Swifthaven 1 Facility services for	DUM TO: SS681 Community Assisted Living-
Rock County Human Services Departmer Community Based Residential Facility ser County clients may choose for such services. W I 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW ntract between Rock Co. Human Services gerton for Community Based Residential attract Amount: Rate x no. of approved	ADDEN NO. S Dept. and Swifthaven 1 Facility services for clients.	DUM TO: SS681 Community Assisted Living-
Rock County Human Services Department Community Based Residential Facility services County clients may choose for such services. W I 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW Intract between Rock Co. Human Services gerton for Community Based Residential attract Amount: Rate x no. of approved	ADDEN NO. S Dept. and Swifthaven 1 Facility services for clients.	OUM TO: SS681 Community Assisted Living- period of 1/1/11 - 12/31/12.
Rock County Human Services Departmer Community Based Residential Facility ser County clients may choose for such services. W 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW Intract between Rock Co. Human Services gerton for Community Based Residential intract Amount: Rate x no. of approved poration Counsel has reviewed this cument and finds it to be proper, as to form. L. L	ADDENI NO s Dept. and Swifthaven 1 Facility services for clients. Total Fiscal Impact	SS681 Community Assisted Living- period of 1/1/11 - 12/31/12. ct & Source of Funds:
Rock County Human Services Departmer Community Based Residential Facility ser County clients may choose for such services. W I 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW ntract between Rock Co. Human Services gerton for Community Based Residential attract Amount: Rate x no. of approved	ADDENI NO. S Dept. and Swifthaven 1 Facility services for clients. Total Fiscal Impa	SS681 Community Assisted Living- period of 1/1/11 - 12/31/12.
Rock County Human Services Department Community Based Residential Facility services County clients may choose for such services. W 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW Intract between Rock Co. Human Services gerton for Community Based Residential intract Amount: Rate x no. of approved poration Counsel has reviewed this cument and finds it to be proper, as to form. Amount 12 and 12 and 12 and 13 and 14 and 14 and 15 and 15 and 16	ADDENI NO. S Dept. and Swifthaven 1 Facility services for clients. Total Fiscal Impart Sofficient ASD'S	SS681 Community Assisted Living- period of 1/1/11 - 12/31/12. ct & Source of Funds:
Rock County Human Services Departmer Community Based Residential Facility ser County clients may choose for such services. W 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW Intract between Rock Co. Human Services gerton for Community Based Residential intract Amount: Rate x no. of approved poration Counsel has reviewed this cument and finds it to be proper, as to form. L. L	ADDENI NO s Dept. and Swifthaven 1 Facility services for clients. Total Fiscal Impact	SS681 Community Assisted Living- period of 1/1/11 - 12/31/12. St& Source of Funds: Finds on any laboration of the lipit.
Rock County Human Services Department Community Based Residential Facility services County clients may choose for such services. W 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW Intract between Rock Co. Human Services gerton for Community Based Residential intract Amount: Rate x no. of approved poration Counsel has reviewed this cument and finds it to be proper, as to form. Amount 12 and 12 and 12 and 13 and 14 and 14 and 15 and 15 and 16	ADDENI NO. S Dept. and Swifthaven 1 Facility services for clients. Total Fiscal Impart Sofficient ASD'S	SS681 Community Assisted Living- period of 1/1/11 - 12/31/12. Sta Source of Funds: Source of Funds: Source of Funds:
Rock County Human Services Department Community Based Residential Facility services County clients may choose for such services. W 11-049 AMENDMENT TO: MINISTRATION CONTRACT REVIEW Intract between Rock Co. Human Services gerton for Community Based Residential intract Amount: Rate x no. of approved poration Counsel has reviewed this cument and finds it to be proper, as to form. Amount 12 and 12 and 12 and 13 and 14 and 14 and 15 and 15 and 16	ADDENI NO. S Dept. and Swifthaven 1 Facility services for clients. Total Fiscal Impariant AS D'S ASSA Finance Diffector White-	SS681 Community Assisted Living- period of 1/1/11 - 12/31/12. Sta Source of Funds: Source of Funds: Source of Funds:

Instructions: Departments are required to complete the contract to General Services. Review the Courspecifics on the Contract Review Process.	
New Contract: 11-015 or, (check box if yes) Amendment to	or, ————————————————————————————————————
Human Services Sara Mo Originating Department Contact	Person X8431 Phone
Contract with: TGPoof LLC dba. Anytime Catering (Name of entity)	
Contract Period: Start Date: 1/1/2011	Expiration Date: <u>12/31/2012</u>
Contract Amount: Rate x number of approved clie	ents
Expenditure/ Revenue Account Numbers (provide S 36-3666-0000-64604 Long Term Support 36-3668-0000-64604 Community Options 36-3674-0000-64604 COP Waiver 36-3678-0000-64604 Community Integrati 36-3706-0000-64604 Community Support Executive Summary: Rock County Human Services Department has developed to the supportive home care services. This is one of sevel may choose for such services.	Program (COP) on Program (CIP-II) Program (CSP) eloped contracts with several providers for
EW II-015 AMENDMENT TO:	ADDENDUM TO:
DMINISTRATION CONTRACT REVIEW	NO. <u>\$5667</u>
ontract between Rock Co. Human Services Dept. a apportive Home Care Services for period of 1/1/ ontract Amount: Rate x no. of approved clients.	$\frac{11 - 12/31/12}{11 - 12/31/12}$
proporation Counsel has reviewed this occument and finds it to be proper, as to form.	Total Fiscal Impact & Source of Funds: Come Comp Comp
	WhiteGeneral Services Yellow- Originating Department Pink - County Clerk

11-028				
New Contract: 🔀 (check box if yes)	or,		c	or,
(check box ii yes)		Amendment to Contract	: #	Addendum to Contract#
Human Services Depa	rtment		Sara Mooren	x8431
Originating De	partmen	t	Contact Person	Phone
Contract with: Partn (Name of entity)	ers in Pro	evention Rock County, Inc	<u>.</u>	
Contract Period:	Start D	ate:1/01/2011	_ E	xpiration Date: <u>12/31/2011</u>
Contract Amount: \$9,8	63	,		
Expenditure/ Revenue (provide 9-digit object o		Numbers: <u>36-3634-0000-</u>	46002 Other Gra	ants and Contracts
•				imately 6 hours a week of support Specialist will provide technical
				ting. Partners in Prevention will
compensate RCHSD fo			in and grant with	ung. 1 articis in 1 revention win
compensate Kerreb to	r uno um	<u>o.</u>		
Were Bids or Q	uotations	S Solicited?	S	No.
A CONTRACTOR OF THE PARTY OF TH	4.0		ADDE	NDUM TO:
NEW 11-028 AM	ENDME	NT TO:	ADD	
ADMINISTRATION CONTR	ACT RE	VIEW	NO	
			and Partners	in Prevention Rock Co. Ind for by the prevention specialist to
Hemorandum of Underst	inding	to provide 6-hours/	wk of support 2/31/11. Cont	by the prevention specialist to ract Amount: \$9,863.00
			Total Fiscal Im	npact & Source of Funds:
Corporation Counsel has rev Document and finds it to be	proper, a	s to form.	Kul	-CA 663-
Jus S. Ford	T.K	12/4/10 Date	Renows	Red ted to affact WAGE COSTS
Signature)	ing for co	ompliance	Finance Directo	7 /10//0 or Oate
Reviewed by Purchas	ng ioi ce ng) 12/1/10	t Mario Pugara	
Lyou of Mu	XIII	1-1-1110	W	Vhite ~General Services ellow- Originating Department
			D:	rink - County Clerk

New Contract: X (11-050) or,	or,	
(check box if yes) Amendment to Con	ntract# Addendum to Contract#	
Human Services	Sara Mooren 8431	
Originating Department	Contact Person Phone	
Contract with: The River of Life United Methodi (Name of entity)	st Church	
Contract Period: Start Date 1/1/2011	Expiration Date: 12/31/2011	
: Contract Amount: <u>\$490 per month (\$5,880 total for th</u>	ne contract period)	
Expenditure/ Revenue Account Numbers: 36-3646-0000-62119 JJS Other Contracted Services		
Executive Summary:		
Beloit owned by The River of Life United Methodist Ch Were Bids or Quotations Solicited?	es X No	
A MANAGEMENT COMPANY OF THE PROPERTY OF THE PR	THE PROPERTY OF THE PROPERTY O	in a second
IEW 118-050 AMENDMENT TO:	ADDENDUM TO:	-
DMINISTRATION CONTRACT REVIEW	NO. SS672	
Part Latrices Book Co Burgo Services Deni	r, and The River of Life United Methodist Churc	<u>h</u>
or Space Agreement allowing the Dept. to utilities of Programming for period of 1/1/11 -	ilige rooms of this facility for Juvenile Justi	ce -
orporation Counsel has reviewed this focument and finds it to be proper, as to form.	Total Fiscal Impact & Source of Funds:	
Reviewed by Purchasing for compliance	Finance Director Date	-
1 Design March	A CANADA A CANADA C	
All of Milles 11110	WhiteGeneral Services	

ROCK-COUNTY

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Requested byHuman_Services Department	SUPPLEMENTAL
Charmian Klyve Department Head	SUPPLEMENTAL APPROPRIATIONS - TRANSFERS
12/3/10 Date	Transfer No.

ACCOUNT # DESCRIPTION AMOUNT ACCOUNT # DESCRIPTION AMOUNT 36-3700-0000-68208 Allocated MH-AODA 50,000 36-3700-0000-62119 Other Contricted Syc 50,000		FROM		I		TO	
50,000 36-3700-0000-62119 Other Contrcted Svc	ACCOUNT #	DESCRIPTION	AMOUNT		ACCOUNT #	DESCRIPTION	NUOMA
	36-3700-0000-68208	Allocated MH-AODA	50,000		- 1	Other Contrcted Svc	50,000
	· ·						<u></u>

FISCAL NOTE:

for the requested transfer. Sufficient funds are available in the above object code

ADMINISTRATIVE NOTE:

Recommended.

REQUIRED APPROVAL:

Governing Committee

Ø.

Finance Committee

×

DATE

COMMITTEE CHAIR

TRANSFER REQUESTS

FINANCE DIMECTOR RECEIVED

RECEIVED
/o-90
DEC 6 2010

TO: FINANCE DIRECTOR

Human Services

Department

REQUESTED BY:

Department Head Signature

DATE: 12/3/2010

	FROM:	AMOUNT
IJ	ACCOUNT #: 36-3700-0000-68208 DESCRIPTION: Allocated MH-AODA	\$50,000.00
	CURRENT BALANCE: \$ \$ C , O SO 1 1 6 10 PROVIDED BY THE FINANCE DIRECTOR	
2)	ACCOUNT #: DESCRIPTION:	·
	CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR	
3)	ACCOUNT #: DESCRIPTION:	
	CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR	
4	ACCOUNT #: DESCRIPTION:	
	CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR	

				<u> </u>	<u> </u>
•					
	ACCOUNT #: DESCRIPTION:	ACCOUNT #: DESCRIPTION:	ACCOUNT #: DESCRIPTION:	ACCOUNT #: DESCRIPTION:	
				36-3700-0000-62119 Other Contracted Services	TO:
				\$50,000.00	AMOUNT

REASON FOR TRANSFER - BE SPECIFIC:

Other Contracted Services. These funds are needed for AODA contracted services. The Human Services Department is requesting a transfer of \$50,000 out of the AODA Block Grant Allocated MH/AODA line into

ROCK COUNTY HUMAN SERVICES DEPARTMENT DIRECTOR'S REPORT MONDAY, DECEMBER 20, 2010

HSD MANAGEMENT TEAM MEETING - December 7, 2010

CALL TO ORDER

AGENDA ADDITIONS

MINUTE MODIFICATIONS

DIVISION MANAGER CHECK-IN

ASSIGNMENTS

ISSUES FOR DISCUSSION AND RESOLUTION

- Budget
- Workgroup Updates
- Safety Committee
- Notification of Staff Changes
- Training Data Base
- Office Space Issues
- · Adult Family Home
- · Confidential Fax Usage
- Secure Email Deployment
- Inclement Weather

INFORMATION ITEMS

 HSD Board Agenda MEETING WRAP-UP

HSD MANAGEMENT TEAM MEETING - December 14, 2010

CALL TO ORDER

AGENDA ADDITIONS

MINUTE MODIFICATIONS

DIVISION MANAGER CHECK-IN

ASSIGNMENTS

ISSUES FOR DISCUSSION AND RESOLUTION

- Budget
- Workgroup Updates
- County Intranet Update and Discussion
- Staff Change Process
- Cell Phone Stipend Policy

INFORMATION ITEMS

 HSD Board Agenda MEETING WRAP-UP