

ROCK COUNTY BOARD OF HEALTH WEDNESDAY, JANUARY 09, 2019 <u>6:00 P.M.</u> PUBLIC HEALTH DEPARTMENT – 3328 N. U.S. HIGHWAY 51 JANESVILLE, WI 53545 (ACROSS FROM SPORTSMAN'S PARK)

<u>AGENDA</u>

- 1. Call to Order
- 2. Adopt Agenda
- 3. Approval of Minutes -(12/5/2018)
- 4. Citizen Participation
- 5. Appeal Of Sanitary Permit Application Denial Jerry and Jacqueline Colquhoun
- 6. New Business
 - A. Administrative Division
 - (1) Review of Payments
 - (2) Transfer of Funds over \$5,000
 - (3) Health Department Report
 - a. In the News
 - b. Surveillance
 - c. Community Events/Outreach
 - d. Budget
 - e. Personnel
 - B. AmeriCorps VISTA Project Opioids in Rock County
 - C. Infectious Disease Trends in Rock County
- 7. Communications and Announcements
- 8. Adjournment

Board Members who are unable to attend the Board of Health meeting, <u>please</u> contact Lou Peer (295-5210) or Jessica Turner at the Public Health Department (757-5440). Thank you.

The County of Rock will provide reasonable accommodations to people with disabilities. Please contact us at 608-757-5510 or e-mail <u>countyadmin@co.rock.wi.us</u> at least 48 hours prior to a public meeting to discuss any accommodations that may be necessary.

Rock County

COMMITTEE REVIEW REPORT

01/02/2019

FOR THE MONTH OF DECEMBER 2018

Account Number	Account Name	PO#	Check Date	Vendor Name	Inv/Enc Amt		
00-0000-0020-17000	PREPAID BUDGET I						
		P1802875	12/27/2018	POSTMASTER JANESVILLE	214.00		
· · · ·			STL-HEAL	TH DEPARTMENT PROG TOTAL	214.00		
I have reviewed the preceding payments in the total amount of \$214.00							
Date:		De	pt Head		, Andre Andre Market and Antonia Strategy and a specific strategy and a specific strategy and a specific strategy		

Committee Chair

Rock County

COMMITTEE REVIEW REPORT

01/02/2019

FOR THE MONTH OF DECEMBER 2018

Account Number	Account Name	PO#	Check Date	Vendor Name	Inv/Enc Amt
31-3000-0000-62119	OTHER SERVICES				
31-3000-0000-02113	OTTER SERVICES	P1800096	12/27/2018	LB MEDWASTE SERVICES	54.90
31-3000-0000-63100	OFC SUPP & EXP				01100
		P1801824	12/20/2018	US BANK	325.37
31-3000-0000-63101	POSTAGE				
		P1800109	12/13/2018	UNITED PARCEL SERVICE	85.42
31-3000-0000-64000	MEDICAL SUPPLIE	-	10/00/00/00		
		P1800091	12/20/2018	GLAXOSMITHKLINE PHARMACEUTICAL	401.50
		P1800102	12/13/2018	PAXVAX INC	1,233.75
		P1800106	12/20/2018	SANOFI PASTEUR INC	1,066.21
· ·		P1802794	12/27/2018	CARRICO AQUATICS RESOURCES INC	990.00
31-3000-0000-64010	LAB SUPPLIES				
		P1800089	12/13/2018	CULLIGAN WATER CONDITIONING IN	35,00
	• · · · ·	P1800100	12/27/2018	NORTH CENTRAL LABORATORIES OF	. 227.40
		P1801824	12/20/2018	US BANK	85.32
		P1802765	12/20/2018	ENVIRO SCIENCES ALPHA ENERGY I	74.80
31-3000-0000-64200	TRAINING EXP				
		P1801824	12/20/2018	US BANK	1,616.20
	•	P1802877	12/20/2018	HEALTH CARE EDUCATION AND TRAI	70.00
			HEAL	TH DEPARTMENT PROG TOTAL	6,265.87
31-3026-0000-63110	ADMIN.EXPENSE				
		P1801824	12/20/2018	US BANK	842,43
			PREPA	842.43	

COMMITTEE REVIEW REPORT

01/02/2019

FOR THE MONTH OF DECEMBER 2018

Account Number	Account Name	PO#	Check Date	Vendor Name		Inv/Enc Amt
I have reviewed the	preceding payments	in the tota	al amount of \$7 ,	108.30		
Date:		D	ept Head			
		Commit	ttee Chair	•		
	•					
					·	

Rock County Transfer Request - Over \$5,000

TO: FINANCE DIRECTOR

Date 12/13/2018

Transfer No. 18-100

Requested By Public Health

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Marie-Noel Sandoval

Department

Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 31-3000-0000-64000 Description: Medical Supplies Current Balance: \$47,623	\$8,200	Account #: 31-3000-0000-65103 Description: Public liability	\$8,200
Account #: Description: Current Balance:	• *	Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Funds are available from our Medical Supplies, Object Code # 64000, account due to decreased clinic visits as a result of the Affordable Care Act and our success with linking clients to a medical home and moving to a population health model.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Lack of awareness that this was an expense to budget for since the public health department purchases our own public liability. Assumption that the liability insurance we purchase for our clinics and staff was the only liability insurance expense we had.

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FISCAL NOTE:			ADMINISTRATIV	E NOTE:	
Sufficient funds are available for transfe		12/13/18	OK JAME	0/13/18	
REQUIRED APPROVAL	0	DATE		COMMITTEE CHAIR	
Governing Committee			· · ·		
Finance Committee	8- <u></u>			· · · · · · · · · · · · · · · · · · ·	

Distribution: **EMAIL** Sherry Oja and Susan Balog