



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**  
Wednesday, January 26, 2011 – 4:30 p.m.

**Rock County Health Care Center – 3<sup>rd</sup> Floor Conference Room, Janesville**

**AGENDA**

1. Call Meeting to Order
2. Approval of Agenda
3. Approval of Minutes of Human Services Board Meeting of January 12, 2011 \*
4. Citizen Participation
5. Holiday Committee Status Report – Ms. Day
6. Juvenile Justice Updates - Mr. Horozewski
7. Approval of Contracts, Transfers, and/or Encumbrances \* – Ms. Mooren
8. Approval of Bills – Mr. Zuehlke
9. Director's Report
  - W2 / ES Caseload
10. Committee Requests for Future Agenda Items
11. Next Meeting: Wednesday, February 9, 2011 at 4:30 p.m. at the Rock County Health Care Center, 3<sup>rd</sup> Floor Conference Room, Janesville, Wisconsin.
12. Adjourn

NOTE TO COMMITTEE MEMBERS: To ensure a quorum, please call the Administrative Secretary at 757-5271 if you are unable to attend the meeting.

\* Attachment    \*\* These items may be handed out at the meeting if not available for the mailing.

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# Contract Review Cover Sheet

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: **11-044** or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

Human Services Sara Mooren X8431  
Originating Department Contact Person Phone

Contract with: AlcoCare, Inc.  
(Name of entity)

Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/11

Contract Amount: \$ Based upon the number of referrals, times the contracted rate.

Expenditure/ Revenue Account Numbers:  
(provide 9-digit object codes)

36-3692-0000-62119 IV Drug  
36-3700-0000-62119 AODA Block Grant  
36-3704-0000-62119 IDP

Residential AODA Treatment	\$108.15/Day	+0%
Secondary Res. Treatment	\$ 60.77/Day	+0%
Urinalysis	\$ 10.00 each	+0%

### Executive Summary:

Rock County Human Services Department's Annual Budgets include Federal, State, and IDP Program funds to purchase AODA treatment services. This provider is one of many providers available for eligible clients to choose from. AODA treatment services are provided within the limits of available Federal, State, and IDP revenues. Waiting lists are established if necessary.

NEW  11-044 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. SS780

Contract between Rock Co. Human Services Dept. and AlcoCare Inc for AODA Treatment services for period of 1/1/11-- 12/31/11.  
Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
Jerome A. Long 1/10/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
Same as 778

Reviewed by Purchasing for compliance:  
Jodi R. Mullis 1/5/11

[Signature] 1-10-11  
Finance Director Date

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

# Contract Review Cover Sheet

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: 11-036 or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

\_\_\_\_\_  
Human Services  
Originating Department Sara Mooren  
Contact Person X8431  
Phone

Contract with: Azura Harbor Holdings, LLC  
(Name of entity)

Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/12

Contract Amount: Rate x number of approved clients

Monthly Rates		
Janesville	\$3,749.21	+0%
Beloit	\$3,749.20	+0%
Clinton	\$3,327.33	+0%
Stoughton	\$2,967.83	+0%

Expenditure/ Revenue Account Numbers (provide 9-digit object codes):

- 36-3666-0000-64604 Long Term Support
- 36-3668-0000-64604 Community Options Program (COP)
- 36-3674-0000-64604 COP Waiver
- 36-3678-0000-64604 Community Integration Program (CIP-II)
- 36-3706-0000-64604 Community Support Program (CSP)

### Executive Summary:

Rock County Human Services Department has developed contracts with several providers for Community Based Residential Facility services. This is one of several providers from which Rock County clients may choose for such services.

NEW  11-036 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

### ADMINISTRATION CONTRACT REVIEW

NO. 98779

Contract between Rock Co. Human Services Dept. and Azura Harbor Holdings LLC for Community Based Residential Facility services for period of 1/1/11 - 12/31/12.  
Contract Amount: Rate x no. of approved clients

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.

Signature

Date

[Signature] 11/10/11

### Total Fiscal Impact & Source of Funds:

Finance Director

Date

[Signature] 1-10-11

Reviewed by Purchasing for compliance:

[Signature] 1/5/11

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





Child Protective Services:

\$2,198,453	Foster homes, family group homes, treatment foster homes
498,532	Group homes
<u>1,103,546</u>	Residential Care Centers
\$3,800,531	Total

Juvenile Justice Services:

\$205,479	Foster homes, family group homes, treatment foster homes
284,452	Group homes
<u>736,607</u>	Residential Care Centers
\$1,226,538	Total

Were Bids or Quotations Solicited?  Yes  No

Covered by State Contract?  Yes  No

State Contract # \_\_\_\_\_

Contract will be signed by:  County Board Chair  
 Other? Who? Chair, Human Services Board

NEW:  11-019 AMENDMENT TO: \_\_\_\_\_

ADDENDUM TO: \_\_\_\_\_

**ADMINISTRATION CONTRACT REVIEW**

NO. SS822

Contract between Rock Co. Human Services Dept. and Children's Service Society of Wisconsin for Treatment Foster Care for period of 1/1/11 - 12/31/11.  
Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.

**Total Fiscal Impact & Source of Funds:**

*John J. Kuznetsov* 11/13/11  
 Signature Date

*Sufficient funds available*  
*in the 5015 2011 budget*  
*[Signature]* 1-13-11  
 Finance Director Date

Reviewed by Purchasing for compliance:  
*Jodi R. Mellis* 11/13/11

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



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# Contract Review Cover Sheet

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.

11-022

New Contract:  or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes)                      Amendment to Contract #                      Addendum to Contract #

Human Services Department                      Sara Mooren                      x8431  
Originating Department                      Contact Person                      Phone

Contract with: Community Care Resources, Inc.  
(Name of entity)

Contract Period:                      Start Date: 1/01/2011                      Expiration Date: 12/31/2011

Contract Amount: \$ Rate x number of approved clients

<u>SERVICE</u>	<u>RATE</u>	<u>UNIT</u>	<u>CHANGE FROM PRIOR YEAR</u>
Treatment Foster Care:			
Level I	\$2,500	Month	0%
* Level II	\$3,200	Month	0%
* Level III	\$3,950	Month	0%
* Specialized Group Care	\$4,100	Month	0%
* Respite (Low Complexity)	\$100	Day	0%
* Respite (Med. Complexity)	\$125	Day	0%
* Respite (High Complexity)	\$150	Day	0%
* Sexual Treatment Offender Program (STOP):			
Assessment	\$1,200	Each	0%
Re-Assessment	\$600	Each	0%
Full Program	\$975	Month	0%
Hourly Treatment	\$120	Hour	0%
Group Therapy Only:			
Sexual Offenders	\$450	Month	0%
Non-Sexual Offenders	\$450	Month	0%
Individual and Family			
Therapy Only	\$575	Month	0%
Biological Family Reunification/	\$120	Hour	0%
Sibling Reparative Therapy			



Expenditure/ Revenue Account Numbers: 36-3638-0000-64604 Child Protective Services – Substitute Care  
36-3654-0000-64604 Juvenile Justice Services – Substitute Care

Executive Summary: Rock County Human Services Department has contracts with several substitute care providers. The number of children approved for placement at each facility will determine the actual amount of each contract. The 2011 County Adopted Budget includes the following funds for substitute care:

<u>Child Protective Services:</u>		<u>Juvenile Justice Services:</u>	
\$2,198,453	Foster homes, family group homes, treatment foster homes	\$206,479	Foster homes, family group homes, treatment foster homes
498,532	Group homes	284,452	Group homes
1,103,546	Residential Care Centers	736,607	Residential Care Centers
\$3,800,531	Total	\$1,226,538	Total

Were Bids or Quotations Solicited?  Yes  No

Covered by State Contract?  Yes  No

State Contract # \_\_\_\_\_

Contract will be signed by:  County Board Chair  
 Other? Who? Chair, Human Services Board

NEW  11-022 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_  
 NO. 88823

**ADMINISTRATION CONTRACT REVIEW**  
 Contract between Rock Co. Human Services Dept. and Community Care Resources Inc. for Treatment Foster Care for period of 1/1/11 - 12/31/11.  
 Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
Anthony S. Kuzak 1/13/11  
 Signature Date

**Total Fiscal Impact & Source of Funds:**  
Same as C. 88823  
 Finance Director Date 1-13-11

Reviewed by Purchasing for compliance:  
Jodi R. Miller 1/13/11

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



NEW  11-032 AMENDMENT TO: \_\_\_\_\_

ADDENDUM TO: \_\_\_\_\_

**ADMINISTRATION CONTRACT REVIEW**

NO. SS781

Contract between Rock Co. Human Services Dept and Family and Children's Center for Residential Care Center, Res. Youth Home and Treatment Foster Care Services for period of 1/1/11 - 12/31/11.  
Contract Amount: Rate x no. of approved clients

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
Jeanne O'Sullivan 1/10/10  
Signature Date

Total Fiscal Impact & Source of Funds:  
Same as 978  
[Signature] 1-10-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
Jodi K. Mellis 1/10/11

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

# Contract Review Cover Sheet

YU

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.

11-034

New Contract:  or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

Human Services Department Sara Mooren x8431  
Originating Department Contact Person Phone

Contract with: Family Services of Southern Wisconsin and Northern Illinois, Inc.  
(Name of entity)

Contract Period: Start Date: 1/01/2011 Expiration Date: 12/31/2011

Contract Amount: \$10,000 (same as 2010)

Expenditure/ Revenue Account Numbers: 36-3634-0000-64604 CPS Program Expense  
(provide 9-digit object codes)

Executive Summary: This contract with Family Services of Southern Wisconsin and Northern Illinois, Inc. provides funding towards operation of a Domestic Abuse Shelter in Beloit. Rock County Human Services Department has contracts with two Domestic Abuse Shelters in Rock County, one in Janesville and one in Beloit. The amount of the contract is not intended to cover the full cost of shelters, but rather is a partial offset to their operating costs.

NEW  11-034 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 88825

Contract between Rock Co. Human Services Dept. and Family Services of Southern Wisconsin and Northern Illinois Inc. for Domestic Abuse Shelter in Beloit for period of 1/1/11 - 12/31/11. Contract Amount: \$10,000.00

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
[Signature] 1/13/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
[Signature] 822

Reviewed by Purchasing for compliance:  
[Signature] 1/13/11

[Signature] 1-13-11  
Finance Director Date

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

# Contract Review Cover Sheet

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: \_\_\_\_\_ or, 11-012(SS665) or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

Human Services Sara Mooren X8431  
Originating Department Contact Person Phone

Contract with: Independent Disability Services  
(Name of entity)

Contract Period: Start Date: 1/1/2011 Expiration Date: 12/31/2012

Contract Amount: Rate x number of approved clients

Supportive Home Care	\$18.00	Hour
Representative Payee	\$37.00	Month
Background Checks	\$10.00	Query

Expenditure/ Revenue Account Numbers (provide 9-digit object codes):

36-3666-0000-64604	Long Term Support
36-3668-0000-64604	Community Options Program (COP)
36-3674-0000-64604	COP Waiver
36-3675-0000-64604	Community Relocation Initiative
36-3678-0000-64604	Community Integration Program (CIP-II)
36-3706-0000-64604	Community Support Program (CSP)

### Executive Summary:

The purpose of this amendment is to increase the charge for "Background Check" services from \$5.00 to \$10.00 in this contract. Other rates remain the same.

NEW  AMENDMENT TO: 11-012, 85665 ADDENDUM TO: \_\_\_\_\_

### ADMINISTRATION CONTRACT REVIEW

NO. 55816

Amendment to contract between Rock Co. Human Services Dept. and Independent Disability Services to increase the charge for "Background Check" services from \$5.00 to \$10.00 for period of 1/1/11 - 12/31/12.

Corporation Counsel has reviewed this document and finds it to be proper, as to form.

Signature

Date

### Total Fiscal Impact & Source of Funds:

Sufficient funds available in 45015201 budget

Finance Director

Date

Reviewed by Purchasing for compliance:

Jodi R. Miller 1/11/11

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

1/7

# Contract Review Cover Sheet

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: **11-080** or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

\_\_\_\_\_  
Human Services  
Originating Department

\_\_\_\_\_  
Sara Mooren  
Contact Person

\_\_\_\_\_  
X8431  
Phone

Contract with: Interim Healthcare of Rockford, Inc.  
(Name of entity)

Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/12

Contract Amount: Rate x number of approved clients

Home Health Aid	\$15.00	Hour	+0%
Companion/Homemaker	\$12.00	Hour	+0%

- Expenditure/ Revenue Account Numbers (provide 9-digit object codes):
- 36-3666-0000-64604 Long Term Support
  - 36-3668-0000-64604 Community Options Program (COP)
  - 36-3674-0000-64604 COP Waiver
  - 36-3678-0000-64604 Community Integration Program (CIP-II)
  - 36-3706-0000-64604 Community Support Program (CSP)

Executive Summary:  
Rock County Human Services Department has developed contracts with several providers for supportive home care services. This is one of several providers from which Rock County clients may choose for such services.

NEW  11-080 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 88817

Contract between Rock Co. Human Services Dept. and Interim Healthcare of Rockford Inc for Supportive Home Care Services for period of 1/1/11 - 12/31/12.  
Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
[Signature] 1/12/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
[Signature] 8/16  
[Signature] 1-12-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
[Signature] Yuhui

12/30

# Contract Review Cover Sheet

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:  or, (97-55) 85280 or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

Human Services Sara Mooren 8431  
Originating Department Contact Person Phone

Contract with: Jefferson County Human Service Department  
(Name of entity)

Contract Period: Start Date: 01/01/2011 Expiration Date: 12/31/2011

Contract Amount: \$165 per day (same as 2010)

Expenditure/ Revenue Account Numbers:  
36-3664-0000-45500

Executive Summary:

This agreement was initiated by the Jefferson County Human Services Department for the purchase of beds at the Juvenile Detention Center (JDC). The Rock County Human Services Department charges all counties the same rate (\$165 per day) for placements at the Detention Center. The total amount of revenue depends on how many out-of-county youth are placed at JDC.

Were Bids or Quotations Solicited?  Yes  No

NEW  AMENDMENT TO: 97-55, 85286 ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 83762

Amendment to contract between Rock Co. Human Services Dept. and Jefferson County Human Service Dept. to extend contract for purchase of beds at the Juvenile Detention Center for period of 1/1/11 - 12/31/11. Contract Amount: \$165/per day

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
Jerome A. Jones 1/10/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
Revenues Credited to HSD -  
JDC's 2011 Budget  
[Signature] 1-10-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
Jodi Miller 1/5/11

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

114

# Contract Review Cover Sheet

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: **11-089** or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

\_\_\_\_\_  
Human Services Originating Department Sara Mooren Contact Person X8431 Phone

Contract with: Parris Enterprises, Inc. dba Comfort Keepers.  
(Name of entity)

Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/12

Contract Amount: Rate x number of approved clients

Service	Rate
Supportive Home Care 2-20 Hours per Week	\$15.84 Hour +0%
Supportive Home Care 21-31 Hours per Week	\$15.29 Hour +0%
Supportive Home Care 32-39 Hours per Week	\$14.74 Hour +0%
Supportive Home Care 40+ Hours per Week	\$13.65 Hour +0%

Expenditure/ Revenue Account Numbers (provide 9-digit object codes):

- 36-3666-0000-64604 Long Term Support
- 36-3668-0000-64604 Community Options Program (COP)
- 36-3674-0000-64604 COP Waiver
- 36-3678-0000-64604 Community Integration Program (CIP-II)
- 36-3706-0000-64604 Community Support Program (CSP)

Executive Summary:  
Rock County Human Services Department has developed contracts with several providers for supportive home care services. This is one of several providers from which Rock County

NEW  11-089 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 88843

Contract between Rock Co. Human Services Dept. and Parris Enterprises Inc dba Comfort Keepers for Supportive Home Care Services for period of 1/1/11 - 12/31/12.  
Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
[Signature] 1/18/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
[Signature] 88842  
[Signature] 1-18-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
[Signature] 1/18/11

White - General Services  
Yellow - Originating Department





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# Contract Review Cover Sheet

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: **11-081** or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

\_\_\_\_\_ Human Services \_\_\_\_\_ Sara Mooren \_\_\_\_\_ X8431  
Originating Department Contact Person Phone

Contract with: St. Elizabeth's Manor  
(Name of entity)

Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/12

Contract Amount: Rate x number of approved clients

Monthly Rates		
Standard	\$3,023.25	+0%
Mid size Double Occupancy	\$2,500.00	+0%

- Expenditure/ Revenue Account Numbers (provide 9-digit object codes):
- 36-3666-0000-64604 Long Term Support
  - 36-3668-0000-64604 Community Options Program (COP)
  - 36-3674-0000-64604 COP Waiver
  - 36-3678-0000-64604 Community Integration Program (CIP-II)
  - 36-3706-0000-64604 Community Support Program (CSP)

Executive Summary:  
Rock County Human Services Department has developed contracts with several providers for Community Based Residential Facility services. This is one of several providers from which Rock County clients may choose for such services.

Were Bids or Quotations Solicited?  Yes  No

NEW  11-081 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 83818

Contract between Rock Co., Human Services Dept. and St. Elizabeth's Manor for Community Based Residential Facility services for period of 1/1/11 - 12/31/12.  
Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
Catherine Wong 1/12/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
Sue as of 816  
[Signature] 1-12-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
[Signature] 1/11/11

1/14

# Contract Review Cover Sheet

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: 11-088 or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

\_\_\_\_\_ Human Services \_\_\_\_\_ Sara Mooren \_\_\_\_\_ X8431  
Originating Department Contact Person Phone

Contract with: Stone Ridge Estates, Inc.  
(Name of entity)

Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/12

Monthly Rate \$2,411.01 +1.0%

Contract Amount: Rate x number of approved clients

- Expenditure/ Revenue Account Numbers (provide 9-digit object codes):
- 36-3666-0000-64604 Long Term Support
  - 36-3668-0000-64604 Community Options Program (COP)
  - 36-3674-0000-64604 COP Waiver
  - 36-3678-0000-64604 Community Integration Program (CIP-II)
  - 36-3706-0000-64604 Community Support Program (CSP)

Executive Summary:  
Rock County Human Services Department has developed contracts with several providers for Community Based Residential Facility services. This is one of several providers from which Rock County clients may choose for such services.

NEW  11-088 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 38842

Contract between Rock Co. Human Services Dept. and Stone Ridge Estates Inc for Community Based Residential Facility services for period of 1/1/11 - 12/31/12.  
Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
[Signature] 1/18/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
Sufficient funds available  
contract 15/15 2011 budget  
[Signature] 1-18-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
[Signature] 1/18/11



11/12

# Contract Review Cover Sheet

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.

**11-079**

New Contract:  or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

Human Services Sara Mooren X8431  
Originating Department Contact Person Phone

Contract with: Tellurian UCAN, Inc.  
(Name of entity)

Contract Period: Start Date: 01/01/11 Expiration Date: 12/31/11

Contract Amount: \$405,328 (Same as 2010)

Expenditure/ Revenue Account Numbers (provide 9-digit object codes):

36-3689-0000-62119 Other Contracted Services

Executive Summary:

Contract for the Jackson House Crisis Stabilization Facility for calendar year 2011. 2011 will continue at a 12-bed capacity, and under similar staffing patterns.

Were Bids or Quotations Solicited? X Yes (RFP #2008-13)  No

Covered by State Contract?  Yes X No

NEW  11-079 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 8831

Contract between Rock Co. Human Services Dept. and Tellurian UCAN Inc for Jackson House Crisis Stabilization Facility services for period of 1/1/11 - 12/31/11.  
Contract Amount: \$405,328.00

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
[Signature] 1/14/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
[Signature] 822  
[Signature] 1-14-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
RFP #2008-13  
01/11/11

# Contract Review Cover Sheet

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.

11-032

New Contract:  or,  
(check box if yes)

Amendment to Contract # \_\_\_\_\_

or, \_\_\_\_\_

Addendum to Contract # \_\_\_\_\_

Human Services Department  
Originating Department

Sara Mooren  
Contact Person

x8431  
Phone

Contract with: Walden Homes, LTD  
(Name of entity)

Contract Period: Start Date: 1/01/2011

Expiration Date: 12/31/2011

Contract Amount: \$ Rate x number of approved clients

SERVICE	RATE	UNIT	CHANGE FROM PRIOR YEAR
Coventry House (GH)	\$197.00	Day	0%
Horizon House (GH)	\$197.00	Day	0%
Thoreau House (GH)	\$197.00	Day	0%

Expenditure/ Revenue Account Numbers: 36-3638-0000-64604 Child Protective Services – Substitute Care  
36-3654-0000-64604 Juvenile Justice Services – Substitute Care

Executive Summary: Rock County Human Services Department has contracts with several substitute care providers. The number of children approved for placement at each facility will determine the actual amount of each contract. The 2011 County Adopted Budget includes the following funds for substitute care:

Child Protective Services:

\$2,198,453 Foster homes, family group homes, treatment foster homes  
498,532 Group homes  
1,103,546 Residential Care Centers  
\$3,800,531 Total

Juvenile Justice Services:

\$205,479 Foster homes, family group homes, treatment foster homes  
284,452 Group homes  
736,607 Residential Care Centers  
\$1,226,538 Total

Were Bids or Quotations Solicited?  Yes

No

NEW -  11-032 AMENDMENT TO: \_\_\_\_\_

ADDENDUM TO: \_\_\_\_\_

**ADMINISTRATION CONTRACT REVIEW**

NO. 55778

Contract between Rock Co. Human Services Dept. and Walden Homes LTD for Group Home Services  
for period of 1/1/11 - 12/31/11.  
Contract Amount: Rate x no. of approved clients.

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.

**Total Fiscal Impact & Source of Funds:**

Sufficient funds verified  
in 2011 budget  
1-10-11  
Finance Director \_\_\_\_\_ Date \_\_\_\_\_

Jessie King 1/10/11  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Reviewed by Purchasing for compliance:

Arri D. Mullin 1/5/11

# Contract Review Cover Sheet

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.

11-033

New Contract:  or, \_\_\_\_\_ or, \_\_\_\_\_  
(check box if yes) Amendment to Contract # Addendum to Contract #

Human Services Department Sara Mooren x8431  
Originating Department Contact Person Phone

Contract with: YWCA of Rock County  
(Name of entity)

Contract Period: Start Date: 1/01/2011 Expiration Date: 12/31/2011

Contract Amount: \$10,000 (same as 2010)

Expenditure/ Revenue Account Numbers: 36-3634-0000-64604 CPS Program Expense  
(provide 9-digit object codes)

Executive Summary: This contract with YWCA of Rock County provides funding towards operation of a Domestic Abuse Shelter in Janesville. Rock County Human Services Department has contracts with two Domestic Abuse Shelters in Rock County, one in Janesville and one in Beloit. The amount of the contract is not intended to cover the full cost of shelters, but rather is a partial offset to their operating costs.

NEW  11-033 AMENDMENT TO: \_\_\_\_\_ ADDENDUM TO: \_\_\_\_\_

ADMINISTRATION CONTRACT REVIEW NO. 88824

Contract between Rock Co. Human Services Dept. and YWCA of Rock County for Domestic Abuse Shelter in Janesville for period of 1/1/11 - 12/31/11.  
Contract Amount: ~~XXXXXXXXXX~~ \$10,000.00

Corporation Counsel has reviewed this Document and finds it to be proper, as to form.  
Jerry S. Kugel 1/13/11  
Signature Date

Total Fiscal Impact & Source of Funds:  
Jane Mooren  
JOB 1-13-11  
Finance Director Date

Reviewed by Purchasing for compliance:  
Jodi R. Miller 1/13/11

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

**ROCK COUNTY HUMAN SERVICES DEPARTMENT  
DIRECTOR'S REPORT  
WEDNESDAY, JANUARY 26, 2011**

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**HSD MANAGEMENT TEAM MEETING – January 11, 2011**

CALL TO ORDER

AGENDA ADDITIONS

MINUTE MODIFICATIONS

DIVISION MANAGER CHECK-IN

ASSIGNMENTS

ISSUES FOR DISCUSSION AND RESOLUTION

- **Budget**
- **Workgroup Updates**
- **IT Work Orders - Shilo**
- **(Info) NAVITUS, Vacation Carry Over, Trainings**
- **Follow-up on Jeff Russell Training**
- **CPS Appeal Paper Reviews**
- **Staff Safety Training**
- **Emergency Call Response Policy – Franklin St.**
- **Intranet Site**
- **Moves**

INFORMATION ITEMS

- **HSD Board Agenda**  
**MEETING WRAP-UP**
- 

**HSD MANAGEMENT TEAM MEETING – January 18, 2011**

CALL TO ORDER

AGENDA ADDITIONS

MINUTE MODIFICATIONS

DIVISION MANAGER CHECK-IN

ASSIGNMENTS

ISSUES FOR DISCUSSION AND RESOLUTION

- **Budget**
- **Workgroup Updates**
- **Mission Statement**
- **Payroll Questions**
- **Pool Vehicle Usage**

INFORMATION ITEMS

- **HSD Board Agenda**  
**MEETING WRAP-UP**
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