

## **Solicitation RFQ 040-16/gsr**

# **Provider of Day Array Services for People with Developmental Disabilities**

**Bid Designation: Public**



**Hamilton County**

# **Hamilton County**

## Bid RFQ 040-16/gsr

### Provider of Day Array Services for People with Developmental Disabilities

Bid Number **RFQ 040-16/gsr**  
 Bid Title **Provider of Day Array Services for People with Developmental Disabilities**

Bid Start Date **May 26, 2016 8:43:53 AM EDT**  
 Bid End Date **Jul 22, 2016 11:00:00 AM EDT**  
 Question & Answer End Date **Jul 1, 2016 12:00:00 PM EDT**

Bid Contact **Gina Richmond**  
**Purchasing Agent II**  
**Purchasing**  
**513-946-4321**  
**HAMCOPurchasingQuotes@hamilton-co.org**

Contract Duration **One Time Purchase**  
 Contract Renewal **Not Applicable**  
 Prices Good for **Not Applicable**  
 Pre-Bid Conference **Jun 15, 2016 8:00:00 AM EDT**  
**Attendance is optional**  
**Location: Kidd Adult Center**  
**9910 Reading Road**  
**Cincinnati, Ohio 45241**

Bid Comments **Hamilton County Commissioners on behalf of Hamilton County Developmental Disabilities Services is interested in identifying an organization to assume operations of the three adult centers which is currently operated by Hamilton County.**  
**Email: hamcopurchasingquotes@hamilton-co.org for a bid packet**

#### Item Response Form

Item **RFQ 040-16/gsr--01-01 · Please use vendor's own cost sheet**  
 Quantity **1 each**  
 Unit Price   
 Delivery Location **Hamilton County**  
DDS - Office Admin  
 4370 Malsbary Rd  
 Suite 200  
 Cincinnati OH 45242  
**Qty 1**

**Description**  
 Vendor's

**HAMILTON COUNTY DEVELOPMENTAL DISABILITIES SERVICES  
HAMILTON COUNTY, OHIO**



**REQUEST FOR QUALIFICATION STATEMENT  
FOR  
Provider of Day Array Services for People with Developmental Disabilities  
RFQ# 040-16**

**OWNER: Hamilton County Commissioners on behalf of  
Hamilton County Developmental Disabilities Services, Hamilton County, Ohio**

**Superintendent – Alice Pavey**

**ISSUED: May 26, 2016**

**STATEMENTS DUE: July 22, 2016**

**CONTACT:  
Gina Richmond-CPPB  
Purchasing Agent  
Hamilton County Administrative Services  
County Administration Building  
138 E. Court St. Room 507  
Cincinnati, Ohio 45202  
Phone: 513-946-4321 Fax: 513-946-4335  
E- Mail: [HAMCOPurchasingQuotes@hamilton-co.org](mailto:HAMCOPurchasingQuotes@hamilton-co.org)**

## Section 1.0 - Introduction

Hamilton County Developmental Disabilities Services (hereinafter referred to as the “Agency”) hereby gives notice of its intent to cease to provide the operations of the three adult centers which it currently operates in Hamilton County.

The Agency currently operates a Medicaid Waiver certified program offering day array services to 478 people in three centers throughout Hamilton County. These centers are identified as and located as follows.

Beckman Adult Center  
2600 Civic Center Drive  
Cincinnati, Ohio 45231  
Square footage: 33,791

Franks Adult Center  
5884 Bridgetown Road  
Cincinnati, Ohio 45248  
Square footage: 30,492

Kidd Adult Center  
9910 Reading Road  
Cincinnati, Ohio 45241  
Square footage: 31,999

The population served in these centers includes people across the acuity spectrum with an emphasis on people with extensive medical and behavioral challenges. These services offer a variety of programming options ranging from an extensive vocational program offering work options to a life enrichment program including a variety of therapeutic recreation activities as well as a combination of all opportunities.

The Agency offers a vocational program through an agreement with a not-for-profit organization that employs the people who desire to participate in the vocational program. General Assembly, Inc. holds a *Certificate Authorizing Special Minimum Wage Rates Under Section 14(c) Of The Fair Labor Standards Act* issued by the US Department of Labor that is used to establish the pay for these employees. The employees receive the opportunity to work at a variety of tasks to allow them to learn skills designed to help them work more efficiently so as to increase their employability in the community.

People who want to experience a day activity other than working participate in the life enrichment program. Time in this program is spent learning each person’s unique interests. Each person is then given the opportunity to select activities from a variety of options within the centers and throughout the community that include academics, art, cooking, computers, exercise, gardening, games, making friends and music.

These centers have developed into the provider of last resort for many of the people served due to the behavioral challenges associated with providing them with quality services based on their specific behavioral needs. Many of the people served in our centers have not been successful in other settings and require extensive behavioral support and creativity to achieve the level of success that they have experienced in our centers. Approximately 30 people are supported through the implementation of behavior support strategies in their Individualized Service Plans which include restrictive measures. Others are best supported through the use of positive strategies and environmental modifications.

Each center has a full-time nurse. The nurse is required to perform skilled tasks such as insulin injections, suctioning, G-tube feedings/medications and care of tracheotomies. The nurse may also train and delegate other center staff to administer medications.

Of these 478 people, 371 possess Medicaid Waivers that provide the funding for their services. The balance of the services are currently paid for entirely through Agency tax levy funds. Upon the outsourcing of the operations of the centers the Provider would enter into a contract with the Agency to serve people whose services are funded by the Agency tax levy. The services funded under this contract would be paid at a rate that is commensurate with Medicaid funded services. We are currently in the process of transitioning the funding of many of the people whose services are paid for by the Agency tax levy to waivers. Thus, it is anticipated that the number of the people served through Medicaid Waiver funding will increase in the future while the number of people who will receive levy funded services will decrease.

The Agency currently is responsible (biller of record for those people with a waiver) for the non-medical transportation (NMT) provided to 404 of the people who attend our centers. These services are currently outsourced to a contract provider.

The Agency is interested in identifying an organization to assume operations of these centers. The details of the services needed are further defined in **Section 2.0, Anticipated Scope of Services**.

### Section 1.1 - Project Schedule:

<b>Action Item</b>	<b>Delivery Date</b>
Pre-qualification conference:	Wednesday, June 15, 2016 8:00 AM EDT – 4:00 PM EDT
Facility tours: Kidd Adult Center Beckman Adult Center Franks Adult Center	Following conference Following Kidd Tour Following Beckman Tour
Deadline for receiving final RFQ questions:	Friday July 1, 2016 by 12:00 PM EDT
Deadline for issuing final RFQ answers:	Wednesday July 13, 2016 at 4:00 PM EDT
Deadline for statements to be received by Issuing Officer:	Friday July 22, 2016 at 11:00 AM EDT
Statements review completed:	Approximately - Monday August 1, 2016
Interviews:	Approximately – August 8, 2016 through August 12, 2016
Written decision issued:	August 19, 2016

Responders can register with Bid Sync by calling 1-801-765-9245 or by visiting the website at [www.bidsync.com](http://www.bidsync.com). There is **no** charge for Hamilton County solicitations. Responders will receive notification of all postings made by Hamilton County for the commodity selections you have made.

### Section 1.2 - Issuing Officer:

The mailing address and contact information for the Issuing Officer to be used to send a statement, or ask questions regarding the RFQ process, technical issues, or the scope of service is:

**Gina Richmond-CPPB**  
**Purchasing Agent**  
**Hamilton County Administrative Services**  
**County Administration Building**  
**138 E. Court St. Room 507**  
**Cincinnati, Ohio 45202**  
**Phone: 513-946-4321 Fax: 513-946-4335**  
**E- Mail: [HAMCOPurchasingQuotes@hamilton-co.org](mailto:HAMCOPurchasingQuotes@hamilton-co.org)**

The RFQ, the evaluation of responses, and the acceptance shall be made in conformance with current County procurement procedures.

### Pre-Qualification Conference and Registration Process:

A Pre-qualification Conference will take place at the Hamilton County Kidd Adult Center, 9910 Reading Road, Cincinnati, Ohio 4524, and Wednesday, June 15, 2016 at 8:00 AM EST. The purpose of the conference is to answer questions related to the RFQ. **While the Pre-Qualification Conference is not mandatory, no other opportunity to visit these sites will be provided.**

Bidders interested in submitting their proposals must register by faxing or e-mailing the registration form document to:

**[HAMCOPurchasingQuotes@hamilton-co.org](mailto:HAMCOPurchasingQuotes@hamilton-co.org)**  
**(RFQ number should be entered in the subject line of the e-mail)**

or

**Faxing to: Gina Richmond at (513) 946-4335**

Registration helps ensure that bidders receive all addenda and copies of all questions and answers given.

If the Bidder attempts any unauthorized communication with individuals associated with this project, the County will reject the Bidder's proposal.

The definition of individuals associated with this project is further defined as:

- Public Officials
- Project Managers and their staff assigned to the project

- Issuing Officer
- Individuals involved with the evaluation process
- Any of the County's external customers
- The requesting department

**The integrity of the competitive process is very important to the County in the administration of its business affairs, the residents of the County and the Bidders and vendors that participate in the process in good faith. Behavior by Bidders and vendors who violate or attempt to manipulate the competitive bid process in any way are taken very seriously.**

Examples of unauthorized communication are:

- Telephone calls
- Letters, e-mails or faxes regarding the project or its evaluation prior to the award made to anyone other than the County Purchasing Department
- Visits in person or through a third party attempting to obtain information regarding the RFQ process.

Electronic qualifications will be received through BidSync or Paper Sealed Statement Qualifications will be received at the Hamilton County Purchasing Department, Room 507, 138 East Court Street, Cincinnati, Ohio 45202, until 11:00 AM on the opening date and will be read at that time. The **Public Opening will be held in conference room A.**

**This is a Request for Qualification (RFQ) and if Vendors are present for the opening the "NAMES ONLY" of all vendors that sent in proposals will be released. Proposals/cost cannot be released until after the contract is signed.**

### **Section 1.3 - Inquiries**

All inquiries to this Request may be submitted by facsimile, email or in writing to the issuing officer.

All questions regarding this proposal must be presented in writing and e-mailed or faxed to:

[\*\*HAMCOPurchasingQuotes@hamilton-co.org\*\*](mailto:HAMCOPurchasingQuotes@hamilton-co.org)

**(Statement Qualification number should be entered in the subject line of the e-mail)**

**or**

**Fax: (513) 946-4335**

### **Section 1.4 - Provider Examination of the RFQ:**

Providers shall carefully examine the entire RFQ and any addenda thereto, all related materials and data referenced in the RFQ or otherwise available, and shall become fully aware of the nature of the request and the conditions to be encountered in performing the requested services.

If Providers discover any ambiguity, conflict, discrepancy, omission or other error in this RFQ, they shall immediately notify the Issuing Officer of such error in writing and request clarification or modification of the document. Modifications shall be made by addenda issued pursuant to **Section 1.5, Addenda to RFQ**. Clarification shall be given by email to all parties who registered without divulging the source of the request. All Providers who plan to submit a statement must register with the **Issuing Officer, Section 1.2** of this document.

If a Provider fails to notify Hamilton County prior to **Friday July 1, 2016 at 12:00 P.M. EDT** of an error in the RFQ known to the Provider, or if an error that reasonably should have been known to the Provider, the Provider shall submit its statement at the Provider's own risk.

### **Section 1.5 - Addenda to RFQ:**

Any addenda to this RFQ will be issued by the Hamilton County Issuing Officer by email to all Providers that have registered using the procedure previously mentioned in **Section 1.2 - Issuing Officer**.

### **Section 1.6 – Pre-Qualification Conference**

There will be a single pre-qualification conference for parties interested in providing these services to address any questions, which may arise. This conference is optional but will be the only forum through which Providers will have the opportunity to ask questions concerning the contents of this RFQ and to observe the operations of the centers. The conference will be held at the Kidd Center on **Wednesday, June 15, 2016 beginning at 8:00 am EDT**. Following the conference we will conduct a tour of Kidd Center. We will then travel to the other two centers in order to provide a tour of all of the operations. These tours will be completed by 4:00 pm EDT. Specifics of these tours will be provided at the pre-qualification conference, each Provider will be responsible for their own transportation between the centers. If questions arise during the conference that cannot be answered at the conference, a response will be provided to all organizations in writing in the next Addendum. Minutes will not be taken or distributed.

### **Section 2.0 – Anticipated Scope of Services**

The Centers for Medicaid and Medicare Services (CMS) published Conflict of Interest Guidance in 2014 that states that providers of Home and Community Based Services (HCBS) for the individual, or those that have an interest in or are employed by a provider of HCBS for the individual, must not provide case management or develop the person-centered service plan. Since day array services are included in the definition of HCBS it is necessary for the Agency to cease being the provider for these services in the future.

Extensive discussions with people served, families, guardians and other stakeholders in the community have indicated the following priorities as we move forward.

A transition of services must be completed in such a way as to minimize the disruption in the lives of the people served in the centers.

We need to work to assure that services will not be lost for the people with the greatest challenges.

Due to the close personal nature of the services provided in these centers and the need to create an environment that mirrors the current service model it is important that the Provider assuming services employ as much of the staff as possible.

The opportunity to participate in a vocational experience providing paid work is important to a large portion of the number of people served in our centers. Thus it is important that services be transitioned to a Provider that is willing to continue to provide this aspect of our program.

Many of the people served by our centers have been attending these centers for a large portion of their lives. They feel an attachment to the physical location and find comfort in maintaining the continuity of the location of their day services. As such agreement to lease or purchase the centers is an important element of the plan.

It is important to note that all people served possess a right to “a free choice of provider” thus prior to the transition of any services to a new provider each individual will be given the opportunity to elect to receive services from any qualified and willing provider of Medicaid services.

Free choice of provider applies to both day array and NMT services. Currently, a large percentage of the people served in the centers select the Agency’s contractor as their NMT provider. As such, capacity to provide NMT to a large number of people is critical to successful operation of the centers.

Information is provided in Attachments 1 – 4 to allow the Provider to better understand the scope of the operations of these centers. The following information is provided:

Attachment 1 – 2015 Adult Center attendance by person served with acuity

Attachment 2 – 2015 Expenditures by center.

Attachment 3 – Current adult center staffing information indicating personnel by center and position noting current salary

Attachment 4 – Pick up and drop off information relative to people for whom we provide NMT.

Attachment 5 – RFQ Evaluation Form

Note that in 2015 the Agency operated four centers. In February 2016 we completed the consolidation of these four centers into three.

### **Section 3.0 – Provider’s Qualifications**

For purposes of this Request, the Provider’s qualifications include, but are not limited to the following:

Current certification by the Ohio Department of Developmental Disabilities to provide the following services under the I/O, Level One and SELF Waivers:

Adult Day Support  
Vocational Habilitation  
Non-Medical Transportation

#### **Section 4.0 – Statement Format/Content**

The format/content provisions listed below have been established to assist the Agency in its review and evaluation of all qualification statements. All statements must comply with the following format to allow the selection committee to fairly evaluate submittals:

The following is a brief description of the desired content for the Qualification Statement:

#### **Section 4.1 – Cover Letter**

An introductory cover letter of not more than one (1) page.

#### **Section 4.2 – Executive Summary**

A two (2) - page summary highlighting the contents of the qualification statement.

#### **Section 4.3 – Organization Background/Overview**

A summary of the organization's background. This overview should address items pertinent to understanding the organization's history in the field specifically serving the population that is currently enrolled in our centers. This summary should include but not be limited to the following:

Organization's name, address, telephone number, fax number, and name of person to contact.

A brief organizational history including years in existence and geographic office locations.

Explain the structure of the organization's ownership (example – corporation, limited partnership etc.)

A listing of your organization's programs providing day array services (or the appropriate state equivalent) indicating the number of people served.

Documentation of the organization's experience at supporting people with medical support needs.

Documentation of the organization's experience at supporting people with intense behavioral support needs.

Evidence of the organization's financial stability, responsibility (submit your most recent 2 years audited financial statement, if available). Confidential information must be submitted in an envelope marked "**Confidential**".

#### **Section 4.4 – Certifications**

Provide documentation of certification by the Ohio Department of Developmental Disabilities to provide the following services under the I/O, Level One and SELF Waivers:

Adult Day Support  
Vocational Habilitation  
Non-Medical Transportation

#### **Section 4.5 - Project Approach**

Describe your proposed methodology for providing day array services for the portion of the population that we serve that would select the organization as a provider. Include within the description how you intend to structure the program options available to the people who select your program. This discussion should include a detailed description of the various opportunities that will be provided. It is essential that this description address all of the items of importance that were identified by the people served, families, guardians and other stakeholders in the community as discussed **Section 2.0, Anticipated Scope of Services**.

#### **Section 4.7 - Quality Control**

Provide an understanding of the importance that your organization places on providing quality services to the people that it serves. This discussion should include but not be limited to the following:

Your quality assurance history over the last two years as documented by reviews and inspections by appropriate regulatory bodies including but not limited to provider compliance reviews conducted by the Ohio Department of Developmental Disabilities.

Independent third party accreditation, such as CARF, JCOH or NCI, as applicable.

Two years summaries of your programs incident/critical incident reporting.

An overview of your organization's plan to gauge the satisfaction of people served including the last two years program summaries.

#### **Section 4.8 – Scheduling**

Indicate the proposed timeline required to accomplish the task of the transfer of responsibility for providing day array services to the people that we currently serve that select the organization as a provider. This timeline should address items related to individual's services, as well as administrative and business issues.

## Section 4.9 - Transition

Provide an organization chart that identifies key personnel needed in completing the transition of services and a description of the steps required. This description must address but not be limited to the following points.

- Enrollment process
- Creation of demographic database
- Seamless transition with no lost days of service
- Hiring of staff
- Communication plan
- Information technology systems
- Production/payroll system

## Section 4.10 – Optional Information

Include any additional information or description of resources supporting your organization's qualifications or any other information you find appropriate to the Agency's selection.

## Section 4.11 Required Forms

- RFQ Registration Form
- Personal Property Tax Statement
- Warranty Unresolved Finding

## Section 4.12 Objections

Objections to any of the requirements of this RFQ must be listed in this section of your response. If an objection is not raised in your submittal it will not be considered during the process. Raising an objection does not necessarily insure that it will receive consideration. The Agency will only entertain objections that are in its best interest.

Objections to the insurance provisions as discussed in **Section 6 – Insurance, Indemnification and Hold Harmless** of this document will not be entertained.

## Section 5.0 – Selection Criteria

The Agency will review, evaluate and rank all statements of qualification received based on the following criteria and the qualifications previously described:

- Competence of the Provider to support a large number of adults with developmental disabilities in receiving day array services.

- Years of experience in the delivery of adult day services.

- The transition of services will be completed in such a way as to minimize the disruption in the lives of the people served in the centers.

Ability of the Provider to serve people across the acuity spectrum with an emphasis on people with extensive medical and behavioral challenges.

Past performance of the Provider as reflected by the evaluations of quality assurance organizations in locales where the Provider is currently operating.

Past performance of the Provider as reflected in the satisfaction of people served

The Provider's willingness ability to include a paid work element to the day array service model.

The Provider's willingness and ability to offer Non-Medical Transportation to people served at the centers.

The Provider's willingness to employ a significant portion of the current staff at their current salaries in order to provide continuity of care for the people served.

The Provider's willingness to provide these services within the three centers currently being utilized.

Services provided should be established in such a manner as to create an environment that mirrors the current service model. In order to accomplish this it is important that the Provider assuming services employ as much of the administrative staff as necessary

Timeline to complete the outsourcing of these services is specific, measurable, attainable and realistic.

## **Section 6.0 – Insurance, Indemnification and Hold Harmless**

THE COUNTY'S INSURANCE REQUIREMENTS ARE NOT NEGOTIABLE. NO DEVIATIONS WILL BE ACCEPTED.

### **A. Indemnification and Hold Harmless**

To the fullest extent permitted by and in compliance with applicable law, Provider shall defend, indemnify and hold harmless the Agency, the Hamilton County Board of Commissioners and their employees, officials, agents, representatives, attorneys, directors, officers and volunteers from any and all liability, losses, claims, suits, actions, administrative proceedings, regulatory proceedings / hearings, expenses, judgments, subrogation's (of any party involved in the subject of this contract), attorneys' fees, court costs, defense costs or other injury or damages or loss, whether actual, alleged or threatened, resulting from injury or damages of any kind whatsoever to any business, entity or person (including death), or damage to property (including destruction, loss of, loss of use of resulting without injury damage or destruction) of whatsoever nature, arising out of or incident to in any way, performance of the terms of this document and any related contracts including, without limitation, by the Provider, its subcontractor(s), the Provider's or its subcontractor's (s') employees and agents, assigns, and those designated by Provider to perform the work or services encompassed by this document.

## B. Insurance

- A. The Provider shall provide and pay for and maintain in full force and affect the insurance outlined herein for coverage at not less than the prescribed minimum limits of liability covering the Provider's activities. Requirements:
1. **General Liability**  
The Provider shall carry comprehensive general liability insurance, which shall include coverage for liability or casualty loss or claims arising from actions by or from the use or occupancy by Provider of premises used by Provider in performance of its duties under this agreement. Such coverage shall be in an amount of One Million Dollars (\$1,000,000.00) per occurrence with an annual aggregate limit of Two Million Dollars (\$2,000,000.00). Excess liability coverage shall be provided in an amount of Two Million Dollars (\$2,000,000.00) per occurrence and annual aggregate.
  2. **Professional Liability**  
The Provider shall carry professional liability insurance providing single limit coverage in an amount of One Million Dollars (\$1,000,000.00) per occurrence with an annual aggregate limit of Two Million Dollars (\$2,000,000.00). Excess liability coverage shall be provided in an amount of Two Million Dollars (\$2,000,000.00) per occurrence and annual aggregate.
  3. **Employers' Liability**  
The Provider shall carry employers' liability insurance in an amount of Five Hundred Thousand Dollars (\$500,000.00).
  4. **Automobile**  
The Provider shall ensure that there is automobile liability insurance for passenger vehicles for all such vehicles used to transport individuals, whether such vehicles are owned by the Provider or its agents or employees in an amount of at least Five Hundred Thousand Dollars (\$500,000.00) combined single limit coverage symbol 1, and in an amount of at least One Million Dollars (\$1,000,000.00) for vans and buses combined single limit coverage symbol 1.
  5. **Workers' Compensation**  
The Provider shall provide evidence of proper workers' compensation coverage.
  6. **Employee Dishonesty**  
It is recommended that the Provider provide coverage against employee dishonesty, in an amount approved by the HCDDS. In the event that the Provider elects not to provide coverage for employee dishonesty, the Provider shall assume all risk for losses arising from employee dishonesty and the HCDDS shall not make any payments to cover losses incurred as a result of employee dishonesty.
  7. **Personal Property**  
The HCDDS shall have no responsibility for tools, equipment, records or other personal property of Provider or individual(s), whether such personal property is located on the premises where services are provided or otherwise, and Provider shall carry such insurance as it deems necessary regarding such personal property.

B. Claims-made Policies

In the event that the Provider meets any of its obligations under this Article by obtaining a "claims-made" policy, the Provider shall provide evidence of either of the following for each type of insurance, which is provided on a claims-made basis:

1. Unlimited extended reporting period coverage which allows for an unlimited period of time to report claims from incidents that occurred after the policy retroactive date and before the end of the policy period (tail coverage), or
2. Continuous coverage from the original retroactive date of coverage. The original retroactive date of coverage means original effective date of the first claims-made policy issued for similar coverage while the Provider was under contract with the HCDDS.

C. Additional Insured

All insurance required by this agreement must name the Hamilton County Developmental Disabilities Services as an additional insured party.

D. Evidence of Coverage

Prior to completing final contracts the Provider shall provide HCDDS with a certificate of insurance evidencing each type of coverage required or provided under this Article. Such certificates shall include a notice of cancellation, change or amendment clause, with notification being sent to HCDDS at least thirty (30) days prior to any such event. Cancellation of insurance or a material change in the insurance coverage will constitute a default by the Provider which if not remedied within the thirty (30) day period prior to the termination of the insurance or the effective date of such change, shall be cause for termination of this agreement pursuant to the Termination Section XXIII of this agreement.

- E. The Provider's insurance coverage shall be primary insurance with respect to the HCDDS, and its employees, officials, agents and volunteers. Any insurance or self-insurance maintained by HCDDS shall be excess of the Provider's insurance and shall not contribute to it.
- F. The Provider, at its expense, shall replenish all coverage limits immediately upon its insurer's reductions in limits due to claims on this agreement or any other agreement. Failure to do so may result in cancellation of this agreement at the HCDDS's sole discretion. If the Provider fails to renew, replace or replenish the coverage required, HCDDS may do so on the Provider's behalf and deduct the cost from the Provider's payments.
- G. The Provider will require all insurance policies in any way related to the work and secured and maintained by the Provider to include clauses stating each underwriter will waive all rights of recovery, under subrogation or otherwise, against HCDDS. The Provider will require of subcontractors, by appropriate written agreements, similar waivers each in favor of all parties enumerated in this section.
- H. The Provider and HCDDS agree to fully cooperate, participate, and comply with all reasonable requirements and recommendations of the insurers and insurance brokers issuing or arranging for issuance of the policies required here, in all areas of safety, insurance program administration, claim reporting and investigating, and audit procedures.

- I. Maintenance of the proper insurance for the duration of the agreement is a material element of the agreement. Material changes in the required coverage or cancellation of the coverage shall constitute a material breach of the agreement.

## **Section 7.0 - Conclusion**

The Statement review process will be conducted in two (2) stages. Stage 1 will consist of a preliminary review to ensure that the qualification materials adhere to the minimum requirements (and mandatory conditions) specified in the RFQ and the completion of all the required forms. Organization's Statements, which successfully complete the first stage, will be deemed "Qualified". Those which do not, will be deemed "Non-Qualified". "Non-Qualified" proposals will be placed in the inactive file.

Partial submissions or proposals submitted after the designated deadline will be determined to be non-responsive and will be "Non-Qualified".

### **Stage 1 Review**

Upon the Deadline for Statements to be received by the Issuing Officer which occurs on **Friday, July 22, 2016 at 11:00 am EDT** the Stage 1 Review will be completed to identify all "Qualified" statements. "Qualified" statements in response to the RFQ must meet the following requirements:

Timely Submission – the statement is received at the address designated in the RFQ by **Friday, July 22, 2016 at 11:00 am EDT** according to instructions. Statements mailed but not received at the designated location by the specified date will be deemed "Non-Qualified" and will not be considered.

Completeness of submission – proposal submission must include at minimum:

Documentation of required certifications from Ohio Department of Developmental Disabilities

Quality Assurance documentation

Incident/critical incident reporting documentation

Required number of copies (1 original, 1 copy, 1 **original electronic copy and one (1) redacted electronic copy** CD and/or Thumb Drive)

All sections defined in **Section 4.0 – Statement Format/Content**

All designated attachments

Easily reproduced, quality paper, single spaced, clearly formatted with type face that is easily read.

Qualified statements will be forwarded to the Agency's Selection Process Review Committee (hereinafter referred to as the "SPRC") to perform the Stage 2 review.

**Proposals which do not meet all of the above first stage review submission requirements will be deemed “Non-Qualified” and will not be reviewed for Stage 2.**

### **Stage 2 Review**

The SPRC shall evaluate the statements (as shown in Attachment 5), rank the Providers using the selection criteria set forth in Section 5. During this review process the SPRC reserves the right to approve the qualifications on the basis of individual items, or on the list of items or to conclude that none of the proposals indicate an appropriate level of correspondence to the desired service level. At any time during the review, and at any level of the review, Hamilton County may request additional information from the Provider. Such information requests and Provider's responses must always be in writing. Information may be requested from sources other than the written statement to evaluate the Provider.

All information obtained will be used in conjunction with the data from Stages 1 and 2 to make a final selection.

The evaluation will include, but will not be limited to:

Viability of the Provider's Day Array Service program to support large numbers of adults with developmental disabilities across multiple locations including but not limited to general operations and creation of vocational and life enrichment programs in both center and community based settings;

The Provider's history of offering quality day array services as evidenced by quality assurance, satisfaction and incident reporting data;

The ability of the transition of services to be completed in such a way as to minimize the disruption in the lives of the people served in the centers;

Assurance that services will not be lost for the people with the greatest challenges;

Services to be provided in such a manner as to create an environment that mirrors the current service model;

The plan to include hiring of current staff at their current rate of pay;

The capacity to provide NMT to a large number of people;

Qualifications and other pertinent business history of the Provider;

Provider's financial status;

Plans for use and maintenance of the three current premises;

Ability to create a timely transition of services;

Information in the Executive Summary;

### Distinguishing Characteristics;

Any other facts considered relevant by the Agency and demonstrated by the proposal or our investigation.

Upon completion of the evaluation of the statements the SPRC shall determine a group of up to three (3) Providers to be interviewed. The information gathered during these interviews will be considered by the SPRC in conjunction with information obtained from reviewing the statements.

### **Section 8.0 - Proposal Selection:**

Following the interviews, the SPRC shall rank the Providers using the stated selection criteria and forward a recommendation for Provider selection to the Agency's Board. Upon the Board's approval of the recommendation, the Hamilton County Commissioners on behalf of Hamilton County Developmental disabilities Services will negotiate a lease or sale contract(s) related to the **three facilities and related furniture and equipment** with the selected Provider. If the parties are able to successfully negotiate a contract, the County Administrator will forward the contract to the Hamilton County Board of County Commissioners for formal approval. If the parties are unable to successfully negotiate a contract, consideration of the next highest ranked Provider will be given.

### **Section 9.0 – Terms and Conditions:**

The contents of this RFQ and the commitments set forth in the selected statements shall be considered contractual obligations, if a contract ensues. Failure to accept these obligations may result in cancellation of the award. All legally required terms and conditions shall be incorporated into final contract agreements with the selected Vendor.

Statements shall be clearly marked:

**“Provider of Day Array Services for People with Developmental Disabilities - RFQ# 040-16”**

# **REQUIRED FORMS SECTION**



## Hamilton County Purchasing Department

138 East Court Street ▪ Room 507 ▪ Cincinnati, OH 45202 ▪ Phone (513) 946-4321 ▪ Fax (513) 946-4335  
 Statement Qualification Information: [www.hamilton-co.org/purchasing/](http://www.hamilton-co.org/purchasing/)  
 Surplus Auction: [www.hamiltoncountyohioauction.com/ps](http://www.hamiltoncountyohioauction.com/ps)

### REGISTRATION FORM

PLEASE READ AND ACKNOWLEDGE RECEIPT OF THIS DOCUMENT

**RFQ#:** 040-16 – Provider of Day Array Services for People with Developmental Disabilities/gsr

All inquiries regarding this RFQ are to be in writing and are to be e-mailed or faxed to:

Gina Richmond, Purchasing Agent  
138 E. Court Street, Room 507  
 Cincinnati, Ohio 45202  
 Fax #: (513) 946-4335

Email: [HAMCOPurchasingQuotes@hamilton-co.org](mailto:HAMCOPurchasingQuotes@hamilton-co.org)

The County will not entertain any oral questions regarding this RFQ. Other than specified above, no bidder may contact any county official, employee, project team member or evaluation team member. Bidders are not to schedule appointments or have contact with any of the individuals connected to or having decision-making authority regarding the award of this RFQ. **Inappropriate contact may result in rejecting of the Bidder's Proposal, including attempts to influence the RFQ process, evaluation process or the award process by Bidders who have submitted statement qualifications or by others on their behalf.**

*The only appropriate contact is with the Purchasing Department as listed above.*

Have you been banned from doing business with the State of Ohio? \_\_\_\_\_.

Please e-mail or fax this page to the Purchasing Department at (513) 946-4335.

By e-mailing or faxing this page to the Purchasing Department you will be registering your company's interest in this RFQ, attendance at pre-qualification conference and all ensuing addenda. Your signature is an acknowledgement that you have read and understand the information contained on this page.

<b>DATE:</b>	
<b>COMPANY NAME:</b>	
<b>ADDRESS:</b>	
<b>REPRESENTATIVE'S NAME:</b>	
<b>TELEPHONE NUMBER:</b>	
<b>FAX NUMBER:</b>	
<b>EMAIL ADDRESS:</b>	
<b>NUMBER OF PEOPLE ATTENDING IF APPLICABLE: Due to tour constraints please limit to no more than three participants</b>	
<b>SIGNATURE:</b>	

**PERSONAL PROPERTY TAX STATEMENT**

**Suppliers Note:** This document must be notarized. Please print and complete document and scan to upload the completed document to your response. If you are submitting your statement qualifications in paper form include all of your forms with your proposal in a sealed envelope.

In accordance with Section 5719.042 of the Ohio Revised Code, I hereby certify that the company I represent is not delinquent in the payment of personal property taxes to the State of Ohio or any subdivision thereof.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE

**TO BE COMPLETED BY NOTARY PUBLIC**

On \_\_\_\_\_, there appeared before me  
DATE

\_\_\_\_\_, saying that he/she is  
PRINT NAME

\_\_\_\_\_ of  
PRINT TITLE

\_\_\_\_\_,  
PRINT NAME OF COMPANY

and that he/she understands all of the implications of the above statement and has signed in good faith.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

**WARRANTY AGAINST AN UNRESOLVED FINDING FOR RECOVERY**

(Formerly State of Ohio Debt)

**Suppliers Note:** This document must be notarized. Please print and complete document and scan to upload the completed document to your statement qualification response. If you are submitting your statement qualifications in paper form include all of your forms with your proposal in a sealed envelope.

In accordance with Section 9.24 of the Ohio Revised Code, I hereby certify that the company I represent does not owe any money to the State of Ohio.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE

**TO BE COMPLETED BY NOTARY PUBLIC**

On \_\_\_\_\_, there appeared before me  
DATE

\_\_\_\_\_, saying that he/she is  
PRINT NAME

\_\_\_\_\_ of,  
PRINT TITLE

\_\_\_\_\_  
PRINT NAME OF COMPANY

and that he/she understands all of the implications of the above statement and has signed in good faith.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

**Hamilton County Developmental Disabilities Services**  
**Attachment 1 - 2015 Adult Center attendance by person served with acuity**

Individual Acuity	January	February	March	April	May	June	July	August	September	October	November	December	Total
3 A	17	14	19	21	19	17	20	19	16	18	17	16	213
4 A	11	11	15	17	16	15	17	16	16	16	13	10	173
5 A	18	13	20	22	20	22	22	21	21	21	18	17	235
9 A	18	15	20	22	19	20	17	20	21	20	16	17	225
10 A	3	0	0	0	0	0	0	0	0	0	0	0	3
11 A	14	12	18	15	18	19	15	18	8	9	15	14	175
12 A	17	14	18	19	17	12	19	20	19	19	9	0	183
15 A	17	16	20	22	18	21	22	10	17	21	18	17	219
17 A	18	16	20	20	20	19	16	21	20	21	17	17	225
18 A	0	0	0	0	0	0	0	0	0	0	3	16	19
19 A	16	13	19	17	17	22	22	19	20	20	18	17	220
20 A	14	12	13	18	12	17	18	15	18	15	13	14	179
21 A	0	5	10	6	3	5	4	0	0	7	7	8	55
22 A	16	10	0	0	0	0	0	0	0	0	0	0	26
23 A	10	8	8	0	0	0	0	0	0	0	0	0	26
26 A	17	13	18	16	17	19	2	0	17	17	3	16	155
27 A	18	15	18	20	19	22	21	17	17	18	15	9	209
29 A	8	9	19	17	17	20	19	19	19	21	6	14	188
30 A	18	16	20	22	14	22	21	21	20	21	18	17	230
31 A	18	16	20	20	20	22	20	18	21	21	18	17	231
32 A	14	12	19	22	20	21	22	18	19	17	16	15	215
33 A	18	15	20	22	20	22	22	20	21	21	18	17	236
38 A	11	9	12	13	13	12	10	12	14	12	10	11	139
40 A	13	13	14	13	13	14	15	15	14	12	13	12	161
41 A	10	10	10	13	12	12	10	11	12	11	8	10	129
45 A	0	6	20	22	20	22	22	21	18	21	17	17	206
46 A	18	16	18	22	20	22	21	21	21	21	18	17	235
49 A	18	16	20	22	19	22	15	21	21	18	18	16	226
50 A	18	16	19	22	20	22	22	21	0	19	16	17	212
51 A	17	10	19	20	17	20	16	18	18	16	14	17	202
52 A	10	11	11	15	16	12	15	14	10	5	5	1	125
56 A	16	2	0	0	0	0	0	0	0	0	0	0	18
61 A	18	14	20	14	20	21	21	20	21	21	18	17	225
66 A	18	15	20	22	20	19	17	19	17	20	17	15	219
68 A	15	13	19	18	18	9	19	17	16	13	12	12	181
69 A	18	16	20	21	20	22	22	21	18	20	18	17	233
70 A	14	11	16	22	19	22	22	18	20	21	17	17	219
71 A	12	11	16	14	14	21	15	20	15	13	9	14	174

72 A	18	14	18	20	20	21	21	20	20	20	16	14	222
78 A	18	16	21	22	20	22	22	21	21	21	18	17	239
85 A	18	16	21	22	20	22	22	21	20	19	18	17	236
89 A	17	16	21	22	20	22	22	21	21	20	18	17	237
91 A	18	16	20	22	20	22	21	21	21	21	18	17	237
96 A	17	2	0	0	0	0	0	0	0	0	0	0	19
101 A	11	10	10	12	10	7	11	10	9	9	5	10	114
102 A	17	14	20	21	20	22	22	21	20	21	18	17	233
104 A	16	16	18	21	20	22	21	18	18	21	18	17	226
106 A	12	13	19	19	17	18	19	19	20	13	4	0	173
109 A	18	16	19	22	20	21	17	21	21	21	18	17	231
111 A	6	9	11	11	12	0	2	12	13	11	7	8	102
112 A	13	8	17	21	14	21	22	18	19	15	16	15	199
114 A	10	7	11	12	13	13	13	12	13	11	10	10	135
117 A	9	10	8	10	9	8	7	6	7	9	8	6	97
118 A	17	13	18	21	17	22	19	20	20	21	17	15	220
119 A	17	15	19	21	19	17	22	18	20	15	17	13	213
121 A	11	9	13	13	11	12	13	13	12	13	12	10	142
122 A	1	3	4	6	2	5	1	0	0	0	0	1	23
124 A	17	15	21	20	19	19	17	21	20	20	16	15	220
126 A	17	13	17	15	15	22	17	21	20	19	17	14	207
127 A	11	13	14	17	17	19	21	19	18	18	16	13	196
128 A	18	16	19	20	13	13	13	12	14	12	10	11	171
130 A	18	14	20	22	20	21	21	21	21	20	18	16	232
131 A	0	0	0	0	0	1	5	2	0	0	0	1	9
132 A	11	6	1	0	0	0	1	0	0	0	0	0	19
133 A	17	16	20	22	20	22	22	21	21	21	18	17	237
135 A	12	14	19	22	20	21	15	21	19	20	16	15	214
136 A	13	13	16	17	16	18	14	14	16	14	15	13	179
138 A	11	13	18	21	16	20	5	18	19	18	15	14	188
139 A	15	16	20	20	19	22	19	19	20	19	17	17	223
140 A	13	16	19	19	20	22	21	21	21	21	15	17	225
141 A	18	15	17	21	18	20	22	18	13	11	12	11	196
142 A	18	16	19	22	19	20	17	20	21	20	17	17	226
143 A	18	16	19	22	20	22	22	21	21	21	18	17	237
145 A	11	9	13	13	13	13	13	12	14	12	10	11	144
146 A	17	16	19	22	20	22	21	19	20	20	17	15	228
149 A	11	8	10	14	13	11	14	12	13	12	9	8	135
150 A	15	14	20	22	20	22	22	21	20	21	18	17	232
153 A	16	16	21	22	20	22	22	21	20	21	18	17	236
	1087	942	1218	1302	1189	1278	1222	1207	1191	1187	998	975	13796
6 B	16	13	15	22	20	22	22	21	21	19	18	17	226

7 B	15	10	19	17	18	18	22	19	17	13	14	12	194
8 B	0	0	0	0	0	0	0	0	0	0	4	16	20
16 B	17	16	20	22	19	22	17	21	21	20	18	17	230
22 B	0	6	21	22	20	22	22	21	21	15	18	16	204
23 B	0	0	4	6	6	10	12	13	12	12	12	10	97
25 B	18	15	20	20	20	21	22	21	21	19	18	17	232
28 B	10	9	12	13	12	12	13	13	12	12	11	10	139
34 B	7	6	9	8	9	7	5	8	9	8	7	7	90
35 B	7	6	9	8	9	8	5	8	9	9	7	7	92
36 B	17	15	19	22	19	22	21	16	20	20	16	17	224
39 B	16	14	19	20	16	21	20	15	19	20	3	0	183
43 B	8	7	8	9	8	9	8	8	9	9	7	7	97
44 B	17	14	19	20	18	21	20	21	21	20	18	16	225
47 B	17	14	19	21	18	22	17	20	20	20	18	11	217
48 B	18	16	19	21	20	22	22	20	21	19	18	17	233
56 B	0	8	17	15	11	7	14	11	13	10	17	17	140
58 B	18	16	19	21	20	21	22	21	20	21	18	16	233
59 B	18	15	20	22	19	22	22	21	21	21	18	17	236
60 B	17	15	18	21	20	22	21	21	21	18	18	17	229
63 B	18	15	20	21	20	22	22	21	21	21	18	15	234
65 B	17	15	19	20	19	11	20	17	9	16	14	14	191
73 B	11	10	18	18	20	21	17	16	20	19	18	12	200
80 B	7	15	18	22	17	21	21	18	19	20	15	17	210
82 B	18	16	20	22	20	21	21	21	20	20	18	17	234
83 B	18	16	20	22	20	22	21	21	21	21	18	17	237
87 B	16	13	20	21	20	21	21	19	21	20	18	17	227
88 B	18	16	20	22	20	22	22	21	21	21	18	17	238
90 B	17	15	20	13	0	0	0	0	0	0	0	0	65
96 B	0	14	20	21	20	22	22	21	21	21	18	17	217
98 B	3	6	9	8	8	9	8	9	7	8	8	6	89
99 B	18	16	20	22	20	20	22	21	21	21	18	17	236
100 B	14	14	20	21	20	22	22	21	21	21	18	17	231
107 B	5	13	14	16	10	15	14	17	16	16	9	10	155
113 B	18	15	20	22	20	22	22	20	0	0	13	17	189
115 B	17	16	21	22	19	22	22	20	16	20	17	15	227
120 B	18	16	20	22	20	22	22	21	21	21	18	17	238
123 B	16	15	14	19	15	16	21	19	20	21	14	15	205
125 B	3	14	20	22	20	22	22	21	21	21	18	17	221
137 B	17	15	19	17	18	20	17	20	19	20	18	17	217
147 B	18	16	20	22	20	22	22	21	20	21	18	17	237
	523	516	698	745	668	726	728	704	683	674	602	572	7839
1 C	18	15	20	22	20	22	21	21	21	21	16	16	233

2 C	13	15	18	19	19	18	22	21	21	21	17	17	221
13 C	5	9	3	0	0	0	0	0	0	0	0	0	17
14 C	18	16	20	22	20	22	20	21	21	21	18	17	236
24 C	15	0	0	0	0	0	0	0	0	0	0	0	15
37 C	17	13	18	22	20	21	21	21	16	19	18	14	220
42 C	17	16	20	22	20	22	22	21	21	21	12	17	231
53 C	18	16	20	22	20	17	17	20	21	21	18	17	227
54 C	18	15	20	22	20	17	17	20	21	21	18	17	226
55 C	13	10	19	21	20	22	16	19	20	20	17	16	213
57 C	0	0	3	4	4	0	0	0	0	0	0	0	11
62 C	18	16	20	22	20	20	21	21	21	21	17	17	234
64 C	0	0	0	0	0	0	0	0	0	0	4	16	20
67 C	17	15	20	22	19	22	17	21	20	20	18	17	228
74 C	18	12	19	21	17	22	18	21	20	19	17	16	220
75 C	18	15	20	22	20	22	22	21	21	19	18	17	235
76 C	10	8	12	12	13	13	10	15	14	16	8	12	143
77 C	6	7	8	9	6	9	6	9	7	8	7	6	88
79 C	17	16	21	22	20	22	22	20	21	21	18	17	237
81 C	18	14	19	22	19	22	22	21	21	21	18	17	234
84 C	18	8	19	8	13	22	21	21	21	19	1	7	178
86 C	15	13	20	21	20	22	21	21	21	21	16	17	228
90 C	0	0	0	9	20	21	22	21	20	21	18	17	169
92 C	15	14	19	19	17	20	19	16	20	19	17	11	206
93 C	17	14	18	21	19	22	17	21	20	20	17	17	223
94 C	15	16	19	21	8	20	22	21	18	17	15	16	208
95 C	0	0	0	0	0	0	0	0	0	0	4	13	17
97 C	6	9	11	10	6	0	0	0	0	0	0	0	42
103 C	0	0	0	0	0	0	0	0	0	0	4	17	21
105 C	17	15	18	22	20	22	18	21	21	21	15	14	224
108 C	9	8	12	13	11	11	13	13	12	12	11	8	133
110 C	11	9	12	13	12	13	11	11	14	12	10	11	139
116 C	18	16	20	22	20	22	21	20	18	20	18	17	232
129 C	18	15	18	22	20	22	21	21	21	21	18	17	234
134 C	17	14	18	22	19	22	20	18	19	21	15	16	221
144 C	9	9	9	8	6	7	8	9	7	9	5	6	92
148 C	0	0	0	0	0	0	0	0	0	0	3	16	19
151 C	18	16	20	22	20	22	22	21	21	21	18	17	238
152 C	18	14	20	22	19	21	22	15	21	21	17	17	227
	495	418	553	603	547	602	572	583	581	585	481	520	6540
	2105	1876	2469	2650	2404	2606	2522	2494	2455	2446	2081	2067	28175

Totals days of attendance by acuity:

Totals individuals by acuity:

A	13796
A1	0
B	7839
C	6540
	<hr/>
	28175
	<hr/>

A	74
A1	0
B	41
C	38
	<hr/>
	153
	<hr/>

Individual	Acuity	January	February	March	April	May	June	July	August	September	October	November	December	Total
1 A		4	3	4	8	7	8	9	9	8	8	8	7	83
2 A		17	16	20	22	20	22	22	21	21	21	17	17	236
6 A		9	9	10	7	13	16	15	14	14	14	14	13	148
8 A		18	16	20	22	20	22	22	21	21	21	18	17	238
10 A		17	15	20	22	20	22	16	19	19	21	18	17	226
11 A		9	6	13	8	12	12	15	9	10	7	7	13	121
14 A		8	15	19	22	20	21	22	21	19	21	17	16	221
17 A		12	12	14	15	18	7	0	11	19	21	16	11	156
19 A		11	14	18	18	15	7	13	18	2	16	14	14	160
21 A		18	16	20	22	20	22	21	21	21	21	18	15	235
22 A		18	16	20	22	20	21	22	21	21	21	18	17	237
23 A		11	8	13	13	11	14	16	16	15	17	14	13	161
24 A		7	6	4	8	11	3	0	0	0	0	0	0	39
26 A		16	15	20	22	19	22	15	21	21	20	17	16	224
27 A		17	15	19	19	19	20	21	11	20	17	14	16	208
28 A		7	6	10	8	7	10	8	9	8	8	9	7	97
32 A		7	6	5	6	4	7	6	9	5	6	8	6	75
33 A		18	16	20	22	20	22	22	20	20	21	18	16	235
34 A		13	12	13	13	9	18	18	16	16	17	14	12	171
36 A		11	9	13	13	7	14	12	10	10	9	12	11	131
37 A		10	9	12	12	12	11	9	13	9	12	11	10	130
38 A		15	15	17	22	18	18	21	21	21	20	18	17	223
39 A		12	0	0	0	0	0	0	0	0	0	0	0	12
40 A		7	6	8	9	6	8	9	9	8	8	8	7	93
41 A		15	11	16	18	15	17	18	17	16	17	15	14	189
42 A		15	16	20	22	20	21	17	20	21	21	18	17	228
47 A		18	16	20	22	20	22	15	21	21	21	18	17	231
50 A		15	15	20	21	18	20	21	18	17	18	15	15	213
52 A		17	15	18	21	18	20	21	20	19	21	16	17	223
54 A		0	2	3	6	9	7	9	7	9	8	6	4	70
56 A		18	15	18	21	19	21	21	16	21	21	17	17	225
57 A		18	16	20	22	20	22	22	20	21	21	18	17	237
58 A		18	14	20	16	16	11	21	20	21	21	17	14	209
61 A		18	15	11	5	0	0	0	0	0	0	0	0	49
62 A		15	16	19	22	20	22	22	19	21	21	18	13	228
63 A		4	5	7	6	6	0	0	0	0	0	0	0	28
64 A		15	13	15	17	15	18	9	0	13	17	14	13	159
65 A		14	0	0	0	0	0	0	0	0	0	0	0	14
67 A		15	11	6	16	15	18	17	15	16	14	13	13	169
68 A		17	16	19	21	18	20	22	17	21	20	18	15	224
69 A		17	14	19	22	20	22	22	21	21	20	18	17	233
70 A		5	15	15	20	19	22	22	19	20	19	18	17	211
72 A		18	16	20	21	20	21	21	20	19	19	18	17	230
73 A		17	0	0	0	0	0	0	0	0	0	0	0	17
74 A		18	15	20	22	20	21	22	21	21	21	18	16	235
76 A		8	9	17	15	18	21	21	13	10	12	7	6	157
78 A		0	13	20	19	9	21	11	0	0	0	0	0	93
79 A		15	15	20	19	18	22	20	19	18	19	18	15	218
85 A		18	16	19	21	19	15	16	20	18	20	17	15	214
87 A		16	13	18	18	17	17	17	19	21	16	15	8	195
88 A		1	2	6	10	8	15	17	17	15	12	16	9	128
89 A		9	0	17	19	18	13	22	21	20	20	18	15	192
93 A		17	15	19	18	19	22	22	20	16	21	18	17	224
97 A		16	16	20	22	20	17	12	21	20	21	18	17	220
98 A		17	16	20	20	19	22	21	20	16	17	18	17	223
99 A		11	10	17	22	20	16	15	16	21	18	17	17	200
100 A		12	14	16	13	14	16	15	13	15	17	16	13	174
102 A		18	16	19	22	19	22	22	19	21	21	18	17	234
104 A		17	16	20	19	19	22	7	0	15	18	18	16	187
107 A		12	8	18	19	18	19	19	17	17	20	11	15	193
109 A		14	10	18	18	17	16	18	18	19	21	16	16	201
110 A		17	16	20	22	20	20	22	19	21	21	18	16	232
115 A		17	14	20	21	20	21	21	21	20	21	18	16	230
116 A		15	10	15	12	15	17	14	16	16	16	11	14	171
118 A		18	12	19	19	20	22	22	20	21	21	18	17	229
119 A		16	15	18	19	19	21	22	20	20	20	17	17	224
121 A		18	15	20	22	19	21	22	21	21	21	18	16	234

123 A	5	12	14	9	17	20	22	21	15	19	8	15	177
126 A	18	13	18	22	20	22	22	20	21	20	17	16	229
130 A	17	14	19	22	20	21	22	21	21	20	17	15	229
136 A	18	16	20	22	20	22	22	21	21	21	18	17	238
137 A	18	12	0	0	0	0	0	0	0	0	0	0	30
138 A	17	15	20	22	20	21	22	20	21	21	17	17	233
141 A	17	0	0	0	0	0	0	0	0	0	0	0	17
142 A	17	15	19	18	15	16	11	18	19	18	18	15	199
	1028	885	1144	1220	1133	1212	1175	1122	1145	1179	1019	945	13207
3 B	18	16	20	22	20	22	22	21	21	21	18	17	238
5 B	18	14	18	21	19	20	21	20	20	19	17	16	223
7 B	8	5	6	10	16	8	14	13	16	16	13	1	126
12 B	17	16	20	21	20	22	11	0	0	0	0	0	127
13 B	17	16	20	22	20	21	22	21	21	20	18	17	235
18 B	11	5	12	17	8	7	0	0	0	0	0	1	61
25 B	14	16	18	18	19	20	21	19	20	20	18	17	220
29 B	16	16	19	22	12	20	21	20	18	20	18	16	218
30 B	16	14	14	16	13	18	20	20	18	19	15	0	183
31 B	18	14	20	22	20	22	22	21	21	21	18	17	236
39 B	1	14	19	20	19	21	21	21	20	21	17	16	210
43 B	17	16	20	22	20	22	22	21	20	21	18	17	236
44 B	10	3	14	0	0	0	0	0	0	0	0	0	27
46 B	17	16	20	20	19	22	21	19	17	21	18	17	227
48 B	18	16	20	21	15	21	22	19	21	21	1	0	195
53 B	15	13	11	20	14	19	19	17	15	18	14	14	189
63 B	0	0	0	0	3	9	7	6	8	7	6	7	53
65 B	1	12	14	17	16	21	20	18	21	20	2	0	162
71 B	14	14	17	18	16	18	17	17	17	16	17	14	195
73 B	1	13	20	22	20	20	10	0	0	0	0	0	106
81 B	18	16	21	22	20	22	16	21	21	21	18	16	232
83 B	18	16	1	0	0	0	0	0	0	0	0	0	35
84 B	5	10	15	13	16	13	6	3	10	16	10	11	128
90 B	18	16	20	19	19	22	17	21	21	21	17	17	228
94 B	13	15	3	14	20	22	22	21	20	21	18	15	204
96 B	0	0	0	0	0	0	0	0	0	4	3	3	10
105 B	16	13	19	18	20	22	22	21	20	21	18	17	227
106 B	18	16	20	22	20	22	22	21	21	21	18	17	238
111 B	17	16	19	18	19	22	22	20	16	19	18	17	223
113 B	9	13	14	9	16	15	20	16	20	17	17	14	180
114 B	16	15	21	21	20	21	21	19	20	21	18	15	228
117 B	18	16	20	20	3	8	9	3	0	0	0	0	97
125 B	16	13	19	22	20	21	21	21	21	21	1	0	196
128 B	11	10	12	11	7	8	9	8	7	9	6	5	103
129 B	14	9	17	20	18	16	20	20	17	18	17	16	202
131 B	16	13	19	22	19	22	20	20	18	21	17	17	224
132 B	8	9	18	21	8	21	22	21	20	17	2	0	167
133 B	18	15	19	22	19	21	22	21	21	21	18	16	233
139 B	10	8	13	11	12	14	12	12	9	12	12	10	135
141 B	1	16	20	22	20	22	22	21	21	21	18	17	221
143 B	17	14	19	22	20	20	21	21	21	21	17	17	230
	524	518	651	700	625	707	679	624	618	644	491	427	7208
4 C	18	15	21	22	20	22	21	21	21	21	18	17	237
9 C	16	0	0	0	0	0	0	0	0	0	0	0	16
15 C	17	14	20	22	19	21	22	20	20	21	18	16	230
16 C	18	16	20	22	20	22	22	21	21	21	18	17	238
20 C	0	10	19	21	17	11	19	19	14	13	15	13	171
35 C	6	6	9	8	8	9	8	9	7	8	8	6	92
45 C	13	12	19	17	19	19	19	17	18	19	15	16	203
48 C	0	0	0	0	0	0	0	0	0	0	17	16	33
49 C	7	0	4	13	12	13	13	13	12	12	10	10	119
51 C	15	13	20	22	20	19	19	16	21	20	17	16	218
55 C	9	8	10	14	11	10	4	5	8	8	7	1	95
59 C	7	6	8	8	7	5	8	5	8	9	7	7	85
60 C	17	16	20	21	20	21	22	21	20	21	18	14	231
65 C	0	0	0	0	0	0	0	0	0	0	16	16	32
66 C	16	11	18	21	19	18	20	19	18	19	17	16	212
75 C	17	16	20	22	20	22	21	19	20	19	18	17	231
77 C	16	12	15	16	16	15	20	18	15	19	18	12	192
80 C	18	16	20	21	18	22	22	21	20	21	18	17	234
82 C	16	16	20	22	20	14	0	0	0	0	0	0	108
86 C	0	0	0	0	17	20	22	21	21	16	14	17	148

91 C	0	0	0	0	0	0	14	21	20	20	18	16	109
92 C	15	12	13	18	19	15	20	17	18	17	14	15	193
95 C	17	11	18	21	20	22	21	21	20	21	17	17	226
96 C	3	3	3	5	4	4	4	4	4	1	0	0	35
101 C	6	6	18	18	19	15	20	17	20	15	13	15	182
103 C	17	16	20	22	20	21	22	20	21	20	18	17	234
108 C	18	15	19	21	20	22	22	21	19	20	17	17	231
112 C	0	0	0	0	0	0	0	0	4	3	2	1	10
120 C	18	15	18	3	0	0	0	0	0	0	0	0	54
122 C	17	14	20	21	19	21	20	20	20	20	18	15	225
124 C	16	13	19	22	19	21	21	19	21	20	18	17	226
125 C	0	0	0	0	0	0	0	0	0	0	17	17	34
127 C	18	14	16	21	20	21	17	21	21	21	17	17	224
132 C	0	0	0	0	0	0	0	0	0	0	13	13	26
134 C	18	16	20	22	20	22	22	21	21	21	18	17	238
135 C	9	9	10	11	12	12	13	12	11	10	8	10	127
140 C	17	11	0	0	0	0	0	0	0	13	18	17	76
	<u>415</u>	<u>342</u>	<u>457</u>	<u>497</u>	<u>475</u>	<u>479</u>	<u>498</u>	<u>479</u>	<u>484</u>	<u>489</u>	<u>495</u>	<u>465</u>	<u>5575</u>
	<u>1967</u>	<u>1745</u>	<u>2252</u>	<u>2417</u>	<u>2233</u>	<u>2398</u>	<u>2352</u>	<u>2225</u>	<u>2247</u>	<u>2312</u>	<u>2005</u>	<u>1837</u>	<u>25990</u>

**Totals days of attendance by acuity:**

<b>A</b>	<b>13207</b>
<b>A1</b>	<b>0</b>
<b>B</b>	<b>7208</b>
<b>C</b>	<b>5575</b>

25990

**Totals individuals by acuity:**

<b>A</b>	<b>70</b>
<b>A1</b>	<b>0</b>
<b>B</b>	<b>40</b>
<b>C</b>	<b>33</b>

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Individual	Acuity	January	February	March	April	May	June	July	August	September	October	November	December	Total
2 A		18	17	20	22	20	22	22	19	21	21	13	0	215
3 A		18	17	20	22	20	17	22	21	21	19	0	0	197
4 A		18	17	17	21	20	21	20	21	21	21	15	9	221
6 A		18	17	18	18	17	16	11	16	17	10	13	12	183
8 A		9	17	19	15	18	22	22	16	21	21	18	16	214
11 A		11	9	14	13	11	14	13	13	9	9	12	9	137
12 A		15	13	19	20	20	22	20	20	21	20	12	0	202
13 A		18	17	19	22	19	22	20	15	18	21	18	17	226
14 A		16	15	18	21	18	19	19	0	0	0	0	0	126
15 A		10	10	11	13	11	9	11	16	8	12	11	9	131
16 A		16	14	18	22	20	21	22	20	21	19	12	0	205
18 A		11	10	7	10	7	12	12	10	12	8	12	11	122
19 A		17	17	17	22	20	22	21	21	21	21	18	17	234
21 A		8	7	8	9	8	8	1	0	0	0	0	0	49
23 A		15	12	17	21	20	22	22	21	21	20	14	0	205
25 A		17	15	20	21	20	21	21	20	21	20	18	17	231
26 A		18	17	18	22	19	22	12	0	0	0	0	0	128
27 A		10	8	10	13	14	9	6	15	11	15	0	0	111
28 A		18	15	19	22	20	22	22	21	21	21	18	17	236
29 A		18	5	0	14	19	22	20	19	21	21	14	0	173
32 A		18	16	19	22	20	22	22	21	21	21	18	17	237
35 A		14	13	13	15	11	9	14	11	8	16	7	11	142
36 A		14	12	12	16	16	17	22	20	20	21	17	16	203
37 A		18	16	19	21	18	20	21	21	16	17	13	0	200
38 A		12	13	16	17	16	18	17	17	17	15	17	17	192
43 A		18	16	19	19	20	21	22	21	21	21	18	16	232
44 A		8	8	10	12	12	12	11	9	9	8	6	0	105
45 A		8	5	7	8	8	5	9	8	10	8	8	7	91
47 A		18	15	20	22	20	22	22	21	21	21	18	17	237
49 A		18	17	19	22	20	22	22	21	21	21	15	16	234
50 A		14	9	16	21	17	22	19	20	7	20	16	16	197
53 A		18	17	19	22	20	16	21	21	17	21	18	17	227
56 A		14	13	12	14	16	14	19	16	20	18	13	13	182
58 A		17	17	16	19	19	20	19	21	17	18	18	17	218
59 A		18	15	19	22	20	22	21	21	21	21	18	17	235
60 A		15	12	16	18	14	18	17	18	15	15	7	7	172
63 A		17	0	0	0	0	0	0	0	0	0	0	0	17
64 A		17	17	19	17	19	21	17	13	20	20	17	15	212
65 A		18	15	19	22	19	21	22	21	21	18	0	0	196
66 A		18	16	20	19	20	21	21	21	20	21	13	0	210
67 A		18	16	19	22	20	22	22	20	21	21	18	17	236
68 A		18	16	20	22	20	13	21	19	21	21	14	0	205
70 A		18	17	19	18	20	22	22	21	21	18	14	0	210
73 A		18	17	20	22	20	22	22	21	21	21	18	17	239
75 A		18	16	20	22	20	22	22	19	18	21	18	16	232
76 A		18	15	19	22	20	22	22	19	20	21	14	0	212
82 A		18	17	18	21	20	22	22	21	21	19	0	0	199
85 A		18	16	19	22	19	22	21	21	19	19	13	0	209
87 A		18	17	20	21	20	22	21	20	20	21	18	15	233
93 A		13	14	14	18	17	17	18	16	18	17	13	14	189
94 A		18	15	19	22	20	22	22	21	21	21	18	17	236
96 A		18	17	20	22	20	22	22	21	21	21	18	17	239
97 A		18	15	19	22	19	20	22	21	21	21	18	16	232
98 A		3	2	6	8	1	6	4	3	3	7	4	0	47
99 A		11	9	9	11	13	13	10	9	13	13	9	0	120
100 A		16	11	15	15	11	0	0	8	10	6	0	0	92
102 A		18	17	20	22	18	22	22	21	21	21	18	17	237
104 A		17	16	16	18	13	0	0	11	20	21	16	10	158
105 A		0	0	19	22	20	22	17	16	21	21	18	17	193
106 A		18	17	20	22	20	22	22	21	21	19	0	0	202
108 A		18	17	20	22	20	22	22	12	0	0	0	0	153
110 A		9	10	12	10	12	13	11	8	10	11	11	9	126
111 A		18	16	20	21	20	22	22	21	20	21	18	17	236
112 A		18	14	19	20	20	22	22	20	7	0	0	0	162
114 A		18	16	19	22	20	21	22	21	21	21	18	16	235
115 A		17	17	19	21	20	20	21	20	17	20	17	16	225
116 A		8	3	0	0	0	0	0	0	0	0	0	0	11
118 A		17	16	17	19	20	22	21	21	20	19	0	0	192

119 A	17	17	18	20	20	22	21	21	21	21	18	17	233
	1063	937	1114	1260	1169	1227	1213	1139	1116	1123	816	601	12778
5 B	13	11	19	21	20	21	22	19	18	18	14	0	196
7 B	18	16	19	22	19	22	21	21	18	19	7	0	202
17 B	13	9	15	20	18	18	5	9	17	16	11	13	164
22 B	16	16	19	22	20	22	22	19	21	21	18	16	232
24 B	18	16	19	20	20	22	22	21	18	19	13	0	208
26 B	0	0	0	0	0	0	10	20	21	21	14	0	86
33 B	18	13	17	22	20	22	21	21	21	21	18	17	231
41 B	13	14	17	22	20	21	21	19	19	16	17	16	215
42 B	8	9	10	12	14	12	12	16	13	13	10	11	140
46 B	14	12	15	16	16	18	17	17	15	16	15	12	183
52 B	18	17	18	22	20	22	21	20	20	21	18	17	234
54 B	16	16	19	21	20	21	17	21	19	19	18	17	224
55 B	10	9	11	11	10	13	13	12	12	12	11	10	134
61 B	7	0	0	0	0	0	0	0	0	0	0	0	7
69 B	9	9	10	12	10	12	9	10	11	10	10	7	119
71 B	6	5	7	8	8	8	6	8	8	9	7	5	85
72 B	18	17	19	22	19	22	22	21	21	16	0	0	197
77 B	15	15	19	22	19	22	21	21	21	21	18	16	230
78 B	18	17	19	22	20	21	22	20	21	18	18	16	232
80 B	18	17	19	20	20	22	22	17	21	18	0	0	194
84 B	18	16	19	22	20	22	22	21	21	21	14	0	216
86 B	16	15	20	21	20	22	22	20	21	21	18	17	233
88 B	6	6	7	8	8	8	8	9	7	8	7	6	88
90 B	18	17	19	22	20	22	21	19	21	21	18	17	235
91 B	13	12	0	12	17	21	19	17	21	21	17	17	187
95 B	5	6	5	10	8	3	10	8	9	7	5	6	82
101 B	18	17	19	21	19	21	22	21	21	19	0	0	198
103 B	17	15	19	21	20	21	21	20	19	21	18	17	229
107 B	8	6	8	9	8	7	7	6	10	8	7	8	92
109 B	18	17	19	22	15	22	22	21	21	21	14	0	212
113 B	17	16	18	8	19	11	0	16	21	21	18	17	182
116 B	0	4	8	9	8	9	5	7	9	9	0	0	68
	420	385	452	522	495	530	505	517	536	522	373	278	5535
1 C	13	11	16	19	9	16	14	14	16	12	10	10	160
9 C	8	8	11	13	12	12	13	11	12	11	10	9	130
10 C	7	3	17	21	12	19	15	19	20	20	16	16	185
20 C	17	10	19	22	18	17	19	15	20	18	17	17	209
30 C	15	17	19	22	18	21	20	20	21	21	18	17	229
31 C	7	11	15	12	12	16	11	13	14	15	8	7	141
34 C	17	15	19	22	20	21	22	21	21	21	18	17	234
39 C	14	16	19	21	19	21	20	19	21	20	18	17	225
40 C	7	11	13	20	19	17	0	0	0	0	0	0	87
48 C	2	5	7	7	7	8	1	0	0	0	0	0	37
51 C	14	16	19	18	19	22	21	20	16	21	18	17	221
57 C	14	11	15	7	19	21	21	19	15	19	14	0	175
61 C	2	7	2	0	0	0	0	0	0	0	0	0	11
62 C	17	17	19	20	18	21	22	21	20	19	0	0	194
74 C	13	12	16	22	18	22	21	20	19	18	6	0	187
79 C	18	17	19	22	20	22	21	20	19	21	18	17	234
81 C	7	9	9	13	11	13	12	12	11	11	11	9	128
83 C	10	12	12	9	15	15	17	16	18	17	12	13	166
89 C	18	17	19	22	20	19	21	20	21	16	0	0	193
92 C	15	14	18	19	20	15	17	21	9	15	0	0	163
117 C	16	15	19	21	20	21	21	21	21	19	7	0	201
	251	254	322	352	326	359	329	322	314	314	201	166	3510
	1734	1576	1888	2134	1990	2116	2047	1978	1966	1959	1390	1045	21823

Totals days of attendance by acuity:

A	12778
A1	0
B	5535
C	3510

21823

Totals individuals by acuity:

A	68
A1	0
B	30
C	21

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Individual	Acuity	January	February	March	April	May	June	July	August	September	October	November	December	Total
1 A		10	12	12	14	13	13	14	10	21	19	11	10	159
2 A		0	0	0	0	0	0	0	0	0	2	18	17	37
3 A		0	0	0	0	0	0	0	0	0	0	0	8	8
4 A		15	14	17	20	10	21	20	18	20	18	16	16	205
9 A		5	1	0	4	10	0	0	0	0	0	0	0	20
10 A		17	17	15	22	20	22	22	21	21	21	18	17	233
11 A		8	6	10	9	8	9	10	6	9	9	7	7	98
12 A		18	17	19	22	18	21	22	21	21	21	18	16	234
13 A		12	9	9	13	12	13	9	12	14	13	11	11	138
15 A		15	13	16	14	3	18	18	17	15	0	14	14	157
18 A		0	0	0	0	0	0	0	15	18	20	17	14	84
24 A		0	0	0	0	0	0	0	0	0	0	4	16	20
25 A		8	10	14	20	18	22	22	21	19	19	14	9	196
27 A		14	16	18	21	19	21	21	20	19	19	16	16	220
28 A		18	17	19	22	20	22	22	21	21	20	18	17	237
30 A		18	17	18	22	18	18	19	21	20	20	17	16	224
32 A		18	17	18	22	20	22	22	21	21	21	18	17	237
33 A		18	17	19	22	20	22	22	21	21	21	17	17	237
35 A		8	9	11	15	11	7	10	10	12	8	8	10	119
36 A		9	8	15	20	20	22	22	17	18	20	16	16	203
37 A		0	0	0	0	0	0	0	0	0	2	14	12	28
44 A		0	0	0	0	0	0	0	0	0	0	3	16	19
47 A		17	17	19	18	14	0	0	8	9	7	6	8	123
49 A		17	15	16	13	16	19	21	21	21	20	18	16	213
50 A		18	16	16	21	20	21	21	20	21	20	18	16	228
51 A		17	17	19	21	20	21	22	19	21	21	15	17	230
52 A		18	17	19	22	20	22	22	18	21	21	18	17	235
59 A		16	16	19	22	20	21	21	18	18	21	17	17	226
62 A		3	3	5	4	3	5	4	5	3	4	5	0	44
65 A		17	17	18	22	19	22	22	16	21	21	17	17	229
66 A		8	3	0	7	9	6	8	11	8	12	8	7	87
70 A		15	16	18	18	14	13	16	8	15	12	16	13	174
71 A		15	14	14	18	17	17	18	16	18	18	12	14	191
73 A		17	17	19	21	17	17	16	20	21	19	16	17	217
74 A		0	0	0	0	0	0	3	12	11	6	7	2	41
75 A		18	17	19	22	19	21	21	20	21	21	18	16	233
76 A		0	0	0	0	0	0	0	0	0	2	17	15	34
77 A		18	17	18	22	20	22	17	21	21	21	18	16	231
78 A		13	12	16	15	18	20	16	14	14	17	16	15	186
79 A		18	16	19	22	20	12	15	11	21	20	18	17	209
80 A		15	9	12	8	15	11	19	9	17	9	8	6	138
81 A		15	9	17	17	19	16	20	15	20	18	10	8	184
83 A		0	0	0	0	0	0	0	0	0	0	4	17	21
85 A		0	0	0	0	0	0	0	0	0	0	4	17	21
86 A		17	14	13	21	20	20	21	20	20	20	18	14	218
87 A		12	9	12	11	0	5	14	12	14	11	10	12	122
88 A		16	14	18	15	20	21	21	21	20	19	17	16	218
89 A		1	1	0	0	0	0	0	10	10	5	2	7	36
92 A		6	8	8	12	11	12	13	11	9	7	11	12	120
94 A		0	0	2	0	0	0	0	0	0	0	0	0	2
95 A		15	13	16	18	15	18	18	14	17	17	15	14	190
96 A		10	14	15	15	12	10	12	9	11	13	12	17	150
97 A		6	1	0	1	0	0	0	0	0	0	11	10	29
100 A		6	4	9	8	5	3	1	0	0	0	0	0	36
102 A		17	16	15	18	19	21	20	12	19	19	15	14	205
104 A		18	17	19	22	20	22	22	20	21	21	18	17	237
105 A		18	17	19	22	20	22	22	21	21	21	18	17	238
106 A		18	17	17	22	20	22	22	21	21	21	18	16	235
107 A		0	0	0	0	0	0	0	0	0	0	4	17	21
109 A		16	15	19	9	20	20	20	20	18	16	15	14	202
114 A		18	17	19	21	20	21	22	21	21	21	18	16	235
116 A		18	16	20	22	19	22	22	21	21	21	18	17	237
118 A		18	17	18	21	20	21	21	21	18	19	18	17	229
121 A		8	7	8	9	8	9	9	6	9	9	6	7	95
122 A		14	14	13	18	15	10	0	11	14	13	17	16	155
124 A		10	8	11	13	12	13	13	13	11	12	11	10	137
125 A		18	17	19	20	20	22	22	20	21	21	18	17	235
127 A		2	3	5	2	3	4	4	3	3	4	6	6	45

131 A	11	9	13	13	11	14	13	13	13	12	12	11	145
132 A	18	13	15	21	13	21	21	18	16	18	16	17	207
133 A	17	17	20	22	19	17	22	21	21	20	18	17	231
135 A	18	16	19	22	19	22	22	20	21	21	18	17	235
138 A	0	0	0	0	0	0	0	0	0	2	6	8	16
139 A	7	4	7	7	5	4	1	0	0	0	0	0	35
141 A	13	16	19	20	18	21	22	21	21	21	18	16	226
142 A	0	0	0	0	0	0	0	0	0	2	18	17	37
144 A	17	17	19	22	20	22	22	21	21	21	18	17	237
148 A	15	11	14	16	15	20	17	19	19	14	12	14	186
150 A	18	17	17	22	20	22	22	21	21	21	18	17	236
151 A	0	0	0	0	0	0	0	0	0	2	16	16	34
152 A	9	16	11	13	12	13	13	13	12	12	10	10	144
153 A	0	0	0	0	0	0	0	0	0	0	0	1	1
154 A	17	4	20	20	19	19	22	20	17	18	10	11	197
155 A	16	17	18	20	10	22	22	13	21	9	1	0	169
156 A	9	9	10	13	12	13	13	13	11	14	11	9	137
	953	873	1010	1146	1032	1107	1128	1074	1145	1100	1059	1081	12708
6 B	16	12	19	14	19	21	19	21	19	19	14	17	210
7 B	0	0	0	0	0	0	0	0	0	0	0	12	12
14 B	3	0	0	0	0	0	0	0	0	0	0	0	3
16 B	9	8	11	13	11	12	12	9	6	8	8	10	117
17 B	18	17	16	22	20	22	22	17	21	21	18	17	231
22 B	18	17	20	21	18	22	22	21	21	21	16	17	234
34 B	0	0	0	0	0	0	0	0	0	0	4	17	21
38 B	18	16	19	22	18	22	21	21	18	19	18	17	229
40 B	0	0	0	6	19	22	17	21	21	16	10	6	138
41 B	9	9	10	13	9	10	13	13	12	12	10	5	125
42 B	18	17	20	21	20	22	21	20	21	21	18	17	236
43 B	7	9	12	6	16	18	10	14	16	11	12	6	137
46 B	15	10	19	21	19	20	20	21	18	19	17	17	216
53 B	3	3	3	4	4	4	5	4	5	4	3	4	46
54 B	0	0	0	0	0	0	0	0	0	0	3	9	12
55 B	0	2	4	3	16	17	16	14	15	17	16	8	128
56 B	16	16	19	22	20	21	22	19	19	16	18	17	225
60 B	16	10	16	18	19	22	22	19	21	17	16	4	200
64 B	7	6	8	7	7	9	5	9	7	8	9	7	89
67 B	18	15	18	22	19	22	22	21	21	20	18	17	233
69 B	17	17	19	22	20	21	22	21	21	21	17	17	235
90 B	15	5	1	15	18	22	22	21	20	20	18	17	194
93 B	0	0	0	0	0	0	0	0	0	1	9	10	20
98 B	8	4	7	15	10	16	18	16	15	12	11	11	143
103 B	18	17	20	21	20	22	22	21	21	21	18	17	238
108 B	4	5	6	2	0	0	0	0	8	8	6	4	43
110 B	18	17	19	22	20	22	22	20	21	21	18	17	237
111 B	17	16	13	20	16	19	20	18	20	15	10	15	199
117 B	17	17	19	21	16	0	0	0	0	0	0	0	90
119 B	18	11	18	22	20	22	22	21	20	21	18	17	230
126 B	15	14	17	20	18	21	20	19	18	21	15	17	215
128 B	0	1	9	6	4	1	6	3	0	0	0	0	30
134 B	6	5	11	17	9	10	13	10	4	2	13	12	112
137 B	18	17	19	20	20	22	22	21	21	21	18	17	236
145 B	11	9	13	13	11	13	12	13	13	12	12	10	142
146 B	16	15	19	19	20	22	22	20	19	21	18	17	228
147 B	0	0	0	0	0	0	0	0	0	0	4	16	20
149 B	18	16	19	22	19	22	21	6	0	0	1	17	161
	407	353	443	512	495	541	533	494	482	466	434	455	5615
5 C	0	3	8	5	5	10	8	9	6	1	5	0	60
8 C	2	17	16	20	19	22	21	20	19	20	18	17	211
19 C	18	17	19	22	14	22	22	21	21	20	18	17	231
20 C	18	17	19	22	20	22	22	21	21	21	18	17	238
21 C	10	9	10	12	10	12	11	11	12	11	11	9	128
23 C	18	17	19	22	18	22	22	21	21	21	17	17	235
26 C	16	15	19	22	19	22	22	20	19	21	18	17	230
29 C	17	15	18	20	14	11	20	17	8	0	0	0	140
31 C	12	4	7	10	11	8	10	12	1	5	3	7	90
39 C	18	17	18	22	20	21	22	21	21	20	17	10	227
45 C	14	15	17	21	20	21	22	21	16	16	15	16	214
48 C	17	16	19	22	20	22	22	21	21	21	17	14	232
57 C	5	8	5	5	19	19	20	19	21	19	13	16	169
58 C	16	14	19	20	20	21	22	21	21	20	17	17	228
61 C	12	14	2	12	16	20	20	19	19	16	13	15	178

63 C	17	17	19	22	20	22	22	20	21	21	18	17	236
68 C	16	15	19	19	20	22	22	20	19	19	18	17	226
72 C	0	0	0	0	0	0	0	0	0	2	18	16	36
82 C	16	15	15	18	19	19	19	20	21	19	16	13	210
84 C	15	14	18	22	20	17	22	21	21	21	18	16	225
91 C	18	17	19	22	20	22	22	21	21	21	18	17	238
99 C	15	17	19	19	19	22	22	21	21	21	18	17	231
101 C	18	17	19	13	19	22	22	21	21	21	18	17	228
112 C	0	0	0	0	0	0	0	0	0	0	7	4	11
113 C	16	14	18	21	20	21	22	20	19	19	18	15	223
115 C	18	17	18	22	20	22	22	21	21	20	18	17	236
120 C	0	0	0	0	0	0	0	0	0	1	18	17	36
123 C	17	13	17	15	13	16	16	17	17	19	13	14	187
129 C	10	11	11	13	13	12	12	12	13	13	10	10	140
130 C	5	6	3	0	0	0	0	0	0	0	0	0	14
136 C	17	11	18	2	1	16	22	21	20	21	17	15	181
140 C	10	9	0	14	18	21	14	19	21	20	15	16	177
143 C	13	13	16	20	19	21	21	16	15	21	18	17	210
	<u>414</u>	<u>404</u>	<u>444</u>	<u>499</u>	<u>486</u>	<u>550</u>	<u>566</u>	<u>544</u>	<u>518</u>	<u>511</u>	<u>476</u>	<u>444</u>	<u>5856</u>
	<u>1774</u>	<u>1630</u>	<u>1897</u>	<u>2157</u>	<u>2013</u>	<u>2198</u>	<u>2227</u>	<u>2112</u>	<u>2145</u>	<u>2077</u>	<u>1969</u>	<u>1980</u>	<u>24179</u>

**Totals days of attendance by acuity:**

<b>A</b>	<b>12708</b>
<b>A1</b>	<b>0</b>
<b>B</b>	<b>5615</b>
<b>C</b>	<b>5856</b>

24179

**Totals individuals by acuity:**

<b>A</b>	<b>86</b>
<b>A1</b>	<b>0</b>
<b>B</b>	<b>37</b>
<b>C</b>	<b>33</b>

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p_det	p_det_title	s_det	s_det_title	gl_1_bal	gl_2_bal	gl_3_bal	bal	percentage
0221	Beckman Ad 511		Regular Employee Compensation	0	0	1458715	##	0
0221	Beckman Ad 517		Regular Employee Overtime	0	0	6388.52	##	0
0221	Beckman Ad 532		Vacation Pay	0	0	12870.5	##	0
0221	Beckman Ad 533		Sick Pay	0	0	5604.06	##	0
0221	Beckman Ad 535		Retroactive Pay	0	0	100	##	0
0221	Beckman Ad 552		Worker's Compensation	0	0	11557.2	##	0
0221	Beckman Ad 611		Office Supplies	0	239.6	6454.07	##	0
0221	Beckman Ad 620		Janitorial Supplies	24.63	1250	9446.43	##	434.2846
0221	Beckman Ad 621		Food Supplies	0	0	89.94	##	0
0221	Beckman Ad 624		Fuel Oil Lubricants	0	185.84	105.63	##	0
0221	Beckman Ad 625		Other Operating Supplies	297.39	365.8	8490.32	##	29.7795
0221	Beckman Ad 630		Drugs & Medical Supplies	20	10	296.38	##	15.319
0221	Beckman Ad 631		Personal Hygiene Supplies	0	0	6114.8	##	0
0221	Beckman Ad 632		Fire and Safety Supplies	0	0	424.48	##	0
0221	Beckman Ad 641		Building Supplies - electrical	0	0	141	##	0
0221	Beckman Ad 643		Building Supplies - maint shop	0	0	55.26	##	0
0221	Beckman Ad 644		Building Supplies - plumbing	0	200	12.76	##	0
0221	Beckman Ad 646		Building Supplies - painting	0	0	337.91	##	0
0221	Beckman Ad 647		Building Supplies - Other	0	0	302.3	##	0
0221	Beckman Ad 651		Building Supplies	0	0	0	0	0
0221	Beckman Ad 731		Plumbing Repair	2386.83	3488.28	3027.94	##	2.7301
0221	Beckman Ad 738		Clock & Alarm Repair	0	0	0	0	0
0221	Beckman Ad 749		Travel Reimbursement Regular Employee	0	0	164	##	0
0221	Beckman Ad 751		Telephone Service	364.98	1805.94	22381.3	##	66.27
0221	Beckman Ad 775		Bus Rental	0	85126.79	1364873	##	0
0221	Beckman Ad 777		Regular Employee Mileage	0	0	1514.96	##	0
0221	Beckman Ad 791		Printing & Publishing	0	0	64.42	##	0
0221	Beckman Ad 821		Water Service	2782.33	3760.15	12022.2	##	5.6723
0221	Beckman Ad 823		Electric Service	6137.52	8799.4	55338.1	##	10.4501
0221	Beckman Ad 824		Waste Removal Service	372.06	512.34	4519.72	##	13.5249
0221	Beckman Ad 831		Appliances Repair & Maintenance	0	300	2134.87	##	0
0221	Beckman Ad 834		Heating Repair & Maintenance	1208.92	4463	5539.38	##	8.2738
0221	Beckman Ad 835		Electric Repair & Maintenance	0	2500	1638.04	##	0
0221	Beckman Ad 837		Air Conditioning Repair	0	0	2893.24	##	0
0221	Beckman Ad 841		Truck & Tractor Repair	0	300	113.1	##	0
0221	Beckman Ad 843		Building Repair & Maintenance	3080.4	5919.52	24170	##	9.7681
0221	Beckman Ad 848		Maint. Agreements	0	2226.83	4084.17	##	0
0221	Beckman Ad 854		Rent of Copier	0	2838.59	2838.58	##	0
0221	Beckman Ad 875		Board of Election Charges	0	0	3669.17	##	0
0221	Beckman Ad 894		Tax Settlement Fees	0	0	59867.4	##	0
0221	Beckman Ad 910		Contractual Services	0	4430.74	31015.2	##	0
0221	Beckman Ad 913		Training Services	0	0	634.5	##	0
0221	Beckman Ad 1001		Mandatory Medicare	0	0	20219.5	##	0
0221	Beckman Ad 1010		Public Employees Retirement System	0	0	271744	##	0
0221	Beckman Ad 1030		Medical Benefits	0	0	336576	##	0
0221	Beckman Ad 1036		Dental Benefits	0	0	14657	##	0
0221	Beckman Ad 1048		Life Insurance	0	0	1614.03	##	0
0221	Beckman Ad 1049		Employee Assistance Plan	0	0	684.74	##	0
						3775506		
0222	Thomas H Kid 511		Regular Employee Compensation	0	0	1798413	##	0
0222	Thomas H Kid 517		Regular Employee Overtime	0	0	3384.49	##	0
0222	Thomas H Kid 521		Temporary Employee Compensation	0	0	9138.19	##	0
0222	Thomas H Kid 532		Vacation Pay	0	0	45632.7	##	0
0222	Thomas H Kid 533		Sick Pay	0	0	80441.6	##	0
0222	Thomas H Kid 535		Retroactive Pay	0	0	100	##	0
0222	Thomas H Kid 552		Worker's Compensation	0	0	14104.3	##	0
0222	Thomas H Kid 611		Office Supplies	1906.8	0	4644.02	##	2.4355
0222	Thomas H Kid 620		Janitorial Supplies	0	1450	11644.5	##	0
0222	Thomas H Kid 624		Fuel Oil Lubricants	38.82	411.58	543.26	##	24.5966
0222	Thomas H Kid 625		Other Operating Supplies	1129.59	2000	7642.41	##	8.5362
0222	Thomas H Kid 630		Drugs & Medical Supplies	10	260	1199.59	##	145.959
0222	Thomas H Kid 631		Personal Hygiene Supplies	0	300	6007	##	0
0222	Thomas H Kid 632		Fire and Safety Supplies	0	0	96.56	##	0
0222	Thomas H Kid 641		Building Supplies - electrical	0	0	10.95	##	0
0222	Thomas H Kid 642		Building Supplies - security	0	100	18	##	0

0222	Thomas H Kid 646	Building Supplies - painting	63.83	0	732.13	##	11.47
0222	Thomas H Kid 731	Plumbing Repair	1409.38	3000	10494.1	##	9.5745
0222	Thomas H Kid 751	Telephone Service	198.51	3153.89	23093.6	##	132.2223
0222	Thomas H Kid 775	Bus Rental	0	84004.07	1175996	##	0
0222	Thomas H Kid 777	Regular Employee Mileage	0	0	3225.55	##	0
0222	Thomas H Kid 791	Printing & Publishing	0	0	87.36	##	0
0222	Thomas H Kid 821	Water Service	552.73	857.09	6895.64	##	14.0263
0222	Thomas H Kid 822	Gas Service	1302.2	14935.99	10581.3	##	19.5955
0222	Thomas H Kid 823	Electric Service	3361.4	22060.87	31700.5	##	15.9938
0222	Thomas H Kid 824	Waste Removal Service	347.14	407.34	4439.8	##	13.9631
0222	Thomas H Kid 831	Appliances Repair & Maintenance	377.39	800	1838.52	##	6.9915
0222	Thomas H Kid 834	Heating Repair & Maintenance	198	3186.2	4332.64	##	37.9739
0222	Thomas H Kid 835	Electric Repair & Maintenance	0	2500	0	##	0
0222	Thomas H Kid 837	Air Conditioning Repair	0	0	1918.46	##	0
0222	Thomas H Kid 841	Truck & Tractor Repair	400	800	854.15	##	4.1354
0222	Thomas H Kid 843	Building Repair & Maintenance	560.75	5127.17	15340.3	##	36.5001
0222	Thomas H Kid 848	Maint. Agreements	0	1828	2948	##	0
0222	Thomas H Kid 849	Other Repairs & Maintenance	0	0	337.38	##	0
0222	Thomas H Kid 854	Rent of Copier	0	2838.59	2838.58	##	0
0222	Thomas H Kid 875	Board of Election Charges	0	0	4477.83	##	0
0222	Thomas H Kid 894	Tax Settlement Fees	0	0	73061.7	##	0
0222	Thomas H Kid 912	Subscriptions & Memberships	0	0	1950	##	0
0222	Thomas H Kid 913	Training Services	200	0	1263	##	6.315
0222	Thomas H Kid 943	Engineering & Scientific Instrument	0	0	2652	##	0
0222	Thomas H Kid 1001	Mandatory Medicare	0	0	26408.1	##	0
0222	Thomas H Kid 1010	Public Employees Retirement System	0	0	434693	##	0
0222	Thomas H Kid 1030	Medical Benefits	0	0	391286	##	0
0222	Thomas H Kid 1036	Dental Benefits	0	0	15718.2	##	0
0222	Thomas H Kid 1048	Life Insurance	0	0	1999.09	##	0
0222	Thomas H Kid 1049	Employee Assistance Plan	0	0	761.12	##	0
					4234945		
0223	Franks Adult 511	Regular Employee Compensation	0	0	1485800	##	0
0223	Franks Adult 517	Regular Employee Overtime	0	0	5591.4	##	0
0223	Franks Adult 521	Temporary Employee Compensation	0	0	606	##	0
0223	Franks Adult 532	Vacation Pay	0	0	62071.3	##	0
0223	Franks Adult 533	Sick Pay	0	0	76691.2	##	0
0223	Franks Adult 552	Worker's Compensation	0	0	12127	##	0
0223	Franks Adult 611	Office Supplies	0	0	3514.71	##	0
0223	Franks Adult 620	Janitorial Supplies	167.51	2106.31	5537.5	##	45.632
0223	Franks Adult 624	Fuel Oil Lubricants	116.57	381.37	1908.06	##	19.64
0223	Franks Adult 625	Other Operating Supplies	2106.03	3774.46	16429.3	##	9.5933
0223	Franks Adult 630	Drugs & Medical Supplies	10	10	1289.45	##	129.945
0223	Franks Adult 631	Personal Hygiene Supplies	0	0	7825.38	##	0
0223	Franks Adult 641	Building Supplies - electrical	0	0	143.98	##	0
0223	Franks Adult 643	Building Supplies - maint shop	0	0	62.89	##	0
0223	Franks Adult 646	Building Supplies - painting	0	0	1482.18	##	0
0223	Franks Adult 647	Building Supplies - Other	0	0	18.78	##	0
0223	Franks Adult 651	Building Supplies	0	0	615.41	##	0
0223	Franks Adult 711	Safety Training and Consulting	0	0	81.71	##	0
0223	Franks Adult 731	Plumbing Repair	334	4000	17864	##	65.461
0223	Franks Adult 736	Inspections	0	0	100	##	0
0223	Franks Adult 751	Telephone Service	314.88	1806.33	32184.7	##	107.949
0223	Franks Adult 775	Bus Rental	0	65454.9	1584545	##	0
0223	Franks Adult 777	Regular Employee Mileage	0	0	3262.42	##	0
0223	Franks Adult 791	Printing & Publishing	0	0	22.06	##	0
0223	Franks Adult 821	Water Service	1547.08	1740.51	8206.57	##	6.4296
0223	Franks Adult 823	Electric Service	9672.76	16296.48	47376.3	##	6.5827
0223	Franks Adult 824	Waste Removal Service	322.48	471.84	3650.64	##	12.7837
0223	Franks Adult 831	Appliances Repair & Maintenance	48.78	1067.17	1893.71	##	60.6986
0223	Franks Adult 834	Heating Repair & Maintenance	395	9049.23	3266.52	##	31.1791
0223	Franks Adult 835	Electric Repair & Maintenance	0	2500	1657	##	0
0223	Franks Adult 837	Air Conditioning Repair	0	0	1365.52	##	0
0223	Franks Adult 840	Passenger Car Repair	0	500	1582.02	##	0
0223	Franks Adult 841	Truck & Tractor Repair	90	300	1012.19	##	14.5799
0223	Franks Adult 843	Building Repair & Maintenance	180	4457	24400.5	##	160.3197
0223	Franks Adult 848	Maint. Agreements	0	703.37	3937.63	##	0

0223	Franks Adult 849	Other Repairs & Maintenance	0	0	8.97	-9	0
0223	Franks Adult 854	Rent of Copier	0	2838.59	2838.58	##	0
0223	Franks Adult 875	Board of Election Charges	0	0	3850.07	##	0
0223	Franks Adult 894	Tax Settlement Fees	0	0	62819	##	0
0223	Franks Adult 910	Contractual Services	4755	16500.03	88531	##	22.0885
0223	Franks Adult 912	Subscriptions & Memberships	0	0	2121.02	##	0
0223	Franks Adult 913	Training Services	0	0	310	##	0
0223	Franks Adult 942	Office Furniture & Equipment	0	0	176.99	##	0
0223	Franks Adult 947	Other Equipment	0	0	3635	##	0
0223	Franks Adult 1001	Mandatory Medicare	0	0	20065.8	##	0
0223	Franks Adult 1010	Public Employees Retirement System	0	0	360938	##	0
0223	Franks Adult 1030	Medical Benefits	0	0	397669	##	0
0223	Franks Adult 1036	Dental Benefits	0	0	14767.4	##	0
0223	Franks Adult 1048	Life Insurance	0	0	1638.3	##	0
0223	Franks Adult 1049	Employee Assistance Plan	0	0	670	##	0
					4378162		
0224	Jackson Adult 511	Regular Employee Compensation	0	0	1411441	##	0
0224	Jackson Adult 517	Regular Employee Overtime	0	0	7166.44	##	0
0224	Jackson Adult 521	Temporary Employee Compensation	0	0	8408.17	##	0
0224	Jackson Adult 532	Vacation Pay	0	0	13940.9	##	0
0224	Jackson Adult 533	Sick Pay	0	0	19526.8	##	0
0224	Jackson Adult 552	Worker's Compensation	0	0	11981.6	##	0
0224	Jackson Adult 611	Office Supplies	0	0	2822.76	##	0
0224	Jackson Adult 620	Janitorial Supplies	0	1436.06	12516.7	##	0
0224	Jackson Adult 624	Fuel Oil Lubricants	0	504.14	1753.96	##	0
0224	Jackson Adult 625	Other Operating Supplies	1074.61	2043.62	7791.35	##	9.1521
0224	Jackson Adult 630	Drugs & Medical Supplies	48.72	10	2065.68	##	42.6043
0224	Jackson Adult 631	Personal Hygiene Supplies	0	0	5267.72	##	0
0224	Jackson Adult 640	Building Supplies - small equipment	0	0	254.54	##	0
0224	Jackson Adult 642	Building Supplies - security	0	0	84.49	##	0
0224	Jackson Adult 646	Building Supplies - painting	0	500	276.09	##	0
0224	Jackson Adult 651	Building Supplies	0	0	187.47	##	0
0224	Jackson Adult 731	Plumbing Repair	0	2767.5	5275.64	##	0
0224	Jackson Adult 737	Appointed Counsel	0	0	195.5	##	0
0224	Jackson Adult 751	Telephone Service	171.53	2769.12	23933	##	155.6705
0224	Jackson Adult 775	Bus Rental	0	122150.45	977850	##	0
0224	Jackson Adult 777	Regular Employee Mileage	0	0	1763.8	##	0
0224	Jackson Adult 791	Printing & Publishing	0	0	21.18	##	0
0224	Jackson Adult 821	Water Service	1009.46	1666.91	9442.55	##	11.0053
0224	Jackson Adult 822	Gas Service	216.39	358.24	1898.15	##	10.4274
0224	Jackson Adult 823	Electric Service	6074.11	12874.56	38799.6	##	8.5073
0224	Jackson Adult 824	Waste Removal Service	372.06	407.34	4464.72	##	13.0948
0224	Jackson Adult 831	Appliances Repair & Maintenance	229.77	800	1682.77	##	10.8055
0224	Jackson Adult 834	Heating Repair & Maintenance	1322.94	5022.61	4813.33	##	7.4349
0224	Jackson Adult 835	Electric Repair & Maintenance	0	2500	414	##	0
0224	Jackson Adult 837	Air Conditioning Repair	0	0	1817.46	##	0
0224	Jackson Adult 840	Passenger Car Repair	0	0	175.92	##	0
0224	Jackson Adult 841	Truck & Tractor Repair	0	300	371.14	##	0
0224	Jackson Adult 843	Building Repair & Maintenance	3092.95	4496	14730.5	##	6.2162
0224	Jackson Adult 848	Maint. Agreements	0	577	2164	##	0
0224	Jackson Adult 854	Rent of Copier	0	2838.59	2838.58	##	0
0224	Jackson Adult 875	Board of Election Charges	0	0	3803.91	##	0
0224	Jackson Adult 894	Tax Settlement Fees	0	0	62065.7	##	0
0224	Jackson Adult 912	Subscriptions & Memberships	0	0	1890	##	0
0224	Jackson Adult 913	Training Services	0	0	315	##	0
0224	Jackson Adult 921	Taxes	0	0	226.62	##	0
0224	Jackson Adult 942	Office Furniture & Equipment	0	0	476	##	0
0224	Jackson Adult 1001	Mandatory Medicare	0	0	20561	##	0
0224	Jackson Adult 1010	Public Employees Retirement System	0	0	259173	##	0
0224	Jackson Adult 1030	Medical Benefits	0	0	310126	##	0
0224	Jackson Adult 1036	Dental Benefits	0	0	11756.3	##	0
0224	Jackson Adult 1048	Life Insurance	0	0	1555.05	##	0
0224	Jackson Adult 1049	Employee Assistance Plan	0	0	611.04	##	0
					3270697		
0225	Northside 511	Regular Employee Compensation	0	0	503788	##	0
0225	Northside 521	Temporary Employee Compensation	0	0	5372.57	##	0

0225	Northside	532	Vacation Pay	0	0	15563.9 ##	0
0225	Northside	533	Sick Pay	0	0	20757.1 ##	0
0225	Northside	552	Worker's Compensation	0	0	4203.62 ##	0
0225	Northside	611	Office Supplies	0	0	566.39 ##	0
0225	Northside	620	Janitorial Supplies	0	0	1325.38 ##	0
0225	Northside	624	Fuel Oil Lubricants	0	1500	10283.8 ##	0
0225	Northside	625	Other Operating Supplies	0	0	235.79 ##	0
0225	Northside	630	Drugs & Medical Supplies	0	0	80.99 ##	0
0225	Northside	631	Personal Hygiene Supplies	0	0	273.6 ##	0
0225	Northside	641	Building Supplies - electrical	0	0	340.69 ##	0
0225	Northside	642	Building Supplies - security	0	0	759.25 ##	0
0225	Northside	643	Building Supplies - maint shop	0	0	623.35 ##	0
0225	Northside	646	Building Supplies - painting	21.19	0	74.77 ##	3.5286
0225	Northside	654	Other Repairs & Maint Supplies	0	0	25.17 ##	0
0225	Northside	731	Plumbing Repair	0	875.79	1086.21 ##	0
0225	Northside	749	Travel Reimbursement Regular Employee	0	0	945.91 ##	0
0225	Northside	751	Telephone Service	442.31	2988.88	9303.72 ##	27.7918
0225	Northside	777	Regular Employee Mileage	0	0	18566.2 ##	0
0225	Northside	791	Printing & Publishing	0	0	88.24 ##	0
0225	Northside	821	Water Service	851.94	1093.51	3268.43 ##	5.12
0225	Northside	822	Gas Service	924.45	11188.36	9336.9 ##	22.2027
0225	Northside	823	Electric Service	1302.74	9711.88	8870.86 ##	14.2644
0225	Northside	831	Appliances Repair & Maintenance	0	797.26	202.74 ##	0
0225	Northside	834	Heating Repair & Maintenance	0	1542.69	376.11 ##	0
0225	Northside	835	Electric Repair & Maintenance	381.6	900	381.6 ##	3.3585
0225	Northside	837	Air Conditioning Repair	0	0	845.1 ##	0
0225	Northside	841	Truck & Tractor Repair	0	0	3349.94 ##	0
0225	Northside	843	Building Repair & Maintenance	288	3527.41	25449.2 ##	100.6133
0225	Northside	850	Power Equipment Repair	0	0	71.09 ##	0
0225	Northside	854	Rent of Copier	0	2838.56	2838.58 ##	0
0225	Northside	875	Board of Election Charges	0	0	1334.57 ##	0
0225	Northside	894	Tax Settlement Fees	0	0	21775.2 ##	0
0225	Northside	913	Training Services	0	3195	5246.5 ##	0
0225	Northside	1001	Mandatory Medicare	0	0	5952.14 ##	0
0225	Northside	1010	Public Employees Retirement System	0	0	186209 ##	0
0225	Northside	1030	Medical Benefits	0	0	107128 ##	0
0225	Northside	1036	Dental Benefits	0	0	2984.3 ##	0
0225	Northside	1048	Life Insurance	0	0	563.16 ##	0
0225	Northside	1049	Employee Assistance Plan	0	0	120.6 ##	0
0225	Northside	6415	HVAC	0	1027.8	8856 ##	0
						989424	

**Hamilton County Developmental Disabilities Services**  
**Attachment 2 - 2015 Expenditures by center**

	Beckman	Kidd	Franks	Jackson	Total w/o Vocational Program	Vocational Program	Total w/ Vocational Program	
<b>Salaries</b>								
511	Regular Employee Compensation	1,458,715	1,798,413	1,485,800	1,411,441	6,154,369	503,788	6,658,157
517	Regular Employee Overtime	6,389	3,384	5,591	7,166	22,531		22,531
521	Temporary Employee Compensation	0	9,138	606	8,408	18,152	5,373	23,525
532	Vacation Pay	12,871	45,633	62,071	13,941	134,515	15,564	150,079
533	Sick Pay	5,604	80,442	76,691	19,527	182,264	20,757	203,021
535	Retroactive Pay	100	100			200		200
		<u>1,483,679</u>	<u>1,937,110</u>	<u>1,630,760</u>	<u>1,460,483</u>	<u>6,512,032</u>	<u>545,481</u>	<u>7,057,513</u>
<b>Payroll Taxes</b>								
552	Worker's Compensation	11,557	14,104	12,127	11,982	49,770	4,204	53,974
611	Office Supplies	6,454	4,644	3,515	2,823	17,436	566	18,002
		<u>18,011</u>	<u>18,748</u>	<u>15,642</u>	<u>14,804</u>	<u>67,206</u>	<u>4,770</u>	<u>71,976</u>
<b>Benefits</b>								
1001	Mandatory Medicare	20,220	26,408	20,066	20,561	87,254	5,952	93,207
1010	Public Employees Retirement System	271,744	434,693	360,938	259,173	1,326,548	186,209	1,512,757
1030	Medical Benefits	336,576	391,286	397,669	310,126	1,435,658	107,128	1,542,786
1036	Dental Benefits	14,657	15,718	14,767	11,756	56,899	2,984	59,883
1048	Life Insurance	1,614	1,999	1,638	1,555	6,806	563	7,370
1049	Employee Assistance Plan	685	761	670	611	2,727	121	2,848
		<u>645,495</u>	<u>870,866</u>	<u>795,749</u>	<u>603,782</u>	<u>2,915,893</u>	<u>302,957</u>	<u>3,218,850</u>
<b>Transportation</b>								
775	Bus Rental	1,364,873	1,175,996	1,584,545	977,850	5,103,264		5,103,264
<b>Operating Costs</b>								
621	Food Supplies	90	0			90		90
624	Fuel Oil Lubricants	106	543	1,908	1,754	4,311	10,284	14,595
625	Other Operating Supplies	8,490	7,642	16,429	7,791	40,353	236	40,589
630	Drugs & Medical Supplies	296	1,200	1,289	2,066	4,851	81	4,932
631	Personal Hygiene Supplies	6,115	6,007	7,825	5,268	25,215	274	25,489
711	Safety Training and Consulting			82		82		82
736	Inspections			100		100		100
749	Travel Reimbursement Regular Employee	164				164	946	1,110
751	Telephone Service	22,381	23,094	32,185	23,933	101,593		101,593
777	Regular Employee Mileage	1,515	3,226	3,262	1,764	9,767	18,566	28,333
791	Printing & Publishing	64	87	22	21	195	88	283
840	Passenger Car Repair			1,582	176	1,758		1,758
841	Truck & Tractor Repair	113	854	1,012	371	2,351	3,350	5,701
849	Other Repairs & Maintenance		337	9		346		346
850	Power Equipment Repair						71	71
854	Rent of Copier	2,839	2,839	2,839	2,839	11,354	2,839	14,193
910	Contract Therapy Services			60,038		60,038		60,038
912	Subscriptions & Memberships		1,950	2,121	1,890	5,961		5,961
913	Training Services	635	1,263	310	315	2,523	5,247	7,769
921	Taxes				227	227		227
		<u>42,808</u>	<u>49,042</u>	<u>131,014</u>	<u>48,414</u>	<u>271,278</u>	<u>41,981</u>	<u>313,258</u>
<b>Building Costs</b>								
620	Janitorial Supplies	9,446	11,644	5,538	12,517	39,145		39,145
632	Fire and Safety Supplies	424	97			521		521
640	Building Supplies - small equipment				255	255		255
641	Building Supplies - electrical	141	11	144		296		296
642	Building Supplies - security	0	18		84	102		102
643	Building Supplies - maint shop	55		63		118		118
644	Building Supplies - plumbing	13				13		13
646	Building Supplies - painting	338	732	1,482	276	2,828		2,828
647	Building Supplies - Other	302		19		321		321
651	Building Supplies	0		615	187	803		803
654	Other Repairs & Maint Supplies							0
731	Plumbing Repair	3,028	10,494	17,864	5,276	36,662		36,662
821	Water Service	12,022	6,896	8,207	9,443	36,567		36,567
822	Gas Service		10,581		1,898	12,479		12,479
823	Electric Service	55,338	31,701	47,376	38,800	173,214		173,214
824	Waste Removal Service	4,520	4,440	3,651	4,465	17,075		17,075
831	Appliances Repair & Maintenance	2,135	1,839	1,894	1,683	7,550		7,550
834	Heating Repair & Maintenance	5,539	4,333	3,267	4,813	17,952		17,952
835	Electric Repair & Maintenance	1,638	0	1,657	414	3,709		3,709
837	Air Conditioning Repair	2,893	1,918	1,366	1,817	7,995		7,995
843	Building Repair & Maintenance	24,170	15,340	24,401	14,731	78,641		78,641
848	Maint. Agreements	4,084	2,948	3,938	2,164	13,134		13,134
910	Contract Cleaning Services	31,015		28,493		59,508		59,508

		157,103	102,991	149,972	98,822	508,888	0	508,888
	<b>Equipment</b>							
942	Office Furniture & Equipment			177	476	653		653
943	Engineering & Scientific Instrument		2,652			2,652		2,652
947	Other Equipment			3,635		3,635		3,635
6415	HVAC							0
		0	2,652	3,812	476	6,940	0	6,940
		<u>3,711,969</u>	<u>4,157,405</u>	<u>4,311,493</u>	<u>3,204,632</u>	<u>15,385,499</u>	<u>895,189</u>	<u>16,280,688</u>

**Hamilton County Developmental Disabilities Services  
Attachment 3 - Current adult center staffing information  
May 4, 2016**

Team Name	Location Name	Position Job Title	Hourly Amount	Annualized	Work Schedule
Adult Services	Beckman Adult Center	Activity Supervisor	\$28.36	52,224.94	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Beckman Adult Center	Adult Center Manager	\$37.65	69,332.48	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Beckman Adult Center	Custodial Aide	8.85	8,991.58	4 hrs./ 12 Mo/ 254 Days
Adult Services	Beckman Adult Center	Custodial Aide	8.61	8,747.70	4 hrs./ 12 Mo/ 254 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$15.07	26,583.48	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$16.68	29,423.52	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$18.38	32,422.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$18.48	32,598.72	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$18.10	31,928.40	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$24.32	42,900.48	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$24.80	43,747.20	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$18.10	31,928.40	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$24.80	43,747.20	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Employment Coordinator	\$39.67	73,052.31	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Beckman Adult Center	Equipment Operator	\$14.89	26,265.96	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Habilitation Specialist 2	\$35.87	63,274.68	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Habilitation Specialist 2	\$20.26	35,738.64	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Lead Custodian	\$15.71	31,922.72	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Beckman Adult Center	Occupational Therapist	\$44.52	81,983.58	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Beckman Adult Center	Production Supervisor	\$26.84	49,425.86	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Beckman Adult Center	Registered Nurse (Adult Center)	\$33.01	58,229.64	7 Hrs/12 Mo./252 Days
Adult Services	Beckman Adult Center	Secretary (Adult Center)	\$16.97	32,327.85	7.5 Hrs/ 12 mo./ 254 Days
Adult Services	Beckman Adult Center	Service Assistant	\$21.47	43,627.04	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Beckman Adult Center	Service Assistant	\$24.32	49,418.24	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Franks Adult Center	Activity Supervisor	\$25.28	46,553.12	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Franks Adult Center	Adult Center Manager	\$43.13	79,423.90	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Franks Adult Center	Custodial Aide	\$10.93	22,209.76	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$15.07	26,583.48	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$15.44	27,236.16	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$16.10	28,400.40	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$24.80	43,747.20	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$17.28	30,481.92	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$18.38	32,422.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$24.80	43,747.20	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$18.38	32,422.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$22.65	39,954.60	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$18.48	32,598.72	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$22.65	39,954.60	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$18.38	32,422.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Equipment Operator	\$14.89	26,265.96	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Habilitation Specialist 2	\$20.26	35,738.64	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Habilitation Specialist 2	\$24.60	43,394.40	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Lead Custodian	\$15.71	31,922.72	8 Hrs./ 12 Mo./ 254 Days

Adult Services	Franks Adult Center	LPN	\$24.17	42,635.88	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Physical Therapist	\$41.15	75,777.73	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Franks Adult Center	Production Supervisor	\$30.91	56,920.77	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Franks Adult Center	Registered Nurse (Adult Center)	\$37.74	66,573.36	7 Hrs/12 Mo./252 Days
Adult Services	Franks Adult Center	Secretary (Adult Center)	\$15.50	29,527.50	7.5 Hrs/ 12 mo./ 254 Days
Adult Services	Franks Adult Center	Service Assistant	\$19.67	39,969.44	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Kidd Adult Center	Activity Supervisor	\$26.06	47,989.49	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Kidd Adult Center	Adult Center Manager	\$43.13	79,423.90	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Kidd Adult Center	Behavior Support Specialist	\$24.53	45,172.00	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Kidd Adult Center	Custodial Aide	9.06	9,205.04	4 hrs./ 12 Mo/ 254 Days
Adult Services	Kidd Adult Center	Custodian	\$14.80	30,073.60	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Kidd Adult Center	Custodian	\$15.16	30,805.12	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.69	25,913.16	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$17.28	30,481.92	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$15.07	26,583.48	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$15.44	27,236.16	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$16.10	28,400.40	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$16.68	29,423.52	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$16.68	29,423.52	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$15.44	27,236.16	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$18.48	32,598.72	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$24.80	43,747.20	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$15.07	26,583.48	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$17.28	30,481.92	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$18.38	32,422.32	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$24.80	43,747.20	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$18.38	32,422.32	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$24.80	43,747.20	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$19.67	34,697.88	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$14.31	25,242.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Direct Services Specialist	\$13.88	24,484.32	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Equipment Operator	\$15.31	27,006.84	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Habilitation Specialist 2	\$36.67	64,685.88	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Habilitation Specialist 2	\$19.67	34,697.88	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Lead Custodian	\$18.85	38,303.20	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Kidd Adult Center	LPN	\$23.70	41,806.80	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Production Supervisor	\$26.84	49,425.86	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Kidd Adult Center	Registered Nurse (Adult Center)	\$32.00	56,448.00	7 Hrs/12 Mo./252 Days
Adult Services	Kidd Adult Center	Secretary (Adult Center)	\$22.77	43,376.84	7.5 Hrs/ 12 mo./ 254 Days
Adult Services	Kidd Adult Center	Service Assistant	\$18.48	37,551.36	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Kidd Adult Center	Speech Language Pathologist	\$47.16	83,190.24	7 Hrs/12 Mo./252 Days
Adult Services	Northside	Activity Supervisor	\$22.40	41,249.60	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Northside	Custodian	\$15.51	31,516.32	8 Hrs./ 12 Mo./ 254 Days
Adult Services	Northside	Equipment Operator	\$15.69	27,677.16	7 Hrs/12 Mo./252 Days
Adult Services	Northside	General Manager of Adult Services	\$54.41	100,196.02	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Northside	Production Supervisor	\$30.00	55,245.00	7.25 Hrs./ 12 Mo/ 254 Days
Adult Services	Northside	Vehicle Operator	\$20.60	41,529.60	8 Hrs./12 Mo./ 252 Days
General Assembly	Northside	General Assembly Secretary	\$22.77	41,930.96	7.25 Hrs./ 12 Mo/ 254 Days
General Assembly	Northside	General Manager of General Assembly	\$54.41	100,196.02	7.25 Hrs./ 12 Mo/ 254 Days
General Assembly	Northside	Production Engineer	\$31.92	58,780.68	7.25 Hrs./ 12 Mo/ 254 Days
General Assembly	Northside	Rehabilitation Engineer	\$47.48	87,434.42	7.25 Hrs./ 12 Mo/ 254 Days
General Assembly	Northside	Sales Representative	\$22.40	41,249.60	7.25 Hrs./ 12 Mo/ 254 Days

	A	B	C	D	E	F	G	H	I	J	K
1	<b>Hamilton County Developmental Disabilities Services</b>										
2	<b>Attachment 4 - Pick up and drop off information</b>										
3	<b>March 28, 2016</b>										
4											
5	The following information represents the approximate pickup and drop off locations for the people who attend the HCDDS adult centers for whom										
6	we are provider of record for NMT										
7											
8	Note: Highlighted riders represent people who use a wheelchair										
9											
10		<b>FRANKS</b>				<b>KIDD</b>				<b>BECKMAN</b>	
11		address	days att.			address	days att.			address	day att.
12		<b>347</b>				<b>200</b>				<b>300</b>	
13	45205	4100 8th St.	m-f		45215	1100 Springwater Ct.	m-f		45240	80 Versailles	m-f
14	45205	800 Elberon Ave.	m,t		45215	1100 Springwater Ct.	m-f		45240	600 Cascade Dr.	m-f
15	45205	1100 McPherson Ave.	m-f		45240	800 Yorkhaven Rd.	m,w,f		45240	1400 Kelvin Ct.	m-f
16	45238	1900 Wildoak	m,w		45241	10200 Kingsport Dr.	m-f		45240	900 Goodhue	m-f
17	45238	750 Grand Ave.	m,t,w,r		45246	130 Rosetta Ct.	m-f		45240	11000 Hinkley Dr.	m-f
18	45238	3900 Vincent Ave.	m-f		45246	500 W. Kemper Rd.	t,w,h,f		45240	11400 Folkstone Dr.	w,h,f
19	45238	2700 E Towers Dr.	r,f		45246	70 Towne Commons Way	m-f		45240	90 Versailles	m-f
20	45248	300 Lilenthat St.	m-f		45246	900 E. Cresentville Rd	m-f		45246	800 Clearfield Ln.	m-f
21					45246	1200 E. Cresentville Rd	m-f		45246	800 Clearfield Ln.	m-f
22					45246	1100 Benedict Ct.	m-f		45246	800 Clearfield Ln.	m-f
23											
24		<b>340</b>				<b>201</b>					
25	45030	500 S. State St. D	m,t,w,r		45230	600 Bennetwoods Ct.	m-f		45231	2300 Walden Glen	m-f
26	45030	5000 Sandstone Cr.	m-f		45230	1200 Birney Ln.	m-f		45231	2500 Willow Ct.	m-f
27	45030	100 N. Walnut St.	m-f		45244	2600 Monchateau Dr.	m-f		45231	1400 Adams Rd.	m-f
28	45230	10000 Stoneridge Way	m-f		45244	6900 Goldengate	m-f		45231	9200 Duvall Pl.	m-f
29	45248	3400 Markay Ct.	m,w,f						45231	9200 Duvall Pl.	m-f
30	45248	3400 Markay Ct.	m-f						45231	9200 Duvall Pl.	m-f
31	45248	3400 Markay Ct.	w,r,f						45231	9200 Duvall Pl.	m-f
32						<b>202</b>			45231	1500 Adams Rd.	m-f
33					45227	5700 Prentice St.	m-f		45240	11000 Quailwood Dr.	m-f
34					45227	5500 Madison Rd.	m-f		45240	11000 Quailwood Dr.	t,w,f
35	45052	100 Clift Rd.	m-f		45227	5500 Madison Rd.	m-f		45251	3000 Compton Rd.	m-f
36	45211	2300 Harrison Ave,	m,w,f		45227	5300 Tompkins	m-f				
37	45211	3400 Cheviot Ave.	w,f		45227	6100 Madison Rd.	t,w				

	A	B	C	D	E	F	G	H	I	J	K
38	45211	3400 Cheviot Ave.	m-f		45230	2300 Sussex Ave.	m-f				
39	45211	3500 Carmel Terrace	m-f		45230	6400 Corbly St.	t,w,h		302		
40	45211	3500 Carmel Terrace	m-f		45230	6500 Graf Dr.	m-f		45231	11000 Pippen Rd.	m-f
41	45211	3000 Brakenwoods Ln.	m-f		45230	1600 Longbourne St.	m		45231	11000 Pippen Rd.	m-f
42	45214	2500 Hansford Pl.	m-f						45239	2400 Clover crest	m-f
43	45214	2500 Hansford Pl.	m-f						45239	2400 Kipling Ave.	m-f
44	45214	2500 Hansford Pl.	m-f		203				45239	2500 Sandhurst Dr.	t,f
45	45225	2200 WesternNorthern Ave.	m-f		45215	1000 Matthews Dr.	m,h,f		45239	2500 Sandhurst Dr.	m-f
46	45225	3500 McHenry Ave.	m-f		45215	1300 Market St.	m-f		45239	2600 Sandhurst Dr.	m-f
47					45215	10000 Grandview Ave	m-f		45240	6900 Grange Ct.	m-f
48					45215	1200 Terry Ct.	m-f		45247	6700 Cheviot Rd.	m-f
49	342				45215	800 Van Buren Ave.	m-f		45247	6700 Cheviot Rd.	m-f
50	45211	4400 Homelawn Ave.	m-f		45217	60 Glenwood Ave	m-f		45247	6700 Cheviot Rd.	m-f
51	45219	700 Riddle Rd.	m,t,w,r		45229	3600 Harvey Ave.	m-f				
52	45220	200 Woolper Ave.	m-f								
53	45220	200 Baxter Ave.	m,w						303		
54	45220	600 Probasco Ct.	m,t,w,r		204				45224	1600 Llanfair	t,h,f
55	45220	3500 Vine St.	m-f		45236	7700 Montgomery Rd.	m-f		45239	2700 W. Northbend Rd.	m-f
56	45238	2700 E. Tower Dr.	m-f		45236	3800 Broadlawn Ct.	m-f		45239	2500 Sandhurst Dr.	t,w,f
57					45237	6600 E. Farm Acres Dr.	m-f		45239	2700 W. Northbend Rd.	m-f
58					45237	200 Mary Crest Dr.	m-f		45239	2500 Sandhurst Dr.	t,w,f
59	343				45237	1300 McClure Ave	m-f		45239	2400 W. Northbend Rd.	m-f
60	45233	1100 Neeb Rd.	m-f		45243	6800 Linfield Ct.	m-f		45239	2500 Sandhurst Dr.	m-f
61	45238	1200 Pinenot Dr.	m-f		45243	6800 Linfield Ct.	m,w,f		45239	2200 W. Northbend Rd.	m-f
62	45238	1200 Pinenot Dr.	m-f						45239	2700 W. Northbend Rd.	m-f
63	45238	1200 Pinenot Dr.	m-f						45251	4100 Ascot Ct.	m-f
64	45238	400 Plum Rd.	m-f		205						
65	45238	5300 Romance Lane	m-f		45206	1800 Yorktown Rd	m-f				
66	45238	280 Brookforest Dr.	m-f		45208	2600 Madison Rd	t,h		304		
67	45238	500 Anderson Ferry Rd.	m-f		45229	4000 Ledgewood Dr.	m-f		45224	6400 Teakwood Ct.	m-f
68	45238	200 Kinsman Ct.	m-f		45229	300 Forest Ave.	m-f		45224	6300 Edwood Ave.	m-f
69	45238	5300 Teaberry Ct.	m-f		45229	800 Windham	m-f		45224	6300 Edwood Ave.	m-f
70	45238	200 Brookforest Dr.	m-f		45237	7700 Greenland Pl	m-f		45224	6300 Edwood Ave.	m-f
71	45238	150 Palisades Pointe	m-f		45237	7600 Greenland Pl	m-f		45224	6300 Edwood Ave.	m-f
72					45237	7600 Greenland Pl	t,h		45224	6300 Edwood Ave.	m-f
73					45237	7300 Scottwood Dr.	m-f		45224	6600 Oak Knoll Dr.	m-f
74	344				45237	7300 Scottwood Dr.	m-f		45224	6600 Oak Knoll Dr.	m-f

	A	B	C	D	E	F	G	H	I	J	K
75	45238	4200 Foley rd.	m-f		45237	5200 Grafton Ave	m-f		45231	1500 Southridge Ln	m-f
76	45238	1000 Coronado Ave.	m-f		45237	1900 Berkley Ave.	m,w				
77	45238	4200 Delryan Dr.	m-f								
78	45238	4700 Delhi Ave.	m-f						<b>305</b>		
79	45238	900 Hillard Dr.	m,t,f		<b>206</b>				45224	6300 Meis Ave	m-f
80					45215	1000 Faxon Ct.	m-f		45224	6200 Betts Ave.	m-f
81					45216	200 Forestwood Dr.	m-f		45224	6200 Betts Ave.	m-f
82	<b>345</b>				45224	5900 Sunridge Dr.	t,w,h		45224	1400 Thomwood Dr.	m-f
83	45238	4700 Clevesdale Dr.	m-f		45224	900 W. Northbend Rd.	m-f		45224	1400 Thomwood Dr.	w,h,f
84	45238	2000 Earlwood Ct.	m-f		45231	400 Altaview Ct.	m-f		45231	9300 Bluegate Dr.	m-f
85	45238	2000 Earlwood Ct.	m-f		45231	900 Sarbrook Dr.	m-f		45231	9300 Bluegate Dr.	m-f
86	45238	5700 Walkerton Dr.	m-f		45231	300 Meadowcrest Rd.	t,h,f		45231	7800 Harrison Ave.	m-f
87	45238	5300 Rawhide Ct.	m-f		45231	9000 Fountainbleau T	m-f		45239	2800 Gardenia Ln	m-f
88	45238	1100 Covedale Ave.	m-f		45231	900 Sarbrook Dr.	m-f		45239	6700 Simpson Ave.	m-f
89	45238	5100 Willnet Dr.	m-f		45231	1000 Gracewind Ct.	m-f				
90	45248	5500 Northglen St.	m-f								
91	45248	3600 Coral Gables Rd.	m-f						<b>306</b>		
92					<b>207</b>				45218	90 Julep Ln	m-f
93					45213	3800 Congreve Rd.	m-f		45218	800 Carini Ln	m,f
94	<b>346</b>				45213	3800 Congreve Rd.	m-f		45224	1400 Thomwood Dr.	m,w,f
95	45214	2100 Quebec Ave.	m-f		45213	3800 Congreve Rd.	m-f		45231	8700 Cottonwood Dr.	m-f
96	45223	5000 Dovetail Ln.	m-f		45213	3800 Congreve Rd.	m-f		45240	11000 Norbourne Dr.	m-f
97	45223	5000 Dovetail Ln.	m-f		45213	5600 View Pointe Dr	m-f		45240	11000 Winston Cr.	m,w,f
98	45223	1700 Hanfield St.	m-f		45213	6400 Montgomery Rd	m,t		45240	11000 Winston Cr.	m-f
99	45223	1700 Hanfield St.	m-f		45213	6600 Montgomery Rd	m,t,w,f		45240	11000 Winston Cr.	m-f
100	45223	1700 Hanfield St.	m-f		45237	6700 Hampton Dr.	m-f		45240	1600 Mandarin Ct.	m-f
101	45223	1500 Springlawn Ave.	m-f		45240	1800 Edgewater Dr.	m-f				
102	45223	1500 Springlawn Ave.	m-f								
103	45225	1600 Pulte St.	m-f						<b>307</b>		
104					<b>208</b>				45239	3200 Rocker Dr.	m-f
105					45215	700 Stewart Ave.	m-f		45247	7300 Appleridge Ct.	m-f
106	<b>348</b>				45215	40 Gahl Terrace	m-f		45247	7300 Appleridge Ct.	m-f
107	45002	7400 Country Village Dr.	m-f		45215	300 Washington Ave.	m-f		45247	5500 Fawnwood Ln	m-f
108	45002	7100 Wesselman Rd.	m-f		45216	100 Sheehan Ave.	m-f		45247	5900 Bluerock Rd.	m-f
109	45211	2700 Baker Ave.	m-f		45216	200 Avalon	m-f		45251	3300 Struble Rd.	m-f
110	45247	7000 Boulder Path Dr.	m-f		45216	200 Avalon	m-f		45252	4200 Endeavor Dr.	m-f
111	45247	5500 Race Rd.	m-f		45216	8200 Monon Ave.	m-f		45252	4200 Endeavor Dr.	m-f

	A	B	C	D	E	F	G	H	I	J	K
112	45248	4400 Hutchinson Rd.	m,t,w		45237	2300 Larkfield Dr.	m-f		45252	5800 Day Rd.	m-f
113											
114											
115	<b>349</b>				<b>209</b>				<b>308</b>		
116	45211	2500 Meyerhill Dr.	m-f		45227	7400 Montgomery Rd.	m-f		45239	3300 Citrus Ln	m-f
117	45211	4300 Bridgetown Rd.	m-f		45236	6300 Elwynne Dr.	m-f		45239	3300 Citrus Ln	m-f
118	45211	2600 Fleetwood Ave.	m,f		45236	6600 Stoll Ln	?		45239	3200 Basswood Ln	m-f
119	45211	3300 Ferncroft Dr.	m-f		45236	6300 Elwynne Dr.	m-f		45247	6700 Schweitzerhoff Rd.	m-f
120	45211	3300 Ferncroft Dr.	m-f		45236	3900 Elm	m-f		45247	6800 Skies Edge Ct.	m-f
121	45211	3300 Ferncroft Dr.	m-f		45236	6300 Elwynne Dr.	m-f		45247	3700 Lincoln Rd.	m-f
122	45211	2500 Hollensshade Ave.	m-f		45236	4000 Longford Dr.	m-f		45247	3700 Lincoln Rd.	m-f
123	45211	2500 Hollensshade Ave.	m-f		45236	4300 Orchard Ln.	m,t,w,h		45247	6000 Ramblingridge Dr.	m-f
124	45225	3300 McHenry Ave.	t,w,f		45236	6300 Elwynne Dr.	m-f				
125	45238	3000 Queen City Ave.	m-f								
126	45238	3000 Queen City Ave.	m-f						<b>309</b>		
127	45238	3000 Epworth Ct.	m-f		<b>211</b>				45223	5900 Saranac Ave.	m-f
128	45238	1700 Vienna Woods Dr.	m-f		45215	1700 Keith Dr.	m-f		45224	1100 Homeside St.	m-f
129					45236	8300 Kenwood Rd.	m-f		45224	500 Christmas Ln	m-f
130					45236	3900 Hunt Rd	m-f		45231	8500 Sunlight Dr.	t,w,h,f
131	<b>350</b>				45236	7900 Kenwood Rd.	w		45231	8700 Planet Dr.	m,h,f
132	45203	700 Clark	m-f		45236	3900 Hunt Rd	m-f		45231	3000 Preserve Ln	m-f
133	45211	2300 Harrison Ave.	m-f		45236	4100 Jud Dr.	t,h,f		45231	9100 Neil Dr.	m-f
134	45211	2300 Harrison Ave.	r		45236	3800 E. Galbraith Rd	t,f		45239	2800 Bluerock Rd.	m-f
135	45211	2700 Powell Dr.	m-f		45236	8300 Kenwood Rd.	m,t,w		45239	2800 Bluerock Rd.	m,t,h
136	45211	2100 Harrison Ave.	m-f		45242	6500 Donjoy Dr.	m,t,w,h		45239	5500 Colerian Ave.	m,t,h,f
137	45214	2500 Hansford Pl.	m-f		45242	5300 Bayberry Dr.	t,w,h				
138	45214	800 Popular St.	m-f		45242	9200 Village Green Dr.	m-f				
139	45230	400 Mohawk St.	m-f		45242	9200 Village Green Dr.	m,t,w		<b>310</b>		
140	45238	3100 West Tower Ave.	t,w,r,f		45242	5300 Bayberry Dr.	m,h,f		45224	1100 Highcliff Ct.	m-f
141	45248	5600 Woodhaven Rd.	m-f						45231	1600 Norcol Ln	m-f
142									45231	7000 Clovernook	m-f
143					<b>212</b>				45231	7000 Clovernook	m-f
144	<b>351</b>				45216	100 W. 68th St.	m-f		45231	7000 Clovernook	m-f
145	45001	100 Oak St.	m-f		45217	4800 Chalet Dr.	m-f		45231	7000 Clovernook	m-f
146	45002	7600 Zion Hill Rd	m-f		45217	7 Glenwood Ave	m-f		45231	7600 Clovernook Ave.	m-f
147	45002	300 E. State St.	m-f		45217	100 Clinton Springs Ave.	m-f		45231	7600 Clovernook Ave.	m-f
148	45052	10200 Mr. Nebo Rd.	m-f		45220	3200 Vine St.	m-f		45231	1300 Madeleine Ct.	m-f

	A	B	C	D	E	F	G	H	I	J	K
149	45052	7800 Foxtrot Dr.	m,t,w,r		45237	1300 Franklin Ave.	m-f		45231	8200 Kingsmere Ct.	m-f
150	45233	2700 Gallia Dr.	m-f		45237	1400 California Ave.	m-f		45231	8900 DeSoto Dr.	m-f
151									45231	1200 Ashmore Ct.	m-f
152											
153	<b>352</b>				<b>213</b>						
154	45233	6500 Thunderhill Ln.	m-f		45216	200 Hunsford St.	m-f		<b>311</b>		
155	45233	6400 Timberhill Ct.	m-f		45216	200 Hunsford St.	m-f		45212	2700 Harris Ave.	t,h,f
156	45233	5200 Hillside	m-f		45232	700 Hand St	m-f		45212	1500 Sherman	m,w,f
157	45233	6700 Jersey Ave.	m-f		45232	700 Fromme Ave	m-f		45212	2600 Leslie Ave.	m-f
158	45233	100 Huey Ave.	t,r		45232	700 Fromme Ave	m-f		45212	1800 Elm Ave.	w,h
159	45233	5900 Bender Rd.	m-f		45232	4500 Melrose Ave.	m-f		45212	4200 Ivanhoe Ave.	m-f
160	45248	6200 Werk Rd.	t,w,r,f		45237	6900 Glen Meadows Ln.	m-f		45212	4200 Ivanhoe Ave.	m-f
161					45237	7800 Stillwell Rd.	m-f		45212	4500 Franklin Ave.	m,t
162									45212	3700 Spencer Ave.	m-f
163	<b>353</b>								45212	1700 Mills Ave.	m-f
164	45211	3200 Mayridge Ct.	m-f		<b>214</b>						
165	45211	4400 Westwood Northern Blvd.	m-f		45214	3200 Longmeadow Ln.	m-f				
166	45211	4400 Westwood Northern Blvd.	m-f		45215	3200 Longmeadow Ln.	m-f		<b>312</b>		
167	45211	4300 St. Martins Pl.	m-f		45236	8200 Ridge Rd.	m-f		45212	2600 Sheridan Dr.	m-f
168	45211	3900 School Section	m-f		45236	3200 Longmeadow Ln.	m-f		45212	5700 Carthage Ave.	m,t,w,f
169	45211	5400 Lees Crossing Dr.	m-f		45241	3600 Horncastle Dr.	m-f		45212	5500 Bosworth Pl.	m-f
170	45211	3800 Westwood Northern Blvd.	m-f		45241	3900 Malaer Dr.	m-f		45212	5700 Glengate Ln.	m-f
171	45211	3800 Westwood Northern Blvd.	m-f		45242	4600 Hunt Rd.	m-f		45216	100 Galbraith Rd.	m-f
172	45211	3500 Crestnoll Dr.	m-f		45242	9000 Spookridge Ln	m-f		45216	100 Galbraith Rd.	m-f
173	45238	1200 Pinenot Dr.	m-f		45242	4600 Hunt Rd.	m-f		45216	100 Galbraith Rd.	m-f
174	45238	3800 Dina Terrace	m-f		45242	4600 Hunt Rd.	m-f		45230	5600 Rolston Ave.	m-f
175					45242	9400 Highland Ave.	m,w,f				
176											
177									<b>313</b>		
178					<b>215</b>				45206	2600 Melrose Ave.	m-f
179					45208	3200 Hardisty Ave	m-f		45206	2600 Melrose Ave.	m-f
180					45208	2100 Pogue Ave.	m-f		45206	2600 Melrose Ave.	m-f
181					45209	3000 Minot Ave.	m,t,h,f		45220	200 Woolper Ave.	m-f
182					45209	4100 Paxton Woods Ln	t,w,h,f		45229	4 Lenox Ln	m-f
183					45213	5600 View Pointe Dr.	m-f		45240	2000 Bluehill Dr.	m-f
184					45227	4900 Charlemer Dr.	m-f		45240	10000 Birchridge Dr.	m-f
185					45213	5500 Verulam Ave.	m,w,f		45240	10000 Maplehill Dr.	m-f

	A	B	C	D	E	F	G	H	I	J	K
186											
187									<b>314</b>		
188									45231	1600 Brightview Dr.	m-f
189									45231	1600 Brightview Dr.	m-f
190									45231	1600 Brightview Dr.	m-f
191									45231	1600 Brightview Dr.	m-f
192									45231	2600 Haverknoll Dr.	m,t,w,h
193									45240	2200 Springside Ct.	m-f
194									45240	11000 Passage Way	m-f
195									45240	11000 Raphael Pl.	w,h,f
196									45251	3000 Laverne Dr.	m-f
197									45251	2100 Deermeadow Dr.	m-f
198											
199											
200									<b>315</b>		
201									45207	2300 Grigg Ave.	m-f
202									45207	3300 Woodburn Ave	m-f
203									45207	1800 Clarion Ave.	m-f
204									45207	2000 Crane Ave.	m-f
205									45207	3500 Evanston Ave.	m-f
206									45207	3400 Fernside Pl.	m-f
207									45207	3300 Fairfield Ave.	m-f

**RFQ Evaluation Form – Attachment #5**

Firm’s Name: \_\_\_\_\_

Evaluator’s Name: \_\_\_\_\_

Date of Evaluation: \_\_\_\_/\_\_\_\_/2016

Evaluation Criteria	Possible Points	Points Awarded
<p><b>Scope of Services</b> - The RFQ Statement shall indicate the ability of the Respondent to meet the terms of the RFQ, especially the ability to address the items delineated in the Anticipated Scope of Services. In determining whether a Respondent is responsible, factors to be considered include, without limitation:</p> <ul style="list-style-type: none"> <li>• Competence of the provider to support a large number of adults with developmental disabilities in receiving day array services;</li> <li>• The transition of services will be completed in such a way as to minimize the disruption in the lives of the people served in the centers;</li> <li>• Ability of the provider to serve to people across the acuity spectrum with an emphasis on individuals with extensive medical and behavioral challenges;</li> <li>• The provider’s willingness to include a paid work element to the day array service model;</li> <li>• The provider’s willingness to offer Non-Medical Transportation to enrollees of the centers;</li> <li>• The provider’s willingness to employ a significant portion of the current staff at their current salaries in order to provide continuity of care for the people served;</li> <li>• Services will be established in such a manner as to create an environment that mirrors the current service model. In order to accomplish this it is important that the provider assuming services employ as much of the administrative staff as necessary;</li> <li>• The provider’s willingness to provide these services within the three centers currently being utilized;</li> </ul>	50	
<p><b>Quality of Services</b> - The RFQ Statement shall indicate the competence of personnel whom the Respondent intends to assign to the Project.</p> <ul style="list-style-type: none"> <li>• Past performance of the provider as reflected by the evaluations of quality assurance organizations in locales where the provider is currently operating;</li> <li>• Past performance of the provider as reflected in the satisfaction of people served</li> </ul>	25	
<p><b>Transition Plan</b> - The RFQ statement shall indicate the methods used by the Respondent to address factors needed to complete a timely and efficient transition of services:</p> <ul style="list-style-type: none"> <li>• Timeline is specific, measurable, attainable and realistic</li> <li>• Timeline addresses all pertinent factors, including but not limited to:                             <ul style="list-style-type: none"> <li>• Enrollment of individuals;</li> <li>• Demographic database;</li> <li>• Seamless transition with no lost days of service;</li> <li>• Hiring of staff</li> <li>• Communication Plan</li> <li>• Information Technology Systems</li> <li>• Production/payroll systems</li> </ul> </li> </ul>	25	

<b>Totals</b>	100	
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## Question and Answers for Bid #RFQ 040-16/gsr - Provider of Day Array Services for People with Developmental Disabilities

### Overall Bid Questions

There are no questions associated with this bid.