

AGENDA

WILL COUNTY BOARD OF HEALTH MEETING WILL COUNTY HEALTH DEPARTMENT 501 ELLA AVENUE JOLIET, IL 60433 CONFERENCE ROOM 1005A / 1005B

FERENCE ROOM 1005A / 1005 October 15, 2025– 3:00PM

MISSION STATEMENT: To promote and protect the health of Will County through equitable policies and programs tailored to the needs of the community, ensuring optimal social, mental, and physical well-being for all.

VISION STATEMENT: Deliver sustainable programs and policies in response to the public health needs of the community.

CORE VALUES: Respect, Integrity, Professionalism, Quality, and Dedication.

- I. Call to Order/Roll Call......3:00p.m.
- II. Pledge of Allegiance to the Flag
- III. President's Comments
- IV. Executive Director's Comments Recognitions
- V. Public Comment for Agenda Items Only **Discussion**
- VI. Approval of Minutes (pgs. 1-6) September 17, 2025 Regular Session – **Motion**
- VII. Treasurer's Report & Department Financial Reports September 30, 2025 – **Motion** (pgs.7-10)
- VIII. Reports from Divisions (pgs. 11-48)
 Division Statistical Reports **Discussion** (pgs. 49-53)
- IX. Old Business
 - A. Funding Update **Discussion**
- X. New Business
 - A. Resolutions #25-62 #25-65
 - 1. Resolution #25-62 Approval of Security Contract (Adm) Motion (pgs. 54-116)
 - 2. Resolution #25-63 Approval of LocumTenens.com Client Agreement (BH) Motion (pgs. 117-127)
 - 3. Resolution #25-64 Approval of Appropriation of Funds (CHC) Motion (pgs. 128-145)
 - 4. Resolution #25-65 Approval of Surplus Equipment (Adm) Motion (pgs. 146-150)
 - B. Discussion of Amended BOH By Laws (pgs. 151-155)
 - C. Governing Council Amended By Laws **Discussion** (pgs. 156-173)
- XI. Executive Session re: Employment/ Legal Matters Motion & Roll Call
- XII. Board Approval of Personnel Status Report **Motion** (pgs. 174-175)
- XIII. Board Members' Concerns and Comments
- XIV. Public General Comments and Concerns Discussion
- XV. Adjournment Motion



WILL COUNTY HEALTH DEPARTMENT BOH MEETING MINUTES

September 17, 2025

The monthly meeting of the Board of Health held at the Will County Health Department, 501 Ella Avenue, Joliet, IL was called to order at 3:00 p.m., Chief Paul Hertzmann, President presiding.

ROLL CALL/ QUORUM WAS NOT PRESENT AT 3:00pm. QUORUM WAS MET AT 3:05pm

MEMBERS' PRESENT

Chief Paul Hertzmann, President
Billie Terrell, PhD., ACSW, Vice President
Edna Brass, MA, BS, Secretary
Allison Gunnink, MBA, LPMT, MT-BC (arrived @ 3:05pm)
Dr. Lipinski
Dr. Morales
Pamela Robbins, MSN, RN
Mica Freeman (arrived @ 3:14pm)
José Vera (arrived @ 3:05pm)

MEMBERS ABSENT

Chief Carey
Dr. Soderquist
Ms. Mitchell

STAFF PRESENT

Elizabeth Bilotta, Executive Director, Administration Denise Bergin, Assistant Executive Director, Administration Mary Kilbride, Executive Assistant, Administration Cindy Jackson, Director of Administrative Services

Stacy Baumgartner, Chief Executive Officer, Community Health Center

Dr. Jennifer Byrd, Chief Medical Officer, Community Health Center

Dr. Kathleen Burke, Program Coordinator, Behavioral Health

Cheryl Picard, Assistant Director of Family Health Services

Alpesh Patel, Program Coordinator, Family Health Services

Sean Conners, Director of Environmental Health

Barb Agor, Safety & Risk Reduction Officer, Administration

Armando Reyes, Director of Compliance, Administration

Ted Strejcek, Information Technology Specialist II, Administration

Caitlin Daly, Program Manager, MAPP/Community Planning, Family Health Services

Magda Lara, Staff Nurse II, Family Health Services

Kathleen Harkins, Community Outreach and Marketing Coordinator, Community Health Center

Trisha Kautz, Director Laboratory Operations, Environmental Health

Randel Jurek, Director of ITT, Administration

Jillian Carlisle, Assistant Director of ITT, Administration

Rita Slechter, Program Manager, Family Health Services

Sylvia Muniz, Director of Family Health Services

Maureen Miller, Patient Access Manager, Community Health Center

Kevin Juday, Media Services Manager, Administration

Norma Musvibe, Director of Nursing, Community Health Center

Katie Schaefers, Finance & Grant Mgmt. Coordinator, Administration

Stacy Morris-Jones, Outreach Specialist II, Family Health Services

Katie Weber, Emergency Preparedness & Response Coordinator, Administration

Thomas Swierczyna, Registered Nurse, Family Health Services

Michelle Zambrano, Director of Operations, Behavioral Health

Stacey Knack, Director of HR, Administration Carol Ricken, Director of Operations, Community Health Center Melissa Sporar, Family Nurse Practitioner, Community Health Center

OTHERS PRESENT

Dan McGrath, Assistant State's Attorney Vince Logan, County Board Jim Richmond, County Board

A quorum was met at 3:05pm.

PLEDGE OF ALLEGIANCE: Chief Hertzmann

PRESIDENT'S COMMENTS: Chief Hertzmann thanked all the Health Department staff as well as BOH members.

EXECUTIVE DIRECTOR'S COMMENTS

- Ms. Bilotta spoke of flu shot being available in the back of the community room.
- Illinois Department of Public Health accepted the submitted IPLAN. The plan goes until October 27, 2030.
- · Ms. Bilotta spoke of Aishwarya Balakrishna accepting the position of Health Equity Manager.
- · September is Suicide Awareness month. It is time to raise awareness and spread hope and spark meaningful action.
- · September is also National Preparedness month to encourage Americans to prepare for emergencies.
- September is also Behavioral Health and National Recovery month.
- Illinois Department of Public Health is acknowledging Newborn Screening Awareness month.

Ms. Muniz announced the retirement of Ms. Slechter, Program Manager, after 10 yrs. with the Health Department. She was presented with a certificate.

Ms. Picard recognized Ms. Carlson, Immunization Program Coordinator, after 40 yrs. at the Health Department. She was presented with a certificate.

PUBLIC COMMENTS FOR AGENDA ITEMS ONLY: None

APPROVAL OF BOARD OF HEALTH MINUTES

Moved to approve August 20th, 2025, regular meeting minutes as presented.

RESULT: APPROVED [UNANIMOUS]

MOVER: Dr. Lipinski SECONDER: Dr. Terrell

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Mr. Vera

ABSTAIN: None

Ms. Bergin presented a detailed explanation of the Agency's financial statements as provided by the County ending August 31st, 2025. The Board of Health moved to approve the Treasurer's Report and Department Financial Reports for the month of August 2025 as presented.

RESULT: APPROVED [UNANIMOUS]

MOVER: Ms. Gunnink SECONDER: Dr. Terrell

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Mr. Vera

ABSTAIN: None

REPORTS FROM DIVISIONS

Written reports were provided in the packet by the Executive Director, Chief Executive Officer, Division Directors, EPR Coordinator, and Media Services Manager.

Dr. Jennifer Byrd - Chief Medical Officer, Community Health Center (Presented Reports for the month of September)

- Dr. Byrd spoke of in the month of August, Childhood Immunization Awareness was featured. Illinois ranks #29 in the nation, with a 66% childhood vaccination rate.
- Dr. Byrd spoke briefly about the Weight Loss Clinic updates.
 - * Dr. Lipinski questioned if we were getting the GLP-1 in the weight loss clinic and he questioned if we are having any issues with the medications? Dr. Byrd stated we get the GLP-1 through 340B Plan, but we are having issues with the diabetic monitor since we can't get paid for it.

Ms. Baumgartner - Chief Executive Officer, Community Health Center (Presented Reports for the month of September)

- Ms. Baumgartner spoke about the Community Paramedic Program. We have been meeting with the Joliet Fire Department as well as with our IRIS Referral Program to make sure that we can refer patients to the program.
- Ms. Baumgartner spoke of the Secure Firearms Program. A kick-off meeting was held in August to discuss the project.
- School Based Health Center BH will be offered two days per week, therapy services will continue five days a week and primary care will be up to 3 days per week in September but will increase to full time once the APRN has been onboarded.
- There was a kickoff meeting with health center leadership and the Electronic Health Record Vendor for a pilot program to beta test an online registration and parental consent interface.
- IPHCA announced they were awarded funding to develop a network of 35 health centers committed to health care through health care technology. This will help to prepare leadership for the future in community health care.
 - * Ms. Gunnink asked what EHR we are using? Ms. Baumgartner stated Nextgen.

Mr. Juday - Media Services (Presented Reports for the month of September)

- Mr. Juday spoke of the new website for the MAPP program that will be finalized by the end of October.
- The FOURCE gave a final presentation and presented their campaigns that took place from July 7th, 2025-August 21st, 2025.

Ms. Jackson - Director of Administrative Services (Presented Reports for the month of September)

- Ms. Jackson spoke of going out to bid for a new Security Contract for FY26-28. The Prebid Meeting will take place on Friday, September 26th. A walk-through will take place at all locations involved. We have the Bid opening on Friday, October 3, 2025.
- There have been issues with our elevator at the Health Department. We are currently working to get some temporary office space on the main floor or temporarily schedule telehealth appointments for clients that are unable to utilize the stairs.
- NBO Open House will take place on September 29th @ 2:00pm.
 - Ms. Gunnink questioned if we could have Spanish signs hung at NBO? Ms. Jackson stated you need a permit for a sign and unfortunately, we have used every permit available for the NBO Location. There is Bilingual sign posted on the doors at NBO, and we also have Spanish speaking staff available.
 - Mr. Vera questioned the possibility of having yard signs around NBO building? Ms. Jackson stated the landlord will not allow any signage in the ground on the property. Ms. Jackson will make sure and request that FHS has a Bilingual sign on their door.

Ms. Agor - Safety and Risk Reduction Officer (Presented Reports for the month of September)

Ms. Agor spoke of the general projects taking place as well as trainings and drills in August.

Mr. Conners - Director of Environmental Health (Presented Reports for the month of September)

- Mr. Conners spoke of the Brucella case being investigated by the Will County Communicable Disease team.
- The Environmental Health Division is submitting for the approval to the Board of Health the revision of the Will County Sewage Treatment and Disposal Ordinance. It was last revised in 2016.
- Illinois Department of Public Health (IDPH) requested assistance from the Will County Health Department Environmental Health and Communicable Disease Programs on a Legionella outbreak at a warehouse facility in Bolingbrook, IL. Two sanitarians accompanied representatives from IDPH to perform an assessment and collected samples from suspected contamination sites. We are currently waiting for the results of the samples.
- Illinois Department of Public Health announced the first human case of West Nile Virus in Will County.
- The Environmental Health division attended a workshop on handling aggressive animals when in the field.

Ms. Zambrano - Director of Operations, Behavioral Health (Presented Reports for the month of September)

- A very productive meeting took place with Chief Cary and his team from the City of Joliet Fire Department Thrive Program. Discussion took place on how our Behavioral Health Dept. could provide services to clients the Fire Department encounters. WCHD received their first referral from the Thrive Program, and the client has been set up with services.
- 102 Total Intakes were reported from August 1st, 2025 August 31st, 2025.
 - * Ms. Gunnink asked, "what is CADC? Ms. Zambrano stated "Certified Alcohol and Drug Counselor"

Dr. Burke - Substance Use Initiatives Coordinator, Behavioral Health (Presented Reports for the month of September)

- There were 0 opioid deaths in the month of August.
- Ten new red boxes have been added in the community for Narcan distribution. We have expanded red box access into the libraries. 1,177 boxes of Naloxone were delivered to the public in August.
- 77 back-to-school kits were distributed to students (college).
- Dr. Burke spoke of two Peer Support Specialists that have joined her staff.

Ms. Muniz - Director of Family Health Services (Presented Reports for the month of September)

- Ms. Muniz spoke about the continued collaboration with school districts, park districts, and community-based organizations to strengthen their tobacco-free policies in Bolingbrook, Wilmington, Joliet and Lockport as just a few.
- The tobacco staff provides community education via a media campaign. There is an ad posted on PACE Buses regarding youth vaping and tobacco prevention.

Ms. Picard - Assistant Director of Family Health Services

• Ms. Picard presented a video by our WIC team at NBO from the parade in Bolingbrook.

Ms. Weber - Emergency Preparedness & Response (EP&R) Coordinator (Presented Reports for the month of September)

- Ms. Weber met with Gabriel Garcia from the Joliet Township on September 3rd, 2025. Gabriel is the new Violence Prevention Community Convener for Joliet Township. This was an introduction to Gabriel and his position and to brief him on all of the services provided by WCHD.
- Illinois Environmental Protection Agency (IEPA) has been covering the cost of the contractors collecting daily filters for BioWatch. We have been notified that IEPA will be unable to cover those costs much longer without a new contract in place. We receive updates each month but without a new contract signed, Illinois will suspend the collections.

OLD BUSINESS:

Funding Update

Ms. Bergin provided a funding update.

* Ms. Freeman stated that being on the Will County Board, she wanted all to be aware that they could submit public opinion in email form or online if interested.

NEW BUSINESS:

Resolutions #25-55 - #25-61

Resolution #25-55 APPROVAL TO REMOVE WCHD ONSITE WASTEWATER TREATMENT ORDINANCE FROM TABLE

RESULT: APPROVED [UNANIMOUS]

MOVER: Dr. Terrell SECONDER: Dr. Morales

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera
ABSTAIN: None

Resolution #25-55 APPROVAL OF WCHD ONSITE WASTEWATER TREATMENT ORDINANCE

Mr. Conners presented and spoke of the changes to the Onsite Wastewater Treatment Ordinance. Ms. Bilotta stated our ordinance has to first be reviewed by Illinois Department of Public Health and then gets reviewed by the State's Attorney's office.

* Ms. Freeman stated she sits on the Ordinance Committee, and she wanted to confirm that the Health Department is okay with all of the changes addressed so far with this Committee.

RESULT: APPROVED [UNANIMOUS]

MOVER: Ms. Gunnink SECONDER: Dr. Terrell

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera

ABSTAIN: None

RESOLUTION #25-56 APPROVAL OF UPTODATE SUBSCRIPTION

Ms. Baumgartner spoke of the request to renew UpToDate subscription for the providers.

* Dr. Morales stated a lot of the things in the subscription have great benefits, but he wanted us to be aware that some information is free through AI but it would not include Continuing Education credits.

RESULT: APPROVED [UNANIMOUS]

MOVER: Dr. Lipinski SECONDER: Dr. Morales

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera
ABSTAIN: None

RESOLUTION #25-57 APPROVAL OF PROVIDER QUALITY ACHIEVEMENT BONUSES (CHC)

Ms. Baumgartner spoke of the annual provider quality achievement bonuses.

RESULT: APPROVED [UNANIMOUS]

MOVER: Dr. Terrell SECONDER: Ms. Freeman

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

ABSTAIN: Vera

RESOLUTION #25-58 APPROVAL OF CONSILIUM STAFFING LOCUM TENENS COVERAGE AGREEMENT (CHC)

Ms. Baumgartner spoke of the need for Locum Tenens Coverage for temporary providers.

RESULT: APPROVED [UNANIMOUS]

MOVER: Ms. Gunnink SECONDER: Dr. Lipinski

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr. Vera

ABSTAIN: None

RESOLUTION #25-59 APPROVAL OF TRANSFER OF FUNDS (CHC)

Ms. Baumgartner spoke of the need for the transfer of funds. We need to move money from salary line item to temporary contracted and medical services line item in order to staff appropriately.

RESULT: APPROVED [UNANIMOUS]

MOVER: Dr. Terrell SECONDER: Ms. Brass

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr. Vera

ABSTAIN: None

RESOLUTION #25-60 APPROVAL OF APPROPRIATION OF FUNDS (CHC)

Ms. Baumgartner spoke of the need to increase the appropriation for the 340B pharmaceutical drug program.

RESULT: APPROVED [UNANIMOUS]

MOVER: Ms. Freeman SECONDER: Ms. Gunnink

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera

ABSTAIN: None

RESOLUTION #25-61 APPROVAL OF IMMUNIZATION FEES

Ms. Muniz/Ms. Picard spoke of the revision of their vaccine fee schedule in order to cover their vaccine costs and maximize their revenue. It is based on usual and customary fees.

- Ms. Robbins questioned if the vaccinations are funded through the Health Department Medicare/Medicaid? Ms. Bergin stated the only private insurance we bill for is BCBS PPO. Medicaid/Medicare are our primary payor sources for the purchase vaccine program. Further discussion took place.
- * Mr. Vera questioned if we were voting for an increase to \$40.00 for the administration fee as well as the cost of the vaccine?

 Ms. Bergin stated the \$40 administration fee has not increased. In addition, if a patient cannot afford the fee, we will still provide services for them.

RESULT: APPROVED [UNANIMOUS]

MOVER: Ms. Freeman SECONDER: Ms. Brass

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera

ABSTAIN: None

REVIEW OF CLOSED SESSION MEETING MINUTES

Chief Hertzmann asked for approval to keep Closed Executive Meeting Minutes closed through March 19, 2026.

RESULT: APPROVED [UNANIMOUS]

MOVER: Dr. Terrell SECONDER: Dr. Morales

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera

ABSTAIN: None

APPROVAL OF PERSONNEL STATUS REPORT FOR SEPTEMBER

Personnel Status Report was discussed by Ms. Bilotta

RESULT: APPROVED [UNANIMOUS]

MOVER: Ms. Robbins SECONDER: Ms. Gunnink

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera

ABSTAIN: None

The Board approved all personnel changes for the Will County Health Department for the month of September.

BOARD MEMBERS' COMMENTS/CONCERNS: None

PUBLIC CONCERNS AND COMMENTS: None

ADJOURNMENT

A motion was made by Ms. Freeman and seconded by Ms. Robbins to adjourn the meeting at 4:44pm.

RESULT: APPROVED [UNANIMOUS]

MOVER: Ms. Freeman SECONDER: Ms. Robbins

AYES: Chief Hertzmann, Dr. Terrell, Ms. Brass, Ms. Gunnink, Dr. Lipinski, Dr. Morales, Ms. Robbins, Ms. Freeman, Mr.

Vera

ABSTAIN: None

By: ______ By: _____ By: _____ Mary Kilbride, Executive Assistant
Will County Board of Health Will County Health Department

FY 2025 Balance Sheet Ten Months Ending September 2025

Assets	Beg Bal <u>12/1/2024</u>	End Bal <u>9/30/2025</u>	<u>Change</u>
Cash and cash equivalents	9,215,160.53	3,158,937.64	(6,056,222.89)
Investments	12,875,000.00	20,140,000.00	7,265,000.00
Receivables	15,259,226.86	387,643.43	(14,871,583.43)
Total Assets	37,349,387.39	23,686,581.07	(13,662,806.32)
Liabilities			
Payables	2,930,808.39	45,428.17	(2,885,380.22)
Due to	17,175.69	9,134.00	(8,041.69)
Unearned revenue	271,502.12	386,511.99	115,009.87
Unavailable revenue	663,656.34		(663,656.34)
Property taxes levied for future periods	11,020,933.65	-	(11,020,933.65)
Equity			
Fund Balance	22,445,311.20	23,245,506.91	800,195.71
Total Liabilities & Equity	37,349,387.39	23,686,581.07	(13,662,806.32)

FY 2025 Change in Cash Ten Months Ending September 2025

	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	June 2025	July 2025	A 2025	Control of the	
Cash and Cash Equivalents						11107 2023	Julie 2023	July 2025	August 2025	September 2025	Total
Beginning Balance	9,215,160.53	3,972,104.74	2,250,131.17	8,273,346.49	6,955,729.23	6,941,598.02	5,620,155.44	4.948.726.51	0.000 500 40		
Deposits	5,711,509.19	3,205,534.13	1,149,294,96	1,927,684.85	2,379,876.29	1,889,461,55	2,501,397.85	,	9,992,589.13	662,694.30	9,215,160.53
Loan from Corporate	9,134.00	=	-	-,527,500.105	2,373,070.23	1,003,401.33	2,301,397.83	7,791,049.47	2,506,901.25	5,599,896.33	34,662,605.87
AP Payments	(1,228,675.07)	(3,552,652.50)	(1,331,111.31)	(1,469,258.89)	(1,000,283.12)	(1,445,427.39)	(1,385,363.93)	1,574.56	(1,574.56)	180	9,134.00
Payroll	(1,725,889.91)	(1,369,158.08)	(1,792,623.76)	(1,776,043.22)	(1,393,724.38)	(1,765,476.74)	,	(1,120,586.70)	(1,848,633.24)	(1,289,894.07)	(15,671,886.22)
Investment Transfers *	(8,000,000.00)	€	8,000,000.00	(2),, (0)0-(3),22)	(1,555,724.56)		(1,787,462.85)	(1,628,174.71)	(2,721,588.28)	(1,813,758.92)	(17,773,900.85)
Prior Period Due To	(9,134.00)	(5,697.12)	(2,344.57)				*		(7,265,000.00)	-	(7,265,000.00)
Ending Balance	3,972,104,74	2,250,131.17	8,273,346.49	6,955,729.23	6,941,598.02	E 630 155 44	4.040.735.54				(17,175.69)
-		4,455,454.27	0,275,540.45	0,555,725.25	0,541,598.02	5,620,155.44	4,948,726.51	9,992,589.13	662,694.30	3,158,937.64	3,158,937.64
											•
Investments											
Beginning Balance	12,875,000.00	20,875,000.00	20,875,000.00	12,875,000.00	12,875,000.00	13 875 000 00	12.075.000.00				
Investment Transfers *	8,000,000.00	.,,	(8,000,000.00)	12,075,000.00	12,073,000.00	12,875,000.00	12,875,000.00	12,875,000.00	12,875,000.00	20,140,000.00	12,875,000.00
Ending Balance	20,875,000.00	20,875,000.00	12,875,000.00	12,875,000.00	12,875,000.00	12,875,000.00	12 075 000 00		7,265,000.00		7,265,000.00
-			11,010,000.00	12,073,000.00	12,673,000.00	12,875,000.00	12,875,000.00	12,875,000.00	20,140,000.00	20,140,000.00	20,140,000.00
											•
Total Cash and Investments	24,847,104.74	23,125,131.17	21,148,346.49	19,830,729.23	19,816,598.02	18,495,155,44	17 000 700 51	22 552 500 40			
-			,- :-,0-101-13	25/050/123.23	13,010,330.02	10,433,155.44	17,823,726.51	22,867,589.13	20,802,694.30	23,298,937.64	23,298,937.64

^{*} investments are updated retrospectively.

FY 2025 Budget Comparison - Revenue Ten Months Ending September 2025

	Adopted Budget	Revised Budget	Revenue	Target - 83.33% <u>Percent</u> Realized
Revenue	Adopted budget	nevised budget	Kevenue	Nealized
Property Taxes	11,015,000.00	11,015,000.00	10,557,696.73	95.85%
Intergovernmental Grants & Contracts				
Administration	1,217,000.00	1,217,000.00	69,705.90	5.73%
Emergency Preparedness and Response	418,331.00	418,331.00	418,574.16	100.06%
Environmental Health	1,277,513.00	1,277,513.00	871,041.42	68.18%
Behavioral Health	1,788,889.00	1,884,295.00	703.011.08	37.31%
Family Health Services	3,971,477.00	4,471,477.00	2,986,226.25	66.78%
Community Health Center	2,861,057.00	2,861,057.00	1,761,821.60	61.58%
	11,534,267.00	12,129,673.00	6,810,380.41	56.15%
Licenses, Permits & Charges for Services				
Administration	230,000.00	230,000.00	147,594.00	64.17%
Environmental Health	2,181,950.00	2,181,950.00	2,008,332.82	92.04%
Behavioral Health	3,617,554.00	3,617,554.00	2,541,077.26	70.24%
Family Health Services	260,000.00	260,000.00	256,709.71	98.73%
Community Health Center	7,743,900.00	7,743,900.00	5,163,069.86	66.67%
	14,033,404.00	14,033,404.00	10,116,783.65	72.09%
Fines and Forfeitures	500.00	500.00	250.00	50.00%
Miscellaneous Revenues				
Rental Income	11,628.00	11,628.00	9,614.00	82.68%
Donations/Fundraiser	450.00	450.00	727	*
Expense Recovery_Prior Years	0.00	×	25,350.42	2
Other: MCO Cap, Performance, MD Srv, Return Cks	160,608.00	160,608.00	90,527.35	56.37%
Anticipated New Revenues	4,000,000.00	1,565,710.00	:50	
Funds On Hand	1,716,323.00	3,555,207.00	3	•
	5,889,009.00	5,293,603.00	125,491.77	2.37%
Transfers In	3,750,000.00	3,750,000.00	3,750,000.00	100.00%
Total Revenue	46,222,180.00	46,222,180.00	31,360,602.56	76.30% *
* Total Develope used for Develope Develope 24	40 505 057 55	152	•	
* Total Revenue used for Revenue Performance %	40,505,857.00	41,101,263.00		

^{*} Total Revenue used for Revenue Performance % Less: Anticipated New Revenues and Funds on Hand

FY 2025 Budget Comparison - Expenditures Ten Months Ending September 2025

T.					Remaining	Target - 75% Percent
	Adopted Budget	Revised Budget	<u>Expenditures</u>	Encumbrances	Budget	Used
Expenditures						
Personnel - Salaries						
Administration	2,547,221.00	2,547,221.00	1,791,158.75	9	756,062.25	70.32%
Emergency Preparedness and Response	299,910.00	299,910.00	242,866.87	2	57,043.13	80.98%
Environmental Health	1,875,823.00	1,875,823.00	1,387,673.82	#	488,149.18	73.98%
Behavioral Health	5,379,055.00	6,285,958.00	3,719,899.59	=	2,566,058.41	59.18%
Family Health Services	4,788,976.00	5,096,759.00	3,628,819.24	8	1,467,939.76	71.20%
Community Health Center	9,686,140.00	9,461,140.00	7,003,482.58	€	2,457,657.42	74.02%
Total Personnel - Salaries	24,577,125.00	25,566,811.00	17,773,900.85	2	7,792,910.15	69.52%
Personnel - Benefits						
Administration	951,657.00	951,657.00	664,825.85	•	286,831.15	69.86%
Emergency Preparedness and Response	117,797.00	117,797.00	91,677.21	-	26,119.79	77.83%
Environmental Health	883,443.00	883,443.00	640,839.24	20	242,603.76	72.54%
Behavioral Health	2,203,200.00	2,592,116.00	1,423,613.63		1,168,502.37	54.92%
Family Health Services	2,069,072.00	2,195,048.00	1,558,753.26	:-:	636,294.74	71.01%
Community Health Center	3,614,926.00	3,564,926.00	2,573,838.69	7. 2 1	991,087.31	72.20%
Total Personnel - Benefits	9,840,095.00	10,304,987.00	6,953,547.88	7.5	3,351,439.12	67.48%
Commodities						
Administration	313,220.00	372,745.00	257,977.35	7.*	114,767.65	69.21%
Emergency Preparedness and Response	10,257.00	21,812.00	17,282.93	1.7	4,529.07	
Environmental Health	219,430.00	214,805.00	141,420.99	747	73,384.01	65.84%
Behavioral Health	168,464.00	268,192.00	105,353.17	923	162,838.83	39.28%
Family Health Services	344,025.00	318,963.00	158,507.61		160,455.39	49.69%
Community Health Center	2,094,575.00	2,139,511.00	1,986,213.83	-	153,297.17	92.83%
Total Commodities	3,149,971.00	3,336,028.00	2,666,755.88	:::	669,272.12	79.94%
Contractual Services						
Administration	1,051,314.00	1,121,789.00	664,847.72	:*:	456,941.28	59.27%
Emergency Preparedness and Response	71,968.00	60,413.00	33,739.64	: #21	26,673.36	55.85%
Environmental Health	193,930.00	288,555.00	187,197.78	-	101,357.22	64.87%
Behavioral Health	1,553,617.00	1,992,315.00	1,152,166.61	140	840,148.39	57.83%
Family Health Services	300,895.00	346,743.00	25,210.17	360	321,532.83	7.27%
Community Health Center	1,433,265.00	1,567,829.00	1,068,297.06	100	499,531.94	68.14%
Total Contractual Services	4,604,989.00	5,377,644.00	3,131,458.98	2 €\	2,246,185.02	58.23%
Capital Outlay						
Administration	50,000.00	36,160.00		2	36,160.00	-
Behavioral Health		23,620.00	23,541.86		78.14	99.67%
Community Health Center		11,220.00	11,201.40	-	18.60	99.83%
Total Capital Outlay	50,000.00	71,000.00	34,743.26	<u> </u>	36,256.74	48.93%
Other Expenditures						
Administration	4,000,000.00	1,565,710.00		-	1,565,710.00	*
Total Expenditures	46,222,180.00	46,222,180.00	30,560,406.85	<u> </u>	15,661,773.15	68.43%
·	-		-		23,001,773.13	00.43/0
* Total Exp for Expense Performance %	42,222,180.00	44,656,470.00	÷			
Less: Anticipated New Expenses			¥			



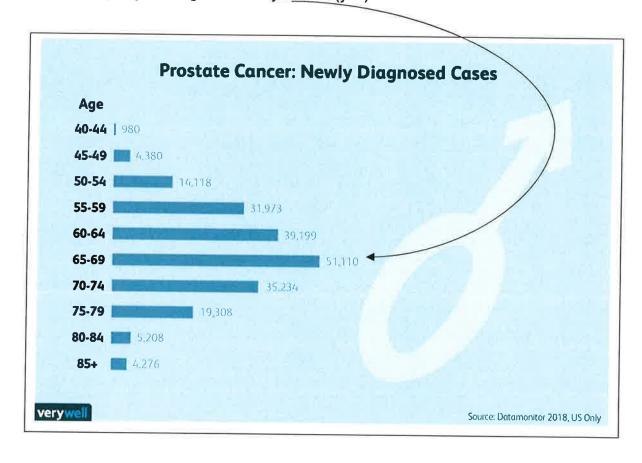
Jennifer Byrd, MD, FAAFP CMO, Community Health Center October 2025

Patient Education & Health Promotion:

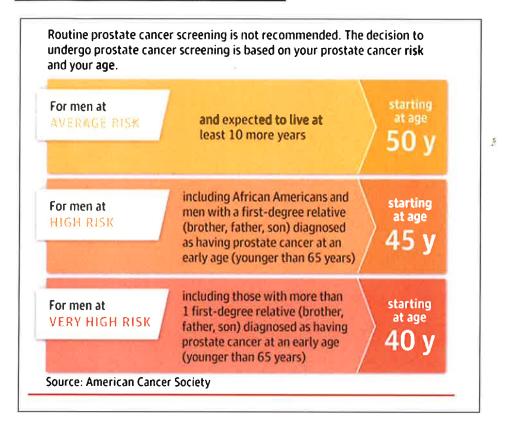
In the month of **September, Prostate Awareness** was featured. To that end, our Affordable Care Act (ACA) staff outfitted our patient education table with flyers, pamphlets, and information centering around prostate cancer and the proper follow up.

Epidemiology:

- The most common cancer in men
- Rate: 120 cases / 100,000 men
- Second leading cause of death in men
- 67% higher in African American males
- Average age of diagnosis is 67 years old (y.o.)



Prostate Cancer Screening Guidelines:



Service expansion/changes:

- * Brooks Middle School is in full swing of this season's Back-To-School' physical exams
 - though our newly hired provider is actively training at our Joliet location (and will begin her work there in late October)
 - the provider staffing is being backfilled with three physicians covering three days per week
 - we have been able to accommodate all of the schools, and the community's, requests for school and sports physical exams, along with their required vaccines
- * Brooks collaboration success story...
 - S. L. is an 11 year old Type I Diabetic who has newly moved from Southern Illinois
 - The school nurse informed the health center physician that S. L.'s blood glucose was poorly controlled with bizarre derangements spanning levels from 40 to 400 (normal being 100)
 - He did not yet have a Pediatric Endocrinologist (that we knew of)
 - Was giving himself insulin injections, though he had an Implanted Insulin Pump
 - And...was only checking his blood sugar once per day (it should be checked at

least 3 times per day in Type I Diabetics

- He had a continuous glucose monitor (CGM) but did not use it.

Intervention....

- The health center physician was able to counsel the child, and speak with the mother to coordinate his care
- What was discovered was that:
 - S.L. did not like his CGM because it kept falling off
 - He had no insulin pump supplies
 - He had "given up" and reverted to a less efficient and effective management of his Diabetes, which had left him in his current uncontrolled state
- The health center physician made the following plan:
 - Prescribe insulin pump supplies until they see their new Endocrinologist (in October)
 - Provide him with a new, updated model of a CGM
 - Affix the CGM in clinic, while at school
 - Coordinated with the mom to ensure that they both had the updated
 CGM APP on their phones and ensured that mom educated S.L. to always bring his phone to school so that he can "see" his blood glucose in real time (from moment to moment).
 - S.L. is going to be fine now, though he was on pace to be critically ill.

Staffing:

- * Medical Assistants (CMA) one open position (Obstetrics/Gynecology)
- * Registered Nurses two open positions (Primary Care & Infectious Disease)
- * Infectious Disease Department Manager (RN) open
- * Psychologist open
- * Family Medicine Physician open
- * Temporary staff
 - RN Infectious Disease
 - RN Behavioral Health



Stacy Baumgartner CEO, Community Health Center October 2025

Northern Branch Location Open House - 391 Quadrangle Drive, Bolingbrook

The Will County Health Department and Will County Community Health Center (WCCHC) hosted an open house on September 29, 2025, at 2:00 p.m. Local stakeholders, elected officials, Board of Health and Governing Council members were invited to participate. The Community Health Center Leadership was excited for this opportunity to showcase the new and renovated health center space and celebrate the expansion of service in the Bolingbrook community.

Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PROWA) halted by a preliminary injunction.

UPDATE:

All Illinois Community Health Centers were notified that a preliminary injunction was issued on September 10, 2025, in New York et al. v. DOJ et al., No. 1:25-cv-00345. Per this order, PROWA may not be implemented or enforced by any Health and Human Services employee, component, program, grantee, or contractor in the effected jurisdictions (including Illinois).

School Based Health Center

The Title V grant requires school-based health centers to have a functioning Community Advisory Board that evaluates and provides feedback on overall program operations.

The council met in September. Program updates and marketing efforts were shared. The committee offered the following observations:

- Coordination and completion of paperwork for new patients remains a needed area for improvement.
- Unfavorable experiences may discourage the acceptance of the health clinic among parents.
- Absence of a full-time medical provider as student physical and immunization deadline looms.

The following were proposed as potential solutions and WCCHC staff will begin to develop: Online registration and parental consent interface project that is currently being beta tested with our electronic health records partner (GBS). This is a cloud-based solution that will allow the

health center staff to send a link to parents' e-mail and allow them to register and consent for health center services. This method solves one of the fundamental issues facing the health center, getting the correct paperwork for services from the parents in a method that is convenient for them.

Next Steps:

- Develop improved workflows for parent inquiries and support the registration process.
- Retrain staff on expectations of the registration process and required follow-up.
- Evaluate telephone call logic and make necessary improvements.
- During the first 30 days of 2024 school year, 79 students received services. During the same period in 2025, 70 students received services. The expectation is the patient volume for the 2026 school year will meet or exceed that of the 2025 school year.

Illinois Primary Health Care Association (IPHCA)

The Community Health Center's Chief Executive Officer has been invited to participate in an expert panel at the IPHCA's Annual Leadership Conference. The purpose of the session is to partner with two other health centers and Prevent Blindness Illinois to discuss ways health centers can bring Optometry services to patients of the health center. The focus will be on how the partnership with Midwest University was leveraged to bring optometry services to the Will County Community Health Center at no cost to patients.

Quality Measure Reporting Improvement

The health center strives to provide value-based care. This is measured through quality indicators set by HRSA (Health Resources and Service Administration) and Healthcare Effectiveness Data and Information Set (HEDIS) performance measures defined by health plans and managed care organizations. Benchmarks are set to measure performance outcomes.

The health center's outcomes have fallen short of the benchmark in many areas. A committee was formed that includes IT support staff and the clinical, risk, and operations managers. This committee meets weekly to identify the problems and develop solutions. The initial evaluation identified that in many cases, the clinical care is being delivered but not documented properly in the electronic health record (EHR). The team is developing workflows to ensure that the clinical care documentation is being captured in a manner that populates the quality measure. As the workflows are developed, they will be approved by the Chief Medical Officer (CMO) and communicated to the clinical staff with training. The committee expects to see changes in the quality measure outcomes by November.



Elizabeth Bilotta
Executive Director, Administration
October 2025

<u>Administration BOH Report – provided by Cindy Jackson, Director of Administrative Services</u> POLICY UPDATES

In September, the Agency's Freedom of Information Act (FOIA) policy was updated. We are currently working on updating several additional agency policies.

SECURITY UPDATES

FY26 Security Bid:

On September 26th, a pre-bid conference was held for the new Security Contract for FY26-28. There were six security companies that participated in the mandatory pre-bid meeting. This pre-bid meeting included walking potential security companies through the bid document and touring the five sites they will provide security for in the upcoming fiscal year. The five sites include the Main Health Department building, the Community Health Center, the North Branch Office sites, and the Tuberculosis Clinic. The bids were due on October 3rd at 10:00am. At 10:10 AM the four bids received were opened and three security companies attended the bid opening. The bids were thoroughly reviewed by Administration and the Will County States' Attorney Office prior to selection of the most responsible bidder. A resolution is in the Board of Health (BOH) packet to approve the selected security contractor.

FACILITY UPDATES 501 Ella (Main)

Elevator:

On September 17th the elevator was taken out of service. A valve malfunctioned causing an issue with the elevator. The elevator technician tried to temporarily repair the elevator valve twice, but was unsuccessful. The new valve was ordered on September 19th. The parts were received and the elevator was repaired and put back into service on October 3rd.

While it is out of service, staff that relied on the elevator to get to their workspace were moved to the main level. In addition, any Behavioral Health clients that relied on the elevator to access their appointments were also seen in a vacant office on the main level.

Window Leak:

On August 12, 2025, a water leak was identified near the large front window on the second floor lobby. The Facilities Team coordinated with a vendor to evaluate the issue. The vendor conducted a thorough inspection of the window on October 2, 2025. According to the vendor, the window itself is in excellent condition. The likely source of the leak appears to be water intrusion behind the decorative aluminum flashing, potentially seeping in through the seams of the underlying plywood. To address the issue, the vendor applied caulking to the aluminum seams in an effort to prevent future water penetration.

Lighting:

There are still ongoing lighting issues in two areas of Behavioral Health. Both spaces are staff workspaces. The lights in one space randomly turn off and a breaker needs to be reset for them to go back on. A lighting contractor came out and evaluated the other space and it was determined that a power pack needs to be replaced, which requires shutting down all power for lighting in Behavioral Health. The Facilities team must complete this work on a Sunday, which is the only day Behavioral Health is closed. We are waiting for a date for the repair to be completed.

In addition to these two programming or parts lighting issues, there are 17 can lights out in Behavioral Health. Previously in October of 2024, 34 can lights were replaced. We are also waiting for a date for the lights to be replaced.

Community Health Center (CHC)

Elevator:

On September 25th the elevator at the CHC was taken out of service after an electrical issue resulted in an entrapment. The following day the elevator technician came out and made repairs and put the elevator back into service.

North Branch Office (NBO) Campus

<u>Campus Signage</u>: The signage on campus was updated in September (before the open house) to better direct patients to the new CHC Campus location.

North Branch Office

Behavioral Health Suite Painting:

A painter was hired to patch, repair, and paint the walls in the waiting room, hallways, and room 104. This project was completed in mid-September prior to the NBO Open House on September 29th. The main areas of the suite look great. There is still patching and painting that needs to be completed in several of the offices.

Facilities Team Final Touches to the Suite:

The Will County Facilities team completed several final touches after the painting was completed, including hanging bulletin boards, artwork, and a smart board, as well as repairing the vinyl floor base in many areas of the suite.

Compliance Report – provided by Armando Reyes, Director of Compliance

The Compliance Program continues to strengthen operational safeguards and provide practical support for staff across all divisions. This month's work has focused on privacy, incident management, policy development, and emerging technology risks.

Privacy and Confidentiality

- Conducted a pilot confidentiality and privacy walkthrough in one of the clinical divisions to assess workstation placement, record handling, and verbal communication practices in shared spaces.
- Will share feedback with division leadership to address identified gaps and reinforce expectations for protecting protected health information (PHI).
- Provided additional reminders about using email encryption when transmitting PHI outside the organization.

Incident Reporting and Risk Review

- Continued oversight of Critical Incident Reporting (CIR) to ensure timely submission and appropriate follow-up.
- Worked with division managers and the Safety Officer to review recent reports, verify corrective actions, and identify opportunities to reduce repeat issues.
- Planning a deeper trend analysis to highlight potential risk clusters and guide future staff training or procedural changes.

Policy Development

- Developing a Service Animal Policy and Procedure aligned with American with Disability Act (ADA) and the Illinois Service Animal Access Act, clarifying staff response steps when service animals are present.
- Began drafting agency-wide guidance on Artificial Intelligence (AI) use in partnership with Information Technology and Telecommunications (ITT).

Training and Orientation

Continued refinement of the expanded new employee compliance orientation, which now includes core compliance principles, privacy and confidentiality, critical incident reporting, ethics and conduct, cultural competency, and mandated reporting.

Collaboration and External Support

The Will County Health Department (WCHD) submitted three project proposals to Adler University requesting non-clinical Social Justice Practicum (SJP) interns to assist with compliance, Emergency Preparedness and Response (EPR), and Mobilizing for Action through Planning and Partnerships (MAPP) initiatives. These placements will support agency-wide compliance monitoring and quality improvement efforts.

The Compliance Program remains focused on practical engagement with divisions through privacy reviews, trend-based risk management, and enhanced staff training. Policy work on service animal guidance and AI use continues to advance, while the CIR process is closely monitored to support safety, accountability, and a proactive compliance culture across the agency.

Finance - BOH Report - provided by Katie Schaefers, Finance & Grants Mgmt. Coordinator

In addition to agency deposits, monthly and quarterly grant expenditure reporting:

- 1. All State Fiscal Year 2026 grant applications have been completed. The State Fiscal Year 2026 grant agreements continue to be executed as issued by the state. State Fiscal year 2026 began July 1, 2025.
- 2. The initial submission for the Health Resources and Services Administration (HRSA) service area competition for health center program funding was completed on September 19, 2025, in collaboration with the Community Health Center. The final submission is due on October 22, 2025. The annual funding allocation for the Will County Community Health Center is \$2,306,848.00.

<u>Information Technology & Telecommunications (ITT) Report – provided by Randy Jurek, Director ITT</u>

Happy Spooky Season

Being the month of Halloween, the ITT team is trying not to scare users while protecting our network from monsters. While this month may not bring major announcements, there is a lot of important behind-the-

scenes work happening to keep our systems modern, secure, and reliable. Much of what we are working on now are foundational projects that ensure we are not only prepared for today's needs but also set up for long-term stability.

Current Projects

Windows 11 Migration & Duo Multi-factor

The ITT Team is in the process of upgrading over 350 computers and devices from Windows 10 to Windows 11. This upgrade is required because Microsoft is ending support for Windows 10 in October, which means no more security updates. Staying current keeps our staff and agency devices secure and reduces the risk of vulnerabilities.

In tandem with this rollout, the ITT Team will also be implementing Duo multi-factor authentication for staff. This is a second layer of login protection (beyond just a password) that helps keep accounts secure and reduces the risk of phishing or impersonation attacks.

Phone System & Infrastructure Upgrades

The ITT Team is gathering quotes to strengthen our network infrastructure. This includes upgrading our phone software and handsets to the latest versions. While our current system is still functional, keeping these tools up-to-date helps avoid unexpected failures and ensures continued reliability for staff and patients.

Rubrik Backup Solution

The ITT Team is also evaluating Rubrik, a modern backup and recovery system. This would improve our ability to protect and recover agency data quickly in the event of an outage, cyberattack, ransomware attack, or disaster. Demos and quotes are being reviewed to see if this system is the right fit for us.

Tanium Platform Rollout

The ITT Team is planning the deployment of Tanium, a more advanced platform for managing and securing agency devices. Tanium will replace the older Microsoft System Center the agency has been using. The benefit is faster, real-time insight into our network. This means if there's a security patch, outdated software, or a problem on a staff device, we can see it and fix it immediately. It will also help monitor the health of devices as well and give us a better overall picture of not only the devices at the agency but the devices that our remote users use.

UKG Payroll & Timekeeping Transition

Finally, the ITT Team is preparing for the agency's move to the UKG payroll and timekeeping system. ITT is helping with the technical side of this rollout, including integration with the new Duo authentication system, so that staff logins remain secure during payroll processing. We will be updating timeclocks and helping Human Resources with posting training and information about the new platform on SharePoint and our Microsoft Teams environment. Also, after roll out, assisting staff anywhere we can.

In Closing

While these projects may not be the most visible, they are vital to keeping our systems secure, efficient, and reliable. They also represent a shift from reacting to problems toward staying ahead of them. One of my main goals for our ITT department and the agency is to get our infrastructure on a solid foundation first

before we start trying to add. This starts with making sure our network infrastructure is on current devices, software versions, and utilizing any tools we can to bolster our cybersecurity stance. I want to thank the ITT team for continuing to take on these complex rollouts, and agency leadership for supporting the investments that allow us to keep our technology current. Hope everyone has a very Happy Halloween, and remember, when trick-r-treating stay with your group, stay in well-lit areas, only visit houses with the porch light on, and always check your candy.

<u>Safety Report – provided by Barbara Agor, Safety & Risk Reduction Officer</u> General Projects:

- Monthly Automated External Defibrillator (AED) checks: All Agency AEDs are checked monthly. One battery expired in October. The replacement battery was ordered and installed.
- Semi-Annual First Aid Kit checks (April and October): First Aid Kit checklist/order forms have been distributed to staff who inventory them. Some forms have been returned to request additional supplies. First aid kits are replenished as requests are received.
- Weather Radios: We replaced all the backup batteries (annual) and replaced one older unit.
- Safety Handbook Updates: We continue to work on updating the Safety Handbook to include all the changes that stemmed from the addition of the new Northern Branch Office Community Health Center site.
- **Building Site Floor Maps:** We are updating the Building Site Floor Maps that are posted around each site to make sure locations of emergency supplies posted on the maps are accurate and to present with more consistency across all sites.
- Branch Office Orientation Checklist: We created a Branch Office Orientation Checklist specific to the new Northern Branch Office Community Health Center site, printed and distributed copies to that location for use. We also updated all of the Branch Office Orientation Checklists (to include updates from the new site), printed and distributed them to all the branch offices as well.
- Safety Walkthroughs September 20th and September 26th: Completed a safety walkthrough in Environmental Health on September 20th. Identified a few minor potential hazards such as trip hazards or phones not able to call out in an emergency. The division has already completed the corrective actions. Completed a safety walkthrough in Family Health Services on September 26th. That report is complete, waiting for supervisor approval.

Emergency Responses:

• Real-World Fire Alarm Evacuation on September 17th in Monee: Fire alarms were triggered at our Eastern Branch Office around 9:45 AM. We found out later that it was a fire alarm company doing some work on one of the other businesses' fire alarms within the same strip mall, causing all the alarms in the strip mall to sound and the Fire Department to respond. Our staff evacuated and accounted for all staff and patients quickly, knew where to assemble, and closed doors on their way out. The After-Action report is complete, and we are following up on recommendations to remind staff to utilize the nearest exit and to hang the "room cleared" door hanger on the front of their door.

Trainings and Drills:

• Safety Orientation Training (for new staff) on September 16th and September 30th: Seven new staff were oriented to our Safety Handbook and safety procedures. Safety orientation helps them understand what to do in different emergencies and helps familiarize them with the reference handbook that they receive.

- Panic Button Training/Drill on September 16th, 20th, and 30th: Thirteen staff members participated and activated the panic button in a Behavioral Health office. This aided in their understanding of what to expect when a panic button is activated. Staff were informed of the purpose of the panic button, who it notifies, and who it does not notify, along with what alarms are triggered and where. These trainings/drills also gave our security a chance to practice their response protocols and manage the alarm system silencing the alarm, clearing the alarm, and resetting the panic buttons.
- Fire Extinguisher Hands-On Training scheduled for October 9th: Staff will have the opportunity to use a fire extinguisher to put out a real fire. Integrity Fire will provide the training on the campus. Three sessions are scheduled with a maximum of 60 participants.
- Narcan Training scheduled for October 14th: Family Health Services is hosting as part of their Community Connections series, and our very own Dr. Burke is presenting this life-saving class. We promoted this as it is an important Safety Training for staff.
- Bloodborne Pathogens Training scheduled for October 17th: Stericycle is coming out to offer their annual training on Bloodborne Pathogens. Staff with occupational exposure risk are encouraged to attend.

Policy, Procedures, & Plan Development and Committee Updates:

- Agency Infection and Exposure Control Plan Committee met on September 22nd: The Agency's Infection and Exposure Control Plan Committee continues to work through final edits of the plan. The fit testing agreement with the Tuberculosis Clinic for initial and annual respirator fit testing for the Community Health Center, and select Family Health Services staff has been approved, and we are working out final logistics for implementation. We are also updating the initial draft Agencywide Post Exposure Plan. We have drafted a new Hepatitis B declination form and are in the process of working out logistics for Agency use. Our next meeting is October 20th.
- Safety Committee met on September 24th: Welcomed a new member, Tyler Bargas, Facilities Manager. Discussed Facility Updates/Concerns. Reviewed ongoing safety updates, trainings, drills, and real-world emergency responses. We discussed the onboarding checklist, and a recommendation was made that they go into the Human Resources personnel files. We will work through that with Human Resources. Discussed the Behavioral Health ongoing lighting issues, and Katie Weber reported that Emergency Preparedness and Response supplied portable rechargeable lanterns for emergency lighting needs. Discussed doors being left unlocked and ways to correct that. Discussed a need for a door sign for the breastfeeding room that indicates someone is in there utilizing it, to avoid someone else from walking in on them. Family Health Services to work on that.

Safety Concerns

- Update Northern Branch Office Community Health Center site: The exterior back door to the new site has difficulty latching, causing it to not be secured unless pushed or pulled all the way shut. The landlord has ordered a new door, and it may take up to six weeks to arrive.
- Joliet On-Site Evacuation Location move: Joliet Fire Department came to assess one of our onsite evacuation locations at our Joliet location per our request, as we were considering a potential
 move. The concern was that the path to the evacuation location crossed the very roadways that
 Emergency Medical Services (EMS) would likely arrive, which could potentially cause a safety
 hazard for our staff. Joliet Fire agreed with our analysis and recommendation and now we are
 working through the logistics of changing that specific on-site evacuation location.

Safety Messages

• September 15th – sent email to All Staff about upcoming Fire Extinguisher Hands-On Training.

- September 17th sent email to All Staff about updated Emergency Reference Card for staff's lanyards.
- September 26th sent email to All Staff about upcoming Narcan Training.
- September 30th sent email to All Staff about upcoming Bloodborne Pathogens training.
- October 3rd sent email to All Staff about Free Stop the Bleed training happening in New Lenox.

Human Resources BOH Report – provided Stacey Knack, Director of Human Resources (HR)

Recruitment Update

Our efforts to fill various positions across the Health Department and Community Health Center are ongoing. As part of our commitment to building a diverse and inclusive workforce, we have reviewed our Equal Employment Opportunity Commission (EEOC) report to identify any underrepresented demographics in our current recruitment efforts.

HR continues to explore new and innovative strategies to attract qualified candidates, including expanding our outreach channels and strengthening community partnerships. Our goal is to ensure we are reaching a broad and diverse talent pool that reflects the communities we serve.

Collective Bargaining Agreement Update

The department is in the process of adding two new job titles to the Collective Bargaining Agreement (CBA). This requires a **Unit Clarification**, which is currently underway and expected to be completed within the next 20 days.

The Unit Clarification process ensures that new or modified positions are appropriately evaluated for inclusion in the union.

Job Fairs

HR staff will be participating in a Job Fair on September 18th at the University of St. Francis.

Employee Engagement

On Friday, September 12, 2025, Human Resources hosted the **14th Annual Benefits Fair** for all County employees. This annual event provides staff with valuable information about the wide range of benefits available throughout the County.

This year's theme was "Your Future in Your Hands," emphasizing the importance of proactive benefits planning. The event featured 18 vendors and welcomed 204 employees in attendance.

As part of the event, employees were entered into a prize drawing. Nineteen winners received prizes ranging from Dunkin' Donuts gift cards to a Ninja Foodie.

The Benefits Fair continues to be a well-received event and remains open to all County employees.

Payroll System Transition Update

The department's current payroll software, **Kronos 8.0 Workforce Central**, is scheduled to be phased out by December 2025. As part of this transition, we are set to go live with a newer version of Kronos on

October 11th. This interim solution will remain in place until the County completes its full transition to **Dayforce**, which will ultimately replace Kronos as our official payroll system.

We are working closely with IT and payroll teams to ensure a smooth transition and minimal disruption to payroll operations.

. Orientation Summary (June – September)

New Hires: 27Transfers: 5

• **Temp**: 5 (internship)

Promotion: 10

Resignations, Terminations, and Retirees

Resignations: 17Terminations: 0Retirements: 4

Employee Count by Department

Administration: 41

Environmental Health: 31Behavioral Health: 68

Community Health Center: 120
 Family Health Services: 80

Total Employees: 340



Sean Conners
Director, Environmental Health
October 2025

FOOD PROGRAM

1. The United States Food & Drug Administration (FDA), U.S. Department of Agriculture Food Safety and Inspection Service (USDA FSIS), and Centers for Disease Control and Prevention (CDC), in collaboration with state and local partners, are investigating illnesses in a multistate outbreak of Listeria monocytogenes infections linked to prepared meals. In response to this investigation, Fresh Realm Inc. began testing individual ingredients used to produce the Marketside-brand linguine with beef meatballs & marinara sauce meal, and the company's ingredient testing of linguine pasta samples were confirmed positive for Listeria monocytogenes by Fresh Realm's contracted lab. On September 27, 2025, FDA was informed by Fresh Realm that whole genome sequencing performed by the company's contracted lab confirmed the linguine sample is positive for the same strain of Listeria that was detected in the company's chicken alfredo meals, which were recalled on June 17, 2025. It is also the same strain of Listeria that is linked to causing illnesses in this outbreak. On September 26, 2025, USDA FSIS updated their public health alert with an additional product that may be contaminated with Listeria monocytogenes, Trader Joe's Cajun Style Blackened Chicken Breast Fettucine Alfredo. On September 25, 2025, the supplier of the affected pasta, Nate's Fine Foods, Inc., recalled certain lots of pre-cooked pasta, after a sample of linguine pasta collected and tested by Fresh Realm tested positive for Listeria monocytogenes. Nate's Fine Foods, Inc. does not sell affected products directly to retail. The firm is working with the FDA and their customers to determine if additional recalls are needed. As of September 25, 2025, a total of twenty people infected with the outbreak strain of Listeria have been reported from fifteen states. Of the thirteen people interviewed, seven (54%) reported eating precooked meals, and four specifically reported eating chicken fettuccine alfredo. Of twenty people with information available, nineteen were hospitalized and four deaths were reported. There is one illness in a pregnant mother that resulted in a fetal loss.

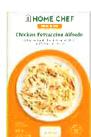












2. Tru Fru, LLC announced that its third-party manufacturer, Georgia Nut Company (GNC) issued a voluntary recall of specific varieties of Tru Fru Freeze Dried products due to the potential presence of metal in the product. Hard or sharp foreign objects in food may cause traumatic injury including laceration and perforation of tissues of the mouth, tongue, throat, stomach and intestine as well as damage to the teeth and gums. These products were distributed in the United States. Consumers may have purchased impacted products via retail stores and online retail, including but not limited to: Albertson's, CVS, Food Lion, H-E-B, Hungryroot, Ingles Markets, Kroger, Stew Leonard's, and Target. The products subject to this U.S. recall include Tru Fru Freeze Dried Strawberries in Dark & White Chocolate and Tru Fru Freeze Dried Strawberries & Crème listed in the shown tables. There have been no reported cases of injury or illness to date. The recall was initiated upon receiving a report from a consumer alerting the company to this matter.





ENVIRONMENTAL HEALTH LAB/ WATER PROGRAM/ SEWAGE PROGRAM

- 1. The Laboratory passed their National Environmental Laboratories Accreditation Chemistry Certification with the Illinois Environmental Protection Agency on September 15, 2025. During the certification each analyst was asked to describe a test method that the laboratory is requesting certification for. All three laboratory analysts did a wonderful job and were able to answer all questions and describe all the details of testing correctly. The rest of the certification included the two certification officers examining all quality control work, proficiency testing, data analysis, managerial reviews, ethics training, preventative/ corrective action plans, etc. Typically, this is a two-or three-day review process, but because there were no issues the review was completed in one day. The laboratory successfully completed their certification with no deviations and only a few recommendations. Two of the recommendations have already been completed and the laboratory was already in the process of working on the third, which will be finished before the end of 2026.
- 2. Trisha Kautz, Director of Laboratory Operations, coordinated a seminar hosted by the Northeastern Illinois Regional Groundwater Protection Planning Committee on Per- and Polyfluoroalkyl (PFAS) Substances held at the Will County Health Department on September 25, 2025. Aaron Burlington with the Illinois Department of Public Health presented on PFAS Substances in Illinois private wells. Teschlyn Woods, Environmental Health Specialist III, and Matthew Mass, Division Manager Public Water Supplies with the Illinois Environmental Protection Agency, discussed PFAS Substances in Illinois Community and Municipal Water Supplies. Topics included the background of PFAS, risks to human health, testing methods, treatment, how to navigate the Illinois PFAS sampling dashboard, and the history and updates to PFAS public acts. Attendees that completed the workshop earned three continuing education hours.







3. At the previous Board of Health meeting the revision of the Will County Onsite Wastewater Treatment Ordinance was approved and now the ordinance will go before the full County Board for review, a public hearing, and approval.

OTHER

- The Will County Health Department Environmental Health Division received and processed approximately 106 Freedom of Information Requests (FOIA) in September 2025.
- The Illinois Department of Public Health (IDPH) has confirmed the first case of Powassan virus in Illinois. This tickborne illness, which can cause severe health issues including brain swelling, seizures, and meningitis, is spread by the bite of infected ticks, most commonly the black-legged deer tick. Residents are advised to take precautions against tick bites, including wearing preventive clothing, applying insect repellent, and checking for ticks after outdoor activities. If symptoms like fever, fatigue, or headache occur after being in wooded or grassy areas where ticks are common, it is important to see a healthcare provider immediately.
- The Illinois Department of Public Health, during their Vector Office Hours, provided a short presentation on Kissing Bugs and their relation to Chagas Disease. Kissing bugs are typically found in the southern United States, Mexico, Central America, and South America. Eleven different species of triatomine bugs have been found in the southern United States. Chagas disease, also known as American trypanosomiasis, is a tropical parasitic disease caused by the Trypanosoma cruzi parasite, primarily transmitted by kissing bugs. Chagas Disease is spread when a Kissing Bug completes a bloodmeal from an animal or human, the bug defecates, and the parasite is in the feces. Open wounds (such as the recent bug bite), mucous membranes, or ingestion are ways that the parasite can infect a person or dog. Many years later, the parasite can cause heart disease and possibly death. There are few medicines to treat Chagas disease. The Environmental Health Division took this information and created a one-page flyer to be put on our website and social media

pages to help educate the public on Kissing Bug Facts and this recent public health concern. The flyer addresses the following topics of concern:

- o What do they look like?
- o When are they most active?
- o Where can they be found?
- How to control Kissing Bugs?
- How is Chagas Disease spread?



Kissing bugs are typically found in the southern United States, Mexico, Central America, and South America. Eleven different species of triatomine bugs have been found in the southern United States.

Kissing Bug Facts

- Kissing bugs have 'cone-shaped' heads, thin antennae, and thin legs.
- They are mainly black or very dark brown, with red, orange or yellow 'stripes' around the edge
 of their bodies.
- Kissing bugs are mostly active at dusk or night.
- Kissing bugs can be found around woodpiles, debris in the yard, and woodrat nests, but are also attracted to the lights and carbon dioxide associated with human houses and dog kennels.
- Kissing bugs are insects that may be infected with Trypanosoma cruzi, the parasite that causes Chagas disease.



Controlling Kissing Bugs

- · Seal up your house to keep kissing bugs from sneaking in.
- Keep the area under and around your house neat. Remove wild animal nests, piles of branches and wood, and trash so that wild animals stay away from your house.
- Turn off outside lights at night if safe. Kissing bugs might fly towards lights and then crawl
 into a house. Keeping the lights off can keep the kissing bugs from coming near.

If you think you have a kissing bug, email a clear picture of suspected kissing bugs to EH@willcountyhealth.org for identification by IDPH

How is Chagas Spread?

After taking a bloodmeal from an animal or human, the bug defecates, and the parasite is in the feces. Open wounds (such as the recent bug bite), mucous membranes, or ingestion are ways that the parasite can infect a person or dog. Many years later, the parasite can cause heart disease and possibly death. There are few medicines to treat Chagas disease.

More information on Chagas Disease can be found on IDPH website or scan the QR code.









Diane Scruggs
Director, Behavioral Health
October 2025

What better way to end September than with our long-awaited "Open House", celebrating the expansion of our Bolingbrook Behavioral Health Division and of the Community Health Center office.

Last month it was reported that the Division met with Chief Cary and his team from the City of Joliet Fire Department ThriveWorks Program. We explored how our Behavioral Health Division could provide services to clients. Since that meeting, we have been receiving referrals from the Joliet Fire Department and from the Lockport Fire Department.

There have been 2 shooting incidents in the Joliet/Will County area. We have recently received calls from local schools to provide grief/trauma counseling to staff and students. We have been able to provide trained staff to these schools.

Part of our expansion was to begin delivering substance use services at the Bolingbrook Office. We applied for and recently received our license to provide these services at our Bolingbrook location.

Intake Unit

A new Intake Counselor started on 9/29/2025. Ashley Moris will primarily be working out of the Northern Branch Office (NBO) location. We are continuing to see an increase in numbers for court clients as well as hospital discharges. Our hospital discharges primarily come from St. Joseph Medical Center; however, we have had an increase from Silver Oaks and Madden Mental Health Center.

Scheduling

Currently, we are scheduling about three weeks out for adult therapy services. Child and Adolescent services are being scheduled two weeks out.

Number of Intakes from 9/1/25 to 9/30/25

Joliet/Adult: 77

Northern Branch Office (NBO)/Adult: 21 Eastern Branch Office (EBO)/Adult: 2 Child & Adolescent (C&A) Joliet/NBO: 40 Total Intakes for all programs: 140

Number of Walk-Ins

Joliet: 4 NBO: 1

Hospital Discharges: 20

Integrated Referral and Intake System (IRIS) referrals:28

Schools: 22

Joliet and Lockport Fire Department: 10

Number of calls requesting Substance Use services: 12

Adult Mental Health Outpatient Program

In the month of September, the adult program had 100 new intakes scheduled throughout the three locations. This was 29 more intakes than in the month of August. In the month of September, we had 807 appointments scheduled across three locations. We had a 60% Kept Rate, 16% Cancel, 7% Staff cancel and 13% Fail Rate. The number of appointments decreased slightly due to a staff member resigning as of 9/8/25.

However, we have successfully filled two positions with internal candidates, Michelle DeMato, LPC, CADC and Emilie Brazinski, LCPC, CADC. Michelle started on 9/29/25, and Emilie started on 10/13/25. We are constantly looking at ways to meet the needs of the residents of Will County. We have been encountering more crisis/emergency calls recently. We will be piloting our new emergency/crisis client hours. Our newly hired staff will have a block one day per week for two hours that will be filled with emergency/crisis clients, which will be determined by the Intake Manager. We are hoping this will limit wait times and get clients in quickly who have higher needs.

The Court Mandated Assessment and Support Program received 31 new referrals from (7/17-8/29/25) for assessments. This program continues to grow. We have expanded services to allow for the provision of solution-focused brief treatment to some clients. Twenty (20) of the referrals have completed their assessments:

- Eight (8) clients have been referred and/or are receiving services at the Will County Health Department, i.e., therapy, case management, psychiatric evaluation, and peer support services.
- Seven (7) clients were recommended to complete a domestic violence evaluation or to complete domestic violence classes.
- Three (3) clients have been referred to for substance use treatment.
- Nine (9) clients have partially completed their assessments.
- Two (2) clients have been a no-call, no-show for their assessment or rescheduled appointment due to insurance issues.

We have nine clients attending our Daily Living Skills Group, with two more expected to start within the next month.

Clinical Training Program

The Behavioral Health Clinical Training program has accepted nine new students for the 2025-2026 training year. The training year spans from September to July for students at the practicum or master's level, and from September to August for doctoral-level interns. Orientation for students is ongoing especially when they first start. Over the next several weeks, they will be trained in multiple and often complex tasks and responsibilities for which they will be accountable. This includes training on our computer system, maintaining schedules, conducting therapy, and psychological evaluations. Office space in Behavioral Health is a challenge, and students are required to sign in and out of an office when they have a client. There is a large student area that they can occupy until their next client arrives. The student area has computers and phones, so they can catch up on notes and documentation, and make outreach calls to schedule appointments for clients on their caseloads. All students receive weekly and sometimes daily supervision with a psychologist, program manager, or program coordinator to discuss caseloads, debrief after sessions, or a crisis.

During these meetings, documentation from the previous week is reviewed, and to ensure students are receiving enough face-to-face hours with clients to satisfy the requirements from their school, from Will County Health Department, and from the State of Illinois for licensure.

Child and Adolescent Services

The child and adolescent program welcomed a new clinician, Robert Zak, on September 8, 2025.

There were 766 appointments scheduled for September, and 504 were kept (66% seen, 34% cancelled)

The current case load for the child and adolescent program is 386, divided among 9 staff.

Mobile Crisis Response (MCR)

The number of calls for Mobile Crisis Response staff was 131. There were 293 appointments scheduled and 243 were kept (90% seen, 10% cancelled)

Total Crisis calls MCR team responded: 283 compared to 295 in September of 2024

Community Involvement and Education

During September, staff participated in nine outside events to promote services available through the Behavioral Health Division in Joliet, Wilmington, Monee, and Manhattan





Several department staff attended training classes in September, including:

- Engaging Healthcare Professionals in Community Work
- Engaging Faith-Based Communities

- De-escalating Skills and Techniques
- Crisis Safety Planning
- Department of Children and Family Services Mandated Reporter
- Federal Emergency Management Agency (FEMA) 100 and FEMA 700
- Risk Assessment in Crisis
- Recognizing and Responding to Human Trafficking

School Based

School-based services are in full swing. We are continuing our discussions to provide support services at the Joliet Township alternate school. This will not require additional staff since we are already in place at both Joliet High Schools. We continue to provide school-based services for substance use in the Joliet High Schools.

The need for school-based mental health services is evident. We are now in a total of 43 schools. All our caseloads have continued to steadily grow. In September we received 33 Referrals from Plainfield School District, 75 referrals from the Joliet Schools, and 21 referrals from Lockport Township High school.

Performance and Quality Improvement (PQI)

1. Commission on Accreditation of Rehabilitation Facilities (CARF)

The Cultural Competency, Risk Management, and Technology and Systems Plans have all been completed. Still in progress are our Succession, Accessibility, Strategic, and Performance Management Plans.

<u>Performance Measurement Plan:</u> Our PQI Coordinator, Darcy Jasien, has located a free resource from CARF called "Six Steps to Building a Performance Management System: a CARF Workbook." We plan to review this book together and use it to prepare our own Performance Management Plan.

A confidential team culture survey was completed by staff in August to support employee engagement. Individual responses are kept confidential by our management consultant, but overall results will be reviewed with leadership in November. These numbers will be compared with past (2024) results to measure ongoing change within our division. They will also be used in the development of our *Performance Measurement and Management Plan*.

2. Quarterly Clinical Audits

As reported last month, our second-quarter audits showed overall improvement in most areas. A Performance Improvement Plan is in development and will be shared with management and staff before completion of our third quarter audits and includes:

- a. An audit packet: to train new and existing staff on what specifically needs to be completed in each chart
- b. <u>A Licensed Practitioner of the Healing Arts (LPHA) checklist</u>: to improve accuracy, efficiency, and consistency in those signing off on their own or others' work (see attached).

Bolingbrook Site Coordinator:

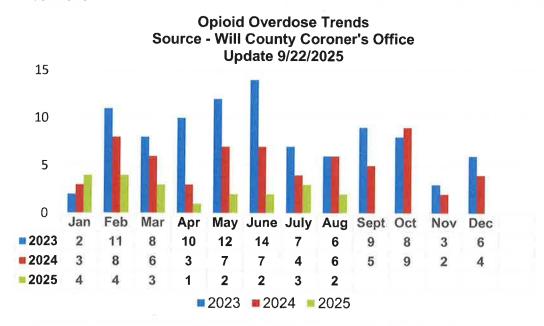
Darcy Jasien, who is our PQI and Bolingbrook Site Coordinator, continues to assist in identifying areas of our Bolingbrook Office requiring maintenance and was involved in the planning of NBO's Open House on September 29th. She completed the first-ever Quarterly Meeting with NBO staff, which went well. Topics focused on site-specific issues, including: the NBO Site Coordinator evolution, emergency coordination, building issues, and IT needs. The next quarterly meeting will be scheduled before the holidays.

3. Client Surveys

The PQI Coordinator is working on plans for semi-annual "client survey months" in which there will be an extra emphasis placed on encouraging clients to share their feedback. The first is tentatively scheduled for November 2025, and the second for May 2026. Survey results will be shared with staff and stakeholders and will also be used to help create our CARF-required plans.

Program number	Program Name	# Clients January- September 2024	# Clients January- September 2025	Increase/Decrease
112	Adult- Monee	23	26	+3
117	Adult/Bolingbrook	91	249	+158
115	Adult-Joliet	526	845	+319
120	Youth-All offices	599	679	+80
130	SASS (Child & Adolescent)	1069	966	-103
140	MCR (Adult)	966	837	-129
Total Unduplicated Clients Served	ALL	3274	3602	+328

Kathleen Burke, PhD October 2025



Overdose deaths have decreased 52% compared to the same time last year.

Opioid Overdose Deaths Will County Coroner	Accidental	Suicide	Undetermined	Total	Overdose Reversals	Reversals compared to Deaths
2023	92	1	2	95	103	92%
2024	62	1	1	64	53	83%
2025	21	1		22	20	110%

Rapid Response Naloxone Distribution/Community Education Highlights

kapia Kesponse Naioxone Dis	tribution/Con	nmunity	Educati	on High	lights
Summary Totals per Year	September	2025	2024	2023	2022
Naloxone Plus Calls	0	5	15	13	3
Fentanyl/Xylazine Test Strips	52	742	2562	1658	1563
Got Naloxone Locations	68	507	624	888	754
NALOXONE DISTRIBUTED					
Business/Narcan Drop Off	0	201	425	564	485
Naloxone Kits Distributed to Public	729	5436	8800	8792	7285
Naloxone Training/ Kits	129	378	2728	1806	445
Micro Pantry Distribution	71	457	656	791	605
Red Distribution Boxes	312	2621	3020	0	0
TOTAL BOXES of Naloxone	1241	9093	15629	11953	8820

September Pop-Up Events, Celebrating Recovery Month

Warren Sharpe - Joliet

Riverwalk - Joliet

St. John Lutheran Church - Joliet

Salvation Army – Joliet

Judson Soul Food Pantry - Joliet

Pride Fest – Joliet

5th Annual Community Day – Joliet

Vet-Fest – Joliet

New Day Employment Network Resource Fair - Joliet

Monee Fall Fest (9/5-9/7)

Acorn Fest – Crete (9/19-9/21)

Crete 150 Year Celebration

ShareFest - New Lenox

Wizard of Oz Community Day – Wilmington

Concert in the Park - Wilmington

Wilmington Farmer's Market

National Night Out – Wilmington

Peotone Library Resource Fair

Cars and Coffee - New Lenox

Last Call Before Fall - New Lenox

Plainfield Fire Department Open House

Bike Night - Braidwood

Cruise Night - Manhattan

Excited to collaborate with a new partner, the New Day Employment Network (NDEN), we celebrated Recovery Month with a wonderful event that focused on breaking the stigma and offering hope that recovery is possible. Rapid Response team members, Jana and Vincent, were honored to receive a certificate on behalf of the Will County Health Department for their participation and for sharing their own personal recovery journey.



Jana and Vincent New Day Employment Network Event

Celebrated Joliet Pride.

Celebrated National Hispanic Heritage Month in University Park.



Rapid Responders Mark, Patty, and Necia at Wizard of Oz in Wilmington

Keeping an Eye Out NITAZENES

- Nitazenes are a powerful class of synthetic opioids, first created in the 1950s for pain relief but never approved for medical use.
- Nitazenes can be 10-40 times stronger than fentanyl, making them extremely dangerous.
- Increasingly showing up in the illicit drug supply, often hidden in heroin, fentanyl, or counterfeit pills.
- High risk for overdose because users may not know they are consuming Nitazenes. Even a small amount can be lethal.
- Naloxone (Narcan) can reverse overdoses, but multiple doses may be required. Always call 911 immediately in suspected overdose situations.
- According to the Centers for Disease Control and Prevention (CDC), there is a growing concern across
 the United States and Europe. Awareness is key, and communities, families, and professionals need to
 be informed.
- This office will continue to monitor and report if cases of Nitazene overdoses have occurred in Will County.



Prevention Strategy/Success Story - Wound Kits

Wound care kits save lives by preventing infection, protecting dignity, and offering care when seeking help feels out of reach.

- Prevents infection small cuts or abscesses can quickly become serious without care.
- Reduce hospitalization basic wound care lowers the risk of Emergency Room visits or severe complications.
- Provides dignity and safety shows people their health matters, even if they're unsheltered or using substances.
- Removes barriers kits give immediate tools when someone may be afraid to go to the hospital.
- Builds trust a simple act of care can open the door to future support and services.

Rapid Response Team member, Vincent, delivered a kit to an unsheltered person in Joliet. Vincent shared with our team this... "Just thought I would share this. I was leaving the Northern Illinois Food Pantry by Sam's Club and saw a man panhandling at the light by Culver's. I saw he had an open wound that he was trying to bandage himself with old bandages. I looped back around and gave him a wound care kit and Narcan. He told me he had been at St. Joes for five hours. I told him to go back. When I got back in my car, he was already using the kit. Just wanted to let you guys know that our efforts are making a direct impact on the streets today. I did take pictures of him. I just wanted you all to see that the efforts are directly helping people".



Suicide Prevention for First Responders (402 Program) Lethal Means Reduction

- Lethal Means are methods/objects that are used by individuals experiencing a suicidal crisis. These include firearms, medication, alcohol, opioids, ropes, and sharp objects.
- Reducing access to these means during a state of crisis can decrease the likelihood of successful suicide attempts.
- About 25% of individuals who attempt suicide do so within five minutes of a suicidal crisis.
 Reducing access to lethal means saves lives
- The 402 Program has free gun locks available for first responders.

Andres Zayes (Pictured here with Necia from the Got Naloxone/Rapid Response Program at Joliet Pride) is the Prevention Training Specialist for the program.



September is the National Recovery Month

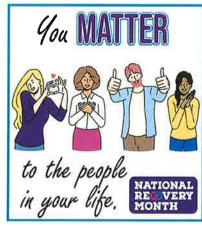
- Recovery is REAL (Restoring Every Aspect of Life)
- Health, Home, Purpose, and Community

Having a purpose is a sense of meaning that can bolster recovery efforts. Fuel your recovery with things that give your life MEANING AND JOY!!

Recovery is strengthened in a safe and supportive environment. Building social networks and a sense of community can support recovery.







Licensed Practitioner of the Healing Arts (LPHA) Checklist

- Click the IMCANs that needs to be reviewed then review the Client Identifying Information & Department of Human Services Registration Page
- o Review Illinois Medicaid Comprehensive Assessment of Needs and Strengths (IM+CANS) 2.0 Section 2
- Review IM+CANs 2.0 Section 3-18.
 - o Review each section
 - Review section 11 and read Mental Health Assessment Summary
 - This is a snapshot of the client.
- o Review IM+CANs 2.0 Health Risk Assessment Addendum
- o Review Treatment Plan
 - o Goals- In the client's own words?
 - o Objectives measurable?
 - o Correct interventions?
 - o Then check Display Note for Safety Plan
- o Check signatures for Qualified Mental Health Professional & Client, Parent/Guardian if applicable.
- Verbal signatures are no longer allowed by Bureau of Accreditation, Licensure and Certification
- o Review progress notes to make sure all interventions used are in the treatment plan
- o If this is a Reviewed Assessment, check what updates have been made through the assessment
- o If something is missing, F10 the therapist to review and fix. Once this is done, sign the Integrated Assessment and Treatment Plan (IATP).
- Write note if signing off on someone else's Initial Assessment(**0AT**) or Reviewed Assessment(**0AR**) with these billing codes.
- o Per policy, make sure Initial Assessment is done within 45 days based on start date & notes.
- o Make sure there is an explanation documented in the notes as to why an overdue Reviewed Assessment is late.
- Review consents to make sure they are updated and correctly filled out.
- Review progress notes and check next scheduled appointment.

Licensed Practitioner of the Healing Arts (LPHA) Reminders:

- 1. If you are a Licensed Practitioner of the Healing Arts (LPHA) signing off on someone else's Initial Assessment (0AT) or Reviewed Assessment (0AR), be sure to double-check that all required signatures are present (client, parent/guardian, therapist, LPHA). Verbal signatures no longer count—therapist must get electronic signature next time client is in the office.
- If you are an LPHA signing off on someone else's Initial Assessment(0AT) or Reviewed Assessment (0AR), be sure to write a note. This is a billable service.
 The date of your note should be the same as the date that you signed the IATP.
- 3. If you are an LPHA signing off on your own Initial Assessment(0AT) or Reviewed Assessment (0AR), be sure to double-check that all required signatures (client, parent/guardian, therapist, LPHA) are present. Verbal signatures no longer count— you must get electronic signature next time client is in the office.



Sylvia Muniz, MSN, RN Director, Family Health Services October 2025

Program Updates

Immunizations-Lisa Carlson, RN, BSN Program Coordinator

The Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP), underwent drastic changes in June 2025 that created a great deal of mistrust in the medical community. Because of these changes, professional societies including the American Academy of Pediatrics (AAP), American College of Obstetricians and Gynecologists (ACOG), and American Academy of Family Physicians (AAFP) began issuing immunization recommendations separate from ACIP. Additionally, the Illinois Immunization Advisory Committee (IL-IAC) made recommendations which aligned with those of the AAP, ACOG, and the AAFP.

On September 12, 2025, Governor J. B. Pritzker issued an executive order (Executive Order 2025-04) to protect life-saving immunization access for Illinoisans through the Statewide Vaccine Access Initiative.

On September 18-19, 2025, the ACIP met and voted to make the following recommendations:

- To not recommend use of Measles, Mumps, Rubella, Varicella (MMRV) vaccine (ProQuad, Merck) for children younger than age 4 years. The committee passed a Vaccine For Children (VFC) program resolution to align it with this recommendation.
- To recommend Hepatitis B testing for all pregnant women (a current recommendation of the U.S. Preventive Services Task Force [USPSTF]).
- To recommend individual-based decision-making (also known as shared clinical decision-making [SCDM]) for COVID-19 vaccinations of all people age 6 months and older following a discussion with a healthcare professional. ACIP also voted to recommend that additional topics be added to the COVID-19 Vaccine Information Statement (VIS) and covered in informed consent discussions.

In response to the Executive Order and accompanying the aforementioned recommendations, the Director of the Illinois Department of Public Health (IDPH), Dr. Sameer Vohra, MD, JD, MA, issued a standing order for the COVID-19 vaccination that will allow Illinois residents the access they need to receive a COVID-19 vaccine. All of these actions will affect administration of several immunizations by the WCHD, including MMRV and COVID-19; there were no changes related to the Hepatitis B vaccine at this time.

MMRV (**ProQuad**) Will County Health Department (WCHD) was already routinely giving MMR and Varicella separately for the first dose to children under 2 years old. We will not have the option of giving MMRV combination vaccine to children under 4 years of age, even if parents request it. We will continue to give the combination MMRV to children over 4 years old when indicated.

Hepatitis B- Hepatitis B testing is already being done on all pregnant women during their prenatal care. However, not all women receive prenatal care. The ACIP tabled the vote regarding the recommendations for the birth dose of Hepatitis B. However, the current recommendation by AAP is for all newborns to receive the first dose of Hepatitis B vaccine within 24 hours of birth.

COVID-19 Vaccination- The ACIP recommendations have much bearing on what vaccines are covered by public and private insurance. Medicaid, Medicare and private insurance are expected to cover COVID-19 vaccinations with these recommendations.

Will County Health Department, in compliance with the Executive Order 2025-04, endorses the IL-IAC recommendations and follows the Standing Order for COVID-19 issued by IDPH Director. This standing order allows COVID-19 vaccine without a doctor's order to all adults, all pregnant women, all children 6 months- 2 years old and children 2-17 who are high risk for severe COVID disease (self-attested). Healthy children 2-17 years old who are not in a high-risk group may have a COVID vaccine with a doctor's order.

COVID vaccine is not yet available through the Vaccines for Children or Adult 317 programs which will provide vaccine to the uninsured, underinsured and to children with Medicaid.

WCHD has purchased Spikevax (Moderna) for the ages 12+ and a few doses of Spikevax (Moderna) for the ages of 6 months through 11 years old. The purchased vaccine will be available to adults with Medicaid, Medicare and private insurance (Blue Cross Blue Shield PPO only) and privately insured children upon arrival in early October.

Off -Site School Clinics were held at the Plainfield School District and Sator Sanchez Elementary School for Joliet District 86 students. A total of 27 students were immunized, and 62 vaccines were administered to students entering Kindergarten, 6th grade, and 12th grade.

Flu Vaccine administration began in September including flu clinics for WCHD and Will County Community Health Center (WCCHC) employees at all locations. As of September 30, 127 employees have received their flu shots from WCHD.

Flu shots have been provided onsite at two Senior Housing complexes in Joliet. Twelve flu shots were administered.

Flu shots are available to our patients of all ages at all three of our locations in Joliet, Bolingbrook, and Monee. We are also providing Flu shots to our Homebound clients – although many of them request the COVID vaccine at the same visit. Home visits will be ramping up in October.

Community Health Initiatives-Betsy Cozzie Program Coordinator All Our Kids Network (AOK)

The Will County All Our Kids (AOK) Early Childhood Network is a community-based collaboration which works to create and support long-lasting partnerships which empower families with knowledge and community resources promoting healthy development and lifelong success. The AOK program oversees the online referral system (IRIS) and media messaging and outreach, including those for developmental screenings.

The quarterly Information and Referral - IRIS (Integrated Referral and Intake System) meeting took place virtually on Monday, July 28th at 10AM. There were 26 members in attendance. During quarterly meetings, quarterly data is shared with the group, and we welcome new partners, along with group discussions about successes and any issues with referrals. We went over new

initiatives that we would like to try based on the strategic plan: upload intake forms and office hours. Next quarterly meeting will be Monday, October 27th, 2025, at 10M on Zoom.

September 2025 Referrals: 618

<u>Total Referrals</u> (Feb. 2020-September 2025): 12,812 <u>New IRIS Partner(s) added in September 2025</u>: None

Current number of referral programs in IRIS: 235 active profiles, 133 agencies

Developmental screenings are being done both virtually, and in person, throughout the county utilizing the Ages and Stages Questionnaire (ASQ). Screenings can be scheduled online, and performed online or over the phone, if necessary. See the training calendar at https://www.svcincofil.org/?page_id=701 for more information. Access to developmental screenings is important to detect developmental delays or other concerns early providing crucial support during a child's critical brain development period. Early intervention leads to better outcomes, potentially decreasing the need for future services and supporting school readiness and long-term learning.

Will County AOK is continuing with ASQ online. Current partners include Governors State University/Family Development Center, Catholic Charities/Healthy Families, Joliet School District/Marycrest Early Childhood Center, Joliet Junior College Early Childhood Center, Dr. James Mitchem Early Childhood Center and Debbie Sykora Early Childhood Center at Valley View School District. Will County launched the pilot in April 2021.

Online screenings completed to date: 2,087

In September, there were eight social media messages about developmental screening posted for AOK on the WCHD's X (formerly Twitter), Facebook, and Instagram accounts. These posts had a reach of 8,216

impressions.



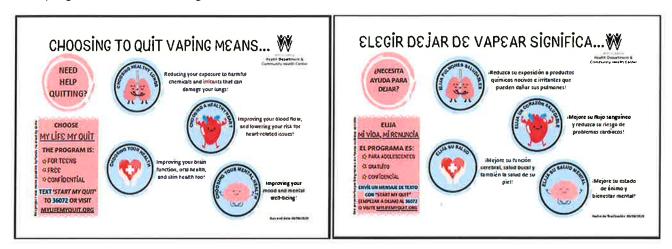


Tobacco Control and Prevention

The Tobacco team is experiencing a transition as we are down to one Community Health Educator due to the promotion of one staff member and the resignation of another. Positions are posted. This deficit in staffing has led us to prioritize our Smoke-Free Illinois Act (SFIA) compliance checks, outreach and education, and follow-up on SFIA complaints. Policy initiatives include tobacco-free park policies, strengthening local school tobacco use code, tobacco retail assessments and tobacco retailer density. Tobacco staff continue to collaborate with school districts, park districts, and community-based

organizations to strengthen their tobacco-free policies in Bolingbrook, Wilmington, Joliet, and Lockport to name a few. Additionally, tobacco staff participate in several coalitions in Will County discussing substance use initiatives and tobacco advocacy efforts: Will County Substance Abuse Prevention Coalition (WCSAPC), Will County Substance Abuse Prevention Coalition (WCSAPC), Smoking and Vaping Subcommittee, the Braidwood Areah Health Community Coalition (BAHCC) and the Wilmington Coalition for a Healthy Community (WCHC), Illinois Prevention Network (IPN), MAPP, the Will-Grundy-Kankakee County Recovery Oriented System of Care (ROSC) Council, and the New Lenox Safe Communities Coalition (NLSCC).

The ad for PACE Bus on youth vaping and tobacco prevention is being displayed inside buses on the Heritage Line in both English and Spanish until end of September as part of our Out-Of-Home Media Campaign. Staff are initiating the creation of a new ad for the winter months.



HIV Prevention/STI Surveillance Kendra Coleman, Program Coordinator Kaprinta Marek, Program Manager

Human immunodeficiency virus (HIV) staff participated in several outreach events last month touching about 250 individuals resulting in nearly 20 HIV rapid tests and condom distribution. Events and organizations included Joliet Job Corps, Riverwalk Homes, River Valley Detention Center, all Joliet Junior College sites, Joliet Pride, Pride After Dark, and the National Hook-up of Black Women Annual Community Day.

Pre-Exposure Prophylaxis (PrEP) clinic continues to see growth approaching 150 actively participating patients in the practice. Additionally, one new patient was started on Yeztugo, an injectable PrEP that is administered every six months as opposed to Apretude that is injected every other month. The goal is to increase compliance because of a decrease in the frequency of administration. Finally, an injection clinic has been set up to streamline the process for all injections for PrEP, HIV treatment and Sexually Transmitted Infection (STI) treatment for Care Clinic patients. This injection clinic will offer a nursing-only visit scheduled outside of our regular weekly clinic days and times.

Our nursing Disease Intervention Specialists conducting STI surveillance have been hard at work following up on positive gonorrhea, chlamydia and syphilis cases. This month we also had three Mpox cases. It is our goal to work more closely with our Will County provider offices to get them onboard by reporting positive cases through the Illinois Disease Surveillance System (IDSS) to ensure timely follow-up and treatment of

all positive cases in Will County. Lack of using the system causes delays in communicating with the proper jurisdictions and ensuring proper notification and treatment for all positive residents and testing individuals of Will County.

Epidemiology (EPI) and Communicable Disease (CD) Alpesh Patel, Program Coordinator Muneeza Azher, Program Manager

The Communicable Disease investigators and staff conducted 704 conducted investigations in September including human cases of West Nile Virus (WNV), measles from Cook County, and a case of meningitis at the Will County Detention Center. Five cases of West Nile Virus neuroinvasive disease highlight a concerning trend among older adults. The majority of those affected were individuals over 65 years of age. Among the reported cases was a 66-year-old female resident of Joliet, who displayed symptoms characteristic of neuroinvasive WNV. Additionally, another case involved a 68-year-old female also from Joliet. The list included a 4-year-old girl, a resident of Joliet, drawing attention to the virus's reach across age groups. Furthermore, a 70-year-old male and a 78-year-old male from Shorewood were also included in the reported cases, underscoring the vulnerability of older populations to this severe illness. This uptick in cases serves as a reminder of the ongoing public health challenge posed by West Nile Virus, particularly among the elderly.

Cook County Department of Public Health (CCDPH) reported a confirmed measles case on September 16th involving a 4-year-old unvaccinated child with recent international travel, who received care at Palos Hospital in Cook County. Four residents of Will County were potentially exposed to the virus at the hospital. The Will County CD/EPI team identified an additional two contacts who accompanied the exposed patients. Four individuals were identified as immune based on vaccine status or titers. One person was not reached despite efforts made by the CD team to inform him of his exposure. The team coordinated with CCDPH and Palos Hospital infection preventionists to flag his electronic health record (EHR) for proper management in case he returned to the emergency department (ED). CCDPH later informed the Will County team that he returned to Palos ED the following weekend but showed no measles symptoms. He was immediately placed in airborne isolation during his visit, and the flag will remain on his EHR for the 21-day monitoring period. An individual with an unknown immunization history was an inpatient at the hospital for an unrelated medical issue. The Will County CD team coordinated with the hospital on the timely receipt of measles titer and MMR within the post-exposure prophylaxis period.

A COVID-19 outbreak has been reported at an assisted living facility in Will County, where 29 residents and six staff members have tested positive for the virus. This situation is still unfolding, and the Will County Health Department is actively involved, providing guidance to the facility and monitoring updates daily. Additionally, in September, a separate outbreak was documented at an adult supportive living facility, where five residents were confirmed to have contracted COVID-19.

IDPH informed WCHD of a case of Neisseria meningitis in a person who had been incarcerated at the Will County Detention Center. According to the IDPH, the case involved a resident from another jurisdiction who was present during the potential incubation period. WCHD contacted the facility to confirm incarceration and exposure dates and to identify any cellmates who may have been exposed and need post exposure prophylaxis (PEP). Two Will County residents were identified; only one could be reached. That individual reported no symptoms and was advised to follow up with their Primary Care Physician (PCP) for PEP. The facility received education and infection prevention guidance. No additional cases have been reported to date.

Mobilizing for Action through Planning & Partnerships (MAPP) - Caitlin Daly, Program Manager
On September 8th, the Illinois Department of Public Health issued its notice of compliance for the Will
County 2025–2030 Illinois Project for Local Assessment of Need (IPLAN). The IPLAN is valid from

10/28/2025 - 10/27/2030. Print and digital copies of the report will be available in October.

Throughout September, the Access to Food and Nutrition and Behavioral Health/Substance Use (BH/SU) Action Teams continued implementing strategies outlined in the new IPLAN.

- The Food and Nutrition Team met on September 9th with 11 participants to explore funding opportunities that support priority strategies. The team will continue to meet on the second Tuesday of each month at 10:00 AM, with the next meeting scheduled for October 14th.
- The Maternal and Child Health Team meets bimonthly, with the next meeting on October 29th.
- The Behavioral Health/Substance Use Team met on September 22nd with 29 participants, continuing development of questions and scope for the Medicare and Language Access landscape assessments. This group meets monthly on the fourth Monday at 1:00 PM, with the next meeting on October 27th.

All meetings are held virtually via Microsoft Teams. Please contact Caitlin Daly at cdaly@willcountyhealth.org to be added to future meeting communications.

Women Infant & Children (WIC) Diana Visvardis, Program Coordinator

WIC increased caseload to 8,118 participants, which is 88% of their assigned caseload. We received 38 online inquiries with 32 successfully scheduled for appointments. As partners in IRIS, we submitted 119 referrals to other partners, and we received nine referrals via IRIS. We are happy to report breastfeeding rates as 31% of Will County WIC babies are exclusively breastfeed and 34% are partially breastfeed. Breastfeeding is beneficial to the mother and the baby. Furthermore, WIC has an International Board Certified Lactation Consultant on staff to help teach staff and quide WIC mothers on their breastfeeding journeys.



Katie Weber Program Coordinator, Emergency Preparedness & Response October 2025

Emergency Preparedness and Response (EP&R) Program

- IDPH announced that 27% funding cuts to the Public Health Emergency Preparedness (PHEP) grant will be returned. An updated budget is being prepared.
- The Will County Long-Term Recovery Group met on October 1st. Kathleen Burke presented to the group on the Behavioral Health services offered at the Health Department.
- On October 10th, Katie Weber and Cortney Smith attended a Zoonotic Disease Awareness and Public Health Symposium hosted by the Cook County Department of Animal Control. The conference provided insights into diagnostics and treatment, as well as the role veterinarians and public health officials play in responding to various zoonotic diseases.
- The Long-Term Recovery Group was invited to present at the Whole Community Conference in Champaign, Illinois on October 22nd. The presentation will cover how the county has combined efforts to plan for Disaster Recovery. Katie Weber will speak with the panel and Cortney Smith will be attending the Whole Community Conference on October 21st -22nd.

BioWatch Program

Illinois Environmental Protection Agency (IEPA) has been covering the cost of the contractors
collecting daily filters for BioWatch. An agreement has been reached, and the program will continue
for another five months.

Medical Reserve Corps (MRC)

- Seven MRC volunteers assisted in packing Bens Blue Bags on October 6th. The sensory bags will be provided to first responders within the Region VII hospital coalition (Grundy, Kendall, Will, Kankakee, and Southern Cook Counties). See photos below
- Four MRC volunteers participated in Will County Emergency Management Agency's Command and Control Exercise on October 15th. The exercise focused on reinforcing command and control roles and testing multi-agency coordination and communication during a high-stake scenario.
- On October 25th, Katie Weber and Cortney Smith will lead medical countermeasures training for the
 unit and volunteers will also participate in a dispensing drill. Volunteers will work with the Algorithm to
 figure out the correct medication for individuals in an Anthrax scenario. They will then work through
 peeling labels from the medication bottles and placing them on the correct area of the consent forms.



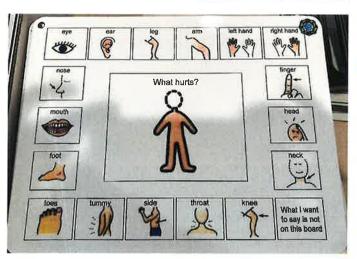














MEDIA SERVICES

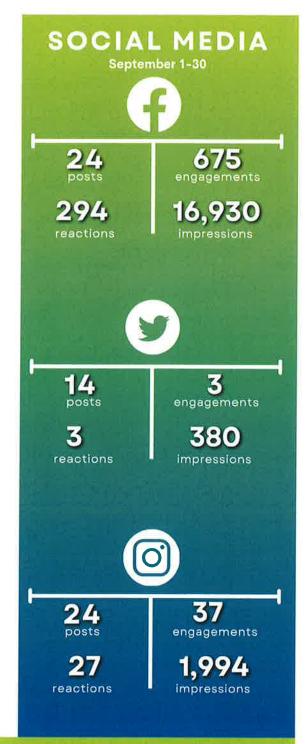
OCTOBER 2025



MONTHLY REPORT



- Media Services is working with Caitlin Daly, MAPP Program
 Manager, on the design of a new MAPP webpage. The goal is
 to have a new MAPP webpage up and running before the end
 of October.
- Media Services played a role in the open house event of the new Behavioral Health Offices and Community Health Center suite at the Northern Branch Office in Bolingbrook. Posters were designed and printed for the event, a media advisory was issued and audio/video equipment was set up for the event.
 Media Services is currently working on a post-event video use to on our social media channels. (See attached event report).
- Media Services has been working with division directors to record videos to be used at new hire orientations. Videos have been recorded and are in the process of being edited and finalized.
- Media Services is working on a collaboration with Lewis
 University that would have small groups of students working
 with media services to review the agency's website, social
 media content and printed materials.
- Media Services is establishing a new social media working group through the agency. This group is for all programs and divisions that provide social media content. The group will set standards in dimensions, colors, logo and font usage while also working on creating a social media calendar a month in advance.
- In addition to continuing to promote our own services on social media, Media Services also used social media to promote awareness and knowledge of Suicide Awareness Month, Prostate Cancer Awareness Month, Food Safety Education Month, Sexual Health Awareness Month and more.



Northern Branch Office Open House September 29, 2025

New Community Health Center Suite New Behavioral Health Suite

The Will County Health Department hosted an open house and ribbon cutting to celebrate the new Community Health Center and Behavioral Health suites at the Northern Branch Office in Bolingbrook. The open house featured brief remarks, a ribbon cutting and tours of the new facility. Speakers included Elizabeth Bilotta (Executive Director of the Will County Health Department), Mica Freeman (Will County Board and Board of Health member), Chief Paul Hertzmann (President of the Board of Health), Dr. Matthew Glowiak (Chair of the Community Health Center's Governing Council), Stacy Baumgartner (CEO of the Will County Community Health Center), Teena Mackey (Executive Director of the Will County Mental Health Board), and Diane Scruggs (Division Director of Behavioral Health at the Will County Health Department).



















WILL COUNTY COMMUNITY HEALTH CENTER - Patients and Visits CY2025 as of 08/31/2025

		2025	2024	2025	2024	2025	2024	2025	2024	2025	2024	2025	2024	2025	2024
Line	Personnel by Major Service Category	Clinic Visits	Clinic Visits	Virtual Visits	Virtual Visits	SBHC Visits	SBHC Visits	Hospital Visits	Hospital Visits	All Visits	All Visits	Patients	Patients	SBHC Patients	SBHC Patients
1	Family Physicians	370	306	3	15	13	0			373	321	204	172	13	
2	General Practitioners	0	0	0	0	0	0			0	0			0	_
3	Internists	944	276	0	3	0	0			944	279		161	0	_
4	Obstetrician/Gynecologists	5442	5225	0	1	0	0		-200	5,442	5,226	2085	2077	0	
5	Pediatricians	2201	1678	68	70	12	0			2,269	1,748	1271	1047	12	
7	Other Specialty Physicians	0	0	0	0	0	0			0	0	0	0	0	- 0
8	Total Physicians (Lines 1–7)	8957	7485	71	89	25	0			9,028	7,574	3861	3412	25	
9a	Nurse Practitioners	4572	6461	174	736	258	211			4,746	7,197	2964	4281	217	150
9b	Physician Assistants	0	0	0	0	0	0			0		0	0	0	130
10	Certified Nurse Midwives	310	274	0	0	0	0			310	274	246	207	0	- 0
10a	Total NPs, PAs, and CNMs (Lines 9a-10)	4882	6735	174	736	258	211			5,056	7,471	3157	4428	217	150
11	Nurses	6	4	0	2	0	0			6		6	6	217	150
15	Total Medical (Lines 8 + 10a through 14)	13845	14224	245	827	283	211			14,090	15,051	6272	6925	236	150
16	Dentists	4403	4674	0	027	0	0			4,403	4,674	2711			
17	Dental Hygienists	459	559	0	0	0	0			4,403	559	419	2750 493	0	
17a	Dental Therapists	0	0	0	0	0	0			459		419	493	0	
19	Total Dental Services (Lines 16–18)	4862	5233	0	0	0	0			4,862	5,233	2943	3038	0	
20a	Psychiatrists	1539	1203	761	918	0	0			2,300	2,121	632	697		
20a1	Licensed Clinical Psychologists	18	0	18	766	0	0			36	766			0	
20a2	Licensed Clinical Social Workers	262	0	0	0	263	1			262	766	34	227	0	- 0
20b	Other Licensed Mental Health Providers	2841	2114	221	6	157	33					41	0	42	1
20c	Other Mental Health Staff	0	0	0	0	0	0			3,062	2,120	964	707	65	22
20	Total Mental Health (Lines 20a-c)	4660	3317	1000	1690	420				0	0	0	0	0	
21	Substance Abuse Services	0	0	1000	1690	0	34 0	-		5,660	5,007	1611	1464	96	23
22	Other Professional Services (specify)	0	0	0	0	0	0			0	0	0	0	0	
22a	Ophthalmologists	0	0	0	0	0	0			0	0	0	0	0	
22b	Optometrists	235	289	0	0	0	0			0	0	0	0	0	
22d	Total Vision Services (Lines 22a–c)	235	289	0	0	0	0			235	289	230	281	0	0
24	Case Managers	0	203	0	0	0	0			235	289	230	281	0	0
25	Patient/Community Education Specialists	0	0	0	0	0				0	0	0	0	0	
29	Total Enabling Services (Lines 24–28)	0	0	0	0	0	0			0	0	0	0	0	0
34	Grand Total (Lines 15+19+20+21+22+22d+23+29+29a+33)	23602					0			0	0	0	0	0	0
20a01	Mental Health - Physicians other than Psychiatrists		23063	1245	2517	703	245			24,847	25,580	11056	11708	332	173
20a01	Mental Health - Nurse Practitioner	240 347	235	1	5	0	0			241	240	203	197	0	0
20a02	Mental Health - Physician Assistants		808	U	15	2	8			347	823	323	714	2	8
20a03	Mental Health - Certified Nurse Midwives	0	0	0	0	0	0			0	0	0	0	0	0
21a	SUD - Physicians other than Psychiatrists	0	0	0	0	0	0			0	0	. 0	0	0	0
21b	SUD - Nurse Practitioner - Medical	168	160	3	10	0	0			171	170	75	63	0	0
21c	SUD - Physician Assistants	147	175	0	4	0	0			147	179	133	161	0	
21d	SUD - Certified Nurse Midwives	0	0	0	0	0	0			0	0	0	0	0	0
21e	SUD - Psychiatrists	0	1	0	0	0	0			0	1	0	1	0	0
21e 21f		278	228	153	209	0	0			431	437	109	136	0	0
	SUD - Licensed Clinical Psycologists	2	0	4	154	0	0			6	154	6	44	0	0
21g	SUD - Licensed Clinical Social Workers	0	0	0	0	0	0			0	0	0	0	0	0
21h	SUD - Other Licensed Mental Health Providers	496	384	44	0	5	3			540	384	204	140	4	3
	Obstetrical Deliveries							298	259						
	Circumcisions							63	44						
	Gyne Admissions including surgeries							51	62						
	Hospital Visits (ER & Admissions)							377	343						
	Dr. Flores' Newborn visits							84	55						
	Grand Total (Lines = 34 from above)	23,602	23,063	1,245	2,517	703	245			24,847	25,580	11,056	11,708	332	173

^{*} Patient/Community Education Specialists (Line 25): Include the number of ACA assists

			1
ENVIRONMENTAL HEALTH	Sep-25	FY25 YTD	FY24
Food Program Activities	784	7808	807
Water Program Activities	121	1038	119
Sewage Program Activities	93	918	80
Other Program Activities (beaches, tanning facilities, etc.)	1653	13843	108
Aerobic Treatment Plant Samples	893	6384	495
Number of Service Requests	28	330	36
Number of Complaints	102	698	57
Number of Well Permits	15	126	11
Number of Septic Permits	20	166	17
Number of Lab Samples Analyzed by EH Lab	4169	29240	240
TOTAL	7,878	60,551	51,1
OFFICE OF VITAL RECORDS	Sep-25	FY25 YTD	FY24
Births Recorded	348	3,715	3,92
Deaths Recorded	339	4,014	3,83

		Family I	lealth Se	rvices M	onthly Bo	oard of He	ealth Rep	ort					
	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25		Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Total
APORS High Risk Birth caseload	137	134	134	124	108	118	105	*	*	*			860
Better Birth Outcomes Comprehensive	43	41	42	61	45	53	46	87	94	104			616
High Risk Infant Follow-Up caseload	260	259	263	255	266	266	261	244	226	225			2525
HealthWorks Lead Agency Medical Case													
Mgmt. caseload	651	656	665	656	666	650	648	645	618	602			6457
WIC caseload	8733	8835	8699	8777	8850	8912	8857	7965	8038	8118			85784
# non-compliant businesses-SFIA	1	15	11	1	16	16	1	19	2	6			88
# partners provided technical assistance													
with developing tobacco policy	0	0	0	2	2	3	0	0	1	NA			8
# clients immunized	269	305	255	292	264	202	261	343	499	338			3028
# travel client immunizations	22	42	26	43	52	52	26	18	25	26			332
# influenza vaccinations	117	114	93	81	49	14	6	0	0	215			689
# chlamydia cases	152	174	155	179	214	245	90	163	123	195			1690
# gonorrhea cases	49	55	49	48	59	63	29	38	40	55			485
# syphilis investigations	60	54	46	95	76	60	77	121	91	67			747
# HIV tests performed	21	31	33	26	60	53	48	33	63	55			423
# Mpox cases	0	0	0	0	0	0	0	0	3	0			3
# CD investigations	315	328	303	324	717	756	659	771	891	704			5768

U/A=results unavailable at this time

^{*} APORS program now merged with BBO, renamed Better Birth Outcomes Comprehensive

September 2025 CD Investigations

Disease	Case Count
Campylobacteriosis	13
Candida auris, clinical	3
Candida auris, screening	1
Carbapenemase Producing Organism, clinical	4
Carbapenem Resistant Organism	4
Cyclosporiasis	1
E. coli unspecified	1
Haemophilus Influenzae Invasive Disease	1
Hepatitis A	1
Hepatitis B Chronic	210
Hepatitis C Virus Chronic Infection	285
Histoplasmosis	4
Legionellosis - Legionnaires Disease	1
Lyme Disease	4
Measles	1
Pertussis	1
Rabies, Potential Human Exposure	21
Rubella	2
Salmonellosis	5
SARS-CoV-2 infection (COVID-19) with ICU Hospitalization	7
Shiga toxin-producing E. coli (STEC)- Shiga toxin pos, not cultured or serotyped	6
Shigellosis	2
Streptococcal Disease Invasive Group A	5
Varicella (Chickenpox)	4
Vibriosis	1
West Nile Virus Neuroinvasive Disease	5
West Nile Virus Non-Neuroinvasive Disease	4
Animal Exposures / Bites	107
Sum	704

BH STATS PLACE HOLDER



WILL COUNTY BOARD OF HEALTH RESOLUTION #25-62

RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH WILL COUNTY, ILLINOIS

APPROVAL TO CONTRACT FOR SECURITY SERVICES AT THE WILL COUNTY HEALTH DEPARTMENT 501 ELLA AVENUE, THE COMMUNITY HEALTH CENTER BUILDING 1106 NEAL AVENUE AND

THE WILL COUNTY HEALTH DEPARTMENT NORTH BRANCH OFFICE BUILDINGS 323 QUADRANGLE DRIVE AND 391 QUADRANGLE DRIVE

WHEREAS, the Will County Health Department requires security services for the Health Department building at 501 Ella Avenue, the Community Health Center building at 1106 Neal Avenue, and North Branch Offices at 323 and 391 Quadrangle Drive; and

WHEREAS, the Health Department completed the formal bidding process as outlined in the Will County Purchasing Ordinance; and

WHEREAS, all received bids were carefully vetted and considered, we request approval to enter into contract with Blue Line Security Solutions effective December 1, 2025 through November 30, 2026 at the following rates of \$28.00 regular hourly, \$43.40 overtime hourly, and \$43.40 hourly for holidays; and

WHEREAS, the term of this agreement includes two one-year renewal options.

NOW, THEREFORE, BE IT RESOLVED, the Will County Board of Health hereby approves the contract for security services with Blue Line Security Solutions.

DATED THIS 15 th Day of October, 2025
Chief Paul Hertzmann, President
Will County Board of Health

BID FORM

SECURITY GUARD SERVICES

WILL COUNTY HEALTH DEPARTMENT 501 ELLA AVENUE, JOLIET, IL

WILL COUNTY COMMUNITY HEALTH CENTER 1106 NEAL AVENUE, JOLIET, IL

WILL COUNTY HEALTH DEPARTMENT AND COMMUNITY HEATLH CENTER 323 AND 391 (SUITE 130) QUADRANGLE DRIVE, BOLINGBROOK IL

SUNNY HILL TUBERCULOSIS (TB) CLINIC 501 ELLA AVENUE, SUITE 2, JOLIET IL

Due: 10:00 a.m. - October 3, 2025

The Bidder proposes to provide security guard services in accordance with the specifications attached herein.

SUBMIT PROPOSAL TO:	WILL COUNTY HEALTH DEPARTMENT EXECUTIVE SUITE 501 ELLA AVENUE JOLIET, IL 60433		
Mandatory Pre-Bid: September	r 26, 2025 10:00 a.m.		
Date Bids Opened: October 3,	2025 10:10 a.m.		
Please Check One: Minority Ve	endor: Yes No		
Should you have any questions Executive Assistant at mkilbride@	regarding this bid, please submit them via email to willcountyhealth.org.	o Mary	Kilbride,
NAME: Blue Line Security Solutions	LLC		
ADDRESS: 9550 Bormet Dr., Suite 2	205	_	
CITY: Mokena	ZIP CODE: 60448		
TELEPHONE: 708-995-7452	FAX:		
FEIN NUMBER: 82-216658			

BID FORM ONE-YEAR CONTRACT FOR SECURITY GUARD SERVICES 2025-2026 CONTRACT

Will County Health Department

501 Ella Ave	nue, Joliet		
Day shift \$(Hourly rate	per hour	\$43.40 per hour (Overtime Hourly Rate)	
	Health Center venue, Joliet		a
Day shift \$2\f (Hourly rate	per hour	\$ 43. 40 per hour (Overtime Hourly Rate)	\$ 43. 40 per hour (* Holiday Hourly Rate)
	Health Departn uadrangle Drive	nent, North Branch Office e, Bolingbrook	
Day shift \$	per hour	\$ 43.40 per hour (Overtime Hourly Rate)	\$ 43.40 per hour (* Holiday Hourly Rate)
	uberculosis Ce nue, Suite 2, Jo		
Day shift \$ <u>28</u> (Hourly rate	per hour	\$ 43.40 per hour (Overtime Hourly Rate)	
* Any vendor	observed holida	y when the vendor is reques	ted to work. Please supply a list of holidays your firm observes.
Signed by: _	Jack Ha	u-	Date: 10/02/25
		Place corporate seal here	
		artment, Community Healtl at Any or All Bids Received	h Center, and the Sunny Hill Tuberculosis Clinic Reserve I.
Approved:	Chief Paul He Will County Bo	rtzmann, President pard of Health	Date:
Approved;	Matthew Glov Community H Governing Co		Date:
Approved:	Douglas Ruth	, Board President	Date:

BID FORM ONE-YEAR CONTRACT FOR SECURITY GUARD SERVICES 2026-2027 CONTRACT

501 Ella Avenue,		
Day shift \$Q ((Hourly rate)	per hour \$ <u>44.4</u> per (Overtime Hourly I	hour \$\frac{44,9}{} per hour Rate) (* Holiday Hourly Rate)
Community Heal 1106 Neal Avenu		
Day shift \$ 2 9 (Hourly rate)	per hour \$\frac{44.9}{\text{Overtime Hourly F}} \text{per}	hour \$
Will County Healt 323 & 391 Quadra	th Department, North Branch C angle Drive, Bolingbrook	<u>Office</u>
Day shift \$ (Hourly rate)	per hour \$\frac{44.91}{\text{Overtime Hourly F}}	hour \$ per hour Rate) (* Holiday Hourly Rate)
Sunny Hill Tubero 501 Ella Avenue,		
Day shift \$ (Hourly rate)	per hour \$ per l (Overtime Hourly R	hour \$ per hour tate) (* Holiday Hourly Rate)
* Any vendor obser	ved holiday when the vendor is	requested to work. Please supply a list of holidays your firm observes
Signed by:	ack Ham	Date: 10/02/25
Title:M	Place corporate se	
The Will County H	ealth Department, Community ot or Reject Any or All Bids Re	Health Center, and the Sunny Hill Tuberculosis Clinic Reserve ceived.
	ef Paul Hertzmann, President County Board of Health	Date:
Cor	tthew Glowiak, Chairperson mmunity Health Center verning Council	Date:
	uglas Ruth, Board President nny Hill TB Clinic Board	Date:

BID FORM ONE-YEAR CONTRACT FOR SECURITY GUARD SERVICES 2027-2028 CONTRACT

	y Health Departi enue, Joliet	<u>ment</u>	
Day shift \$36 (Hourly ra	per hour	\$ 46.48 per hour (Overtime Hourly Rate)	\$\(\begin{aligned} \(4\) \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
1106 Neal A	/ Health Center Avenue, Joliet		
Day shift \$ <u>30</u> (Hourly ra	per hour	\$\frac{46.2\}{\text{V}}\text{ per hour (Overtime Hourly Rate)}	\$ 46.48 per hour (* Holiday Hourly Rate)
Will County 323 & 391 C	r Health Departr Quadrangle Driv	nent, North Branch Office e, Bolingbrook	
Day shift \$		\$\frac{46.48}{\text{Overtime Hourly Rate}}\)	\$\frac{46.48}{\text{Poliday Hourly Rate}}\)
	Tuberculosis Ce enue, Suite 2, Jo		
Day shift \$ <u>36</u> (Hourly rat	per hour e)	\$per hour (Overtime Hourly Rate)	\$ 46.48 per hour (* Holiday Hourly Rate)
			ted to work. Please supply a list of holidays your firm observes
Signed by:	Jack Ho	1944-	Date: 10/02/25
Title:	Mangang	Portwer Place corporate seal here	; :
The Will Coι the Right to	inty Health Dep Accept or Rejec	artment, Community Healtl ct Any or All Bids Received	n Center, and the Sunny Hill Tuberculosis Clinic Reserve
Approved:	Chief Paul He Will County Bo	rtzmann, President pard of Health	Date:
Approved:	Matthew Glov	viak, Chairperson	Date:
	Community H Governing Co	ealth Center	
Approved:			Date:
	Douglas Ruth Sunny Hill TB	, Board President Clinic Board	

PRIME CONTRACTOR CERTIFICATION

The undersigned hereby certifies that	Blue Line Security Solutions LLC
	Name of Contractor
is not barred from Contracting with any unit of State 33E-3 or 33E-4 of the Criminal Code of 1961.	e or local government as a result of a violation of either Sectior
Representative of Contractor	Title Portuse
Jark Haur Signature	
Note: A person who makes a false certificate com	nmits a Class 3 Felony.

33E-3. Bid-rigging. A person commits the offense of bid-rigging when he knowingly agrees with any person who is, or but for such agreement would be, a competitor of such person concerning any bid submitted or not submitted by such person or another to a unit of State or local government when with the intent that the bid submitted or not submitted will result in the award of a Contract to such person or another and he either (1) provides such person or receives from another information concerning the price or other material term or terms of the bid which would otherwise not be disclosed to a competitor in an independent non-collusive submission of bids or (2) submits a bid that is of such a price or other material term or terms that he does not intend the bid to be accepted.

Sections 33E-3 and 33E-4 provide as follows:

Bid-rigging is a Class 3 felony. Any person convicted of this offense or any similar offense of any state or the United States which contains the same elements as this offense shall be barred for 5 years from the date of conviction from Contracting with any unit of State or local government. No corporation shall be barred from Contracting with any unit of State or local government as a result of a conviction under this Section of any employee or agent of such corporation if the employee so convicted is no longer employed by the corporation and: (1) it has been finally adjudicated not guilty or (2) if it demonstrates to the governmental entity with which it seeks to Contract and that entity finds that the commission of the offense was neither authorized, requested, commanded, nor performed by a director, officer or a high managerial agent in behalf of the corporation as provided in paragraph (2) of subsection (a) of Section 5-4 of this Code.

33E-4 Bid rotating. A person commits the offense of bid rotating when, pursuant to any collusive scheme or agreement with another, he engages in a pattern over time (which, for the purposes of this Section, shall include at least 3 Contract bids within a period of 10 years, the most recent of which occurs after the effective date of this amendatory Act of 1988) of submitting sealed bids to units of State or local government with the intent that the award of such bids rotates, or is distributed among, persons or business entities which submit bids on a substantial number of the same Contracts. Bid rotating is a Class 2 felony. Any person convicted of this offense or any similar offense of any state or the United States which contains the same elements as this offense shall be permanently barred from Contracting with any unit of State or local government. No corporation shall be barred from Contracting with any unit of State or local government as a result of a conviction under this Section of any employee or agent of such corporation if the employee so convicted is no longer employed by the corporation and: (1) it has been finally adjudicated not guilty or (2) if it demonstrates to the governmental entity with which it seeks to Contract and that entity finds that the commission of the offense was neither authorized, requested, commanded, nor performed by a director, officer or a high managerial agent in behalf of the corporation as provided in paragraph (2) of subsection (a) of Section 5-4 of this Code.

Possible violations of Section 33 can be reported to the Office of the Will County State's Attorney at (815) 727-8453.

IF THE PRIME CONTRACTOR CERTIFICATION IS NOT SUBMITTED, THE BID PACKAGE AND CONTRACT SHALL BE NON-CONFORMING AND SHALL BE REJECTED.

REFERENCE FORM: SECURITY GUARD SERVICES CONTRACT REFERENCES

Please provide at least three (3) references for which similar services have been rendered. If at least three (3) references for commercial clients similar in scope are not provided, the bid package and contract shall be non-conforming and shall be rejected.

COMPANY NAME AND ADDRESS	CONTACT PERSON	PHONE NUMBER AND EMAIL
FedEx 942 South Shady Grove Rd. Memphis, TN 38120	Josh Atteberry Security Specialist	
Indianapolis Airport 7800 Col. H Cook Memorial Dr. Indianapolis, IN 46241	Michael Hammond Division Chief, Special Operations	
Sephora 9394 Sephora Way Avon, IN 46132	Mike Truax Director, Logistics Asset Protection	
9		

RECEIPT OF ADDENDA FORM:

10		5, 10:00 A					
: 10)-03-2	5, 10:10 <i>A</i>	.M.	N.		- 62	
N	AME_	Blue Line	Security Sc	olutions LLC		F.E.I.N. #	
Αſ	DDRE	SS 9550	Bormet Dr.,	Suite 205			
	_	okena			STATEIL	_{ZIP} 60448	Please check on
C	ONTA	CT Anna	Both			Minority Vend	dor/ yes
PH	HONE			FAX		EMAIL_	
No	жпоwі э. <u>А</u>	edged: , dated <u>S</u>	eptember 29	9th, 2025_, si	gned Omn	a Both	
_							
AD act	knowl	edged:				to the Bidding Docu	
AD ach	knowle	edged: , dated		, się	gned		
AD ack	knowle	edged: , dated DUM RECedged:	EIPT: Receip	pt of the follow	gned ing Addendum		ments is hereby
AD ack	DENE	oum REC	EIPT: Receip	pt of the follow	gneding Addendum	to the Bidding Docu	ments is hereby
AD ack	DENE	edged: , dated DUM RECedged: dated	EIPT: Receip	pt of the follow	ing Addendum gned	to the Bidding Docu	ments is hereby

IF THE RECEIPT OF ADDENDA FORM IS NOT SUBMITTED, THE BID PACKAGE AND CONTRACT SHALL BE NON-CONFORMING AND SHALL BE REJECTED.

PLUELINI /

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

CERTIFICATE OF LIABILITY INSURANCE

CONTACT Austin Carey PRODUCER **USI Insurance Services LLC** PHONE (A/C, No, Ext) E-MAIL FAX (A/C, No) 2001 Spring Road, Ste 200 ADDRESS Oak Brook, iL 60523 NAIC # 312 442-7200 14478 INSURER A: Mercer Insurance Company INSURED INSURER B : Illinois Union Insurance Company 27960 Blue Line Security Solutions LLC 13269 INSURER C : Zenith Insurance Company 9550 Bormet Dr Ste 205 INSURER D : Lexington Insurance Company 19437 Mokena, IL 60448-8445 INSURER E : Cincinnati Insurance Company 10677

COVERAGES CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			PRO00147825	09/05/2025		EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 50,000
1							MED EXP (Any one person)	\$5,000
1	X Retention: \$15,000 GEN'L AGGREGATE LIMIT APPLIES PER						PERSONAL & ADV INJURY	s 1,000,000
							GENERAL AGGREGATE	\$2,000,000
	X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	s 2,000,000
	OTHER.							\$
E	AUTOMOBILE LIABILITY		E	ENP0758614	09/27/2025	09/27/2026	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED AUTOS ONLY SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
В	UMBRELLA LIAB X OCCUR			G48864636001	09/05/2025	09/05/2026	EACH OCCURRENCE	\$5,000,000
	X EXCESS LIAB CLAIMS-MADE					AGGREGATE	s5,000,000	
	DED X RETENTIONS							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		M1406301	05/17/2025		PER OTH- STATUTE ER		
1 5	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT	\$1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$1,000,000
							E.L. DISEASE - POLICY LIMIT	\$1,000,000
D	Excess Liability Professional			052114818	09/05/2025	09/05/2026	6 \$4,000,000	
Α			PRO00147825		09/05/2025	09/05/2026	\$1,000,000/\$2,000,000	
1	Liability						·	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The General Liability policy includes an additional insured endorsement that provides additional insured status to County of Will, 302 North Chicago Street, Joliet, IL. 60432; Will County Health Department,
501 Ella Avenue, Joliet, IL 60433; Community Health Center, 1106 Neal Avenue, Joliet, IL. 60433;
323 & 391 Quadrangle Drive, Bolingbrook, IL; Sunny Hill TB Clinic 501 Ella Avenue, Suite 2, Joliet,
IL. 60433, only when there is a written contract that requires such status, and only with regard to work performed on behalf of the named insured.

CEI	DTI	FIC	AT	-	10	-	20

County of Will 302 N. Chicago Street Joliet, IL 60432 CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

adomos a Chesan

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THIS CERTIFIES THAT



Blue Line Security Solutions, LLC

* Nationally certified by the: CHICAGO MINORITY SUPPLIER DEVELOPMENT COUNCIL

*NAICS Code(s): 561612; 541690

* Description of their product/services as defined by the North American Industry Classification System (NAICS)

CH12664	Certificate Number		Orbra Generalings-Johnson	Debra Jennings-Johnson President / CEO
		m	Ying McGuire NMSDC CEO and President	
10/03/2024	Issued Date		10/31/2025	Expiration Date

By using your password (NMSDC issued only), authorized users may log into NMSDC Central to view the entire profile: http://nmsdc.org

Certify, Develop, Connect, Advocate...

 * MBEs certified by an Affiliate of the National Minority Supplier Development Council, Inc. $^{\text{@}}$

BIDDING REQUIREMENTS SECURITY GUARD SERVICES

Will County Health Department (Main Complex)
501 Ella Avenue
Joliet, IL 60433

Will County Health Department, Community Health Center 1106 Neal Avenue Joliet, IL 60433

Will County Health Department, North Branch Offices 323 Quadrangle Drive & 391 Quadrangle Drive (Suite 130) Bolingbrook, IL 60440

> Sunny Hill Tuberculosis Clinic 501 Ella Avenue Suite 2 Joliet, IL 60433

> > **SEPEMBER 3, 2025**



To Whom It May Concern:

You are invited to submit your bid to provide Security Guard Services for the Will County Health Department Main Complex at 501 Ella Avenue, Joliet, IL; the Will County Community Health Center at 1106 Neal Avenue, Joliet, IL; Will County Health Department North Branch Office at 323 and 391 Quadrangle Drive, Bolingbrook, IL; and the Sunny Hill Tuberculosis Clinic at 501 Ella Avenue, Suite 2, Joliet, IL. This Contract is for a twelve (12) month period beginning December 1, 2025 through November 30, 2026, with two (2) one (1) year renewal options.

Specifications are attached hereto and are considered part of the SEALED BID package.

A 10% Bid Bond or cashier's check made payable to the Will County Treasurer <u>MUST accompany your sealed bid, or it will be rejected</u>. Money orders or company checks will <u>not</u> be accepted.

A <u>Mandatory Pre-Bid</u> Conference will be held <u>10:00 A.M., Friday, September 26, 2025</u> beginning at the Will County Health Department, 501 Ella Avenue, Gathering Room (2nd floor, room 2002), Joliet, IL, 60433 with a site visit to all the above-noted buildings.

Sealed Bids must be received in the Will County Health Department, Executive Suite, 501 Ella Avenue, Joliet, IL, 60433, **NOT LATER THAN** <u>10:00 A.M., Friday, October 3, 2025.</u>

Bids will be publicly opened and read by the Will County Health Department Executive Director or designated representative at <u>10:10 A.M., Friday, October 3, 2025</u> at the Will County Health Department, 501 Ella Avenue, Gathering Room (2nd floor, room 2002), Joliet, IL, 60433.

The Will County Health Department, Community Health Center, and the Sunny Hill Tuberculosis Clinic reserve the right to accept or reject any or all bids received.

Should you have any questions regarding this bid, please submit them via email to Mary Kilbride, Executive Assistant at mkilbride@willcountyhealth.org.

We welcome your bid.

ADVERTISEMENT OF BID SECURITY GUARD SERVICES WILL COUNTY HEALTH DEPARTMENT/COMMUNITY HEALTH CENTER AND SUNNY HILL TUBERCULOSIS CLINIC JOLIET. IL

THE WILL COUNTY HEALTH DEPARTMENT, AS BIDDING AGENT FOR THE WILL COUNTY BOARD OF HEALTH, COMMUNITY HEALTH CENTER GOVERNING COUNCIL, AND THE SUNNY HILL TUBERCULOSIS CLINIC BOARD WILL ACCEPT **SEALED BIDS** FOR SECURITY GUARD SERVICES FOR THE HEALTH DEPARTMENT MAIN COMPLEX, 501 ELLA AVENUE, JOLIET, IL; THE COMMUNITY HEALTH CENTER AT 1106 NEAL AVENUE, JOLIET, IL; THE HEALTH DEPARTMENT NORTH BRANCH OFFICE 323 AND 391 QUADRANGLE DRIVE, BOLINGBROOK, IL; AND THE SUNNY HILL TUBERCULOSIS CLINIC AT 501 ELLA AVENUE, SUITE 2, JOLIET, IL.

SEALED BID FOR THE WILL COUNTY HEALTH DEPARTMENT (HEALTH DEPARTMENT), COMMUNITY HEALTH CENTER (CHC), SUNNY HILL TUBERCULOSIS (TB) CLINIC WILL BE RECEIVED IN THE WILL COUNTY HEALTH DEPARTMENT'S EXECUTIVE SUITE, 501 ELLA AVENUE, JOLIET, IL 60433, UNTIL THE HOUR OF 10:00 A.M., FRIDAY, OCTOBER 3, 2025.

A MANDATORY PRE-BID CONFERENCE WILL BE HELD ON <u>FRIDAY</u>, <u>SEPTEMBER 26, 2025</u>, <u>AT 10:00 A.M</u>. BEGINNING AT THE WILL COUNTY HEALTH DEPARTMENT, GATHERING ROOM (2nd FLOOR, ROOM 2002), 501 ELLA AVENUE, JOLIET, IL 60433 WITH A SITE VISIT TO ALL THE ABOVE-NOTED BUILDINGS.

SEALED BIDS WILL BE PUBLICLY OPENED IN THE GATHERING ROOM AND READ BY THE WILL COUNTY HEALTH DEPARTMENT EXECUTIVE DIRECTOR OR DESIGNATED REPRESENTATIVE AT 10:10 A.M., FRIDAY, OCTOBER 3, 2025, AT THE WILL COUNTY HEALTH DEPARTMENT, 501 ELLA AVENUE, JOLIET, ILLINOIS 60433.

SPECIFICATIONS AND CONDITIONS OF THE BID ARE AVAILABLE AT www.willcountyhealth.org. AS WELL AS THE EXECUTIVE SUITE, WILL COUNTY HEALTH DEPARTMENT, 501 ELLA AVENUE, JOLIET, IL, 60433, (815) 740-8982 OR EMAIL mkilbride@willcountyhealth.org AND ON DEMANDSTAR.

THE TENDERING OF A BID SHALL BE CONSTRUED AS ACCEPTANCE OF THE SPECIFICATIONS. THE HEALTH DEPARTMENT, COMMUNITY HEALTH CENTER, AND SUNNY HILL TUBERCULOSIS CLINIC RESERVE THE RIGHT TO ACCEPT OR REJECT ANY OR ALL BIDS OR PROPOSALS RECEIVED.

BY ORDER OF THE BOARD OF HEALTH PRESIDENT, PAUL HERTZMANN, THE WILL COUNTY COMMUNITY HEALTH CENTER CHAIRMAN, MATTHEW GLOWIAK, AND THE SUNNY HILL TUBERCULOSIS CLINIC BOARD PRESIDENT, DOUGLAS RUTH.

INSTRUCTIONS TO BIDDERS SECURITY GUARD SERVICES WILL COUNTY HEALTH DEPARTMENT/COMMUNITY HEALTH CENTER AND SUNNY HILL TUBERCULOSIS CLINIC JOLIET, IL

General Specifications

You are invited to submit your sealed bid to provide Security Guard Services for the Will County Health Department Main Complex at 501 Ella Avenue, Joliet, IL; Community Health Center at 1106 Neal Avenue, Joliet, IL; Will County Health Department North Branch Office at 323 and 391 Quadrangle Drive, Bolingbrook, IL; and the Sunny Hill Tuberculosis Clinic at 501 Ella Avenue, Suite 2, Joliet, IL. The Health Department shall be the Bid Agent and shall be responsible for all administrative functions (questions, documentation, addendums, notifications, etc.) concerning the bid and bid procedures. This Contract is for a twelve (12) month period beginning December 1, 2025 through November 30, 2026, with two (2) one (1) year renewal options at the costs provided per building on Bid Form for each 12-month period. The Board of Health (BOH) may provide notice at any time prior to November 30, 2026 of one (1) year renewal or non-renewal for the period of December 1, 2026 to November 30, 2027. If renewed through November 30, 2027, the BOH may provide notice at any time prior to November 30, 2027 of the second one (1) year renewal or non-renewal for the period of December 1, 2027 to November 30, 2028. Will County Health Department, Community Health Center and Sunny Hill Tuberculosis Clinic shall collectively be referred to as "Health Department Entities".

MANDATORY PRE-BID MEETING:

A <u>Mandatory Pre-Bid</u> Conference will be held <u>10:00 A.M., Friday, September 26, 2025</u> beginning at the Will County Health Department, 501 Ella Avenue, Gathering Room (2nd floor, room 2002), Joliet, IL, 60433 with a site visit to all the above-noted buildings. At this time, there will be a walk-through of the buildings at 501 Ella Avenue (Joliet), 1106 Neal Avenue (Joliet), 501 Ella Avenue, Suite 2 (Joliet), and 323 and 391 Quadrangle Drive (Bolingbrook). You will be expected to examine the premises and satisfy yourself fully as to all existing conditions under which you will be obliged to work. No allowance will be made subsequently in this condition on behalf of any bidder for any error or negligence on the bidder's part. If you do not attend this meeting or arrive late, you will not be permitted to bid. **No exceptions will be made**.

SEALED BIDS:

Sealed bids will be received in the Executive Suite, Will County Health Department, 501 Ella Avenue, Joliet, IL, 60433, not later than <u>10:00 A.M., Friday, October 3, 2025.</u> BIDS RECEIVED AFTER THIS TIME WILL NOT BE ACCEPTED.

Sealed bids will be publicly opened and read aloud by the Will County Health Department Executive Director or designated representative on <u>Friday, October 3, 2025 at 10:10 A.M</u> at the Will County Health Department, 501 Ella Avenue, Gathering Room (2nd floor, room 2002), Joliet, IL, 60433.

Bids must be made in accordance with the instructions contained herein.

Bid forms shall be completely filled out either typewritten or in ink. The complete set of the bid package and contract must be submitted with the proposal, in duplicate with <u>ONE ORIGINAL AND ONE COPY CLEARLY MARKED. BIDS WHICH FAIL TO SUBMIT THE ENTIRE COMPLETED BID</u>

<u>PACKAGE AND CONTRACT CLEARLY MARKED WILL BE REJECTED, WILL BE NON-CONFORMING, AND WILL NOT BE ACCEPTED.</u>

Bids shall be submitted on the forms furnished by the Health Department in a sealed package, plainly marked, with the title Security Guard Services Bid written/typed on the envelope, with the bidder's name, address, and the label included on the last page of this bid package affixed to the outside of the sealed bid package. The following notation shall appear on the sealed bid package: SEALED BID: SECURITY GUARD SERVICES. BIDS DUE: FRIDAY, OCTOBER 3, 2025, NOT LATER THAN 10:00 A.M. Bids shall be addressed to the Will County Health Department (Executive Suite), 501 Ella Avenue, Joliet, IL, 60433.

SPECIFICATIONS:

Specifications are attached hereto and incorporated herein.

TAX EXEMPTION:

The Health Department Entities are exempt from Federal, State and Municipal Taxes.

SIGNATURE OF BIDS:

The **signature on bid documents shall** be that of an authorized representative of bidder. An officer of or agent of the offering bidder who is empowered to bind the bidder in a contract shall sign the proposal and any clarifications to that proposal.

Each bidder, by making a bid, represents that the bidder has read and understands the bidding documents.

Any bid not containing said signed documents shall be non-conforming and shall be rejected.

ADVERTISEMENTS:

The bidder shall not place or maintain any signs, bills, posters, or other advertisements in or about the buildings, except by written permission of Will County Health Department.

BID SECURITY:

A 10% Bid Bond or Cashier's Check made payable to the Will County Treasurer shall accompany each bid, attached to the front cover, as a guarantee that if the bid is accepted, a Contract will be entered. Money orders or company checks will not be accepted. The bid bond should be based on the first Contract period. The unsuccessful bidders' checks will be returned after the Health Department Entities have awarded the bid. The bid bond or cashier's check of the successful bidder will be returned after being replaced with their performance bond.

PERFORMANCE BOND:

A Performance Bond for the amount of the Contract, based on the first Contract period, will be required from the successful bidder and shall be valid throughout the life of the Contract. The Performance Bond will be returned at the completion of the Contract. If it is difficult to acquire a Performance Bond by the time the Contract is to commence, the Health Department Entities will accept a letter notarized by the Insurance Carrier showing that such Bond is being processed. For each option year, the

successful bidder shall obtain a performance bond for the term of the option and the performance bond shall be based on the amount of the Contract for the option period.

BIDDING PROCEDURES:

- 1. The Health Department shall be the Bid Agent and shall be responsible for all administrative functions (questions, documentation, addendums, notifications, etc.) concerning the bid and bid procedures.
- 2. All bids must be prepared on the forms provided by the Health Department and submitted in duplicate, with <u>ONE ORIGINAL AND ONE COPY OF THE ENTIRE COMPLETED BID PACKAGE AND CONTRACT, CLEARLY MARKED,</u> in accordance with the Instructions to Bidders. <u>Any bid package not containing ONE ORIGINAL AND ONE COPY OF THE ENTIRE COMPLETED BID PACKAGE AND CONTRACT, CLEARLY MARKED shall be non-conforming and shall be rejected.</u> The entire bid package are the terms of the agreement.
- 3. A bid is invalid if it has not been deposited at the designated location prior to the time and date for receipt of bids indicated in the Advertisement of Bids or prior to any extension thereof issued to the bidders.
- 4. Unless otherwise provided in any supplement to the Instructions to bidders, no bidder shall modify, withdraw, or cancel their bid or any part thereof for ninety (90) days after the time designated for the receipt of bids in the Advertisement of Bids.
- 5. Changes or corrections may be made in the bid documents after they have been issued and before bids are received. In such cases a written addendum describing the change or correction will be issued by the Health Department to all bidders recorded by the Health Department as having attended the pre-bid conference. Such addendum shall take precedence over that portion of the documents concerned and shall become part of the bid documents. Except in unusual cases, addendum will be issued to reach the bidders at least five (5) days prior to date established for receipt of Bids. If the signed receipt of Addenda form is not included in the bid package and contract (EVEN IF NO ADDENDA ITEMS), the bid package and contract shall be non-conforming and shall be rejected.
- 6. Each bidder shall carefully examine all bid documents and all addenda thereto and shall thoroughly familiarize themselves with the detailed requirements thereof prior to submitting a proposal. Should a bidder find discrepancies or ambiguities in, or omissions from documents, or should they be in doubt as to their meaning, they shall, at once, and in any event, not later than five (5) days prior to bid due date, notify the Health Department, who will, if necessary, send written addendum to all bidders. The Health Department will not be responsible for any oral instructions. All inquiries shall be directed to the Executive Assistant in writing via email at mkilbride@willcountyhealth.org. After sealed bids are received, the bidder will make no allowance for oversight.

PRIME CONTRACTOR CERTIFICATION:

Included in this bid package is a Prime Contractor Certification form. This form must be filled out and returned with your sealed bid package or the bid package will not be accepted and shall be non-conforming and shall be rejected.

WORDS AND FIGURES:

Where amounts are given in both words and figures, the words shall govern. If the amount is not written in words, the unit cost will take precedence over the extended price in case of a discrepancy in the multiplication.

CONTRACT DURATION:

The Contract is to commence December 1, 2025 and extend through November 30, 2026 for 501 Ella Avenue Joliet IL 60433, 1106 Neal Avenue Joliet IL 60433, 323 and 391 Quadrangle Drive Bolingbrook IL 60440, and 501 Ella Avenue Suite 2, Joliet IL 60433. This Contract has the allowance for two (2) one (1) year renewal options at the costs provided per building on Bid Form for each 12-month period. The Board of Health (BOH) may provide notice at any time prior to November 30, 2026 of one (1) year renewal or non-renewal for the period of December 1, 2026 to November 30, 2027. If renewed through November 30, 2027, the BOH may provide notice at any time prior to November 30, 2027 of the second one (1) year renewal or non-renewal for the period of December 1, 2027 to November 30, 2028.

REJECTION OF BIDS:

The bidder acknowledges the right of the Health Department Entities to reject any and all bids received.

DEFAULT:

In case of default by the successful bidder, the Health Department Entities may procure the articles or services from other sources and may deduct from any unpaid balance due the successful bidder any increase in cost to the county as a result of said default, or may collect against the bond or surety for excess costs so paid, and the prices paid by the Health Department Entities shall be considered the prevailing market price at the time such purchase is made.

PREVAILING WAGES:

This bid is not subject to the Prevailing Wage Act.

ADDITION/CHANGE/DELETION OF LOCATIONS AND HOURS:

This bid allows the Health Department Entities to add/change/delete hours and office locations as needed throughout the life of the contract and any extensions offered and accepted by successful bidder, by means of amendment to the contract. This amendment will specify requirements of new location and hours at the current rate for type of service required, and agreed upon by both parties, with thirty (30) days written notice.

Contractor agrees that additional hours may be required upon request by Health Department Entities.

If any of the Health Department Entities should move to a different location and vacate specific offices, notice will be given a minimum of thirty (30) days prior to said move, and Health Department Entities shall not be liable for the remainder of the Contract amount for that building.

NON-DISCRIMINATION:

The Contractor shall at all times observe and comply with any law, statute, regulation or the like relating in any way to civil rights including but not limited to 775 ILCS 10/1.

EQUAL EMPLOYMENT OPPORTUNITY:

Contractor shall comply with the Illinois Human Rights Act, 775 ILCS 5/1-101 et seq., as amended and any rules and regulations promulgated in accordance therewith, including, but not limited to the Equal Employment Opportunity Clause, Illinois Administrative Code, Title 44, Part 750. Furthermore, the Contractor shall comply with the Public Works Employment Discrimination Act 775 IL 10/0.01 et seq., as amended.

REGULATORY COMPLIANCE:

After reviewing 30 ILCS 708- Grant Accountability and Transparency Act (GATA) and (e-CFR) electronic code of Federal Regulations – Title 2 Grants and agreements. Health Department Entities represent all relevant provisions of Appendix II to Part 200- Contract Provisions for non-federal entity contracts required by provisions of the code of Federal Regulations (CFR) have been complied with herein.

PAYMENT PERIOD:

Separate monthly billing to the Will County Health Department and the Sunny Hill Tuberculosis Clinic should begin on the 30th day of the month after commencement. Payment to the Contractor by the Health Department and the Sunny Hill Tuberculosis Clinic shall be made in monthly installments pursuant to the Local Government Prompt Payment Act.

INSURANCE:

RISK OF LOSS: The Contractor shall assume all risks for loss or damages to materials whether stored on the site or elsewhere, or to tools or equipment owned or rented by the Contractor, and they shall maintain such insurance that they may deem necessary to protect themselves against such loss or damage.

TYPES OF INSURANCE:

- 1. Worker's compensation insurance. The Contractor shall procure worker's compensation insurance as required by applicable state law for all of their employees who would be engaged in work on the project. In case any class of employees engaged in any work on the project under this Contract is not protected under the worker's compensation statute, the Contractor shall provide adequate employer's liability insurance for the protection of their employees as are not otherwise protected. In addition, the Contractor will provide employer's liability (coverage B) in the amount of \$1,000,000.00.
- 2. Contractor's comprehensive general liability and property damage insurance. Contractor's comprehensive general and property damage insurance shall be in an amount not less than \$1,000,000.00 for injuries including accidental death to any one person and not less than \$3,000,000.00 combined single limit bodily injury, property damage and general aggregate.
- 3. County's protective liability insurance. The Contractor shall protect the County or its assignee, if any, from contingent responsibility arising from the work performed under this Contract by adding these parties as named insured as a rider to the general Contractor comprehensive general liability policy: County of Will, 302 North Chicago Street, Joliet, IL. 60432; Will County Health Department, 501 Ella Avenue, Joliet, IL 60433; Community Health Center, 1106 Neal Avenue, Joliet, IL. 60433; 323 & 391 Quadrangle Drive, Bolingbrook, IL; Sunny Hill TB Clinic 501 Ella Avenue, Suite 2, Joliet, IL. 60433.

PROOF OF CARRIAGE OF INSURANCE:

- 1. The Contractor shall furnish the Health Department at the time of bidding, with certificates showing the type, amount, class, or operations covered, effective dates and dates or expiration of policies, which policies shall specifically refer to the indemnity agreement. Such certificates shall also contain substantially the following statement: "The Insurance covered by this Certificate will not be canceled or materially altered except after 30 days written notice has been received by all named insured." Any bid not containing said proof of insurance shall be nonconforming and shall be rejected.
- All policies shall substitute the word "Occurrence" for "accident" for both bodily and property damage. "Occurrence" shall be defined to mean an event or series of events or continuous or repeated exposure to conditions, which unexpectedly cause injury or damage during the policy period.
- 3. All insurance coverage shall be provided by Insurance Companies maintaining a financial strength and claims paying ability rating no lower than "A" Minus "VIII" as rated by the most current AM Bests Insurance Guide.

TAXES:

The Contractor shall pay all applicable sales, use, service use, service occupation, social security, and other taxes, levies, assessments, and duties, and shall make income tax deductions, all as required by local, State and Federal law.

CHOICE OF LAW AND VENUE:

The bid and this agreement shall be governed by the laws of the State of Illinois, without regard to conflict of law provisions. Venue for any cause of action related to this bid or agreement shall be the Twelfth Judicial Circuit, Will County, Illinois.

RIGHT OF THE HEALTH DEPARTMENT ENTITIES TO TERMINATE CONTRACT:

- 1. If any of the Provisions of the Contract are violated by the Contractor, or if the Contractor shall disregard applicable law, ordinances, rules or regulations or work requirements as spelled out in the bid specifications, or the Contractor shall be adjudged as bankrupt or make a general assignment for the benefit of creditors, or if a receiver should be appointed for the Contractor, or if at any time during the progress of the work the Contractor should allow any indebtedness to accrue for labor, material, or equipment, and should the Contractor fail to pay for labor, material, or equipment, and should the Contractor fail to pay and discharge the same within 5 days after demand made by the person or persons furnishing such labor, material or equipment, the Health Department Entities may serve written notice upon the Contractor and the Surety of its intention to terminate the Contract. Unless within 10 days after the serving of such notice upon the Contractor, such violation or other matter shall have been corrected or satisfactory arrangement for correction have been made, the Contractor shall, upon the expiration of said 10 days, at Health Department Entities' option, cease and terminate work. The Contract shall then be null and void.
- In the event of any such termination, the Health Department Entities shall immediately serve notice thereof upon the Surety and the Contractor, and the Surety shall have the right to take over and perform the Contract; provided, however, that if the Surety does not commence performance thereof

within 10 days from the date of the mailing of such Surety of notice of termination, the Health Department Entities may take over work and prosecute the same to completion by other Contract or by force. Contractor shall be liable to the Health Department Entities for any excess cost to the Health Department Entities occasioned thereby, and in such event the Health Department Entities may take possession of and utilize in completing the work, such material, equipment and the like as may be on the project site of the work and necessary, therefore.

- 3. Notwithstanding anything contained herein to the contrary, failure to comply with or perform the services required within the bid specifications shall be cause for termination.
- 4. The Health Department Entities or its assignee may terminate this agreement by giving the Contractor written notification of termination of this agreement by registered United States Mail, sufficient postage prepaid, return receipt requested, addressed to the Contractor at its address stated in the Contract, at least 30 days prior to termination, with service of such notice conclusively presumed to be received on date of dispatch. In such event, the Contractor shall only be entitled to receive a prorated payment for work performed pursuant to the Contract through date of termination.

ILLINOIS FREEDOM OF INFORMATION ACT:

All submissions to the Health Department Entities become the property of the Health Department Entities and these and any late submissions will not be returned. Your proposal will be open to the public under the Illinois Freedom of Information Act (FOIA) (5 ILCS 140) and other applicable laws and rules, unless you request in your proposal that we treat certain information as exempt. We will not honor requests to exempt entire proposals. You must show the specific grounds in FOIA or other law or rule that support exempt treatment. If you request exempt treatment, you must submit an additional copy of the proposal with exempt information deleted. This copy must tell the general nature of the material removed and shall retain as much of the proposal as possible. In the event the Health Department Entities receive a request for a document submitted, the Health Department Entities shall provide notice to Contractor as soon as practicable. Regardless, Contractor will be responsible for any costs or damages associated with defending your request for exempt treatment. Furthermore, Contractor warrants that Health Department Entities' responses to requests for a document submitted that is not requested to be exempt will not violate the rights of any third party.

Please be advised that if your proposal is accepted by the Health Department Entities all related records maintained by, provided to, or required to be provided to the Health Department Entities during the Contract duration are subject to FOIA. In the event the Health Department Entities receive a request for a document relating to Contractor, its provision of services, or the arranging for the provision of services, the Health Department Entities shall provide notice to Contractor as soon as practicable and, within the period available under FOIA, Contractor may then identify those records, or portions thereof, that it in good faith believes to be exempt from production and the justification for such exemption. Regardless, Contractor will be responsible for any costs or damages associated with defending the request for exempt treatment. Furthermore, Contractor will warrant that Health Department Entities' response to requests for a document relating to Contractor, its provision of services, or the arranging for the provision of services, will not violate the rights of any third party.

Please be advised also that FOIA provides that any record in the possession of a party with whom the Health Department Entities have contracted to perform a governmental function on behalf of the Health Department Entities, and that directly relates to the governmental function and is not otherwise exempt under FOIA is considered a public record of the Health Department Entities for purposes of FOIA. 5 ILCS 140/7(2). As such, upon request by the Health Department Entities (or any of its officers, agents, employees or officials), the Contractor shall provide to the Health Department Entities at no cost and within the timeframes of FOIA a copy of any "public record" as required by FOIA and in compliance

with the provisions of FOIA. After request by the Health Department Entities, Contractor may then identify those records, or portions thereof, that it in good faith believes to be exempt from production and the justification for such exemption. Regardless, Contractor will be responsible for any costs or damages associated with defending the request for exempt treatment.

AWARDING OF BID:

Contractors who have submitted bids may be requested to attend an in-person interview for Health Department Entities management to meet the potential designated manager and / or point of contact for this account.

The bidder acknowledges the right of the Health Department Entities to accept the bid deemed most favorable to the interest of the Health Department Entities after all bids have been examined and evaluated. The competency, responsibility, and past experience, if any, of all bidders will be considered in making the award. The Bid for the Sunny Hill Tuberculosis Clinic will be awarded by its Board President on November 19, 2025. The Bid for the Will County Health Department will be awarded by the Board of Health at the October 15, 2025 meeting. The Bid for the Community Health Center will be awarded by the Governing Council at the November 5, 2025 meeting. Notification will be made to the successful vendor.

SUBMITTAL REQUIREMENTS:

Each of the following items shall be submitted by the bid time mentioned herein in order that the bid will be considered. **Any bid not containing items 1 to 7 below shall be non-conforming and shall be rejected**:

- 1. 10% Bid Bond or Cashier's Check
- 2. Certificates of Insurance
- 3. Signed Copy of Prime Contractor Certification
- 4. Contractor must submit at least three (3) references for commercial customers that are similar in scope with their bid on the completed Reference Form
- 5. Signed Completed Bid Forms (3)
- 6. Signed Receipt of Addenda Form
- 7. One original and one copy of Entire Bid and Contract Package

CONTRACTORS REQUIREMENTS:

To be qualified to bid, the Contractor must have security contracts for work similar to that specified in this Contract. Contractor must submit at least three (3) references with their bid. If at least 3 references are not provided, the bid package and contract shall be non-conforming and shall be rejected. Contractors may be requested to submit further information regarding their business to better evaluate their Contract bid. Any Contractor may be required by the Health Department Entities to submit additional data to satisfy the Health Department Entities that such Contractor is equipped and prepared to fulfill a Contract should a Contract be awarded to him or her. The Health Department Entities reserve the right to reject any and all bids that are non-responsive, to waive any non-material informalities in the bidding, and to accept the bid deemed most favorable to the interest of the Health Department Entities after all bids have been examined and evaluated.

SECURITY GUARD SPECIFICATIONS

<u>ESTIMATED SCHEDULED HOURS OF COVERAGE</u> – Shifts at the Will County Health Department Community Health Center, Will County Health Department North Branch Office, and Sunny Hill TB Clinic will require one Security Guard. Two Security Guards will be required at the Main Complex during the day shift.

The scheduled hours of coverage are as follows:

DAY SHIFT

Will County Health Department

Main Complex	-Guard - 501 Ella Avenue, Joliet	Main Complex	 Front Desk Guard
Monday	7:15 a.m. – 7:00 p.m.	Monday	8:30 a.m 4:30 p.m.
Tuesday	7:15 a.m. – 7:00 p.m.	Tuesday	8:30 a.m 4:30 p.m.
Wednesday	7:15 a.m. – 7:00 p.m.	Wednesday	8:30 a.m 4:30 p.m.
Thursday	7:15 a.m. – 7:00 p.m.	Thursday	8:30 a.m 4:30 p.m.
Friday	7:15 a.m. – 6:00 p.m.	Friday	8:30 a.m. – 4:30 p.m.
Saturday	7:15 a.m. – 4:15 p.m.	·	•

DAY SHIFT

Will County Health Department

Community Health Center - 1106 Neal Avenue, Joliet**

Monday	6:30 a.m 6:45 p.m.
Tuesday	6:30 a.m 6:45 p.m.
Wednesday	6:30 a.m 6:45 p.m.
Thursday	6:30 a.m 6:45 p.m.
Friday	6:30 a.m. – 5:00 p.m.
Saturday	6:30 a.m 4:00 p.m.

DAY SHIFT

Will County Health Department

North Branch Office, 323 and 391 (Suite 130) Quadrangle Drive, Bolingbrook

Monday	7:45 a.m 5:00 p.m.
Tuesday	7:45 a.m. – 5:00 p.m.
Wednesday	7:45 a.m. – 6:30 p.m.
Thursday	7:45 a.m 6:00 p.m.
Friday	7:45 a.m 5:00 p.m.

DAY SHIFT

Sunny Hill	TB Clinic -	501	Flla	Avenue	Suite	 Joliet***

Monday	8:00 a.m 4:00 p.m.
Tuesday	8:00 a.m 4:00 p.m.
Wednesday	8:00 a.m 4:00 p.m.
Thursday	8:00 a.m 4:00 p.m.
Friday	8:00 a.m 4:00 p.m.

^{**} First Wednesday of each month will require late guard coverage as needed due to monthly business meetings at the Community Health Center.

See Attachment III for the list of County holidays. All sites are closed on County holidays.

^{***} Quarterly Wednesday business meetings require late guard coverage.

THE DUTIES REQUIRED SHALL INCLUDE, BUT NOT BE LIMITED TO, THE FOLLOWING:

Will County Health Department and Community Health Center Duties

BASIC FUNCTIONS:

Provide unarmed security services for safeguarding people and property of the Will County Health Department Main Complex at 501 Ella Avenue, Joliet and of the Community Health Center (CHC) at 1106 Neal Avenue, Joliet. Bilingual skills are recommended, but not required.

RESPONSIBILITIES:

- Opening shift responsibilities for opening guards:
 - o Turn off alarm (if necessary), unlock doors throughout buildings, as requested by staff, cleaning crews, vendors, or Administrative Staff.
- End of shift responsibilities for the closing guards:
 - Ensure exterior doors are locked after hours and the burglar alarm (501 Ella) is activated.
 - At the end of every closing shift, do an overhead page to ensure that everyone is out of the building, before leaving and/or arming the building.
 - Make final check of the facility immediately prior to end of shift, turning off electrical appliances as needed, double checking all exterior doors are locked, making sure there are no staff or visitors remaining in the building, and secure the front desk area.
- Conduct security rounds twice every hour that guard is on duty. This will include a check of parking lots during day shift and via monitoring cameras during night shift and key locations inside buildings including first and second floor areas. Ensure all emergency access doors are kept locked from the outside.
- To acknowledge and greet clients coming into the building and determine their needs.
- Answer the security desk phone.
- Contact the bilingual staff member to assist with clients.
- The Front Desk Security Guard (S/G) will station himself / herself at the front reception area. Coordinate lunch and breaks to ensure a guard is present at all required times.
- Unlock offices and clinical areas to allow cleaning crews access, remain in the area and relock doors when cleaning crew is finished.
- Accept and sign for deliveries and will assist with coordination of UPS or FedEx pick-ups.
- Secure any mail and/or packages that may be delivered after hours or on Saturdays.
- Contact driver / courier, if necessary.
- Operate overhead paging system(s) when necessary.

- Monitor security cameras.
- Transport daily deposits between buildings.
- Assist staff or customers with vending machine issues and facilitate operations with vending company.
- Read and follow all memos, policies and procedures issued.
- Follow facility policies as established, including policies regarding smoking, visitors, phone calls, cell phone usage, etc.
- Report observed maintenance needs to Director of Administrative Services or to Will County Facilities staff.
- Report observed janitorial needs to Director of Administrative Services or to cleaning crew.
- May perform maintenance duties to assure safe access in and around the facilities (i.e., salt and shovel sidewalk, placement of floor mats).
- May perform simple janitorial duties to ensure a safe and sanitary facility (i.e., provide toilet paper or hand towels, mop up a spill).
- Enforce parking lot regulations (see Attachment I).
- Oversee parking lot security, checking periodically to help assure the safety of staff and visitors. Includes escorting staff and visitors to and from vehicles, front and back lots. Keep trespassers off property.
- Follow Fire Safety procedure outlined in Attachment II.
- Assist in proper evacuation of visitors during fire drills or alarms.
- Guards are to be oriented to fire alarms, firefighting equipment and emergency procedures.
- Enforce the agency's policies regarding designated smoking areas, parking and door propping.
- Doors must never be propped. If you see a door propped open, remove the prop and notify the Director of Administrative Services.
- Respond immediately to emergencies, going immediately to the point of disturbance, if known.
- Respond to panic button alarms immediately and carry emergency radio.
- Monitor and assist with coordination of emergency and 911 incidents. Ensure driveways are clear for emergency vehicles; direct EMS staff to designated departments. Front Desk Security Guard must maintain 911 log.

- Prepare Critical Incident Reports, as needed, with detail to corrective actions taken and turn report into the Director of Administrative Services or the Director of Compliance within 24 hours.
- Emergency radios provided by Will County Health Department:
 - Guards are supplied with emergency radios for communication when responding to incidents, emergencies and evaluations. Radios must be used. Radios ensure communication with all buildings, all guards, and all Division Directors.
 - Participate in quarterly emergency radio drills.
- May stop employees to check for I.D. badges.
- Security will stop an unfamiliar person anywhere in the building and ask to see I.D. Any suspicious persons will be escorted off premises. An incident report is to be filed.
- Vendors:
 - Must escort vendors around the facility. (Paper shredding, medical waste, and area carpet vendors as well as other service providers.)
 - Verify identity of all vendors. If Security was not notified in advance that a vendor is scheduled to be onsite, ensure the vendor is allowed to be on the property by checking with Administration staff prior to escorting them around the facility.
- Sign in and out on the security staff timecards, indicating in and out time, building, dates worked, etc. The timecards must be turned into the Director of Administrative Services every Monday or the following day if Monday is a holiday. Timecards should include Monday through Saturday hours. If security works in multiple locations, there must be a separate timecard for each location. Timecards must be turned in the last day of the month, as we are billed monthly invoices. Provide accurate weekly records of time for all staff.
- Report for duty in full uniform.
- Contact Administration Leadership staff, as directed, for after hour incidents or emergencies.
- Security Company responsibility (for all sites):
 - At minimum, three two-way radios are supplied by the Security Contractor to Joliet Health Department campus guards for communication when a guard is away from their station (doing rounds, delivering cash, turning in timecards, etc.) to each guard at 501 Ella Avenue and 1106 Neal Avenue. The radios must operate on a common frequency. Guards must keep two-way radio on person when on duty.
 - Conduct an annual survey of campus to make recommendations in writing regarding safety concerns, risks and potential improvements.
 - Respond immediately to staffing concerns.
 - Make sure all guards have a valid card through the Illinois Department of Professional Regulations as the Private Detective, Private Alarm, Private Security, Fingerprint Vendor, and Locksmith Act of 2004. It will be the responsibility of the Security Agency to turn into the Director of Administrative Services of the Will County Health Department a photocopy of each assigned guard's card.
 - Ensure guards receive ongoing training to address agency safety concerns.

- Newly assigned guards must receive onsite training prior to any assignment. The Director of Administrative Services must receive notice one-week prior to a new guard starting, so there is proper time to schedule training with the new guard.
- Perform other duties as needed or assigned.

Assigned guards (ALL LOCATIONS) will:

- Have ability to communicate well with others.
- Refrain from socializing with staff.
- Restrict entry into security office to security personnel only.
- Have maturity to handle potentially violent situations and have demonstrated effective nonconfrontational / de-escalation skills.
- Not make or receive personal phone calls or be on cellphone texting, playing games, surfing the intranet, or watching television on security camera monitors.
- Not loiter in clinical areas, medical records offices, or administrative offices.
- Have a valid Permanent Employee Registration Card (PERC) through the Illinois Department of Professional Regulations.
- Take a two-step TB skin test upon assignment. Previous positive individuals will need a chest x-ray upon assignment.
- Receive on-site training prior to any assignment.
- Maintain strict confidentiality with respect to clients, agency personnel, visitors, and incidents.
- Report any lost access key cards or keys.
- Wear appropriate PPE as required by WCHD policies.
- Follow good hygiene and health screening requirements as required by Health Department policies.
- Keep security office clean and clutter free.
- Not sleep while on duty.

Will County Health Department North Branch Office (Bolingbrook)

BASIC FUNCTIONS:

Provide unarmed security services for safeguarding people and property of the Will County Health Department North Branch Office at 323 (also includes 325, 339, 335), and 391 (Suite 130) Quadrangle Drive in Bolingbrook.

RESPONSIBILITIES:

- Opening shift responsibilities for the guard:
 - Unlock four (4) exterior doors as scheduled (exterior door at 391 Quadrangle building and doors 323 A, 323 B and 335 C at 323 Quadrangle building)
 - Unlock the 391 building Suite 130 interior door.
- Closing shift responsibilities for the guard:
 - o Ensure all exterior doors are locked at the end of each shift.
 - o Ensure that the 391 Building Suite 130 interior suite door is locked.
 - Make final check of the facility immediately prior to end of shift, turning off electrical appliances as needed and double checking all exterior doors and locked offices and/or rooms and securing the front desk areas.
 - At the end of every closing shift, do an overhead page to ensure that everyone is out of the building, before leaving the building.
- Unlock interior doors, as requested by staff, cleaning crews, and vendors.
- Operate overhead paging system when necessary.
- Monitor security cameras.
- Conduct security rounds twice every hour. Rounds must include walking all hallways in the two buildings and a walk around the exterior of the two buildings, as trained.
- Respond immediately to emergencies, going immediately to the point of disturbance, if known.
- Respond to panic button alarms immediately and carry emergency radio.
- Write Critical Incident Reports for all incidents that security witnesses (Critical Incident Report
 Witness Form) or is involved in (Critical Incident Report). Reports must include all information
 requested and as much detail as possible. Turn reports into the Director of Administrative
 Services within 24 hours.
- Emergency radios provided by Will County Health Department:
 - Guards are supplied with emergency radios for communication when responding to incidents, emergencies and evaluations. Radios must be used. Radios ensure communication with all buildings, all guards, and all Division Directors.
 - o Participate in quarterly emergency radio drills.

- Monitor and assist with coordination of emergency and 911 incidents. Ensure driveways are clear for emergency vehicles; direct EMS staff to designated departments. The Security Guard must maintain a 911 log of all 911 calls and responses.
- Monitors parking lot to assure the safety of staff and visitors. Escort staff and visitors to and from vehicles, if and when necessary or requested.
- Report observed maintenance and janitorial needs to Director of Administrative Services and Branch Office Facility Liaison.
- May perform maintenance duties to assure safe access in and around the facilities (i.e., salt and shovel sidewalk, placement of floor mats).
- May perform simple janitorial duties to ensure a safe and sanitary facility (i.e., provide toilet paper or hand towels, mop up a spill).
- Can accept and sign for deliveries, as needed.
- Secure any mail and/or packages that may be delivered after hours.
- Vendors:
 - Must escort vendors around the facility. (Paper shredding, medical waste, and area carpet vendors as well as other service providers.)
 - Verify identity of all vendors. If Security was not notified in advance that a vendor is scheduled to be onsite, ensure the vendor is allowed by checking with Administration staff to be on the property prior to escorting them around the facility.
- Responsible for fire safety. Follow procedure outlined in Attachment II.
- Guards are to be oriented to fire alarms, firefighting equipment and emergency procedures.
- Assist in proper evacuation of staff and visitors during drills and real events.
- May stop employees to check for I.D. badges. All employees are required to wear a visible ID badge as a part of the dress code.
- Security will stop an unfamiliar person anywhere in the building and ask to see I.D. Any suspicious persons will be escorted off premises. An incident report is to be completed.
- Read and follow all memos, policies, and procedures issued.
- Follow facility policies as established, including policies regarding smoking/vaping, visitors, phone calls, cell phone usage, etc.
- Doors must never be propped. If you see a door propped open, remove the prop and notify the Director of Administrative Services.
- Contact the Director of Administrative Services or as directed, for after hour incidents or emergencies.

Perform other duties as needed or assigned.

Assigned guards will:

- Report for duty in full uniform.
- Sign in and out on the sign-in sheet; sign in time will denote a.m. or p.m. These timesheets should be turned in on Monday mornings by 9:00am to the Director of Administrative Services.
- Have ability to communicate well with others.
- Refrain from socializing with staff.
- Restrict entry into security office. At the Bolingbrook Office, staff will need to enter the security
 office to get supplies from supply cabinets, but staff must never sit down and socialize in the
 security office.
- Have maturity to handle potentially violent situations and have demonstrated effective nonconfrontational / de-escalation skills.
- Not make or receive personal phone calls, text, play games, surf the intranet, or watch shows on cell phones or the security camera monitors.
- Not loiter in clinical areas, medical records offices, or administrative offices.
- Have a valid Permanent Employee Registration Card (PERC) through the Illinois Department of Professional Regulations. The card will be provided to the Director of Administrative Services.
- Take a two-step TB skin test upon assignment. Previous positive individuals will need a chest x-ray upon assignment.
- Newly assigned guards must receive onsite training prior to any assignment. The Director of Administrative Services must receive notice one-week prior to a new guard starting, so there is proper time to schedule training with the new guard.
- Maintain strict confidentiality with respect to clients, agency personnel, visitors, and incidents.
- Report any lost access key cards, key fobs, or keys.
- Wear appropriate Personal Protective Equipment (PPE) when required by WCHD.
- Follow good hygiene and health screening requirements as required by Health Department policies.
- Keep security office clean and clutter free.

Sunny Hill Tuberculosis (TB) Clinic Duties

Basic Functions:

Provide unarmed security service for safeguarding people and property of Sunny Hill Tuberculosis Clinic. Work under the general supervision of the TB Administrator. Bilingual skills are recommended, but not required.

Responsibilities:

- To acknowledge clients coming into the building and determine their needs.
- Answers telephone and forwards call to the appropriate person.
- Gives directions to the TB Clinic when requested.
- Provides explanation of service hours for skin testing and chest x-rays.
- Contacts the bilingual staff member to assist with clients.
- Maintains skin tests forms on clipboards at front desk.
- Responsible for continuous play of Tuberculosis DVD daily.
- Plays the Tuberculosis Facts Informational DVD on Wednesday mornings in language appropriate for waiting room patients.
- To read and follow all memos issued.
- Respond immediately to any emergency, going immediately to the point of disturbance, if known.
- Report observed maintenance needs to the administrator who will then notify maintenance.
 Guard will also note on daily guard report.
- May perform minor repairs or light maintenance duties to assure safe access in and around the
 facility (i.e., salt and shovel entrance to the TB Clinic, keeping doors clear of snow and ice to
 ensure opening and closing passable, change light bulbs on the outside entrance).
- Make final check of the facility immediately prior to end of shift, turning off electrical appliances as needed and double checking all exterior doors and locked offices and/or rooms.
- Prepared chronological report of events for Security Managers and Administrator of Sunny Hill daily. Incident reports to be turned in as required.
- Prepares Incident Reports with significant detail to follow up and take corrective actions.
- The Security Guard (S/G) will be stationed at the front reception area.
- Periodic walk throughs are performed only when there are no clients in the building.

- Each S/G will sign in and out on the sign-in sheet, sign in time will denote a.m. or p.m.
- S/G will report for duty in full uniform.
- S/G may escort all employees and visitors to and from their cars as needed.
- Security will stop an unfamiliar person anywhere in the building and ask to see I.D. Any suspicious persons will be escorted off premises. An incident report is to be filed.
- At end of shift, S/G will attach incident reports (if any) and turn original in to Administrator for review. Copy may be made for site supervisor to check.
- Guard to be present in the building at all times unless given Administrator approval. All breaks and lunch are to be taken on site (in the building).
- Responsible for fire safety.
- S/G payroll and/or any paperwork are not the responsibility of any facility staff member.
- S/G is responsible to follow facility policies as established including, smoking, visitors, phone calls, etc.
- Guards are to be oriented fire alarms and firefighting equipment.
- Accept deliveries.
- Monitor security camera.
- Perform other duties as needed or assigned.

Assigned guards will:

- Take a two-step TB Skin test upon assignment to the clinic and annually thereafter. Previous positive individuals will need a chest x-ray upon assignment.
- Be N95 Fit tested annually by TB Clinic staff.
- Page the Administrator when needed to relay information as needed.
- Not make or receive personal phone calls at this clinic.
- Maintain strict confidentiality with respect to clients, clinic personnel, and incident reports.
- Have ability to communicate well with others.
- Have eight (8) hour training at the facility at security company's expense.
- Newly assigned guards must receive on-site training prior to any assignment.
- Have maturity to handle potentially violent situations and have demonstrated effective confrontation skills.

 Have a valid Permanent Employee Registration Card (PERC) through the Illinois Department of Professional Regulations. It will be the responsibility of the Security Agency to turn into the Administrator of Sunny Hill TB Clinic, a photocopy of each guard's card who will be assigned to this project.

GENERAL REQUIREMENTS:

- At minimum, three two-way radios are supplied by the Security Contractor to Joliet Health Department campus guards for communication when a guard is away from their station (doing rounds, delivering cash, turning in timecards, etc.) to each guard at 501 Ella Avenue and 1106 Neal Avenue. The radios must operate on a common frequency. Guards must keep two-way radio on person when on duty.
- Security Contractor must conduct an annual survey of campus to make recommendations regarding safety concerns, risks and potential improvements.
- Security Contractor must respond immediately to staffing concerns.
- Make sure all guards have a valid card through the Illinois Department of Professional Regulations as the Private Detective, Private Alarm, Private Security, Fingerprint Vendor, and Locksmith Act of 2004. It will be the responsibility of the Security Agency to turn into the Director of Administrative Services of the Will County Health Department a photocopy of each assigned guard's card.
- Ensure guards receive ongoing training to address agency safety concerns
- All guards are to be uniformed and unarmed.
- The successful bidder must supply all necessary forms. The Health Department Entities reserve
 the right to reject or relieve of duty an assigned guard for just cause.
- The Contractor shall provide and schedule sufficient and competent personnel.
- The Contractor shall employ sufficient and competent <u>supervisory</u> personnel with proven performance records.
- Prior to commencing any work under this Contract, all employees of Contractor who have access to any Health Department Entities buildings shall be background checked and fingerprinted by the contractor. The awarded contractor is responsible for running a comprehensive background check (including prior employers, schools, and relevant private and public databases) and finger printing of all contractor's employees working at any of our facilities, as required by the Health Care Worker Background Check Act. No employees will be allowed to work in any of the facilities until they have successfully passed the background check. Results must be made available to the Health Department Entities prior to the contract commencing. Due to the sensitive nature of the work to be performed, the Health Department Entities reserve the right to request Contractor to substitute employees or in the alternative, to reject Contractor's bid or to terminate said Contract.
- The Contractor must obtain and return all department keys and access cards for guards if / when they are no longer employed by Contractor.
- The Health Department Entities may carefully interview Contractor's personnel, screened, reference-checked, and covered by bond and subject to a security clearance.

- The Contractor's personnel shall be able to verbally communicate in a common language.
- The Contractor ensures that all of their employees and/or agents shall abide by all safety rules and regulations, which may be promulgated from time to time by either the Health Department Entities or Contractor as they pertain to the operations.
- The successful Contractor shall pay all salaries, payroll and other taxes, fees, worker's compensation and other charges or insurance levied or required by any federal, state, or local statutes relating to the employment of its employees.
- Contractor shall provide proper and sufficient training and orientation to Contract Staff to satisfy service.

TERMINATION CLAUSE:

Failure to satisfactorily perform the duties and responsibilities may result in contract termination if corrective efforts fail to resolve the problem(s). Thirty (30) days written notice is required.

DAILY OPERATION PROCEDURES

WILL COUNTY HEALTH DEPARTMENT 501 ELLA AVENUE, JOLIET, IL

Below is an example of the daily security guard procedures. This is not meant to be an all-inclusive list, but a general guideline. They may be altered at any time depending upon the needs of the department. Communication of major changes will be with the security services administration initially and communicated by the security company to their employees. Minor changes may be handled by the Will County Health Department Administration Office with the guard on duty.

MONDAY - FRIDAY

6:45 a.m. Monday - Friday the CHC Guard will enter Health Department building at

door #4 using assigned key card to turn off alarm system and promptly return

to the CHC building.

7:30 a.m. – 8:00 a.m. Open main complex front door entrance and interior wing doors and

designated office / suite doors. There is a shared building key that is kept in

the security office in a drawer that all guards have access to.

8:00 a.m. Turn on security monitors in the Security office, if necessary.

8:30 a.m. Front Desk Security Guard stationed at front desk on duty to answer phone

and greet clients and customers and turn on Front Desk computer to

monitor cameras.

9:00 a.m. Begin roving patrol inside facility and outside parking lots. To be conducted

two times per hour.

When not on roving patrol, the guard will maintain a presence in the waiting areas of the Family Health Services Division, Behavioral Health Programs,

or Environmental Health.

4:30 p.m. Front Desk Security Guard secures front desk area and leaves for day.

5:00 p.m. – 7:00 p.m. Conduct roving patrols inside facility and outside parking lots.

6:45 p.m. – 7:00 p.m. Patrol inside facility and outside parking lots. Lock all interior and

exterior main entrance doors. Turn off interior lights.

7:00 p.m. Closing guard will lock building exterior doors, set building burglar alarm

and exit the building.

SATURDAYS

7:15 a.m. Guard will enter Health Department building at door #4 using assigned key

card and will turn off alarm system.

Open main complex front door entrance.

Open Behavioral Health Division suite doors and turn on lights to the suite.

8:00 a.m.

Begin roving patrol inside facility and outside parking lots. To be conducted once per hour.

Majority of day guard will maintain presence in the front lobby, watch surveillance cameras, and request all visitors/clients and staff to sign-in and out.

Secure any mail and/or packages that may be delivered in the security office.

4:00 p.m.

Lock main entrance interior and exterior doors that were opened in the a.m., turn off lights in BH and set alarm, and exit the facility.

COMMUNITY HEALTH CENTER 1106 NEAL AVENUE, JOLIET, IL

Below is an example of the daily security guard procedures. This is not meant to be an all-inclusive list, but a general guideline. They may be altered at any time depending upon the needs of the Health Center. Communication of major changes will be with the security services administration initially and communicated by the security company to their employees. Minor changes may be handled by the Will County Health Department Administrative Services Director with the guard on duty.

MONDAY – SATURDAY

6:30 a.m. Enter the building and unlock Community Health Center front doors.

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6:45 a.m. Go to 501 Ella Building (enter the building using Door #4) and turn off the burglar alarm and promptly return to the CHC building.

7:00 a.m. until close Turn on the Surveillance Camera iPad to monitor cameras.

Begin roving patrol inside facility and outside parking lots. To be conducted two times per hour.

two times per hour.

When not on patrol, security guard will remain in assigned guard station and provide visitor badges after check in. The security guard will instruct

patients, visitors, and staff to adhere to the sign-in practices.

9:00 a.m. Deliver daily deposit money bag to Administration's Finance Department at

501 Ella Avenue. (not on Saturdays)

End of shift Lock and secure Community Health Center outside doors.

WILL COUNTY HEALTH DEPARTMENT 323 & 391 QUADRAGLE DRIVE, BOLINGBROOK

Below is an example of the daily security guard procedures. This is not meant to be an all-inclusive list, but a general guideline. They may be altered at any time depending upon the needs of the department. Communication of major changes will be with the security services administration initially and communicated by the security company to their employees. Minor changes may be handled by the Will County Health Department Administration Office with the guard on duty.

MONDAY - FRIDAY

7:45 a.m. Monday – Friday the Guard will enter Health Department office through

the employee entrance door #339 using assigned key fob.

7:45 a.m. – 8:15 a.m. Open 391 building exterior door by 7:50am. Open 323 building exterior

doors between 8:00-8:15 am, at the appropriate scheduled time.

8:00 a.m. Turn on security monitors in the Security office. Make sure the Emergency

radio is charged and turned on (should be on Health/Health setting).

9:00 a.m. Begin roving patrol inside the two buildings and around the outside

perimeter of the buildings. To be conducted two times per hour. Must walk through Behavior Health (BH) suite, then to the WIC suite, then through Environmental Health (EH) suite, next exiting EH exterior door, then head over to the 391 building and walk through suite 130 (must enter the suite and walk down the hallway to the exam rooms), then head back next door

to the BH suite.

When not on roving patrol, the guard will maintain a presence in the waiting areas of the Family Health Services Division, the Behavioral Health Division, the Community Health Center or the Environmental Health

Division. Take the iPad with to monitor all cameras.

4:00 p.m. – 6:30 p.m. Patrol inside facilities, around the exterior of two buildings and parking lots.

Lock all exterior doors at the appropriate scheduled time. Turn off interior

lights.

SUNNY HILL TUBERCULOSIS (TB) CLINIC 501 ELLA AVENUE, SUITE 2, JOLIET IL

Below is an example of the daily activities of the S/G at the TB Clinic. This is not meant to be an all-inclusive list, but a general guideline of activities. They may be altered at any time depending upon the needs of the clinic. Communication of major changes will be with the security services administration initially and communicated by firm to their employee. Minor changes may be handled by the Sunny Hill TB Clinic Administrator with the guard on duty.

- Walk around the outside of the building to check for any problems.
- Enter the building when the first employee arrives or wait until an employee is present on site.
- All offices are opened, files unlocked in the medical records room by TB Clinic staff.

8:00 a.m.

Open front Doors

TUESDAY – WEDNESDAY

8:00 a.m. – 4:00 p.m.

Stationed at the front desk

Answers phone calls

Greet clients

Determines who will need notification of clients' arrival

Always remains in the front of the building when clients are present

Periodic walk-throughs when no clients are in the building

4:00 p.m.

Front doors are locked upon last client exiting the building

Directs clients arriving after doors locked to return

Check all electrical appliances to see if they have been turned off (i.e.,

coffee pot)

MONDAY - THURSDAY - FRIDAY

8:00 a.m. – 4:00 p.m.

Stationed in the waiting room/front desk

Assists at front desk as needed/requested

ATTACHMENT I

WILL COUNTY HEALTH DEPARTMENT 501 ELLA AVENUE, JOLIET IL

COMMUNITY HEALTH CENTER 1106 NEAL AVENUE, JOLIET IL

SUNNY HILL TUBERCULOSIS (TB) CLINIC 501 ELLA AVENUE, SUITE 2, JOLIET IL

PARKING LOTS

HANDICAP PARKING is to be enforced.

NO PARKING and RESERVED PARKING is to be enforced.

Designated employee and provider parking is to be enforced.

Employees parking in patient parking (at the CHC and at TB Clinic) is to be enforced.

Abandoned vehicles, improperly parked vehicles, children or animals left in vehicles unattended, or any suspicious activity will be reported to the Director of Administrative Services and to the appropriate authorities, during normal business hours.

Similar activities occurring after normal business hours will be documented on a shift activity log and reported to the Director of Administrative Services the next business day.

ATTACHMENT II

WILL COUNTY HEALTH DEPARTMENT 501 ELLA AVENUE, JOLIET, IL

WILL COUNTY COMMUNITY HEALTH CENTER 1106 NEAL AVENUE, JOLIET, IL

WILL COUNTY HEALTH DEPARTMENT AND COMMUNITY HEATLH CENTER 323 AND 391 (SUITE 130) QUADRANGLE DRIVE, BOLINGBROOK IL

SUNNY HILL TUBERCULOSIS (TB) CLINIC 501 ELLA AVENUE, SUITE 2, JOLIET IL

Fire Alarm:

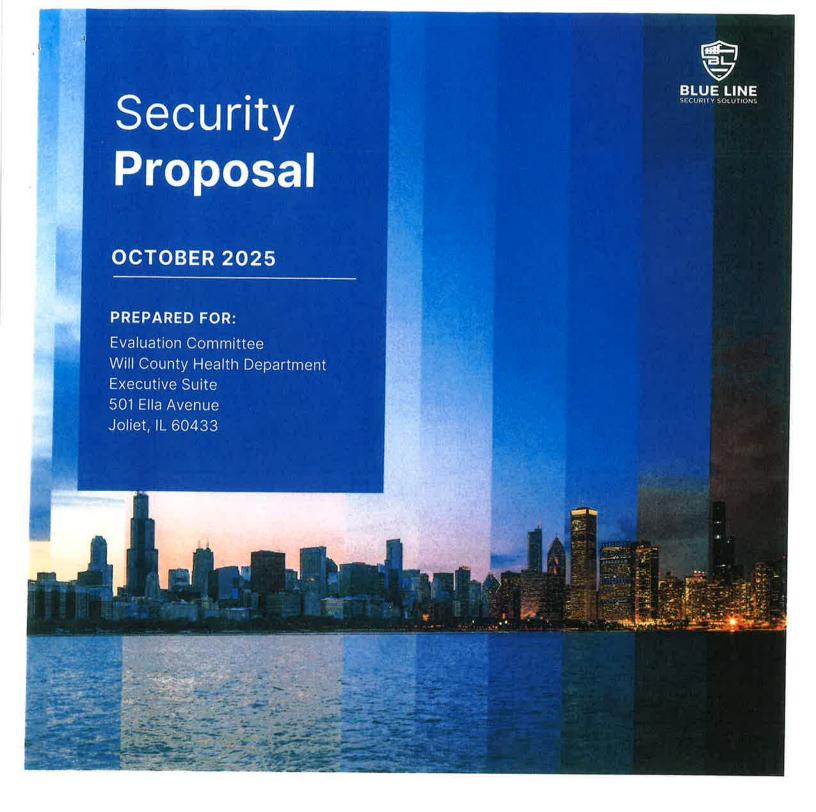
In the event of a fire alarm, it is the responsibility of security guard staff to assist in seeing that the building is properly evacuated.

The fire alarm systems will automatically report the condition to the fire department and to designated building representatives.

S/G may assist personnel who have exited the building, assembled outside the building until after fire department and/or building staff arrives and declares an all clear.

HVAC and Emergency Generators:

HVAC and emergency power generators are fully automatic and require no special attention. If the HVAC system does not seem to be running and the building temperature is dropping; or, in the event of a power outage, if the emergency generator fails to start or fails to power up emergency circuits, call the Director of Administrative Services.



Submitted by: Blue Line Security Solutions

9550 Bormet Dr. Suite 205 Mokena, IL 60448 www.blsecurity.org



Cover Letter

October 2nd, 2025

Evaluation Committee
Will County Health Department
Executive Suite
501 Ella Avenue
Joliet, IL 60433

Subject: Proposal Submission – Security Guard Services

Dear Evaluation Committee,

Blue Line Security Solutions, LLC ("Blue Line") is honored to present this proposal to provide professional unarmed security officer services for the Will County Health Department, including the Community Health Center, North Branch Office, and Sunny Hill Tuberculosis Clinic. We recognize the critical role these facilities play in serving the health and wellbeing of residents, and we understand that securing healthcare environments requires a unique balance of safety, accessibility, and compassion.

Our mission is to provide security programs that safeguard people, property, and reputation while maintaining a welcoming atmosphere for patients and visitors. We accomplish this through a proven blend of highly trained officers, cutting-edge technology, and rigorous accountability practices.

Blue Line offers a strong track record in supporting healthcare, municipal, and community-facing organizations. As a certified **Women-Owned Business Enterprise (WBE)** and **Minority-Owned Business Enterprise (MBE)**, we not only deliver operational excellence but also support Will County's diversity and inclusion goals. Our leadership team brings decades of combined experience in law enforcement, healthcare security, and private security operations, ensuring that every officer deployed to your facilities meets the highest standards of professionalism and reliability.

We're confident Blue Line offers the best of both worlds: **national capabilities with small-business care**. Our company has the scale, licensing, and infrastructure to manage complex, multi-site programs while delivering the continuity of personnel, personalized service, and executive-level involvement that larger firms often fail to provide.

We appreciate the opportunity to earn your trust and look forward to serving Will County with a program that is proactive, reliable, and tailored to your community's unique needs.

Respectfully submitted.

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Anna Both

Director of Marketing & Communications Blue Line Security Solutions, LLC anna@blsecurity.org | 708-995-7452



Executive Summary

Blue Line Security Solutions is a nationwide provider of comprehensive security services with a mission to **elevate industry standards** through professionalism, innovation, and client-first service.

Founded in 2017, Blue Line has rapidly become a trusted partner for government agencies, Fortune 500 corporations, community organizations, airports, and healthcare providers. With more than 400 licensed security professionals across multiple states, we combine operational scale with personalized service to deliver consistent, reliable protection.

Our Value to Will County

Healthcare and community-facing environments require a unique security model — one that protects without intimidating, enforces policies without disrupting care, and fosters trust among patients, staff, and visitors. Blue Line is uniquely positioned to deliver this balance.

Our program is built on three pillars of excellence:

1. Personnel Excellence

- Officers carefully vetted, trained, and retained.
- Specialized healthcare training: HIPAA awareness, infection control, patient interaction, workplace violence prevention, and de-escalation techniques.
- o Continuity of personnel to ensure familiarity and trust within facilities.

2. Technology Integration

- TrackTik Guard Tour System for GPS-verified patrols, incident documentation, and realtime reporting.
- Client dashboards with full transparency into officer activity, staffing compliance, and incident trends.
- Automated alerts for missed patrols or urgent events, ensuring rapid escalation and accountability.

3. Accountability & Quality Assurance

- Structured supervision model with site supervisors, field supervisors, and 24/7 operations management.
- Measurable Key Performance Indicators (KPIs) tied to staffing compliance, patrol completion, incident response time, and client satisfaction.
- Monthly client review meetings and quarterly audits to ensure ongoing improvement.

Competitive Advantages

- Lower Turnover = Greater Stability 44% turnover vs. 200–300% industry average, reducing retraining costs and ensuring continuity at sensitive facilities.
- Scalable Operations Proven ability to fully mobilize large, multi-site contracts within 30 days.
- **Healthcare-Specific Experience** Successful performance in medical, community health, and airport facilities where public interaction is a constant.
- Supplier Diversity WBE and MBE certifications supporting Will County's diversity objectives.
- Technology-Backed Transparency Real-time reporting and compliance dashboards via TrackTik.



Summary: Partnering with Blue Line means Will County gains a security provider that is **both a trusted protector and a strategic partner**. We reduce risks, improve safety, and enhance the reputation of your facilities by delivering reliable service, measurable results, and client-focused care.

Company Profile & Differentiators

Company Profile

Legal Name: Blue Line Security Solutions, LLC

Business Structure: Limited Liability Company (LLC)

Year Established: 2017

Headquarters: 9550 Bormet Dr., Suite 205, Mokena, IL 60448

Personnel: 400+ licensed officers across multiple states

Certifications: WBE and MBE (City of Chicago, other jurisdictions)

Website: www.blsecurity.org

Differentiators

1. Leadership Expertise

- Decades of combined experience in law enforcement, private security, and healthcare environments.
- Leadership team includes former police chiefs, corporate security executives, and certified security contractors.

2. Client-Centric Service Model

- o 24/7 access to Blue Line's leadership.
- Single point of contact for contract oversight.
- o Monthly performance reviews and executive involvement.

3. Technology-Enabled Oversight

- TrackTik Guard Tour Software providing GPS patrol verification, incident reporting, and compliance metrics.
- Real-time dashboards available to clients.

4. Personnel Stability

- Turnover at just 44% vs. industry average of 200–300%.
- Structured retention programs including competitive pay, recognition, and career progression.

5. Supplier Diversity & Community Impact

- Certified WBE and MBE partner, helping clients achieve diversity goals.
- o Recruitment programs focused on hiring locally, supporting the communities we serve.

6. Proven Multi-Sector Performance

- Trusted by FedEx, Indianapolis International Airport, Fifth Third Bank, Sephora, and multiple municipalities.
- Experience spanning healthcare, aviation, financial, government, retail, and community security.



Leadership Team & Organizational Structure

Blue Line Security Solutions' leadership team combines decades of law enforcement, corporate security, corrections, and private security management experience. This depth of expertise ensures that every client benefits from strategic oversight, hands-on involvement, and a culture of accountability that runs from the executive level to the frontline officer.

Our leadership model is designed around three principles:

- 1. **Direct Accountability** Executive-level leaders remain actively engaged with every contract, offering clients access to decision-makers.
- 2. **Operational Excellence** Experienced operations managers and supervisors provide daily oversight, quality assurance, and field-level support.
- 3. **Client Partnership** Blue Line builds strong relationships with clients through responsive communication, monthly reviews, and transparent reporting.

Executive Leadership

Jack Harris - Managing Partner

Jack Harris co-founded Blue Line Security Solutions and provides executive oversight for all operations. With more than 25 years in law enforcement and corporate security, Jack has held leadership roles with the Chicago Police Department, Union Pacific Railroad Police, and Norfolk Southern Railroad Police.

Jack holds a B.S. in Industrial & Organizational Psychology (DePaul University) and an M.A. in Communications & Training (Governors State University). He is also a graduate of the FBI Executive Leadership Institute.

Jack ensures that every client contract is supported by strong operational discipline, risk management practices, and officer readiness. His leadership ensures Blue Line's reputation for professionalism, reliability, and accountability.

Fatima Hasan-Callahan – Managing Partner

Fatima Hasan-Callahan directs strategy, compliance, and organizational operations. She holds an MBA, two M.A. degrees from Johns Hopkins University, and a B.A. in Finance and Communications from Lake Forest College.

Fatima is licensed as both a **Private Security Contractor** and **Private Detective** in Illinois. Her expertise includes corporate compliance, operational management, and business development. She is also the reason for Blue Line's WBE/MBE certification, ensuring clients benefit from diversity-driven contracting.

Fatima ensures every Blue Line program meets regulatory requirements, maintains financial integrity, and delivers measurable client value.



Jim McShane - Vice President

Jim McShane brings more than 16 years of experience in security and law enforcement, including service in the Illinois Army National Guard, Illinois police service, and as a Corporate Security Manager with FedEx.

He holds a **B.S. in Criminal Justice (Purdue University, Summa Cum Laude)** and certifications in workplace violence prevention, advanced interrogations, and security management.

At Blue Line, Jim oversees large-scale contracts, ensures rapid mobilization, and leads compliance efforts. His FedEx corporate experience provides unique insight into managing complex, multi-site operations.

Operations Leadership

John O'Malley - Division Manager

John O'Malley brings more than 30 years of security and law enforcement experience, having served as **Chief and Deputy Chief with the Cook County Sheriff's Department**. He is a graduate of the **FBI LEEDS program** and holds certifications in homeland security and incident command.

At Blue Line, John serves as a **Division Manager**, responsible for supervising site supervisors and overseeing daily operations for assigned client accounts. He ensures officer performance, post compliance, and client satisfaction, while providing guidance to field supervisors and operations staff. His extensive leadership background ensures that Blue Line's operations are delivered with professionalism, discipline, and accountability.

Justin Hunt - Operations Manager

Justin Hunt has more than 15 years of experience in corrections and law enforcement, including managing high-security units and crisis response teams.

At Blue Line, Justin oversees **field operations and logistics**, ensuring officers are properly trained, equipped, and supervised. He provides direct oversight of multi-site contracts, conducts field inspections, and ensures operational performance aligns with client expectations.

Alex Gutierrez – Senior Manager of Operations

Alex Gutierrez has more than 20 years of experience in executive protection, retail loss prevention, and large-scale event security. He directs officer training, scheduling, and field supervision.

Alex specializes in ensuring staffing continuity, mentoring new officers, and maintaining client satisfaction. He plays a critical role in developing post orders, implementing training, and ensuring seamless daily operations. Fluent in Spanish, Alex is also able to communicate effectively with bilingual staff and diverse communities, enhancing Blue Line's ability to serve clients in multicultural environments.



Relevant Experience & Past Performance

Blue Line Security Solutions has successfully delivered security services across a wide range of industries, including healthcare, aviation, financial services, community organizations, and Fortune 500 corporations. Each contract demonstrates our ability to adapt to unique client needs while maintaining consistent excellence in officer performance, supervision, and reporting.

We have highlighted five representative engagements that closely align with the scope and requirements of the Will County Health Department RFP.

FedEx Corporation - Multi-Site National Security Program

Scope of Work:

Blue Line provides security across **26 FedEx facilities nationwide**, including 18 primary distribution centers, 3 seasonal hubs, and 5 high-risk sites requiring enhanced protection.

Services Provided:

- 4,000+ weekly guard hours across multiple states.
- Access control and visitor management at high-volume facilities.
- TSA-compliant cargo screening at airside facilities.
- Alarm response and incident reporting.
- Driver escort protection and secure dock management.

Challenges & Outcomes:

- Ensured zero major incidents throughout the contract term despite high-volume and high-risk environments.
- Successfully integrated with TSA and FedEx Corporate Security requirements.
- Provided consistent personnel across multiple regions, delivering continuity of service that large national vendors struggled to achieve.
- Reference:
 Josh Atteberry, Security Specialis

Indianapolis International Airport - Public Safety Support

Scope of Work:

Unarmed officer services for off-airport support facilities at one of the Midwest's busiest airports.

Services Provided:

- Access control and perimeter patrols.
- Credential verification for staff and vendors.
- Emergency response coordination with Airport Public Safety.
- Use of TrackTik Guard Tour System for real-time reporting.

Challenges & Outcomes:



- Integrated seamlessly with Airport's multi-agency security structure, ensuring compliance with aviation security standards.
- Reduced unauthorized access attempts through visible patrol presence.
- Delivered real-time reporting that improved airport leadership's ability to monitor activity trends.

Reference:

Paula Courtney, Public Safety Manager

Greektown SSA #16 - Community-Focused Security

Scope of Work:

Community-based patrols and public safety engagement in a busy commercial and entertainment district in Chicago.

Services Provided:

- Daily foot and vehicle patrols.
- Incident response, de-escalation, and coordination with local law enforcement.
- Homeless outreach and assistance.
- Seasonal event security, including festivals and parades.

Challenges & Outcomes:

- Reduced petty thefts and disorderly conduct incidents through proactive patrols.
- Increased stakeholder satisfaction, with merchants reporting a stronger sense of safety and community trust.
- Officers became trusted ambassadors for the district, balancing safety enforcement with a customer-service approach.

Reference:

Tia Angelos, Program Director

Fifth Third Bank - Multi-Site Financial Security

Scope of Work:

Contracted to secure 11 bank sites requiring consistent coverage and client-facing professionalism.

Services Provided:

- 1,683 weekly guard hours across multiple branches.
- Patrols, access control, and incident response.
- Customer service support and ATM monitoring.
- CCTV monitoring and alarm response.

Challenges & Outcomes:



- Annual contract value of \$2.25 million with consistent performance and client renewal.
- Provided continuity of personnel at sensitive client-facing posts, reducing retraining and maintaining strong client trust.
- Officers delivered dual roles as security professionals and customer-service representatives.

Reference:

Frank Loveridge, VP Physical Security

Sephora - Avon, Indiana Distribution Facility

Scope of Work:

Asset protection and workplace safety for a high-value retail distribution center.

Services Provided:

- Site access control and visitor verification.
- Perimeter patrols and theft deterrence.
- Equipment and logistics protection.
- Integration with Sephora's loss prevention team.

Challenges & Outcomes:

- Improved loss prevention results, reducing shrinkage and unauthorized access.
- Created a safer workplace environment through consistent officer presence and engagement.
- Provided detailed reporting that supported internal audits and compliance.

Reference:

Mike Truax, Director of Logistics Asset Protection



Staffing, Recruitment & Training

Blue Line Security Solutions understands that the success of any security program depends on the quality, professionalism, and preparedness of its personnel. For Will County, where officers will operate in sensitive healthcare and public-facing environments, we implement a **rigorous staffing**, **recruitment**, **and training program** to ensure every officer is qualified, reliable, and capable of representing the County with integrity and professionalism.

Recruitment & Candidate Pipeline

Blue Line maintains an active **Applicant Tracking System (ATS)** with more than **500 pre-screened candidates** across Illinois and neighboring states. This pipeline allows us to quickly source, evaluate, and deploy qualified officers. Our recruitment strategy includes:

- **Right of First Refusal:** Qualified incumbent staff will be given the opportunity to remain on assignment, ensuring continuity and a smooth transition.
- Targeted Local Hiring: Preference for candidates residing in Will County and surrounding areas to strengthen community familiarity and reduce travel-related attrition.
- **Specialized Recruitment Channels:** Partnerships with veteran associations, law enforcement academies, and workforce development programs.
- **Community-Based Outreach:** Local job fairs, career centers, and vocational programs to attract diverse and motivated candidates.

Vetting & Screening Process

Every candidate undergoes a **multi-stage vetting process** prior to deployment, exceeding state licensing requirements. Screening includes:

- Background Checks Criminal history, sex offender registry, reference verification, and employment history validation.
- Drug & Alcohol Screening Pre-employment testing and random post-hire screenings.
- License Verification Confirmation of all state-mandated licenses and training credentials.
- Credit & Civil Record Checks For officers assigned to sensitive posts involving public funds or pharmaceuticals.
- Psychological & Integrity Screening Ensures officers can handle stress, exercise sound judgment, and maintain ethical standards.

Training Philosophy

We believe officers are not simply "guards" but ambassadors of safety and service. Our training program combines core security skills with healthcare-specific competencies to prepare officers for the unique environment of Will County's health facilities.

Training Standards

- Initial Training: Minimum of 40 hours pre-deployment.
- **Healthcare-Specific Modules:** 16–20 hours specialized training tailored to patient-centered environments
- Annual Refresher Training: 16+ hours of continuing education.
- Quarterly Updates: Focused modules addressing new risks, regulations, or site-specific issues.



Training Curriculum

Category	Topics Covered	Hours
Orientation & Post Orders	Policies, site-specific duties, reporting protocols	8 hrs
Patrol & Access Control	Facility patrols, visitor management, ID checks, perimeter security	8 hrs
Conflict Management	De-escalation techniques, verbal judo, managing disruptive behavior	6 hrs
Healthcare Environment Training	HIPAA awareness, infection control, behavioral health interaction, patient & visitor engagement	12 hrs
Emergency Preparedness	Fire safety, active shooter drills, evacuation procedures, crisis management	8 hrs
First Aid & CPR	CPR, AED, First Aid certification (Red Cross/AHA)	6 hrs
Workplace Violence Prevention	Recognizing warning signs, intervention protocols, reporting	4 hrs
Diversity, Equity & Inclusion	Cultural awareness, implicit bias, ADA compliance	4 hrs
Ongoing Annual Training	Refresher modules, regulatory updates, healthcare-specific drills	16+ hrs

Total Pre-Deployment Training: ~52 hrs minimum

Healthcare-Specific Training Modules

Because security officers in healthcare environments interact with patients, visitors, and staff daily, Blue Line emphasizes specialized training that goes beyond traditional security skills:

- HIPAA Awareness & Confidentiality Protecting patient information during interactions and reporting.
- Infection Control Procedures Proper use of PPE, sanitization practices, and protocols for pandemic or outbreak response.
- Behavioral Health & De-escalation Managing interactions with distressed patients, visitors, or individuals experiencing mental health crises.
- Patient & Visitor Interaction Balancing professionalism and compassion, treating every individual with dignity and respect.
- **Healthcare Workplace Violence Prevention** Recognizing early warning signs of aggression and using non-violent intervention strategies.

Ongoing Development & Retention

Blue Line invests in officer growth to reduce turnover and build long-term partnerships:

- Quarterly Training Modules Covering emerging threats, healthcare compliance, and sitespecific issues.
- Mentorship Program New officers are paired with senior personnel for their first 90 days to reinforce training and promote retention.
- Career Progression Pathways Opportunities for officers to advance to lead officer, supervisor, or operations management roles.
- Recognition Programs Monthly commendations and retention bonuses tied to tenure milestones.



Staffing Key Performance Indicators (KPIs)

- 100% of officers fully trained and certified prior to deployment.
- Zero untrained officers assigned to posts.
- <5% annual turnover at Will County posts.</p>
- 100% completion of quarterly and annual refresher training.
- 100% compliance with reporting and patrol verification via TrackTik.

Retention, Supervision & Quality Assurance

Blue Line Security Solutions understands that security programs succeed or fail based on one key factor: **people.** Even the most advanced technology cannot replace the stability and professionalism of a well-trained, motivated officer. For Will County, where security officers interact daily with patients, staff, and the public in healthcare environments, **continuity of personnel and consistent supervision** are critical to building trust and ensuring reliable performance.

Unlike many "big-box" providers whose business model accepts high turnover as a cost of doing business, Blue Line has built a culture that prioritizes retention, professional growth, and accountability. The result: a turnover rate of only 44%, compared to an industry average of 200–300%.

Officer Retention Programs

Blue Line's retention approach focuses on **supporting officers as valued professionals** and providing a career path rather than just a job:

Competitive Compensation & Benefits

- o Market-competitive wages to attract and retain high-quality candidates.
 - o Benefits packages including healthcare, paid leave, and retirement options.

Recognition & Rewards

- "Officer of the Month" and quarterly commendations.
- Retention bonuses tied to tenure milestones.
- Spot awards for exceptional service or client commendations.

Career Progression & Advancement

- Clear advancement pathways to Lead Officer, Supervisor, and Operations Manager roles.
- o Mentorship programs to develop leadership skills.
- o Tuition and training reimbursement for advanced certifications.

Supportive Culture

- o Open communication between officers, supervisors, and leadership.
- 24/7 access to operations managers for immediate support.
- Regular engagement with officers to address morale, challenges, and professional development.

Outcome: Blue Line's officers are not only retained longer but are more engaged, reliable, and client-focused — reducing turnover-related disruptions and costs.



Supervision Structure

Blue Line implements a multi-layered supervision model to ensure constant accountability and responsive management for Will County facilities:

Site Supervisors

- Assigned to each location with 24/7 responsibility for daily staffing, officer performance, and client liaison.
- Conduct pre-shift briefings, ensure compliance with post orders, and perform uniform inspections.

Field Supervisors

- Roving personnel who conduct at least two unannounced inspections per week at each site.
- Verify officer alertness, professionalism, and patrol compliance.
- Submit inspection reports reviewed by operations management.

Division Managers (John O'Malley)

- o Oversee multiple contracts, manage staffing allocations, and resolve escalated issues.
- Conduct monthly performance reviews with clients.

Vice President & Managing Partners

- o Provide executive oversight and remain available to Will County leadership 24/7.
- o Ensure strategic alignment, rapid escalation response, and long-term program success.

Chain of Accountability: From frontline officers to managing partners, Will County will have direct access to every level of Blue Line's leadership team.

Quality Assurance Program

Blue Line enforces a **formalized QA process** designed to measure, track, and improve officer performance and contract compliance.

Key QA Components:

- Random Site Audits Conducted by supervisors and division managers to verify officer alertness and adherence to post orders.
- Monthly KPI Reviews Compliance reports on staffing, incident response, patrol verification, and client satisfaction.
- Quarterly Client Surveys Solicited feedback from Will County stakeholders to ensure officers are meeting expectations.
- Corrective Action Protocols Root cause analysis for performance issues, followed by retraining, coaching, or replacement if required.
- After-Action Reviews Conducted for all incidents to identify lessons learned and improve future response.

Uniform Standards

Professional appearance is a key component of deterrence and public confidence. Blue Line enforces strict uniform standards:

- Navy Tactical Shirt With nameplate, Blue Line insignia, and epaulets.
- Black Tactical Cargo Pants Reinforced seams for durability.



- Tactical Footwear Ensures safety and comfort for extended shifts.
- Seasonal Outerwear Branded jackets and gear with Blue Line insignia.

Supervisors conduct regular uniform inspections to ensure officers present a consistent, professional image at all times.

Key Performance Indicators (KPIs)

Blue Line tracks and reports measurable KPIs to hold ourselves accountable and demonstrate value to Will County:

- Staffing Compliance: ≥ 95% scheduled posts filled with no uncovered shifts.
- Patrol Compliance: 100% of scheduled patrols verified via TrackTik.
- Turnover: Maintain < 5% annual turnover at Will County facilities.
- Incident Reporting: 100% of incidents documented and submitted within 24 hours.
- Supervisor Inspections: Minimum of 2 unannounced inspections per site, per week.
- Client Satisfaction: ≥ 90% satisfaction rating from quarterly Will County surveys.
- Response Time: ≤ 3 minutes average response to emergencies within facilities.

Technology: TrackTik Guard Management System

Blue Line Security Solutions recognizes that technology is essential for providing accountability, transparency, and efficiency in modern security programs. While people remain at the core of effective security, technology ensures their performance is **visible**, **verifiable**, **and measurable**.

For Will County, Blue Line will deploy the **TrackTik Guard Management System** — an advanced GPS-enabled guard tour and reporting platform that allows both Blue Line leadership and Will County administrators to **monitor activity in real time**.

Core Features of TrackTik

GPS Patrol Verification

- o Officers scan checkpoints with NFC tags, QR codes, or GPS validation.
- o Time-stamped records prove compliance with patrol schedules.
- Prevents "missed patrols" and ensures full coverage of facilities.

Real-Time Incident Reporting

- Officers can upload incident reports with photos, videos, and notes directly from their mobile device.
- o Incidents are immediately visible to supervisors and Blue Line's operations center.
- Streamlines escalation and response while creating a defensible record.

Client Dashboards

- Will County leaders will have secure login access to dashboards.
- Live activity feeds show officer patrols, incident logs, and compliance data.
- o Exportable reports for monthly or quarterly reviews.

Automated Escalation Alerts

- If a checkpoint is missed or an incident is logged, the system sends instant alerts to supervisors.
- Provides layered accountability so no issue goes unnoticed.

Audit Trail & Compliance

Permanent digital record of officer activity.



- o Critical for legal defensibility, insurance audits, and risk management.
- Ensures compliance with both contractual obligations and state regulations.

Reporting Capabilities

TrackTik transforms officer activity into actionable data, allowing Will County to make informed decisions about safety, staffing, and risk mitigation.

Sample Reports Provided to Will County:

- Daily Activity Logs Officer notes, patrol verification, and incidents.
- Incident Reports Detailed accounts with attachments and witness statements.
- Staffing Compliance Reports Verification that all scheduled posts were covered.
- Monthly KPI Package Summary of patrol compliance, incident trends, response times, and recommendations.
- **Custom Reports** Tailored to specific County requests, such as loitering trends, parking enforcement, or visitor management analysis.

Healthcare-Specific Applications

Security in healthcare and public health facilities must be highly visible, responsive, and patient-friendly. TrackTik provides tools that directly support these goals:

- Patient & Visitor Safety Monitoring Patrols can be tailored to high-traffic public areas (waiting rooms, entrances, parking lots) with verifiable checkpoint scans.
- Infection Control Support Reports can track sanitation rounds or PPE compliance in restricted areas
- Workplace Violence Prevention Incident reporting captures early warning behaviors (aggressive visitors, disruptive patients), enabling quick escalation before situations worsen.
- **Emergency Response Documentation** All fire alarms, medical emergencies, or disturbances are logged with time stamps for after-action review.

Value to Will County

By implementing TrackTik, Blue Line ensures that Will County receives a **transparent**, **data-driven security program** where nothing is left to chance.

- For Administrators: Clear visibility into officer performance and accountability.
- For Staff & Patients: Peace of mind knowing security is active, present, and responsive.
- For Risk Management: Legally defensible documentation that protects the County in the event of incidents or liability claims.
- For Continuous Improvement: Data-driven insights allow adjustments to patrol routes, staffing levels, and response protocols.

Key Performance Indicators (KPIs) with TrackTik

- Patrol Compliance: ≥ 100% completion of scheduled patrol routes.
- Incident Report Timeliness: 100% of incidents logged within 30 minutes of occurrence.
- Escalation Alerts: 100% supervisor acknowledgement of missed patrols or high-severity incidents within 15 minutes.



 Client Access: Will County dashboard live 24/7 with monthly report summaries provided.

Risk Management & Compliance

Blue Line Security Solutions recognizes that security officers are often the first line of defense in risk management for public facilities. For Will County, where officers will operate in healthcare and public-facing environments, compliance with legal, regulatory, and contractual obligations is not just a requirement — it is a cornerstone of protecting patients, staff, visitors, and County assets.

Our approach to risk management is designed to minimize liability, enhance safety, and ensure full compliance with all applicable standards.

Policies & Procedures

Blue Line maintains a comprehensive library of written policies and procedures that guide officer conduct and ensure consistency across all contracts. Key components include:

Use-of-Force Continuum

- Officers are trained to apply only the minimal and proportionate level of force necessary.
- o Emphasis on de-escalation and non-violent conflict resolution.
- Firearms are not used for unarmed posts; non-lethal options (e.g., handcuffs, OC spray) only if specifically authorized.

Weapons & Detention Policies

- Officers at Will County sites will not carry firearms.
- Any use of restraints or law enforcement interaction is governed by Illinois statutes and client policy.
- Officers will coordinate with local law enforcement when arrests or detentions are required.

Incident Documentation

- All incidents, regardless of severity, are documented in TrackTik and submitted within 24 hours
- Reports include officer notes, witness statements, and supporting photos or video evidence.
- Serious incidents are escalated to Division Managers and client leadership within one hour.

Healthcare & Workplace Compliance

Operating in healthcare facilities requires specialized compliance protocols to protect patients, staff, and visitors while meeting regulatory mandates.

HIPAA Compliance

- Officers trained in confidentiality and proper handling of protected health information (PHI).
- o Incident reports avoid disclosure of patient-identifying details except where required by law.

OSHA Standards



- Officers trained to identify workplace hazards and enforce OSHAcompliant safety practices.
- Daily Job Hazard Analyses (JHAs) performed at sites with specific risk areas (e.g., labs, storage rooms).

ADA Compliance

- o Officers trained in ADA awareness to ensure equal access for all patients and visitors.
- o Emphasis on respectful interaction with individuals requiring accommodations.

Workplace Violence Prevention

- o Officers trained to recognize early warning signs of aggression or potential violence.
- Rapid intervention protocols to protect staff in clinics and public health offices.

Compliance Programs

Blue Line enforces a layered compliance program that ensures legal, ethical, and operational standards are consistently met.

Internal Compliance Audits

- o Quarterly reviews of officer reports, patrol compliance, and training completion.
- Findings presented to leadership and corrective actions tracked to closure.

Legal & Regulatory Monitoring

- o Continuous review of Illinois and federal laws impacting healthcare security.
- Updates integrated into officer training modules and client protocols.

Client-Specific Post Orders

- o Site-specific procedures aligned with Will County policies.
- o Regular updates in partnership with client administrators.

Insurance Coverage

Blue Line maintains insurance levels that exceed typical contractual requirements. Certificates of insurance can be provided upon award.

- **General Liability Insurance** \$5M aggregate coverage.
- Professional Liability (Errors & Omissions) \$2M coverage.
- Workers' Compensation Statutory coverage for Illinois.
- Automobile Liability For all vehicles used in patrol services.
- Umbrella/Excess Coverage Available upon client request.

This comprehensive coverage ensures Will County is fully protected from liability in the event of claims or incidents.

Corrective Action & Continuous Improvement

When compliance or performance issues are identified, Blue Line applies a **structured corrective action process**:

- 1. **Root Cause Analysis** Identify whether the issue was due to training, supervision, or process gaps.
- 2. Immediate Remediation Retraining, coaching, or replacement of personnel as required.
- 3. **Follow-Up Audit** Ensure corrective measures were effective and sustained.



4. **Client Transparency** – Findings and resolutions documented and shared with Will County leadership.

Key Performance Indicators (KPIs)

- 100% compliance with HIPAA and OSHA requirements.
- 100% completion of quarterly compliance audits.
- Zero tolerance for unreported incidents.
- All serious incidents reported to Will County leadership within 1 hour.
- All certificates of insurance and bonding delivered prior to contract start date.

Transition & Mobilization Plan

Blue Line Security Solutions understands that the **transition period** is often the most critical phase of any new contract. A poorly executed transition can result in uncovered posts, compliance gaps, or loss of confidence from staff and visitors. For Will County, where healthcare facilities must remain accessible and safe at all times, Blue Line has developed a **proven**, **structured mobilization plan** designed to ensure seamless continuity of coverage with zero disruption.

Our transition strategy is based on three guiding principles:

- 1. **Continuity of Service** No gaps in coverage during transition.
- 2. Clear Communication Regular updates to Will County leadership at every phase.
- 3. **Rapid Readiness** Full operational staffing achieved within 30 days of award, or sooner if required.

Mobilization Timeline

Phase 1 – Planning & Assessment (Week 1)

- Conduct site surveys at all Will County facilities (Health Department, Community Health Center, North Branch Office, Sunny Hill Tuberculosis Clinic).
- Review current post orders and staffing patterns.
- Meet with Will County administrators and key facility staff to identify unique risks and expectations.
- Develop draft post orders tailored to each site.
- Assign dedicated transition team including Division Manager, Operations Manager, and HR representative.

Phase 2 – Recruitment & Vetting (Week 2)

- Begin officer recruitment through Blue Line's Applicant Tracking System (ATS) and local hiring channels.
- Offer right-of-first-refusal to qualified incumbent staff to maintain continuity.
- Conduct full vetting: background checks, drug screening, license verification, and psychological evaluations.
- Begin assignment of officers to sites based on fit and experience.



Phase 3 - Training & Orientation (Week 3)

- Deliver site-specific training tailored to Will County facilities.
- Healthcare modules include HIPAA, infection control, patient/visitor interaction, and deescalation.
- Supervisors conduct on-site walkthroughs with officers to review post orders and facility layouts.
- Conduct tabletop emergency response exercises with County staff (e.g., active shooter, fire, medical emergency).

Phase 4 – Deployment & Soft Launch (Week 4)

- Begin phased officer deployment under direct supervision.
- Division Manager and Field Supervisors present during first shifts at each site.
- TrackTik Guard Tour software deployed for live activity verification.
- Daily check-ins with Will County leadership to address adjustments.

Phase 5 – Stabilization & Optimization (Day 30 and Ongoing)

- Conduct first monthly performance review meeting with Will County administrators.
- Implement adjustments to staffing levels, patrol routes, or reporting processes as needed.
- Transition program enters "steady state" with full staffing and ongoing quality assurance.

Transition Team

- Division Manager (John O'Malley): Directs transition execution, supervises site supervisors.
- Operations Manager (Justin Hunt): Oversees recruitment, vetting, and officer deployment.
- Senior Manager of Operations (Alex Gutierrez): Ensures training, scheduling, and continuity.
- HR & Compliance Staff: Manage background checks, licensing, and onboarding paperwork.
- Field Supervisors: Conduct daily inspections during first month of deployment.

Staffing Strategy During Transition

- Rover Officers: Blue Line maintains a pool of trained "rover" officers available to cover posts during unexpected absences or last-minute needs.
- Overlap Shifts: During the first two weeks of deployment, Blue Line schedules overlapping shifts with supervisory staff to ensure smooth handoff and immediate correction of any issues.
- **Continuity of Personnel:** Incumbent officers who meet Will County standards will be retained whenever possible to ensure familiarity with facilities and reduce disruption.

Client Engagement Milestones

- Day 1–3: Kickoff meetings with Will County leadership, initial site surveys.
- Day 7: Draft post orders submitted for County review.
- Day 14: Recruitment and vetting complete; training schedule delivered.
- Day 21: Training and orientation completed; officers walkthrough assigned sites.
- Day 28: Full deployment under supervisory presence.



• **Day 30:** First monthly performance review meeting; stabilization adjustments implemented.

Guarantee of Coverage

Blue Line guarantees that all posts will be staffed from Day 1 of deployment. If any unexpected gaps arise, rover officers or supervisory staff will provide immediate coverage to ensure zero uncovered shifts.

Key Performance Indicators (KPIs) During Transition

- 100% of scheduled posts covered from contract start date.
- 100% of officers trained prior to deployment.
- All post orders drafted and approved within 10 business days of award.
- All incident reporting transitioned to TrackTik system within 30 days.
- First monthly performance review completed by Day 30.

Licenses, Certifications & Offices

Blue Line Security Solutions maintains all required licenses and certifications to provide security services in the State of Illinois. Our compliance ensures that every officer deployed is properly licensed, vetted, and supported by an organization that operates with integrity and professionalism.

Certifications

- Women-Owned Business Enterprise (WBE) Certified by the City of Chicago
- Minority-Owned Business Enterprise (MBE) Certified by the City of Chicago

These certifications support Will County's supplier diversity objectives while providing a trusted partner with proven operational capacity.

Licenses - Illinois

- Private Security Contractor License #122.001441
- Private Detective Agency Licenses #117.001861 / #118.000348

Blue Line's Illinois licenses allow us to provide both armed and unarmed security services, as well as investigative support when required.

Local Office Presence

Blue Line maintains multiple Illinois offices to support rapid response, field supervision, and direct client engagement:

- Illinois Headquarters: 9550 Bormet Dr., Suite 205, Mokena, IL 60448
- Illinois Regional Offices:
 - o 15320 Cooper Ave, Suite B, Harvey, IL
 - o 332 S. Michigan Ave, Chicago, IL

Our local presence ensures that Will County receives direct oversight, immediate support, and executive-level availability throughout the life of the contract.



Client References

Blue Line Security Solutions has delivered security services for large-scale commercial, logistics, and critical infrastructure clients. Below are three contract references that closely reflect the scope and requirements of Will County. These references align with the official submission form provided by Will County and demonstrate our proven ability to deliver professional, reliable security services in complex environments.

1.FedEx

942 South Shady Grove Rd.

Memphis, TN 38120

- Contact Person: Josh Atteberry, Security Specialist
- Phone
- Email

2.Indianapolis Airport

7800 Col. H Cook Memorial Dr.

Indianapolis, IN 46241

- Contact Person: Michael Hammond, Division Chief, Special Operations
- Phone
- Email

3.Sephora

9394 Sephora Way

Avon, IN 46132

- Contact Person: Mike Truax, Director, Logistics Asset Protection
- Phon
- Email

Relevance to Will County

These references reflect Blue Line's experience securing:

- High-volume distribution and logistics facilities (FedEx, Sephora)
- Critical infrastructure and transportation hubs (Indianapolis Airport)
- Large-scale contracts with demanding compliance requirements

Will County can be confident that Blue Line brings the same **professionalism**, **consistency**, **and reliability** proven with these nationally recognized clients.



Pricing Narrative

Blue Line Security Solutions understands that price is an important factor in Will County's evaluation. Our pricing model has been carefully designed to balance **competitive hourly rates** with **long-term value**, **service continuity**, and **measurable results**.

While some vendors may present lower hourly costs, the **total cost of ownership** is significantly higher when turnover, overtime, compliance gaps, or service failures are factored in. Blue Line provides Will County with a cost structure that avoids those hidden costs, ensuring long-term savings and peace of mind.

Transparent Pricing Approach

Our rates are calculated with full transparency, reflecting:

- Base officer wage (competitive within the Illinois market to support retention).
- Mandatory payroll taxes and benefits (FICA, unemployment, worker's compensation).
- Insurance coverage exceeding statutory requirements.
- Training and compliance costs (included in our hourly rate).
- Administrative overhead and supervision (no hidden fees).
- Technology integration TrackTik guard tour and reporting system included at no additional charge.

This structure ensures that Will County knows exactly what is being paid for, with no unexpected addons.

Value Drivers for Will County

1. Low Turnover = Continuity of Coverage

- Blue Line's turnover rate is 44% vs. industry averages of 200–300%.
- Fewer replacements mean lower retraining costs, reduced onboarding time, and greater consistency in who Will County staff and visitors interact with daily.

2. Reduced Overtime Through Smarter Scheduling

- By maintaining a larger roster of qualified officers and a pool of "rover" staff, Blue Line minimizes costly overtime hours.
- This ensures coverage reliability without driving up the contract value over time.

3. Built-In Technology Savings

- TrackTik guard tour and reporting software is provided at no additional charge, unlike competitors who bill separately for reporting technology.
- This provides Will County with real-time dashboards, GPS verification, and incident reporting without increasing costs.

4. Healthcare-Specific Value



- Officers trained in healthcare security reduce liability from patient/visitor incidents.
- Workplace violence prevention training helps mitigate risks that could otherwise result in costly claims or disruptions.
- Blue Line's approach reduces compliance risks under OSHA, EEOC, and ADA, protecting the County from potential penalties.

Competitive Benchmarking

Research shows that investing just \$1–2 more per hour in officer wages dramatically improves **retention**, **reliability**, **and performance**. Blue Line's pricing reflects this principle, ensuring Will County avoids the hidden costs of service failures while benefiting from a workforce that is motivated, stable, and accountable.

Deliverables Tied to Pricing

Unlike low-cost vendors who provide only staffing, Blue Line's pricing includes:

- 24/7 supervisory support and emergency response coverage.
- Quarterly performance reviews with County administrators.
- Custom reporting and KPI analysis.
- Dedicated Division Manager oversight at no additional charge.

Outcome for Will County

By choosing Blue Line, Will County receives **cost-effective**, **long-term value** rather than short-term savings that compromise service. Our pricing ensures:

- Predictable contract costs with no hidden technology or compliance fees.
- Higher quality officers who stay longer, reducing churn and training costs.
- Improved safety and compliance outcomes, reducing liability and protecting public trust.



Conclusion

Blue Line Security Solutions is honored to present this proposal to the Will County Health Department. We recognize that protecting healthcare and public health facilities requires more than traditional security — it requires officers who are professional, approachable, and prepared to manage both safety risks and sensitive human interactions.

Our approach combines:

- Continuity of personnel Officers who become a trusted extension of the Will County team, not a revolving door of new faces.
- Specialized healthcare training De-escalation, workplace violence prevention, and patient/visitor interaction to maintain safe and welcoming environments.
- Transparency and accountability Real-time TrackTik reporting, daily safety checks, and measurable KPIs that allow County leadership to monitor outcomes.
- Hands-on supervision Local Division Managers and Field Supervisors ensuring performance meets the highest standards every day.

We're confident that Blue Line offers the best of both worlds: **national capabilities with small-business care.** Our clients benefit from the resources and scalability of a nationwide provider, while enjoying the personal service, responsiveness, and attention to detail that larger vendors often fail to deliver.

Where other providers may focus only on filling posts, Blue Line delivers **stability**, **safety**, **and partnership**. By investing in our people and leveraging proven processes, we help Will County achieve its goals: safe facilities, reduced risks, consistent coverage, and a strong sense of security for staff, patients, and visitors alike.

On behalf of our leadership team and over 400 dedicated officers, we thank you for the opportunity to submit this proposal. We look forward to building a partnership with Will County that is defined by reliability, professionalism, and measurable results.



WILL COUNTY BOARD OF HEALTH RESOLUTION #25-63

RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH WILL COUNTY, ILLINOIS

APPROVAL TO ENTER INTO A CLIENT AGREEMENT WITH LOCUMTENENS.COM, LLC.

WHEREAS, the Behavioral Health division of the Will County Health Department provides child, adolescent and adult therapy services and psychiatry services; and

WHEREAS, child, adolescent and adult therapy and psychiatry staffing services may be needed to support program operations; and

WHEREAS, LocumTenens.com, LLC will provide child, adolescent, and adult psychiatry services as contracted for a period of one year; and

WHEREAS, the Agency agrees to pay in accordance with the fee payment and invoicing section of the attached agreement.

NOW, THEREFORE, BE IT RESOLVED, the Will County Board of Health hereby approves the Client Agreement with LocumTenens.com, LLC from October 16, 2025 through October 15, 2026.

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DATED THIS 15th day of October 2025

This Client Agreement is between Will County Health Department ("Client" or "you") and LocumTenens.com, LLC ("LocumTenens.com," "we" or "us").

1.0 Overview

This Client Agreement provides the terms and conditions regarding the provision to you of locum tenens Contractors (each, a "Contractor"). The types of Contractors we will make available to you will be described in one or more Addenda to this Client Agreement entered into from time to time (each, a "Contractor Addendum"). The Contractor Addenda shall also describe the fee structure applicable for such Contractors in addition to other terms regarding such Contractors and shall be a part of this Client Agreement.

2.0 LocumTenens.com Duties

To assist you in obtaining qualified Contractors, LocumTenens.com will:

- 2.1 Source, screen and present potential Contractors as appropriate;
- 2.2 Use our best efforts to present Contractors acceptable to you:
- 2.3 Reimburse the Contractor(s) for his/her fee(s);
- 2.4 Provide malpractice insurance coverage, where required, through our insurance carrier for any and all Contractor(s) provided by us to you;
- 2.5 Verify or assist in obtaining Contractor licensure, as necessary; and
- 2.6 Allow you to retain patient revenue generated by any locum tenens Contractor(s) placed by us.

3.0 Client Duties

To enable us to attract qualified Contractors to your facility, you or your assigned facility will:

- 3.1 Use independent judgment as to a Contractor's qualifications, credentials and background. You acknowledge that the ultimate decision as to a Contractor's qualifications belongs to Cilent;
- 3.2 Inform LocumTenens.com in writing within forty-eight (48) hours if any Contractor presented by LocumTenens.com, including any Contractor whose name has been submitted for clearance, is currently engaged, or has been previously engaged within the twelve months prior to such presentation or submission for clearance, in active written, two-way communication regarding employment or engagement with or regarding the facility where the medical services are to be provided. Absent such notification, the Contractor will be conclusively presumed to have been introduced by LocumTenens.com. Upon request by LocumTenens.com, Client agrees to submit written or pictorial proof of such communication, or of an introduction by another agency within the twenty-four (24) months preceding the presentation or submission for clearance by LocumTenens.com;
- 3.3 Supply the Contractor, according to the required specialty, reasonably maintained usual and customary equipment, usual and customary supplies, a suitable practice environment complying with accepted clinical and procedural standards and, as necessary, appropriately trained support staff to enable the Contractor(s) to perform his/her services;
- 3.4 Supply the Contractor the cost of transportation to and from the assigned facility's community (to also include any luggage surcharges), reasonable and acceptable living accommodations outside of the assigned facility, local transportation within the community (rental car or, if a personal vehicle is used, reimbursement of mileage at the rate allowed by the Internal Revenue Service), and gasoline reimbursement (both local gas and round trip gasoline expenses);
- 3.5 Use your best efforts to promptly obtain hospital privileges for Contractors, when applicable. You will be solely responsible for any and all costs and expenses associated with or required for credentialing and/or privileging all Contractors, including but not limited to, costs for medical tests, drug screens, CSR screening, DEA certification, DEA address change and compliance with OSHA requirements. LocumTenens.com shall not be responsible for any such costs associated with, required for or relating to the credentialing or privileging of any Contractor;
- 3.6 Pay all fees associated with any patient compensation fund as applicable by state;
- 3.7 Verify identity of Contractor at Client's facility;
- 3.8 Pay or reimburse LocumTenans.com for state/county sales, use, franchise or receipts taxes (as applicable by state) charged against payments to us under this Client Agreement; Client further agrees to pay any expenses related to the state's assessment of any imputed taxes/expenses related to the treatment of Contractors as independent contractors;
- 3.9 Comply and require the assigned facility to comply with AMA, TJC, federal, state and local standards relating to patient care and related activities:
- 3.10 Participate in LocumTenens.com customer service/risk management activities by reporting, in writing, immediately to us any incident which may lead to a malpractice claim or disciplinary action taken against any Contractor; and
- 3.11 Reimburse all fees charged to LocumTenens.com that arise out of the services of any managed service provider, vendor management system or similar such outsourced management agency that you may engage or utilize; this obligation shall survive any termination or expiration of this Agreement.

4.0 Fees

- 4.1 You agree to pay LocumTenens.com the specific fees for each Contractor as specified on the applicable Contractor Addendum. Such fees are due and payable regardless of the number of cases or modalities performed by the Contractor. Additionally, you agree that: (a) it is your responsibility to ensure all patient charts are completed by the Contractor prior to the Contractor's completion of service, and (b) failure of verification of patient chart completion does not constitute in any way a reduction or elimination of your responsibility to pay all fees to us as required.
- 4.2 Immediately upon your acceptance of a Contractor, you agree to pay LocumTenens.com a deposit in the amount specified on the applicable Contractor Addendum. Upon our receipt of your written request, you may apply the remaining balance of a deposit paid for a particular Contractor against payment of the last two invoices for your account relating to that Contractor. In addition, provided that all amounts owed to us are paid in full, upon your written request made within one year of placing the deposit, we will refund the remaining balance of the deposit relating to that Contractor to you.
- 4.3 You agree to pay LocumTenens.com an administrative service fee in the amount specified on the applicable Contractor Addendum for each day a Contractor delivers services through patient contact or call availability.
- 4.4 Should a Contractor render services or be scheduled for call on a holiday, all hours will be charged at a holiday premium rate, as outlined in the Contractor Addendum. In addition, if the Contractor does not reside in the geographic area but remains within a fifty (50) mile radius of your facility, regardless of whether the Contractor renders services, on the applicable holiday, the holiday premium rate will apply. Holidays include Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day, New Year's Day, and any other holidays recognized by your facility.
- 4.5 You are responsible for verifying and signing Contractor's timesheets on a weekly basis or assuring an authorized representative of the assigned facility does so. A signed timesheet indicates your agreement that Contractor has properly provided services for the stated hours and that you will remit payment pursuant to the applicable Contractor Addendum and other applicable provisions of this Client Agreement. Any and all timesheets are deemed to be accurate, valid and approved by you at the close of business on the third (3rd) business day following your receipt of the timesheet, and LocumTenens.com is owed payment of the service fees for the time reflected on any such timesheet in accordance with the terms hereof. If you have a question concerning a Contractor's timesheet, you shall notify LocumTenens.com within three (3) business days of your receipt of the timesheet.
- 4.6 Payment for each time card period is due immediately upon receipt of an invoice. All payments more than Thirty(30) days past due will accrue interest at the rate of one and one half percent (1-1/2%) per month from the date of invoice or the date due, whichever is later.

5.0 Cancellation of Coverage

LocumTenens.com expends significant lime and effort locating Contractors, arranging for coverage, arranging for transportation, and otherwise arranging to meet your staffing needs. The Contractor we place must arrange his/her schedule as far in advance as possible, which may involve foregoing other opportunities. As a result, the following provisions apply with respect to your cancellation of services:

- 5.1 You may request that a Contractor be removed or a placement cancelled (a) at any time if the request is based on your reasonable dissatisfaction with the clinical performance or professional conduct of such Contractor or (b) at any time and for any reason, provided that we receive from you at least 30 days prior written notice. If you request that a Contractor be removed or a placement cancelled under (a) above, written documentation detailing the specific reasons for the request for removal must be received by LocumTenens.com prior to the Contractor's removal and such documentation must be reasonably satisfactory to us. In the event of a removal or cancellation under (a) or (b) above, you agree to pay us (i) all amounts owed hereunder for locum tenens coverage provided by such Contractor through the effective date of the cancellation, plus, but not being ilmited to, (ii) full roundtrip transportation, local housing, local transportation, any and all fees and penalties incurred by us or Contractor as a result of having to cancel lease agreements for this assignment, plus, but not being limited to, (iii) all other amounts due directly from you to the Contractor.
- 5.2 In the event that you request that a Contractor that has been scheduled to provide services to or for you (whether or not actually placed in your facility) be removed or his or her placement cancelled and such removal or cancellation does not satisfy the conditions of the preceding paragraph, you agree to pay us (i) all amounts owed hereunder for locum tenens coverage provided through the effective date of the cancellation plus (ii) the full amount of fees and costs which would have been payable for any uncompleted portion of the locum tenens period up to a maximum of thirty calendar days. You also agree to reimburse LocumTenens.com for any fees and/or charges incurred by us that result from the cancellation including, but not limited to: airline penalties for cancellation and rescheduling, non-refundable housing deposits, plus all other non-cancellable amounts which you would have been required to pay or reimburse us for through the remaining term of the locum tenens period requested by you (such as non-cancellable rental or lease costs).
- 5.3 LocumTenens.com will not, in any event, remove a Contractor from or cancel an assignment for illegal or discriminatory reasons,

6.0 Subsequent Placement, Recruitment or Other Usage of a Candidate

Our locum tenens trial practice option allows you to work with a Contractor prior to entering Into a permanent commitment with him/her. Upon payment of the applicable amount set forth below, you or the assigned facility may enter into a direct relationship with a Contractor who has worked with you or has been introduced or presented through LocumTenens.com, following completion of 90 days of locum tenens coverage by that Contractor.

- 6.1 (a) If the Contractor provides in-person medical services and is hired for a permanent position, the recruitment fee is equal to (i) 25% of the annual salary for the first year of employment, including incentive or other bonus, offered to and accepted by the Contractor or (ii) 25% of the actual salary, including incentive or other bonus, paid to the Contractor for the first year of employment (or part thereof, if a full year of employment is not completed), whichever of (i) and (ii) is greater. The amount determined under clause (i) shall be payable as provided under Section 6.3, and any additional amount required to be paid under clause (ii) will be paid promptly after the determination thereof.
 - (b) If the Contractor provides remote, telemedicine services and is hired for a permanent position, the recruitment fee is equal to (x) 50% of the annual salary for the first year of employment, including incentive or other bonus, offered to and accepted by the Contractor or (y) 50% of the actual salary, including incentive or other bonus, paid to the Contractor for the first year of employment (or part thereof, if a full year of employment is not completed), whichever of (x) and (y) is greater. The amount determined under clause (x) shall be payable as provided

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- under Section 6.3., and any additional amount required to be paid under clause (y) will be paid promptly after the determination thereof. The recruitment fee amounts apply without regard to the specialty of the Contractor.
- (c) The above recruitment fees are payable for any Contractor introduced to you by LocumTenens.com who: (i) Accepts a position with you or with the facility where the Contractor was assigned or any, facility, organization or group owned or operated by, or affiliated with you or with the assigned facility, whether or not in your or its actual community, within two years of the date the Contractor was introduced or presented, or if the Contractor worked, two years from the last day the Contractor last provided services to or for you; or (ii) If you or the assigned facility personnel assist in obtaining the position, accepts a position within a 15 mile radius of the facility where the Contractor provided services within two years of the date the Contractor was introduced or presented, or if the Contractor worked, two years from the last day the Contractor last provided services to or for you, or if the Contractor obtains privileges at any facility, organization or group owned or operated by or affiliated with you or with the assigned facility.
- 6.2 If the Contractor engages in locum lenens coverage or provides services for you or any of your affiliates or with the assigned facility, except through LocumTenens.com, within two years of the date the Contractor was introduced or presented, or if the Contractor worked, two years from the last day the Contractor last provided services to or for you, then the recruitment fee is equal to 25% of the national average annual salary for the Contractor's specialty, excluding incentive or other bonus, as printed by Medical Group Management Association (MGMA) for the then-current calendar year. The recruitment fee is owed without regard to the specialty of the Contractor.
- 6.3 The recruitment fees above are due on the first day the Contractor performs any of the services listed above. Pending our receipt of the recruitment fee, paid in full, all locum tenens fees based on the current rates structure will remain in full effect and due through the date on which the recruitment fee is paid in full. The locum tenens fees will NOT be credited against the separate recruitment fee. These obligations will remain in full effect regardless of the date of termination or cancellation of coverage or cancellation of this Client Agreement and whether or not either of us is in breach of any term of this Client Agreement. In addition, should you elect to interview a candidate introduced to you by LocumTenens.com for a permanent position, you agree to pay expenses related to that interview.

7.0 Status of Contractors

Contractors are independent contractors of LocumTenens.com and/or any one of its affiliates (including LT Medical, LLC). Contractors are not employees, agents or subcontractors of LocumTenens.com. Because Contractors are independent contractors, neither LocumTenens.com, nor you, will be responsible for tax withholding or incurring employee social security payments, workers' compensation insurance, unemployment insurance or health insurance. All medical, healthcare, or clinical decisions or actions shall be solely those of the Contractor.

8.0 Standards Of Service

LocumTenens.com is committed to customer satisfaction. Our risk management will periodically review the performance of Contractors while on assignment. You agree to assist LocumTenens.com in this process by providing us with meaningful feedback by (1) including locum tenens Contractors placed through us in the ongoing quality assurance/risk management programs of your facility, (2) providing necessary materials and reports on the performance of Contractors to LocumTenens.com's customer service/risk management team, medical director and legal counsel, and (3) advising us within 48 hours of your notification of any incident or claim involving a Contractor placed through LocumTenens.com so that we may assist in its resolution.

9.0 Term

- 9.1 The term of this Client Agreement is for a period of one (1) year and will automatically renew for successive one year terms unless otherwise terminated as provided herein.
- 9.2 Client may terminate this Client Agreement for any reason by giving at least thirty(30) days advance written notice of cancellation. Said thirty(30) day period shall commence upon the date of receipt of such notice by LocumTenens.com. Upon termination of this Client Agreement under this paragraph, you agree to pay us (i) all amounts owed hereunder for locum tenens coverage provided through the effective date of the termination plus (ii) the full amount payable and due for any uncompleted portion of the then existing locum tenens periods up to a maximum of thirty calendar days for each such period. You also agree to reimburse LocumTenens.com for any fees and/or charges incurred by us that result from the termination (such as airline penalties for cancellation and rescheduling, non-refundable housing deposits and the like) plus all other non-cancellable amounts which you would have been required to pay or reimburse us for through the remaining term of the then existing locum tenens periods (such as non-cancellable rental or lease costs).
- 9.3 LocumTenens.com may terminate this Client Agreement for any reason upon thirty(30) days prior written notice effective upon receipt by Client.

10.0 Mutual Indemnification

- 10.1 LocumTenens.com shall defend, indemnify, and hold harmless Client, its affiliates, officers, directors, employees, counsel, agents, and assigns from and against any and all losses, liabilities, damages, costs (including, without limitation, court costs and costs of appeal), and expenses (including, without limitation, reasonable attorneys' fees and expenses) (collectively, "Damages") caused or alleged to have been caused, directly or indirectly, by or as a result of any breach by us, or any failure, negligence, or willful misconduct by us in connection with our performance, of this Client Agreement.
- 10.2 Client shall defend, indemnify, and hold LocumTenens.com, its affiliates, officers, directors, employees, counsel, agents, and assigns, harmless from and against any and all Damages caused or alleged to have been caused, directly or indirectly, by or as a result of any breach by Client, or any negligence or willful misconduct by Client in connection with its performance, of this Client Agreement or the provision of medical or health care services by Client or the assigned facility.

11.0 General

11.1 The terms or conditions hereof (including the fees payable hereunder), the identity and/or qualifications of the Contractors, and any other information of LocumTenens.com which we deem to be proprietary, are confidential and are provided for your internal use only in connection with

your performance of this Client Agreement. You agree to not disclose, or discuss, any such information with any third party (including any Contractor) without our express written consent.

- 11.2 Any controversy or claim arising out of or relating to the Interpretation, enforcement or breach of this Client Agreement or the relationship between the parties hereto shall be resolved by binding arbitration in accordance with the Commercial Arbitration Rules for the American Arbitration Association at any arbitration hearing to be held in Atlanta, Georgia. If LocumTenens.com prevails, Client agrees to pay for reasonable expenses, including attorneys' fees. This paragraph shall be specifically enforceable. The award rendered by the arbitrator(s) may be entered and enforced in any court of competent jurisdiction.
- 11.3 Neither party shall be liable for any damages incurred by reason of any delay in fulfilling its respective obligations under this Client Agreement, if such delays are caused by conditions beyond the control of such party, including, but not limited to, governmental restrictions, natural disasters, work stoppages, labor disputes, war or insurrection, or acts of God.
- 11.4 The failure of either party to exercise any of its rights under this Client Agreement shall not be deemed to be a waiver of such rights.
- 11.5 This Client Agreement (which includes all attachments hereto, all coverage requests and addenda signed by the parties) is our entire agreement and supersedes all prior agreements between us. It binds us and each of our successors and assigns. This Client Agreement may not be assigned by you without our prior written consent. Any changes must be in writing and signed by both parties. If any provisions of this Client Agreement are found to be invalid, the other provisions will remain in full force and effect.
- 11.6 This Client Agreement does not create any rights in any party, other than LocumTenens.com and Client.
- 11.7 LocumTenens.com will retain its records and provide government authorities access to them consistent with Title 42 of the United States Code Annotated, Section 1395x(v)(1).
- 11.8 All notices, requests, instructions or other documents shall be in writing and shall be effective upon receipt, if given (i) in person or by courier or a courier service, (ii) by facsimile or other wire transmission, (iii) by electronic mail where receipt is confirmed, or (iv) by U.S. mail, certified or registered mall, postage prepaid, or overnight delivery service; addressed as set forth on the signature page.
- 11.9 This Client Agreement shall be governed by the laws of the State of Illfnols.

The effective date of this Client Agreement is extension, 2025

CLIENT:Will County Health Department	LocumTenens.com, LLC
Name:	Name: Zach Richardson
Sign:	Sign: H
Fitie:	Title: AVP-Behavioral Health
Date:	Date: 10/6/2025
Federal Employer ID:	Notice Address:
	2655 Northwinds Parkway Alpharetta, GA 30009

ADDENDUM FOR Will County Health Department DESCRIPTION OF CONTRACTORS AND FEE STRUCTURE

This Addendum serves as an amendment and supplement to any prior Client Agreements between Will County Health Department ("Client" or "you") and LOCUMTENENS.COM, LLC ("LocumTonens.com," "we" or "us"). This Addendum is a "Contractor Addendum" as described in the Client Agreement.

The parties agree that the following types of Contractors may be provided by LocumTenens.com under the Client Agreement. The fees applicable to such Contractors are described below.

Specialty:	Child & Adolescent Psychiatry (Doctor)	Child & Adolescent Psychiatry (Doctor)	Psychiatry (Doctor)	
RATES				
Regular (Onsite)		\$280.00-\$320.00 Per Hour	\$270.00-\$315.00 Per Hour	
Regular (Tele)	\$280.00-\$320.00 Per Hour	75555	42.0.00 45 jo.55 i 6i i logi	
Overtime	\$420.00-\$480.00 Per Hour after 40.00 Hour(s) Per Week.	\$420.00-\$480.00 Per Hour after 40.00 Hour(s) Per Week.	\$405.00-\$472.50 Per Hour after 40.00 Hour(s) Per Week.	
Daposit	\$15,000.00 Per Booking	\$15,000.00 Per Booking	\$15,000.00 Per Booking	
CALL			, and a second	
Weeknight Call (Onsite)		\$500.00-\$750.00 Per Day with a Callback Rate of \$420.00-\$480.00 Per Hour	\$500.00-\$750.00 Per Day with a Callback Rate of \$405.00-\$472.50 Per Hour	
Weeknight Call (Tele)	\$500.00-\$750.00 Per Day with a Callback Rate of \$420.00-\$480.00 Per Hour			
Weekend Call (Onsite)		\$1,300.00 Per Day with a Callback Rate of \$420.00-\$480.00 Per Hour	\$1,300.00 Per Day with a Callback Rate of \$405.00-\$472.50 Per Hour	
Weekend Call (Tele)	\$1,300.00 Per Day with a Callback Rate of \$420.00-\$480.00 Per Hour			
24 Hour Call (Onsite)		\$1,300.00 Per Day with a Caliback Rate of \$420.00-\$480.00 Per Hour	\$1,300.00 Per Day with a Caliback Rate of \$405.00-\$472.50 Per Hour	
24 Hour Call (Tele)	\$1,300.00 Per Day with a Callback Rate of \$420.00-\$480.00 Per Hour			
HOLIDAY				
\$1,300.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays		\$1,300.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holldays	\$1,300.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays	
EES & EXPENSES				
Per Diem		\$0.00-\$70.00 Per Booking Day	\$0.00-\$70.00 Per Booking Day	
Technology Fee	\$0.00-\$70.00 Per Booking Day		, , ,	

Specialty:	Psychiatry (Doctor)
RATES	
Regular (Tele)	\$270.00-\$315.00 Per Hour
Overtime	\$405.00-\$472.50 Per Hour after 40.00 Hour(s) Per Week.
Deposit	\$15,000.00 Per Booking
CALL	
Weeknight Call (Tele)	\$500.00-\$750.00 Per Day with a Callback Rate of \$405.00-\$472.50 Per Hour
Weekend Call (Tele)	\$1,300.00 Per Day with a Caliback Rate of \$405.00-\$472.50 Per Hour
24 Hour Call (Tele)	\$1,300.00 Per Day with a Callback Rate of \$405.00-\$472.50 Per Hour
HOLIDAY	
Holiday Premium	\$1,300.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays
FEES & EXPENSES	
Admin Fee	\$35.00 Per Booking Day
Technology Fee	\$0.00-\$70.00 Per Booking Day

Specialty:	Psychology (Advanced Practitioner)
RATES	- Systematical Flactational)
Regular (Onsite)	\$145.00-\$210.00 Per Hour
Regular (Tele)	\$145.00-\$210.00 Per Hour
Overtime	\$195.00-\$315.00 Per Hour after 40.00 Hour(s) Per Week.
Deposit	\$15,000.00 Per Booking
CALL	
Weeknight Call (Onsite)	\$375.00-\$500,00 Per Day with a Callback Rate of \$217.50-\$315.00 Per Hour
Weeknight Call (Tele)	\$375.00-\$500.00 Per Day with a Callback Rate of \$195.00-\$292.50 Per Hour
Weekend Call (Onsite)	\$750.00 Per Day with a Callback Rate of \$217.50-\$315.00 Per Hour
Weekend Call (Tele)	\$750.00 Per Day with a Caliback Rate of \$217.50-\$315.00 Per Hour
24 Hour Call (Onsite)	\$750.00 Per Day with a Callback Rate of \$217.50-\$315.00 Per Hour
24 Hour Call (Tele)	\$750.00 Per Day with a Caliback Rate of \$217.50-\$315.00 Per Hour
HOLIDAY	7
Holiday Premium	\$750.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays
FEES & EXPENSES	
Per Diem	\$0.00-\$70.00 Per Booking Day
Technology Fee	\$0.00-\$70.00 Per Booking Day

Rates are subject to change based upon market conditions.

Additional Provisions, if any: Section 2.4 should read: "Each Contractor shall provide a certificate of insurance showing that each Contractor has such malpractice insurance coverage in the amounts of \$1 million per claim and \$3 million per aggregate and which certificate names the Will County Health Department as an additional insured." Section 3.8 is waived. Section 4.2 should read: "Immediately upon your acceptance of a Contractor, you agree to pay LocumTenens.com a deposit in the amount specified on the applicable Contractor Addendum. Upon our receipt of your written request, you may apply the remaining balance of a deposit paid for a particular Contractor against payment of the last two invoices for your account relating to that Contractor. In addition, provided that all amounts owed to us are paid in full, we will refund the remaining balance of the deposit relating to that Contractor to you within 30 days. Section 4.3 is waived. Section 4.4 should read: "Should a Contractor render services or be scheduled for call on a holiday, all hours will be charged at a holiday premium rate, as outlined in the Contractor Addendum." Section 4.6 should read: "Payment for each time card period is due pursuant to the Illinois Local Government Prompt Payment Act." Section 5.1 should read: "You may request that a Contractor be removed or a placement cancelled (a) at any time if the request is based on your reasonable dissatisfaction with the clinical performance or professional conduct of such Contractor or (b) at any time and for any reason, provided that we receive from you at least 30 days prior written notice. If you request that a Contractor be removed or a placement cancelled under (a) above, written documentation detailing the specific reasons for the request for removal must be received by LocumTenens.com. In the event of a removal or cancellation under (a) or (b) above, you agree to pay us (i) all amounts owed hereunder for locum tenens coverage provided by such Contractor through the effective date of the cancellation, plus, but not being limited to, (II) full roundtrip transportation, local housing, local transportation, any and all fees and penalties incurred by us or Contractor as a result of having to cancel lease agreements for this assignment, plus, but not being limited to, (iii) all other amounts due directly from you to the Contractor." Section 6.3 should read: "The recruitment fees above are due on the first day the Contractor performs any of the services listed above. Pending our receipt of the recruitment fee, paid in full, all locum tenens fees based on the current rates structure will remain in full effect and due through the date on which the recruitment fee is paid in full. The locum tenens fees will NOT be credited against the separate recruitment fee. These obligations will remain in full effect regardless of the date of termination or cancellation of coverage or cancellation of this Client Agreement." Section 9.1 should read: "The term of this Client Agreement is for a period of one (1) year." Section 10.1 should read: "LocumTenens.com shall defend, indemnify, and hold harmless Client, its affiliates, officers, directors, employees, counsel, agents, and assigns from and against any and all losses, liabilities, damages, costs (including, without limitation, court costs and costs of appeal), and expenses (including, without limitation, reasonable attorneys' fees and expenses) (collectively, "Damages") caused or alleged to have been caused, directly or indirectly, by or as a result of any breach by us, or any Contractor or any failure, negligence, or willful misconduct by us or any Contractor in connection with our performance, of this Client Agreement." Section 11.2 is waived. Section 11.5 should read: "This Client Agreement (which includes all attachments hereto, all coverage requests and addenda signed by the parties) is our entire agreement and supersedes all prior agreements between us. It binds us and each of our successors and assigns. This Client Agreement may not be assigned by either Party without prior written consent. Any changes must be in writing and signed by both parties. If any provisions of this Client Agreement are found to be invalid, the other provisions will remain in full force and effect." Section 11.9 should read: "This Client Agreement shall be governed by the laws of the State of Illinois and Venue shall be in the 12th Judicial Circuit, Will County,

The provisions hereof shall control over any inconsistent provisions contained in the Client Agreement (to the extent of the inconsistency). The effective date of this Addendum is 64.69.255.

CLIENT: Will County Health Department	LOCUMTENENS.COM, LLC		
Name:	Name: Zach Richardson		
Sign:	Sign: July		
Title:	Title: AVP-Behavioral Health		
Date:	Date: 10/6/2025		

ADDENDUM FOR Will County Health Department DESCRIPTION OF CONTRACTORS AND FEE STRUCTURE

This Addendum serves as an amendment and supplement to any prior Client Agreements between Will County Health Department ("Client" or "you") and LOCUMTENENS.COM, LLC ("LocumTenens.com," "we" or "us"). This Addendum is a "Contractor Addendum" as described in the Client Agreement.

The parties agree that the following types of Contractors may be provided by LocumTenens.com under the Client Agreement. The fees applicable to such Contractors are described below.

Specialty:	Child & Adolescent Psychiatry (Advanced Practitioner)	Child & Adolescent Psychiatry (Advanced Practitioner)	Psychlatry (Advanced Practitioner)		
RATES		<u> </u>			
Regular (Onsite)		\$160.00-\$195.00 Per Hour			
Regular (Tele)	\$160.00-\$195.00 Per Hour		\$150.00-\$185.00 Per Hour		
Overtime	\$240.00-\$292.50 Per Hour after 40,00 Hour(s) Per Week,	\$240.00-\$292.50 Per Hour after 40.00 Hour(s) Per Week.	\$225.00-\$277.50 Per Hour after 40.00 Hour(s) Per Week.		
Deposit	\$15,000.00 Per Booking	\$15,000.00 Per Booking	\$15,000.00 Per Booking		
CALL					
Weeknight Call (Onsite)	Ŧ	\$375.00-\$500.00 Per Day with a Callback Rate of \$240.00-\$292.50 Per Hour			
Weeknight Call (Tele)	\$375.00-\$500.00 Per Day with a Callback Rate of \$240.00-\$292.50 Per Hour		\$375.00-\$500.00 Per Day with a Callback Rate of \$225.00-\$277.50 Per Hour		
Weekend Call (Onsite)		\$750.00 Per Day with a Callback Rate of \$240.00-\$292.50 Per Hour			
Weekend Call (Tele)	\$750.00 Per Day with a Callback Rate of \$240.00-\$292.50 Per Hour		\$750.00 Per Day with a Callback Rate of \$225.00-\$277.50 Per Hour		
24 Hour Call (Onsite)		\$750.00 Per Day with a Callback Rate of \$240.00-\$292.50 Per Hour			
24 Hour Call (Tele)	\$750.00 Per Day with a Callback Rate of \$240.00-\$292.50 Per Hour		\$750.00 Per Day with a Callback Rate of \$225.00-\$277.50 Per Hour		
HOLIDAY					
Holiday Premium	\$750.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays	\$750.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays	\$750.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays		
EES & EXPENSES					
Per Dlem		\$0.00-\$70.00 Per Booking Day			
Technology Fee	\$0.00-\$70.00 Per Booking Day		\$0.00-\$70.00 Per Booking Day		

Specialty:	Psychiatry (Advanced Practitioner)
RATE6	
Regular (Onsite)	\$150.00-\$185.00 Per Hour
Overtime	\$225.00-\$277.50 Per Hour after 40.00 Hour(s) Per Week.
Deposit	\$15,000.00 Per Booking
CALL	
Weeknight Call (Onsite)	\$375.00-\$500.00 Per Day with a Callback Rate of \$225.00-\$277.50 Per Hour
Weekend Call (Onsite)	\$750.00 Per Day with a Callback Rate of \$225.00-\$277.50 Per Hour
24 Hour Call (Onsite)	\$750.00 Per Day with a Callback Rate of \$225.00-\$277.50 Per Hour
HOLIDAY	
Hollday Premium	\$750.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays
FEES & EXPENSES	
Per Diem	\$0.00-\$70.00 Per Booking Day

Specialty:	Clinical Social Work (Advanced Practitioner)
RATES	(in the state of
Regular (Onsite)	\$90.00-\$135.00 Per Hour
Overtime	\$135.00-\$202.50 Per Hour after 40.00 Hour(s) Per Week.
Deposit	\$15,000.00 Per Booking
CALL	
Weeknight Call (Onsite)	\$225.00-\$450.00 Per Day with a Callback Rate of \$135.00-\$202.50 Per Hour
Weekend Call (Onsite)	\$550.00 Per Day with a Callback Rate of \$135.00-\$202.50 Per Hour
24 Hour Call (Onsite)	\$550.00 Per Day with a Caliback Rate of \$135.00-\$202.50 Per Hour
HOLIDAY	,
Hollday Premium	\$550.00 Per Day and a Multiplier of 1.50 applied to Rates and Call on Holidays
FEES & EXPENSES	, and a state of the state of t
Per Diem	\$0.00-\$70.00 Per Booking Day
Admin Fee	\$35.00 Per Booking Day

Rates are subject to change based upon market conditions.

Additional Provisions, if any: Section 2.4 should read: "Each Contractor shall provide a certificate of insurance showing that each Contractor has such malpractice insurance coverage in the amounts of \$1 million per claim and \$3 million per aggregate and which certificate names the Will County Health Department as an additional insured." Section 3.8 is waived. Section 4.2 should read: "Immediately upon your acceptance of a Contractor, you agree to pay LocumTenens.com a deposit in the amount specified on the applicable Contractor Addendum. Upon our receipt of your written request, you may apply the remaining balance of a deposit paid for a particular Contractor against payment of the last two invoices for your account relating to that Contractor. In addition, provided that all amounts owed to us are paid in full, we will refund the remaining balance of the deposit relating to that Contractor to you within 30 days. Section 4.3 is waived. Section 4.4 should read: "Should a Contractor render services or be scheduled for call on a holiday, all hours will be charged at a holiday premium rate, as outlined in the Contractor Addendum." Section 4.6 should read: "Payment for each time card period is due pursuant to the Illinois Local Government Prompt Payment Act." Section 5.1 should read: "You may request that a Contractor be removed or a placement cancelled (a) at any time if the request is based on your reasonable dissatisfaction with the clinical performance or professional conduct of such Contractor or (b) at any time and for any reason, provided that we receive from you at least 30 days prior written notice. If you request that a Contractor be removed or a placement cancelled under (a) above, written documentation detailing the specific reasons for the request for removal must be received by LocumTenens.com. In the event of a removal or cancellation under (a) or (b) above, you agree to pay us (i) all amounts owed hereunder for locum tenens coverage provided by such Contractor through the effective date of the cancellation, plus, but not being limited to, (ii) full roundtrip transportation, local housing, local transportation, any and all fees and penalties incurred by us or Contractor as a result of having to cancel lease agreements for this assignment, plus, but not being limited to, (iii) all other amounts due directly from you to the Contractor." Section 6.3 should read: "The recruitment fees above are due on the first day the Contractor performs any of the services listed above. Pending our receipt of the recrultment fee, paid in full, all locum tenens fees based on the current rates structure will remain in full effect and due through the date on which the recruitment fee is paid in full. The locum tenens fees will NOT be credited against the separate recruitment fee. These obligations will remain in full effect regardless of the date of termination or cancellation of coverage or cancellation of this Client Agreement." Section 9.1 should read: "The term of this Client Agreement is for a period of one (1) year." Section 10.1 should read: "LocumTenens.com shall defend, indemnify, and hold harmless Client, its affiliates, officers, directors, employees, counsel, agents, and assigns from and against any and all losses, liabilities, damages, costs (including, without limitation, court costs and costs of appeal), and expenses (including, without limitation, reasonable attorneys' fees and expenses) (collectively, "Damages") caused or alleged to have been caused, directly or indirectly, by or as a result of any breach by us, or any Contractor or any failure, negligence, or willful misconduct by us or any Contractor in connection with our performance, of this Client Agreement." Section 11.2 is waived. Section 11.5 should read: "This Client Agreement (which includes all attachments hereto, all coverage requests and addenda signed by the parties) is our entire agreement and supersedes all prior agreements between us. It binds us and each of our successors and assigns. This Client Agreement may not be assigned by either Party without prior written consent. Any changes must be in writing and signed by both parties. If any provisions of this Cilent Agreement are found to be invalid, the other provisions will remain in full force and effect." Section 11.9 should read: "This Client Agreement shall be governed by the laws of the State of Illinois and Venue shall be in the 12th Judicial Circuit, Will County,

The provisions hereof shall control over any inconsistent provisions contained in the Client Agreement (to the extent of the inconsistency). The effective date of this Addendum is Gut so 2025.

October 16, 2025

CLIENT: Will County Health Department	LOCUMTENENS.COM, LLC		
Name:	Name: Zach Righardson		
Sign:	Sign:		
Title:	Title: AVP-Behavioral Health		
Date:	Date: 10/6/2025		



WILL COUNTY BOARD OF HEALTH RESOLUTION #25-64

RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH WILL COUNTY, ILLINOIS

APPROVAL FOR THE APPROPRIATION OF FUNDS FOR ILLINOIS DEPARTMENT OF PUBLIC HEALTH STUDENT LOAN REPAYMENT PROGRAM GRANT - \$5,810

WHEREAS, the Will County Community Health Center of the Will County Health
Department received an Illinois Department of Public Health Student Loan Repayment Program
grant to provide funds for a specified licensed practitioner for educational loans; and

WHEREAS, the award of \$10,000 provides funding to support an established schedule of quarterly payments to the named practitioner in return for providing full time services; and

WHEREAS, the grant period is May 1, 2025, through April 30, 2026; and

WHEREAS, the funding appropriation presented covers December 1, 2024, through November 30, 2025; and

NOW, THEREFORE, BE IT RESOLVED, the Will County Board of Health hereby approves the additional appropriation of funds to the FY2025 Will County Health Department budget:

Revenue:

From:	2102-498010-120-34010-40	Anticipated New Revenue	\$ 5,810
To:	2102-435040-120-34060-40	IDPH Student Loan Repayment	\$ 5,810

Expenses:

From:	2102-599010-120-34010-40	Anticipated New Expenses	\$ 5,810
To:	2102-542560-120-34060-40	Subgrant Awards/Obligations	\$ 5,810

DATED THIS 15th day of October, 2025.

Chief Paul Hertzmann, President Will County Board of Health

Contract # 51580161M Appropriation: 733-48220-4900-0000 PY25

STATE OF ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Grant Agreement

The Illinois Department of Public Health, 535 West Jefferson Street, Springfield, IL 62761 or its successor, hereinafter referred to as the "Department" and, Will County Community Health Center, 1106 Neal Ave, Joliet, Illinois 60433 hereinafter referred to as the "Grantee" hereby agree as follows:

1. Authority:

- 1.1 The Department is authorized to make this grant pursuant to the 20 ILCS 2310-25, 2310-30, 2310-35, 110 ILCS 935, and 77 III Adm. Code 582.
- 1.2 The sole purpose of this grant is to provide funds to the Grantee for the named licensed practitioner employed by the above-mentioned Grantee, to be put directly towards the educational loans of that licensed practitioner, in return for providing Full or Half time services as described herein.
- 1.3 The Grantee represents and warrants that the grant application submitted by the Grantee is in all material aspects true and accurate; that it is authorized to undertake the obligations set forth in this Agreement and that it has obtained or will obtain all permits, licenses or other governmental approvals that may be necessary to perform the grant services.

2. Services:

- 2.1 The Grantee will provide the following clinical services and agrees to act in compliance with all state and federal statutes and administrative rules applicable to the provision of services pursuant to this grant agreement. The grant application submitted by the Grantee related to this grant agreement and on file with the Department is hereby incorporated and made a part of this agreement.
 - 2.1.1. Grantee certifies that it is a public or non-profit private entity located in a health professional shortage area (HPSA) in Illinois.
 - 2.1.2. Grantee agrees that the grant funds paid by the Department for the benefit of the practitioner shall not be used as a salary offset and that the salaries paid by Grantee to the practitioners are based on prevailing wages in the practitioner's area. Such wages are not set or determined by the Department.
 - 2.1.3. Grantee agrees it will treat any and all patients regardless of the ability of the individual to pay for primary care services, including, but not limited to, co-payments that may be required under programs established in Title XVIII (Medicare) of the Social Security Act, in Title XIX (Medicaid) of such Act, or private insurance plans. The practice will include hospital coverage appropriate to the needs of patients and to ensure continuity of care.
 - 2.1.4. Grantee agrees to prepare a schedule of patient fees or payments consistent with locally prevailing rates or charges and designed to cover the entity's reasonable costs, and prepare a corresponding schedule of discounts and make every reasonable and lawful effort to secure from patient's fees for services.

FY 2025 Revised September 2024

1

- 2.1.5. Grantee agrees to accept assignments of beneficiaries under the Medicare Program and enter into appropriate agreements with the state agency administering the Medicaid and SCHIP programs for payment of services under those programs (b)(2).
- 2.1.6. Grantee agrees to use grant funds exclusively to employ the licensed practitioner(s) at the approved site to provide office based primary clinical care as described herein in connection with the term described in Section 4 below at the following site(s):

Will County Community Health Center 1106 Neal Avenue Joliet, IL 60433

- 2.2. The Grantee shall not use the services of a subcontractor or subgrantee to fulfill any obligations under this Agreement.
- 2.3. The Grantee will not commingle funds between separate grants or subgrants, even if the grants or subgrants are related, or the same population is being served.
- 2.4. In connection with the services described in Section 2.1 above, the Department will compensate the Grantee as provided in section 5.1 of this agreement. The Grantee must pay the full \$10000 to practitioners as described in section 2.4.1 of this agreement. Grantee's payments to the pre-approved practitioner shall be on a monthly basis, in arrears. Grantee shall not make any such payment unless: (i) the pre-approved practitioner provides Full or Half Time, face to face clinical services at the pre-approved site as described herein; and (ii) Grantee provides the Department with quarterly reports fully documenting practitioner's Full or Half Time service and Grantee's full compliance with this agreement. If such conditions are not continuously met, Grantee shall withhold payments to the practitioner. For Full Time Service, Grantee shall pay the practitioner 1/24 of the total grant per month. For Part Time Service, the Grantee shall pay the Practitioner 1/48 of the total grant per month. All sums not earned by the Practitioner shall be withheld by Grantee and refunded to the Department upon request.
 - 2.4.1. Payments will be made by the Grantee to Ngozi Sheila Eboru payment in the amount of \$830.00 on May 31, 2025, June 30, 2025, July 31, 2025, August 31, 2025, September 30, 2025, October 31, 2025, November 30, 2025, December 31, 2025, January 31, 2026, February 28, 2026, March 30, 2026, and \$870.00 on April 30, 2026.
 - 2.4.2. The Grantee will submit cancelled checks within 60 days of issuance, quarterly, as proof of payment to practitioner of all awarded grant funds.
 - 2.4.3. Any and all obligations of the Department will cease immediately without penalty of further payment being required if the Illinois General Assembly or federal funding source fails to appropriate or otherwise make available sufficient funds for this grant agreement.
 - **2.4.4.** Any and all obligations of the Department will cease immediately without penalty of further payment being required if the federal source fails to approve this grant agreement.
 - 2.4.5. Payments will be made from the Department's Tobacco Settlement allocation.
 - 2.4.6. The Grantee will expend grant funds awarded under this Agreement in accordance with the budget approved and on file with the Department.

FY 2025 Revised September 2024

2

- 2.4.7. Grantee, through its agents, employees and contractors, will provide all equipment, supplies, services and other items of support which are necessary for the effective performance of the services, unless the agreement specifically set forth items of support to be provided by the Department.
- 2.4.8. Grantee shall not, in accordance with P.A. 096-1456, expend any grant funds paid from the State of Illinois General Revenue Funds for the following promotional items: calendars, pens, buttons, pins, magnets, and any other similar promotional items.
- 2.5. Grantee will not substitute or use different practitioners other than those expressly authorized by name this agreement.

3. <u>Definitions:</u>

- 3.1 Conflict of Interest: A Conflict of Interest occurs when an individual employed by Grantee, with the authority to enter into agreements on behalf of Grantee, has a private, personal, or financial interest which conflicts, or appears to conflict, with the individual's duties and responsibilities relating to grant performance and the management and expenditure of grant funds.
- 3.2 Grant Funds. Funds disbursed by the Department, to the Grantee, for use solely in furtherance of performing the services required by this Agreement. Grant Funds may comprise of State or federal monies, or a combination thereof, and are subject to the Grant Funds Recovery Act.
- 3.3 Grant Instructions. The Instructions provided to Grantee set forth the Grantee's reporting requirements and all other requirements under this Agreement. Failure to comply with the requirements set forth in the Grant Instructions will be considered a material breach of the performance required by this Agreement and may result in termination of the Agreement.
- 3.4 Operational Utilities. Utilities required for basic operational functions, without which Grantee's ability to perform under the Agreement would be substantially hindered. Operational utilities are electricity, gas, heat, air conditioning, water, cable, telephone, and internet. Rent is not considered an operational utility, and Grantee is not required to disclose its landlord or lessor to the Department even if Grantee uses the rented space for more than performance of this Agreement.
- 3.5 Party: A signatory to this Agreement. A subcontractor or subgrantee is not considered a Party.
- 3.6 Subcontractor: A third party, not a party to this Agreement, who provides or tenders goods of any kind, or performs services of any kind, for the Grantee.
- 3.7 Subgrantee: A third party, not a party to this Agreement, who performs services on behalf of the Grantee in furtherance of Grantee's performance of the services described herein during the term of this grant.
- 3.8 A Full-Time clinical practice is defined as a minimum of 40 hours each week in an office-based setting. The practice will include hospital coverage appropriate to the needs of patients and to ensure continuity of care. For all health professionals except obstetricians and gynecologists (OB/GYN) and certified nurse midwives (CNM), at least 32 of the minimum 40 hours each week must involve providing face to face clinical services in the ambulatory out-patient setting at the Department pre-approved practice site, during normally scheduled office hours. For an OB/GYN or CNM, the majority of the 40 hours per week (not less than 21 hours per week) must be devoted to providing ambulatory care services during normally scheduled office hours. Of the remaining 19 hours, no more than 8 hours may be spent on administrative activities. Grantee shall render full time service for the entire term of this agreement.
 - 3.6.1 The 40 hours per week may be compressed into no less than 4 days per week with no more than 12 hours

FY 2025 Revised September 2024

3

of regularly scheduled clinical work to be performed in any 24-hour period.

- 3.9 A Half-Time clinical practice is defined as a minimum of 20 hours each week in an office-based setting. The practice will include hospital coverage appropriate to the needs of patients and to ensure continuity of care. For all health professionals except obstetricians and gynecologists (OB/GYN) and certified nurse midwives (CNM), at least 16 of the minimum 20 hours each week must involve providing face to face clinical services in the ambulatory out-patient setting at the Department pre-approved practice site, during normally scheduled office hours. For an OB/GYN or CNM, the majority of the 20 hours per week (not less than 11 hours per week) must be devoted to providing ambulatory care services during normally scheduled office hours. Of the remaining 9 hours, no more than 4 hours may be spent on administrative activities. Grantee shall render half time service for the entire term of this agreement.
 - 3.9.1 The 20 hours per week may be compressed into no less than 2 days per week with no more than 12 hours of regularly scheduled clinical work to be performed in any 24-hour period.

4. Term:

The period of this Agreement is from 5/1/2025 through 4/30/2026; however, it may be terminated for convenience at any time under section 9.21 by the Department upon 30 days advance written notice to the Grantee. Upon such termination by the Department, the Grantee shall be entitled to retain all sums for work satisfactorily comploted prior to the Department's termination. In no event shall Grantee be entitled to retain any sums not earned by the licensed practitioner under the terms of this agreement. All sums received by Grantee for work that would have otherwise occurred after the Department's termination, shall be fully repaid to the Department no later than the end of the grant term. If the Department terminates this agreement under Section 9.21, then the penalties set forth in Section 10 shall not be applied to work not performed by Grantee after the Department's termination, unless Grantee fails to repay all unearned sums by the end of the Grant term. If Grantee fails to repay all sums due to the Department as stated herein, then all penalties in Section 10 shall apply and survive termination.

5. Compensation:

- 5.1 The Grant Funds shall be an amount not to exceed a maximum amount of \$10,000.
- 5.2 This Grant is funded through tobacco settlement funds.
- 5.3 Subject to 5.1 above, the Department will compensate the Grantee on the following basis:

Upon Execution

Upon execution of the grant agreement, payment will be initiated by the Department and sent to the Comptroller's office for disbursement.

- 5.4 The Grantee will expend Grant Funds awarded under this Agreement in accordance with the budget approved and on file with the Department and the terms of this agreement. Departmental approval of a budget does not constitute prior written consent for the use of such services.
- 5.5 Upon Departmental approval of Grantee's budget, the budget shall be incorporated as an appendix to this Agreement. Deviations from the approved budget may not be made without prior written approval from the Department. Approved deviations will be incorporated as an amendment to the budget but will not require an amendment to the Agreement.
- 5.6 The Grantee will not commingle funds between separate grants or subgrants, even if the grants or subgrants are related, or the same population is being served.
- 5.7 Grantee, through its agents, employees, and contractors will provide all equipment, supplies, services, and other items of support which are necessary for the effective performance of the services required by Section 2.1 of this Agreement, unless the Agreement specifically sets forth items of support to be provided by the Department.

FY 2025 Revised September 2024

4

5.8 Expenditure of Grant Funds; Right to Refund

Payment of the grant amount specified in Section 5.1 shall be made to the Grantee as specified herein and in accordance with the approved budget on file with the Department. Grant Funds provided under this Agreement must be expended only to perform the tasks set forth in Section 2.1 of this Agreement and in the grant application on file with the Department. In addition to reasons set forth in other sections of this Agreement, the Grantee must refund the Department if (i) the total grant expenditures are less than the amount vouchered to the Grantee from the Department pursuant to this Agreement; or (ii) Grant Funds have not been expended or legally obligated by a binding contractual obligation within the grant term. If the Department requires a refund under either of the above circumstances, the Grant Funds must be returned to the Department within forty-five (45) days of the end of the grant term or the otherwise effective Agreement termination date.

5.9 Grant Fund Recovery Act (30 ILCS 705/1, et seq.)

This Agreement is subject to all applicable provisions of the Illinois Grant Funds Recovery Act, including the requirement that any Grant Funds not expended or legally obligated at the expiration or termination of the Grant term must be returned to the Department within forty-five (45) days following said expiration or termination. Any interest earned on Grant Funds that is not expended or logally obligated during the Grant term must also be returned to the Department within forty-five (45) days following the expiration or termination of this Agreement. Grantee's failure to comply with any reporting requirements of the Department may result in the termination of this Agreement or suspension of payments under this Agreement.

6. Notices:

Notices and other communications provided for herein shall be given in writing by registered or certified mail, return receipt requested, by receipted hand delivery, by courier (UPS, Federal Express or other similar and reliable carrier), by e-mail, or by fax showing the date and time of successful delivery. Notices shall be sent to the individuals at the following respective addresses, including e-mail addresses, or to such other address as either Party may from time to time designate by notice to the other Party. Each such notice shall be deemed to have been provided at the time it was received. By giving notice, either Party may change the contact information.

To the Department:

Illinois Department of Public Health

Center for Rural Health 535 W. Jefferson Street Springfield, IL 62761-0002

To the Grantee:

Will County Community Health Center

1106 Neal Ave Joliet, Illinois 60433

E-mail: sknack@willcountyhealth.org

7. Public Information Requirements:

For the duration of the Agreement, the Grantee will prominently acknowledge the Department's participation as a partner in all grant-related press releases, publications, and promotional materials presented to the media or otherwise disseminated or published. The Grantee must provide the Department with copies of any proposed press releases, publications, and promotional materials at least fifteen (15) days before these materials are disseminated. Grantee will submit copies of any press releases, publications, and promotional materials to the Department's Program contact person(s). The Grantee shall not publish, disseminate, or otherwise release any promotional materials without first receiving the Department's express written approval.

FY 2025 Revised September 2024

5

Contract # 51580161M

E-mail: Kandice.Kent@Illinois.gov

The Grantee will provide adequate and reasonable advance notice of promotional events such as open houses, dedications, or other planned publicity events, and will coordinate with the Department in the planning of said events. Any materials or displays to be distributed in connection with the promotional event must be submitted to the Department in advance of publication or dissemination, and must prominently acknowledge the Department's participation in the event.

8. Grant Fund Control Requirements:

8.1 Audited Financial Statements:

- **8.1.1** This paragraph applies only to Grantees who receive \$150,000 or more in funding from the State of Illinois, including all Departments or Agencies thereof, and whether State or federal funds.
 - 8.1.1.1 Grantees not subject to OMB Uniform Grant Guidance shall provide audited financial statements, conducted in accordance with Government Auditing Standards, within one hundred-eighty (180) days after the Grantee's fiscal year ending on or after June 30, 2024. This deadline may be extended in the discretion of the Department's Chief Financial Officer.
 - 8.1.1.2 Grantees subject to OMB Uniform Grant Guidance shall provide a single audit report within one hundred-eighty (180) days after the Grantee's fiscal year ending on or after June 30, 2024.
 - 8.1.1.2.1 In the discretion of the Department's Chief Financial Officer, this deadline may be extended up to nine (9) months after the end of the Grantee's fiscal year without approval from the cognizant Federal agency.
 - 8.1.1.2.2 This deadline may be extended longer than nine (9) months after the end of the Grantee's fiscal year contingent upon approval by the cognizant Federal agency.
- 8.1.2 Audit Requirements for State Grants Audited by the Illinois Office of the Auditor General (OAG): Grantees required by the Illinois OAG to obtain a financial audit, compliance examination, or performance audit will be notified of this requirement by the OAG. The Grantee shall provide the Department with a copy of any financial audit, compliance examination, Single Audit, or performance audit conducted, along with the accompanying management letter, letter of immaterial findings and the SAS 114 letter within thirty (30) days of the Grantee's receipt of such audit report, but in no event later than nine (9) months following the end of the period for which the audit or examination was performed. The Audit Report must be provided to the Department for any year in which an audit is performed over the life of the grant.
- 6.1.3 <u>Discretionary Audit</u>: The Department may, at any time, and at its sole discretion, require a financial audit, a grant-specific audit, or any other audit, Management Letter and SAS 114 letter to be delivered within thirty (30) days of the Grantee's receipt of such audit report, but in no event later than nine (9) months following the end of the period for which the audit was performed.
- 8.1.4 <u>Audit Performance</u>: All audits shall be performed by an independent certified public accountant or accounting firm licensed by the appropriate licensing body in accordance with applicable auditing standards. The Grantee will fully comply and cooperate with any and all audits.

8.2 Consolidated Financial Reports:

- 8.2.1 This paragraph applies to all Grantees, unless exempted in part or in whole by program rules, regulations, or policies.
- 8.2.2 If requested by the Department, Grantees shall submit Consolidated Financial Reports within sixty (60) days after the Grantee's fiscal year ending on or after June 30, 2024. This report will be used for purposes of closing out the grant. In the event that this Agreement is terminated prior to the end of the State fiscal year,

FY 2025 Revised September 2024

6

the Grantee shall provide a close-out report within sixty (60) calendar days of such termination.

FY 2025 Revised September 2024

7

- 8.2.3 The Consolidated Financial Report and the Audited Financial Statements must cover the same period of time.
- 8.2.4 Consolidated Financial Reports must include an opinion from the report issuer on the Cost and Revenue schedules included in the Consolidated Financial Report.

8.3 Reporting Requirements:

In addition to any other documents specified in this Agreement, the Grantee must submit the following reports and information in accordance with the provisions hereof.

- 8.3.1 Department Defined Reporting Timelines. A Grantee receiving a grant award of \$25,000 or less shall file reports pursuant to the timeline defined by the Department. The report(s) shall describe the progress of the program, Project, and the use and expenditure of Grant Funds provided to the Grantee under this Agreement. The Department reserves the right to request revised reports or clarification of any statements made in such reports.
- 8.3.2 Expenditures and Project Activity Prior to Grant Execution. If the Agreement is executed more than ninety (90) days after the beginning date of the grant term provided in the Agreement, the Grantee must submit a Financial Status Report and a Project Status Report, in a format provided by the Department. The Reports must account for expenditures and Project activity incurred from the beginning of the grant term to the end of the month preceding the date of the Department's execution. If these Reports are required, the Department will not disburse any Grant Funds until the report is received and approved by the Department.
- **8.3.3** Additional Information: Upon request by the Department, the Grantee must, within the time directed by the Department, submit additional written reports regarding the Project, including, but not limited to, materials sufficient to document information provided by the Grantee.
- 8.3.4 <u>Submittal of Reports:</u> Submittal of all reports and documentation required under this Agreement should be submitted to the named individual as directed by the Department.

8.4 Grant Instructions

This grant agreement constitutes the grant instructions detailing reporting requirements and procedures relating to the grant. The Grantee is obligated to comply with those requirements and any revisions thereto in accordance with Section 8.8 of this Agreement. Failure to comply with the reporting requirements may be considered a material breach of the performance required by this Agreement and may result in termination of the Agreement pursuant to Section 8.8 and initiation of proceedings to recover all Grant Funds disbursed to the Grantee. If the grantee has additional questions about the grant, Section 6 of this agreement provides a contact for the Department.

8.5 Fiscal Recording Requirements

The Grantee's financial management system shall be structured to provide for accurate, current, and complete disclosure of the financial results of the Project funded under this grant program. The Grantee is accountable for all Grant Funds received under this grant. The Grantee shall maintain effective control and accountability over all Grant Funds, equipment, property, and other assets under the grant as required by the Department. The Grantee shall keep records sufficient to permit the tracing of Grant Funds to a level of expenditure adequate to ensure that Grant Funds have been appropriately expended. The Grantee must have internal controls consistent with generally accepted accounting practices adopted by the American Institute of Certified Public Accountants.

8.6 <u>Due Diligence in Expenditure of Grant Funds/Conflicts of Interest</u>

FY 2025 Revised September 2024

8

- 8.6.1 Grantee shall ensure that Grant Funds are expended in accordance with the following principles: (i) grant expenditures should be made in accordance with generally accepted sound business practices, arms-length bargaining, applicable federal and state laws and regulations; (ii) grant expenditures should conform to the terms and conditions of this Agreement and be actual and necessary expenditures; (iii) grant expenditures should not exceed the amount that would be incurred by a prudent person under the circumstances prevailing at the time the decision is made to incur the costs; and (iv) grant accounting should be consistent with generally accepted accounting principles.
- 8.6.2 An actual or potential Conflict of Interest between Grantee and any other party or entity involved in the subject matter of the agreement existing prior to execution of this Agreement must be disclosed to the Department as part of the grant application. An actual or potential Conflict of Interest between Grantee and party(s) or entity(s) involved in the subject matter of the agreement arising after execution of this Agreement must be disclosed to the Department within ten (10) days of discovery. Grantee must obtain express written permission to work with a party or entity involved in the subject matter of the agreement with whom it has an actual or potential conflict of interest. Failure to obtain such express written permission may be considered a material breach of the Agreement and may result in termination of the Agreement and initiation of proceedings to recover all Grant Funds disbursed to the Grantee.

8.7 Monitoring

The grant will be monitored for compliance in accordance with the terms and conditions of the Agreement, together with appropriate programmatic rules, regulations, policies and/or guidelines that the Department promulgates or implements. The Grantee must permit any authorized Department agent to access, examine and copy any and all grant-related documents, equipment, papers, or records, whether in hard copy or electronic, which support Grantee's performance of services under this Agreement.

8.8 Effect of Failure to Comply

The Grantee should refer to the Grant Instructions and the Reports Deliverable Schedule for the specific reporting requirements and due dates. Grantee must submit the reports in the format provided by the Department. Failure to comply with the reporting requirements shall result in the withholding of Grant Funds and/or the recovery of improper payments of Unallowable Costs. The Grantee's failure to comply with this requirement will be considered a material breach of the performance required by this Agreement and may result in termination of the Agreement and initiation of proceedings to recover all Grant Funds disbursed to the Grantee. Grantee's failure to comply with the reporting requirements of Section 8.3 and this Section shall be considered prima facie evidence of default, and may be admitted as such, without further proof, into evidence before the Department or in any other legal proceeding.

9. General Provisions:

9.1 Availability of Appropriation/Sufficiency of Funds

This grant is contingent upon and subject to the availability of sufficient funds. The Department may terminate or suspend this grant, in whole or in part, without penalty or further payment being required, if (i) the State funds have not been appropriated to the Department (or sufficient Federal funds have not been made available to the Department by the Federal funding source), (ii) the Governor or the Department reserves appropriated funds, or (iii) the Governor or the Department determines that appropriated funds (or Federal funds) may not be available for payment. The Department shall provide notice, in writing, to Grantee of any such funding failure and its election to terminate or suspend this grant as soon as practicable. Any suspension or termination pursuant to this Section will be effective upon Grantee's receipt of notice.

9

FY 2025 Revised September 2024

9.2 Audit/Retention of Records (30 ILCS 500/20-65)

Grantee shall maintain all books and records relating to the performance of the Agreement or subgrant and necessary to support amounts charged to the State under the Agreement. Books and records, including information stored in databases or other computer systems, shall be maintained by the Grantee for a period of three (3) years from the date of final payment under the Agreement or completion of the Agreement, whichever is later. If federal funds are used to pay Agreement costs, the Grantee must retain records for five (5) years. Books and records required to be maintained under this Section shall be available for review or audit by representatives of: the granting Agency, the Auditor General, the Attorney General, the Executive Inspector General, the Chief Procurement Officer, State of Illinois internal auditors or other governmental entities with monitoring authority, upon reasonable notice and during normal business hours. Grantee shall cooperate fully with any such audit and with any investigation conducted by any of these entitles. Fallure to maintain books and records sufficient to fully support purported disbursements, as required by this Section, shall establish a presumption in favor of the State for the recovery of any funds paid by the State under the Agreement. Grantee shall not impose a charge for audit or examination of the Grantee's books and records.

9.3 Time is of the Essence

Time is of the essence with respect to Grantee's performance of this Agreement. Grantee shall continue to perform its obligations while any dispute concerning the Agreement is being resolved unless otherwise directed by the State.

9.4 No Waiver of Rights

Except as specifically waived in writing, failure by a Party to exercise or enforce a right does not waive that Party's right to exercise or enforce that or other rights in the future.

9.5 Force Majeure

Failure by either Party to perform its duties and obligations will be excused by unforeseeable circumstances beyond its reasonable control and not due to its negligence including acts of nature, acts of terrorism, riots, labor disputes, fire, flood, explosion, and governmental prohibition. The non-declaring Party may cancel the Agreement without penalty if performance does not resume within thirty (30) days of the declaration.

9.6 Confidential Information

Each Party to this Agreement may have or gain access to confidential data or information owned or maintained by the other Party in the course of carrying out its responsibilities under this Agreement. Grantee shall presume all information received from the State or to which it gains access pursuant to this Agreement is confidential. Grantee information, unless clearly marked as confidential and exempt from disclosure under the Illinois Freedom of Information Act, shall be considered public. No confidential data collected, maintained, or used in the course of performance of the Agreement shall be disseminated except as authorized by

law and with the written consent of the disclosing Party, either during the period of the Agreement or thereafter. The receiving Party must return any and all data collected, maintained, created or used in the course of the performance of the Agreement, in whatever form it is maintained, promptly at the end of the Agreement, or earlier at the request of the disclosing Party, or notify the disclosing Party in writing of its destruction. The foregoing obligations shall not apply to confidential data or information lawfully in the receiving Party's possession prior to its acquisition from the disclosing Party; received in good faith from a third-party not subject to any confidentiality obligation to the disclosing Party; or which later becomes publicly known through no breach of confidentiality obligation by the receiving Party; or is independently developed by the receiving Party without the use or benefit of the disclosing Party's confidential information.

9.7 Use and Ownership

FY 2025

Revised September 2024

10

All work performed or supplies created by Grantee under this Agreement, whether written documents or data, goods, or deliverables of any kind, shall be deemed work-for-hire under copyright law and all intellectual property and other laws, and the State of Illinois is granted sole and exclusive ownership to all such work, unless otherwise agreed in writing. Grantee hereby assigns to the State all right, title, and interest in and to such work including any related intellectual property rights, and/or waives any and all claims that Grantee may have to such work including any so-called "moral rights" in connection with the work. Grantee acknowledges the State may use the work product for any purpose. Confidential data or information contained in such work shall be subject to confidentiality provisions of this Agreement.

Equipment and material authorized to be purchased with Grant Funds becomes the property of the Grantee. Grantee will maintain an inventory or property control record for all equipment and material purchased with Grant Funds. During the grant term, the Grantee must: (i) use equipment and materials acquired with Grant Funds only for the approved Project purposes set forth in Section 2.1; (ii) provide sufficient maintenance on the equipment and materials to permit achievement of the approved Project purposes; and (iii) maintain, at its own expense, insurance coverage on all equipment and material purchased with Grant Funds, for its full insurable value, against loss, damage and other risks ordinarily insured against by owners or users of similar equipment and material in similar businesses. The Grantee is prohibited from selling, transferring, encumbering (other than original financing) or otherwise disposing of said equipment or material during the grant term without prior written approval of the Department. The Department reserves the right to inspect, at any time, such equipment and materials. All Grantee actions involving equipment and materials shall be in compliance with the applicable state and federal law.

9.8 Indemnification and Liability

The Grantee shall indemnify and hold harmless the State of Illinois, its agencies, officers, employees, agents and volunteers from any and all costs, demands, expenses, losses, claims, damages, liabilities, settlements and judgments, including in-house and contracted attorneys' fees and expenses, arising out of: (i) any breach or violation by Grantee of any of its certifications, representations, warranties, covenants or agreements; (ii) any actual or alleged death or injury to any person, damage to any property or any other damage or loss claimed to result in whole or in part from Grantee's negligent performance; or (iii) any act, activity or omission of Grantee or any of its employees, representatives, subcontractors or agents. Neither Party shall be liable for incidental, special, consequential or punitive damages.

9.9 Independent Contractor

Grantee shall act as an independent contractor and not an agent or employee of, or joint venturer with, the State. All payments by the State shall be made on that basis.

9.10 Compliance with the Law

The Grantee, its employees, agents, and subcontractors shall comply with all applicable federal, state, and local laws, rules, ordinances, regulations, orders, federal circulars and all license and permit requirements in the performance of this Agreement. Grantee shall be in compliance with applicable tax requirements and shall be current in payment of such taxes. Grantee shall obtain, at its own expense, all licenses and permissions necessary for the performance of this Agreement.

9.11 Background Check

Whenever the State deems it reasonably necessary for security reasons, the State may conduct, at its expense, criminal and driver history background checks of Grantee's and subcontractor's officers, employees or agents. Grantee shall immediately reassign any such individual who, in the opinion of the State, does not pass the background checks.

9.12 Applicable Law

FY 2025 Revised September 2024

11

This Agreement shall be construed in accordance with, and is subject to, the laws and rules of the State of Illinois. The Department of Human Rights' Equal Opportunity requirements (44 III. Adm. Code 750) are incorporated by reference. Any claim against the State arising out of this Agreement must be filed exclusively with the Illinois Court of Claims (705 ILCS 505/1). The State shall not enter into binding arbitration to resolve any Agreement dispute. The State of Illinois does not waive sovereign immunity by entering into this Agreement. The official text of cited statutes is incorporated by reference (An unofficial version can be viewed at http://www.ilga.gov/legislation/ilcs/ilcs.asp). In compliance with the Illinois and federal Constitutions, the Illinois Human Rights Act, the U. S. Civil Rights Act, and Section 504 of the federal Rehabilitation Act and other applicable laws and rules the State does not unlawfully discriminate in employment, agreements, or any other activity.

9.13 Contractual Authority

The Agency that signs for the State of Illinois shall be the only State entity responsible for performance and payment under the Agreement. When the Chief Procurement Officer or authorized designee signs in addition to an Agency, they do so as approving officer and shall have no liability to Grantee. When the Chief Procurement officer or authorized designee signs a master agreement on behalf of State agencies, only the Agency that places an order with the Grantee shall have any liability to Grantee for that order.

9.14 Modifications and Survival

Amendments, modifications, and waivers must be in writing and signed by authorized representatives of the Partles. Any provision of this Agreement officially declared void, unenforceable, or against public policy, shall be ignored and the remaining provisions shall be interpreted, as far as possible, to give effect to the Partles' intent. All provisions that by their nature would be expected to survive, shall survive termination. In the event of a conflict between the State's and the Grantee's terms, conditions, and attachments, the State's terms, conditions and attachments shall prevail.

9.15 Performance Record/Suspension

Upon request of the Department, Grantee shall meet to discuss performance or provide Agreement performance updates to help ensure proper performance of the Agreement. The Department may consider Grantee's performance and compliance with all applicable laws, under this or any other current grant agreement with the Department, in determining whether to continue the Agreement and assessing Grantee's eligibility to receive future grants. After due consideration of any non-performance or non-compliance with the requirements outlined in the Grant Instructions Packet, including failure to perform or comply, under this Agreement or any other current grant agreement with the Department, the Department may, at its sole discretion, immediately suspend this Agreement or any other current grant agreement between Grantee and the Department. Suspension under this Section shall be effective upon Grantee's receipt of notice.

9.16 Freedom of Information Act

This Agreement and all related public records maintained by, provided to, or required to be provided to the State are subject to the Illinois Freedom of Information Act, notwithstanding any provision to the contrary that may be found in this Agreement.

9.17 <u>Amendments</u>

This Agreement may not be amended without prior written approval of both the Grantee and the Department. The agreement may not be amended verbally.

9.18 Assignment

The Grantee understands and agrees that this Agreement may not be sold, assigned, or transferred in any manner and that any actual or attempted sale, assignment, or transfer without the prior written approval of the Department shall render this Agreement null, void, and of no further effect.

FY 2025

Revised September 2024

12

9.19 Termination for Cause

The Department may terminate this Agreement, in whole or in part, if: (i) the Grantee commits any illegal act; (ii) the Grantee breaches any material term, condition, or provision of this Agreement or is in material violation of a provision of this Agreement; (iii) the Department determines that the Grantee lacks the financial resources to perform this Agreement; (iv) the Department determines that the actions or inactions of the Grantee or its agents, have caused, or reasonably could cause, jeopardy to health, safety, or property; (v) the Grantee has notified the Department that it is unable or unwilling to perform the Agreement; (vi) the Department has reasonable cause to believe that the Grantee cannot lawfully perform the Agreement; or (vii) the Grantee's performance under any other current grant agreement causes the Department to reasonably believe that the Grantee is unable to perform the Agreement.

Termination under this section, whether in whole or in part, shall be effective upon Grantee's receipt of notice. For termination due to any of the causes contained in this Section, the Department retains its rights to seek any available legal or equitable remedies and damages.

9.20 <u>Termination for Convenience</u>

The Department may, for its convenience and with thirty (30) days prior written notice to Grantee, terminate this Agreement in whole or in part and without payment of any penalty or incurring any further obligation to the Grantee. However, in the event that the Department terminates this agreement for convenience, Grantee shall still be obligated to submit timely and accurate close-out reports and other reports required by this agreement and the Department.

Following termination for convenience, the Grantee shall be entitled to payment upon (i) submission of satisfactory proof of Full Time or Half Time clinical services as described above by a properly licensed practitioner, properly provided in compliance with this Agreement up to and including the date of termination; and (ii) submission of all required reports. Any funds advanced by the Department but not so earned by Grantee and properly paid to the licensed practitioner according to terms herein shall be returned to the Department within Forty-five (45) days.

9.21 Health Insurance Portability and Accountability Act Compliance

Grantee shall comply with the applicable provisions of the Health Insurance Portability and Accountability Act (HIPAA), including, but not limited to statute, 42 U.S.C 132d, and applicable regulations, 45 C.F.R 160, 162, and 164, as may be promulgated or amended over time.

9.22 Inducement Resolution

It is the intent of the State that all or a portion of the costs of this project will be paid or reimbursed from the proceeds of tax-exempt bonds subsequently issued by the State.

9.23 Linguistic and Cultural Competency Guidelines and Assurance

The State of Illinois' Linguistic and Culturally Competency Guidelines (LCC Guideline) are incorporated into and made a part of this Agreement. The purpose of the LCC Guidelines is to improve access to culturally competent programs, services, and activities for Limited English Proficient (LEP) customers, persons who are hard of hearing or Deaf, and persons with low literacy. More information about the LCC Guidelines can be found at http://www.dhs.state.il.us/page.aspx?item=66602 (this website also has available training resources and examples).

9.24 Entire Agreement

The Department and the Grantee understand and agree that this Agreement constitutes the entire Agreement between them and that no promises, terms, or conditions not recited or incorporated within this Agreement, including prior Agreements or oral discussions not incorporated within this Agreement, shall be binding upon either the Grantee or the Department.

13

FY 2025 Revised September 2024

- Federal State Loan Repayment Program (SLRP) General Grant Provisions: This Section is applicable to SLRP program requirements.
 - 10.1 Grantee certifies that during the last five (5) years no order, judgment or decree of any Federal authority has been issued barring, suspending, or otherwise limiting its right to contract with any governmental entity, including school districts, or to engage in any business practice or activity. Grantee further certifies that it will include this certification within every subgrant related to the performance of this Agreement.
 - 10.2 The federal whistleblower protections of 41 U.S.C. 4712 apply to all Grantees, Grantee employees, contractors, and subgrantees working in relation to this Agreement. Grantee certifies that in accordance with the Pilot Program for Enhancement of Contractor Employee Whistleblower Protections, Grantee will (i) inform its employees working on this grant that they are subject to the whistleblower rights and remedies of the pilot program; (ii) inform its employees in writing of employee whistleblower protections under 41 U.S.C. 4712 in the predominant native language of the workforce; and (iii) include this certification and requirements in any agreement made with a contractor or subgrantee.
 - All else notwithstanding, if the Grantee or licensed practitioner fails for any reason(s) to begin and/or to fully complete the full grant service term, as specified in Sections 2 and 4 above, then Grantee shall be liable to the Department for an amount equal to the number of months of obligated service not completed by Grantee, multiplied by \$7,500, plus interest on the above amounts at the maximum legal prevailing rate of interest, as determined by the Treasurer of the United States from the date of breach. However, in no event will the amount the Department will be entitled to recover be less than \$31,000.
 - 10.4 Any amount the Department is entitled to recover shall be paid within 1 year of the date the Director determines that the applicant is in breach of this written contract, unless otherwise specified herein.
 - 10.5 Failure to pay the Department debt by the due date has the following consequences:
 - **10.5.1** The debt may be reported to credit reporting agencies. Any loan repayment debt more than 60 days past due shall be reported to all appropriate credit reporting agencies.
 - 10.5.2 All Grant funds shall be subject to all provisions of the Grant Funds Recovery Act, 30 ILCS 705, which are incorporated herein by reference. At the Department's option, the Department may: (i) initiate Grant Fund Recovery measures; and/or (ii) refer the matter to the Illinois Attorney General's office to invoke all lawful remedles which may include, but are not limited to, litigation or referral to a debt collection agency.
 - 10.5.3 State payments due to the grantee (e.g., state income tax refund, other Grants and/or other State payments) may be offset by the Illinois Department of Revenue to repay a delinquent loan repayment debt.
 - 10.5.4 The Grantee is required to reimburse the State of Illinois for all costs and expenses, including but not limited to attorney fees, incurred by Department or an agent of the State for the successful action against the Grantee for a breach of any provision of this grant agreement. The Grantee understands and agrees that the Department may utilize any and all lawful means of collection including, but not limited to administrative, court action, collection agency, and/or offset.
 - 10.6 A financial obligation under the loan repayment program may only be discharged in bankruptcy if the discharge is granted more than seven years after the due date and only if a bankruptcy court determines that the non-discharge of the debt would be unconscionable subject to applicable law.
 - 10.7 Any transfer, change or termination of or to the licensed provider's approved practice from the approved Grantee's location prior to the full term and full completion of this agreement, for any reason(s), shall require the return of all Anneamed money from the Grantee to the Department within 45 days of the provider's departure from the approved practice location.

FY 2025 Revised September 2024

14

- 10.8 The Grantee is required to reimburse the State of Illinois for all expenses, including but not limited to attorney fees, incurred by Department or an agent of the State for the successful action against the Grantee for a breach of any provision of this grant agreement. The Grantee understands and agrees that the Department may utilize any lawful means of collection including, but not limited to court action, collection agency, and offset.
- 10.9 The Grantee certifies it does not have a judgment lien against the Grantee's funds or property for a debt to the State of Illinois or the United States.
- 10.10 The Grantee agrees the Department may verify compliance with the performance pursuant to any and all provisions of this grant agreement and grants permission to any and all persons and institutions to release all information requested by the Department.
- 10.11 In the event the Illinois Family Practice Residency Act is amended while this grant agreement is in effect, this grant agreement shall be amended automatically to incorporate such amendments to such Law, provided that obligations of the Grantee shall not be increased.
- 10.12 In the event any portion of this grant agreement is held invalid by any court of competent jurisdiction remaining terms shall remain in full force and effect.
- 10.13 Obligations of the Grantee shall remain in full force and effect until the service obligation is fulfilled or all funds are repaid to the Department pursuant to the terms of this grant agreement.
- 10.14 The Grantee agrees to comply with the provisions of the National Health Service Corps Loan Repayment Program.
- 10.15 The Grantee understands that misrepresentation of the facts presented in the application or failure to meet the practice terms will be considered a breach of grant agreement.
- 10.16 The Grantee agrees it will accept assignment under Section 1842(b)(3)(B)(ii) of the Social Security Act for all services for which payment may be made under Part B of Title XVIII (Medicare). The Grantee further agrees to enter into an appropriate agreement with the Illinois Healthcare and Family Services which administers the Illinois Medicaid plan for medical assistance under Title XIX to provide service to individuals entitled to medical assistance under the plan.
- 10.17 The Grantee agrees that, in providing primary health services, the site will not, in the case of an individual seeking care, discriminate on the basis of the ability of the individual to pay for such care or on the basis that payment for such care will be made pursuant to the program established in Title XVIII (Medicare) of the Social Security Act or pursuant to the program established in Title XIX (Medicaid) of such Act and the Children's Health Insurance Program, as appropriate for his/her designated discipline, to utilize a sliding fee scale.
- 10.18 If the scheduled licensed practitioner becomes totally and permanently disabled or dies, the Grantee will return all unearned-Grant funds to the Department within 45 days of the determination of the disability or death. For the purposes of this grant agreement, disability means a physical or mental disease, impairment or condition which prevents employment in the Grantee's health profession with or without reasonable accommodation. Proof of disability or death shall be a declaration from the Social Security Administration, Illinois Industrial Commission, Illinois Department of Public Health, Division of Vital Records, Department of Defense or an insurer authorized to transact business in the State of Illinois who is an insurer of the Grantee providing disability or life insurance coverage to the Grantee. The Grantee shall provide immediate written notice to this office.
- 10.19 A failure of Grantee to contemporaneously create and thereafter maintain for no less than three years, complete and accurate records sufficient to clearly demonstrate full compliance with all terms and conditions of this grant shall create a presumption in favor of the Department for recovery of all such Grant funds.
- 10.20 The Grantee shall employ the primary care service provider named in Section 2.4.1 on a full or half-time clinical basis in a current federally designated Health Professional Shortage Area (HPSA) in Illinois as designated under Section 332 of the Public Health Service Act (42 CFR 5) as pre-authorized by the Department.

FY 2025

Revised September 2024

15

11. Taxpayer Status:

I certify, under penalty of perjury, that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been
 notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to
 report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 2. I am a U.S. person (including a U.S. resident alien).
 - If you are an individual, enter your name and SSN as it appears on your Social Security Card.
 - If you are a sole proprietor, enter the owner's name on the name line followed by the name of the business and the owner's SSN or EIN.
 - If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's name
 on the name line and the d/b/a on the business name line and enter the owner's SSN or EIN.
 - If the LLC is a corporation or partnership, enter the entity's business name and EIN and for corporations, attach IRS acceptance letter (CP261 or CP277).
 - For all other entities, enter the name of the entity as used to apply for the entity's EIN and the EIN.

Name:

Business Name: Will County Community Health Center

Taxpayer Identification Number:

Social Security Number:

Or

Employer Identification Number: 36-3971168

Legal Status: Tax Exempt

FY 2025 Revised September 2024

16

Contract # 51580161M

12. Attestation:

Grantee certifies under oath that Grantee has read, understands, and agrees to all provisions of this Agreement and that the information contained in the Agreement is true and correct to the best of his/her knowledge, information and belief, that the funds awarded under this grant shall be used only for the purposes described in this Agreement and that the Grantee shall be bound by the same. Grantee acknowledges that the award of Grant Funds under this Agreement is conditioned upon this certification/attestation.

For the Grantee:	For the Departr	
chrabet Motta	Kandic	e Kent
Grantee Signature	Recommended I	Ву
Elizabeth Bilotta Coff/25	Sameer Vohra by Jaime Linderman	
	Dr. Sameer Vohra Illinois Department	•
CEO Title	Date	
108703-00 Illinois Department of Human Rights Number (if applicable)	
Date		



WILL COUNTY BOARD OF HEALTH RESOLUTION #25-65

RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH WILL COUNTY, ILLINOIS

APPROVAL TO SURPLUS EQUIPMENT- LISTING ATTACHED

WHEREAS, the Will County Health Department requires the disposal and/or recycling of medical equipment, furniture, office equipment, and computer equipment for the Community Health Center and Administration divisions.

NOW, THEREFORE, BE IT RESOLVED, the Will County Board of Health hereby approves the disposal and/or recycling of the attached listings of items.

DATED THIS 15th day of October, 2025.

Will County Purchasing - 302 N. Chicago St. - Joliet, IL 60432 (815) 740-4605 Fax (815) 740-4604

Department : Will County Health Department	Phone No.: 815-727-8480	Resolution No.:	25-65
Approved By:	Signature:	Date Approved:	

(1)	(2)	(3)		(4)		T						T
Category	Trf Asset / Surplus Tag No.	Item/Description	Age	Condition (W/NW)	Vehicle Mileage	Serial No./ Vin No.	County Tag No	Transferred to Warehouse/Dept/ Charitable Inst	Received By (Signature)	Date Received	Disposed of by Warehouse/ Department	(5)
Office Equipment		HP 1320 Laser jet printer	10 years	nw		cndc52wjp	4683	No				DF
Office Equipment		Canon imageclass mf236bn printer	8 years	nw		ycg36326	22090	No				DF
Computer		HP ProBook 450 G6	6 years	nw		5CD951333B	22500	No				TC
Computer		Lenovo Thinkpad Ultrabook	5 years	nw		TP00048A	18720	No				TC
Computer		Lenovo Thinkpad w/ attached UltraBase lock	5 years	nw		0B67692		No				TC
Computer		HP ProBook 450 G6	6 years	nw		5CD939DBM3		No				TC
Computer		HP EliteDesk 800G6 SFF	5 years	nw	2	MXL1172358	24691	No				тс
Computer		HP ProDesk	5 years	nw		MXL14235XD		No				TC
Computer		HP EliteOne 800 G5	6 years	nw		MXL9414R7P	22099	No				TC
Computer		HP ProBook 450 G5	8 years	пw		5cd82066pz	19290	No				df
Computer		HP ProBook 450 G5	8 years	nw		5cd951334j		No				df
Computer		HP ProBook 450 G5	8 years	nw		5cd0162ghz	24080	No				df
Computer		lenovo destktop a27	4 years	пw		mjzrzr1	14846	No				df
Computer		lenovo e93z	9 years	nw		mj006zxw	16485	No				df
Computer		HP Pro1 g4	7 years	nw		8cg917093x		No				df
Computer		HP EliteDesk 800G6 SFF	5 years	nw		mxl11732rz24690		No				df

(1) Category- Office Equipment, Furniture, Computer, Machinery, Vehicle, Others

(2) Surplus Tag No.- Tag Number assigned by the Purchasing Department

(3) Item/Description - If transferring computer equipment, include operating system description. Ex: Windows 2000

(4) Condition - W-Working; NW-Non-Working

(5) Initial- Department Head should initial for disposal of non-computer broken item(s)

-If Maintenance is disposing of the item(s), the Maintenance Staff should initial

-Computer Staff (either ICT or department staff) should initial to verify hard drive was stripped.

Will County Purchasing - 302 N. Chicago St. - Joliet, IL 60432 (815) 740-4605 Fax (815) 740-4604

Department : Will County Health Department	Phone No.: 815-727-8480	Resolution No.:	25-65
Approved By:	Signature:	Date Approved:	

(1)	(2)	(3)		(4)								(5)
	Trf Asset /							Transferred to		1 1	Disposed of	(5)
0.1	Surplus		1	Condition	Vehicle	Serial No./	County	Warehouse/Dept/	Received By	Date	by Warehouse/	1
Category	Tag No.	Item/Description	Age	(W / NW)	Mileage	Vin No.	Tag No.	Charitable Inst	(Signature)	Received	Department	Initial
Office Equipment		dymo label printer	10 years	nw		1750283		No				df
Office Equipment		epson scanner	8 years	nw		RYTW029713		No				DF
Computer		HP ELITEONE 800	6 years	nw		MXL9333QVVB	22085	No				DF
Computer		HP ELITEONE 800	6 years	nw		MXL11231PS	22067	No				DF
Computer		hp probook 450 g6	6 years	nw		5CD939DBLT	22092	No				DF
Computer		hp probook 450 g7	5 years	nw		5CD019G4R9	24088	No				df
Computer		microsoft surface pro	6 years	nw		17503564353	18773	No				df
Computer		microsoft surface pro	6 years	nw		543262353	18784	No				df
Computer		microsoft surface pro	6 years	nw		36231601953	24118	No				df
Computer		microsoft surface laptop	6 years	nw		26880694257		No				df
Computer		microsoft surface laptop	6 years	nw		25694202357		No				df
Computer		lenovo m92z	13 years	nw		mj91yv1	16487	No				df
Computer		lenovo m900	9 years	nw		mj946gzq		No				df
Computer		hp eliteone 800	6 years	nw		mxl9412r7p	22099	No				df -
Office Equipment		Acer cd241h monitor	10 years	пw		mmt4maa001723009d74 201		No				df
omos Equipment		NOT SUZ-FIT HIGHIGH	To years	TIV		201		No				

(1) Category-

Office Equipment, Furniture, Computer, Machinery,

Vehicle, Others

(3) Item/Description - If transferring computer equipment, include operating system description. Ex: Windows 2000

⁽²⁾ Surplus Tag No.- Tag Number assigned by the Purchasing Department

⁽⁴⁾ Condition - W-Working; NW-Non-Working

⁽⁵⁾ Initial- Department Head should initial for disposal of non-computer broken item(s)

⁻If Maintenance is disposing of the item(s), the Maintenance Staff should initial

⁻Computer Staff (either ICT or department staff) should initial to verify hard drive was stripped

Will County Purchasing - 302 N. Chicago St. - Joliet, IL 60432 (815) 740-4605 Fax (815) 740-4604

Department : Will County Health Department	Phone No.: 815-727-8480	Resolution No.:	25-65
Approved By:	Signature:	Date Approved:	

(1)	(2)	(3)		(4)						1		T (5)
Category	Trf Asset / Surplus Tag No	Item/Description	Age	Condition (W/NW)	Vehicle Mileage	Serial No./ Vin No.	County Tag No	Transferred to Warehouse/Dept/ Charitable Inst	Received By (Signature)	Date Received	Disposed of by Warehouse/ Department	(5)
Computer		HP Probook 450 G7	5 years	nw		5CD0162GJC	24097	No				tc
Computer		HP Probook 450 G7	5 years	nw		5CD019G4SB	24086	No				tc
Computer		HP Probook 450 G7	5 years	nw		5CD029DYBM	25044	No				tc
Computer		HP Probook 450 G7	5 years	nw		5CD019G4RJ	24108	No				tc
Computer		HP Probook 450 G7	5 years	nw		5CD0162GKP	(faded)	No				tc
Computer		HP Probook 450 G7	5 years	nw		5CD0162GLL	24121	No				
Computer		HP Probook 450 G7	5 years	nw		5CD029DYL2	25033	No				tc
Computer		ViewSonic VG2228WM	14 years	nw		STB161940661	29038	No				to
Computer		ThinkCentre M70a	5 years	nw		MJ0E01MX	24692	No				tc
Office Equipment		Fujitsu fi-7160 Scanner	12 years	nw		A36DC44783	18776	No				
Office Equipment		Avocent AUTOVIEW1000R Switch	15 years	nw		100069141	4802	No			-	tc
Office Equipment		1995 KS-2 BoxTV	30 years	пw		532210025	4372	No				ttc
Computer		HP Probook 450 G7	5 years	nw		5CD019G4R8	25009	No				tc
Office Equipment		Fujitsu fi-6130 Scanner	10 years	nw		277508	14810	No		1 1		tc
Office Equipment		Fujitsu fi-6130 Scanner	10 years	nw		262613	14815	No		1 1		tc
Office Equipment		Mobile Whiteboard	unk	nw			1,010	No				tc

(1) Category-

Office Equipment, Furniture, Computer, Machinery,

Vehicle, Others

(3) Item/Description - If transferring computer equipment, include operating system description. Ex: Windows 2000

- (4) Condition W-Working; NW-Non-Working
- (5) Initial- Department Head should initial for disposal of non-computer broken item(s)
- -If Maintenance is disposing of the item(s), the Maintenance Staff should initial
- -Computer Staff (either ICT or department staff) should initial to verify hard drive was stripped

⁽²⁾ Surplus Tag No. Tag Number assigned by the Purchasing Department

Will County Purchasing - 302 N. Chicago St. - Joliet, IL 60432 (815) 740-4605 Fax (815) 740-4604

Department: Will County Health Department - CHC	Phone No.: 815-727-5916	Resolution No.: 25-65
Approved By:	Signature:	Date Approved:

(1)	(2) Trf Asset /	(3)		(4)				m* a		T		(5)
Category	Surplus Tag No.	Item/Description	Age	Condition (W / NW)	Vehicle Mileage	Serial No./ Vin No.	County Tag No.	Transferred to Warehouse/Dept/ Charitable Inst	Received By (Signature)	Date Received	Disposed of by Warehouse/ Department	Initial
Furniture		6 - Cabinets for clinical staff		NW			n/a				,	
Furniture		4 - Waiting room chairs- EBC		NW			n/a					
Other		Digital xray sensor		NW		UL49547	n/a					
Other		Digital xray sensor		NW		UL49496	n/a					
Other		2 - Refrigerator thermometer	20	NW		7017817	n/a					
Other		Steam incubator	10	NW		155761	09684		-			
Other		Handheld BP/pulse oximter	8	NW		AB07040253	09686					
Other		WelchAllyn otoscope	8	NW		74227	17036, 1703					
Other		Hemocue glucose POC tester	8	NW		1448118050	n/a					
Other		Hemocue glucose POC tester	8	NW		1444013026	n/a					
Other		Electronic thernometer		NW		09410817	n/a					
Other		Dental xray unit & head	24	NW		771-1527383DP, 80564	n/a				vendor coordinated	
Other		4 - Patient exam lamps	unkn	NW		n/a	n/a					
Office Equipment		Fellows paper shredder	unkn	NW			79424					
. •				- •								

Office Equipment, Furniture, Computer, Machinery, (1) Category-Vehicle, Others

⁽²⁾ Surplus Tag No.- Tag Number assigned by the Purchasing Department

⁽³⁾ Item/Description - If transferring computer equipment, include operating system description. Ex: Windows 2000

⁽⁴⁾ Condition - W-Working; NW-Non-Working

⁽⁵⁾ Initial- Department Head should initial for disposal of non-computer broken item(s)

⁻If Maintenance is disposing of the item(s), the Maintenance Staff should initial

⁻Computer Staff (either ICT or department staff) should initial to verify hard drive was stripped.



WILL COUNTY BOARD OF HEALTH BY-LAWS

Adopted 10 April 1973 Revised 11 January 1989 Revised 20 December 2006 Revised 18 December 2024

This Board of Health operates under the provisions of Division 5-25 of the Counties Code of the State of Illinois, entitled "County and Multiple-County Health Departments" (55 ILCS 5/5-25001, et seq.).

ARTICLE I

Members

Appointments to the Board of Health are made by the County Executive with the approval of the Will County Board, in conformance with Division 5-25 of the Counties Code of the State of Illinois.

ARTICLE II

Officers

- Officers of the Board of Health shall be a President, a Vice-President, and a Secretary, who shall be elected annually by the Board. The elected County Treasurer shall be the Treasurer of the County Health Department, although not a member of the Board of Health.
- The duties of the officers of the Board of Health shall be those which are customary for such officers, (See Roberts Rules of Order), and any other duties as shall be set forth in these By-Laws. If there is any conflict between these By-Laws and Roberts Rules of Order, these By-Laws shall control.
- 3. Officers shall be elected for the ensuing fiscal year at the Board of Health meeting held in November.

ARTICLE III

Meetings

- 1. The regular meeting dates of the Board of Health shall be established following the annual election of Officers. All regular meetings and special meetings of the Board of Health are subject to the Illinois Open Meetings Act and shall, at all times, comply with the Illinois Open Meetings Act. A quorum of the Board of Health shall consist of a majority of the total number of members currently sitting on the Board.
- 2. The Board of Health may hold special meetings upon a written request signed by (2) two members of the Board of Health and filed with the Secretary, or on request of the medical health officer or public health administrator.
- 3. Any permitted public comment at the Board of Health meeting should be held to less than three (3) minutes.

Will County Board of Health Bylaws Amended by the Will County Board of Health November 19, 2025December 18, 2024

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ARTICLE IV

Voting

All questions before the Board of Health shall be decided by a majority vote of all members present, unless Illinois law or Roberts' Rules of Order requires otherwise.

ARTICLE V

Duties of Board of Health

The Board of Health:

- Shall initiate and carry out programs and activities deemed necessary or desirable in the promotion and protection of health and in the control of disease.
- 2. May request the Will County Board to pass ordinances permitting the charging and collection of such fees as may be necessary to finance selected services, and the promotion and protection of health and control of disease.
- Shall provide for, or request, adequate financing for the health department program; and shall adopt fiscal
 policies which shall be kept in writing.
- 4. May enter into contracts as allowed by Illinois law.
- 5. Shall employ a staff adequately qualified to carry out the department program(s) and which shall meet at least "The Minimum Qualifications for Personnel Employed by Local Health Departments as Established by the Illinois Department of Public Health" and shall adopt personnel policies which shall be kept in writing and made available to employees.
- 6. Shall appoint a medical health officer or a public health administrator as executive officer of the department. The executive officer shall possess qualifications prescribed by the Illinois Department of Public Health and Illinois law.
- Shall, according to the requirements of Division 5-25 of the Illinois Counties Code, and within the professional technical competence of its staff, and the number of staff employed; and, with the staff of the health department acting as its agent, enforce all State laws pertaining to the preservation of health, and all county and municipal ordinances except as otherwise provided in the Division 5-25 of the Illinois Counties Code; also shall enforce all rules, regulations and ordinances promulgated by the Illinois Department of Public Health, the Will County Board or by the governing bodies of cities and villages in the county, except as otherwise provided by Illinois state law.
- 8. May, according to Division 5-25 of the Illinois Counties Code, recommend, when deemed necessary, to the Will County Board, the enactment of such ordinances and rules and regulations as may be necessary or desirable for the protection of health and control of disease within its jurisdiction.
- Shall be responsible for recommending and approving goals that support the organization's mission, values, and strategic goals.

ARTICLE VI

Fiscal Year

The fiscal year of the Board of Health shall be the same as that of the County of Will: December 1 through November 30.

Will County Board of Health Bylaws Amended by the Will County Board of Health November 19, 2025December 48, 2024

-2-

ARTICLE VII

Budget and Disbursements

The Board of Health:

- 1. Shall, annually approve a budget for the Health Department for submission to the Will County Board.
- 2. Shall review at each meeting the fiscal status of the Health Department.
- Shall adopt and review salary ranges and increments for staff members.

ARTICLE VIII

Accounts

The Board of Health:

- Shall keep a record in the Health Department headquarters of all receipts and disbursements. This
 record shall be compared and reconciled, at least annually, with the records of the County Treasurer.
- Shall cause an annual audit to be made of the Health Department accounts. The County Treasurer's
 annual audit of all accounts, which includes the Health Department, may be accepted as the Board of
 Health's official audit.

ARTICE IX

Annual Reports

The Board of Health shall annually publish a report explaining the Health Department's activities and expenditures for the past year. This report shall be for free distribution and shall be submitted to the Will County Board.

ARTICLE X

Committees

The President of the Board of Health:

- Shall, create such committees as seem appropriate for the conduct of the Board of Health business. Members of such committees should be appointed from current members of the Board of Health. All such committees shall comply with the Open Meetings Act.
- 2. May appoint Ad Hoc Advisory Committees from professional or community groups.

ARTICLE XI

Reimbursement for Expenses of Members of Board of Health

The Board of Health:

- 1. Shall serve without compensation.
- May be reimbursed for actual, necessary expense incurred in the performance of their duties, such as attendance at meetings of the Board of Health, Will County Board and Will County Board Committee meetings or at meetings of the Illinois Association of Boards of Health and Illinois Public Health Association.

Will County Board of Health Bylaws Amended by the Will County Board of Health November 19, 2025December 18, 2024

- 3 -

ARTICLE XII

Property of the Board of Health

The Board of Health:

- Shall request the executive director of the Health Department to keep an accurate inventory of all
 property of the Health Department.
- 2. Shall cause property of the Health Department to be adequately protected by insurance.
- May require that property of the Health Department destroyed or damaged by carelessness of any employee, be replaced at the expense of the employee, if circumstances justify.

ARTICLE XIII

Nepotism and Conflict of Interest

- Conflict of Interest. No member of the Board of Health shall use his or her position to influence any decision or action in any matter in which he or she has any economic interest distinguishable from that of the public generally.
- Gifts. No member of the Board of Health shall accept any gift based upon any understanding, either explicit or implicit, that a judgment or decision will be influenced.
- Advice or Assistance. No member of the Board of Health shall solicit or accept any gift in return for advice or assistance on any matter concerning the operation or business of the Health Department.
- Use of County Owned Property. No member of the Board of Health shall engage in or permit
 unauthorized use of Department owned property.
- Use or Disclosure of Confidential Information. No member of the Board of Health shall disclose
 confidential information or use confidential information gained in the course of his or her position for
 financial gain.
- 6. Interest in Department Business. Board of Health members will refrain from recommending products or services supplied by any vendor which is owned or operated by a family member, or in which they have an economic interest. Should such vendors be considered by the Board, members should disclose any familial or economic interest, and refrain from voting on related subjects.
- 7. Nepotism. No member of the Board of Health shall hire or advocate for hire in any county agency, any person who is a relative as defined as spouse, parent, child, brother or sister, aunt or uncle, niece or nephew, grandparent or grandchild, solely because of that relationship. Whenever any such hiring takes place, it will be presumed that it was done solely because of existing relationship, and it will be incumbent on the hiring officer or agency to demonstrate otherwise.
- 8. No member of the Board of Health shall violate the Will County Ethics Ordinance (Sections 32.065, 32.066, 32.067, 32.068 and Section 32.069 of the Will County Code of Ordinances) in any respect.

ARTICLE XIV Electronic Meeting Attendance

Board of Health members shall be permitted to attend a Board meeting electronically only in strict compliance with the Illinois Open Meetings Act 5 ILCS 120/1, et seq.

Will County Board of Health Bylaws Amended by the Will County Board of Health

4-

Article XV Amendments of Bylaws Members of the Board of Health may amend these Bylaws by a vote of two-thirds (2/3) of the Board of Health, provided that a written notice of the proposed changes be sent to each member at least two (2) weeks before the meeting at which the Bylaws are to be amended. ATTEST: Chief Paul Hertzmann President, Board of Health Adopted by the Will County Board of Mealth, April 10, 1972. Revised by the Will County Board of Health, January 11, 1989. Amended by the Will County Board of Health, January 11, 1989. Amended by the Will County Board of Health, January 11, 1989. Amended by the Will County Board of Health, January 11, 1989. Formatted: Left, Line spacing: single Formatted: Left, Line spacing: single Formatted: Font: 9 pt Formatted: Font: 9 pt Formatted: Font: 9 pt

Will County Board of Health Bylaws Amended by the Will County Board of Health November 19, 2025December 18, 2024



WILL COUNTY COMMUNITY HEALTH CENTER GOVERNING COUNCIL

BYLAWS

ARTICLE I - NAME

The name of this body shall be the Will County Community Health Center Governing Council.

ARTICLE II - PURPOSE

The mission of the Will County Community Health Center ("Center") is to improve the health of the residents of Will County by providing access to quality integrated medical, behavioral health, and dental care through community collaboration, service and education.

ARTICLE III - OBJECTIVES

The objectives of the Center shall be:

- To provide quality primary health and supportive services to all residents of primarily Will County but also surrounding counties, especially the medically underserved, uninsured and underinsured.
- To increase the accessibility of primary and preventive health services to low-income, medically underserved, uninsured and underinsured, including minority groups.
- To integrate primary health services with other community health resources.
- To engage with health care providers, health insurers and local businesses to coordinate care and market services appropriate to our purpose as described in Article II.
- To work with the Health Center Leadership to achieve Health Center Goals by evaluating service utilization patterns, monitoring quality and patient satisfaction data and supporting effective and efficient practices.

ARTICLE IV - AUTHORITY

The Center is a private not for profit entity incorporated under the laws of the State of Illinois. The Governing Council of the Center has entered into a written Cooperative Operational Agreement with the Will County Board of Health to jointly accomplish the objectives stated above. The Will County Board of Health derives its authority to operate under 55 ILCS 5/5- 25001, *et seq*.

ARTICLE V - SIZE AND COMPOSITION

A. SIZE

The Council shall consist of between 9 and 15 voting members. Its members can be increased at the discretion of the Council.

B. <u>COMPOSITION</u>

- 1. A majority (51%) of the Council members shall be individuals who are served by the Center and who, as a group, represent the populations served in terms of demographic factors, such as race, ethnicity, and gender. Patient board members must be current registered patients of the health center and must have accessed the health center in the past 24 months to receive at least one or more in-scope service(s) that generated a health center visit.
- 2. No more than one-half of the remaining non-patient members of the Council may be individuals who derive more than 10 percent of their annual income from the health care industry (provide medical services, manufacture medical equipment, and/or develop pharmaceuticals). Income percentage shall be verified with a signed attestation by the non-patient board member who derives income from the health care industry.
- 3. The Will County Executive, with approval of the Will County Board, may appoint up to one-quarter of the members.
- 4. The remaining Council members shall be representatives of the community in which the catchment area is located and shall be selected for their expertise in community affairs, local government, finance and banking, legal affairs, trade unions, and other commercial and industrial concerns, or social service agencies within the community.
- 5. A Governing Council member may not be an employee of the Center, or spouse or child, parent, brother or sister by blood, marriage, or adoption of such an employee.
- 6. The Chief Executive Officer (CEO) of the Center gives logistical, managerial and administrative assistance to the Council.
- 7. The CEO may be a non-voting, ex-officio member of the Council.

ARTICLE VI - MEMBERSHIP & TERMS OF OFFICE

A. MEMBERSHIP ELIGIBILITY

The Council shall select Council members throughout the year, whenever a vacancy occurs, and shall solicit nominations from the community serviced by the Center, community organizations, and health organizations. Such members shall be selected from a slate of one or more nominees, as long as they conform to HRSA regulations and requirements.

B. VACANCIES

Any vacancies occurring in the Council shall be filled by appointment of the Council, which shall use its best efforts to maintain the Council's composition of patient members and members at large.

- Potential Governing Council members will be interviewed by 2-3 Governing Council members prior to the Governing Council Meeting. If they agree this candidate would be a good fit for the Governing Council, those members will introduce the candidate to the Governing Council and explain why the candidate would be a good addition.
- An appointment shall be made by an affirmative vote of the majority of members present and
 entitled to vote. Any Council member appointed to fill a vacancy shall be appointed for the
 unexpired term of his/her predecessor in office.

C. RESIGNATION / REMOVAL

A member of the Council may resign or may be removed as set forth below:

RESIGNATION:

• A Council member may resign his or her position as a member of the Council at any time by giving thirty (30) days' written notice to the Governing Council Chairperson.

REMOVAL

- Any member of the Council may be removed from the Council if, within any twelve- month period, they have accumulated five absences. The Chair shall notify the member by writing by mail or by email after four absences in any twelve- month period. An absence shall be defined as any meeting where notice of absence was not delivered to the Chair or designee prior to the scheduled start of the meeting. After such notice, if a fifth absence occurs, a vote shall be taken at the next meeting regarding removal. A majority vote of those present and voting shall cause that member to be removed.
- A Council member may be removed for just cause due to a conviction of a felony or misdemeanor involving moral turpitude, or for cause. In order to remove a member, Governing Council shall pass a resolution identifying the possible removal and general reason(s) therefore. The resolution shall schedule a hearing date, time, and place. The member whose removal is sought shall be notified in writing of the possible removal and may present evidence against removal. The Council shall deliberate and state their findings of facts on the record, and state whether such member is or is not removed from office.

D. TERMS OF OFFICE

Members shall be appointed for terms of two years, with half of the members beginning terms on even years, and the others beginning on odd years. Reappointments shall be reviewed annually, beginning one month prior to the annual meeting.

ARTICLE VII- MEETING AND VOTING

A. REGULAR AND SPECIAL MEETINGS

Regular meetings of the Council shall be held monthly at a time and place to be decided by the Council in accord with the Illinois Open Meetings Act. Special meetings may be called by the

Chair or the Chief Executive Officer of the Center or requested by two (2) members of the Governing Council and posted by the Administrative Assistant to the CEO in accord with the Illinois Open Meetings Act.

In order to hold a special meeting, advance notice of such meeting shall be given to each member of the Governing Council forty-eight (48) hours before the time of the meeting, stating the time,

place and the business to be transacted and no other business shall be considered at a special meeting.

B. ANNUAL MEETING

The regular meeting on the first Wednesday in April shall be known as the annual meeting, and shall be for the purpose of electing officers, reappointment of Council members, reviewing Council self-assessment report, receiving reports of officers and committees, and for any other business that may arise. The Council shall determine whether the meeting will be for the Council only or if the management staff is to be included.

Not less than fifty (50) days prior to each Annual Meeting, the Governance Committee shall meet to develop a slate of officers and members for the year. Nominations for membership and officers may be submitted by any Council member to the Governance Committee at any time prior to this meeting.

The Governance Committee, acting by unanimous vote, shall nominate a number of nominees for Council members equal to the number of current vacancies or vacancies which will occur at the Annual meeting. The Governance Committee shall take into account the requirements concerning the composition of the Governing Council as in Article V of these Bylaws.

Not less than thirty (30) days before each Annual Meeting, the Governance Committee shall submit to the Secretary its nominations for members and officers, and the Secretary shall immediately inform the Governing Council members of these nominations.

C. NOTICE

Notice of special meetings of the Council shall be given by written notice delivered personally, mailed or via email to each Council member at his/her designated address at least forty-eight (48) hours prior to said meeting.

D. QUORUM

A majority of the Council members shall constitute a quorum for the transaction of business at any Council meeting. If less than a majority of the Council members are present at the meeting, a majority of the Council members present may adjourn the meeting. If a majority of the Council are not present; the members in attendance can decide to adjourn the meeting or conduct a discussion meeting of which the minutes will be prepared and placed on file.

E. RECORDING OF MINUTES AND STORAGE

Minutes shall be taken at all Governing Council and committee meetings. Minutes shall be kept in both written and audio recording form and shall be taken in accordance with the Illinois Open Meetings Act.

All minutes shall be approved at the following regular meeting. Once approved, minutes shall be open for public inspection within 10 days. Additionally, minutes shall be posted on the Internet for public viewing.

Written minutes shall be kept at the main office of the Community Health Center. Audio recordings shall be stored electronically and backed up as frequently as other electronic files held by the Community Health Center. No minutes shall be disposed of until proper authorization is granted pursuant to applicable law.

F. VOTING

All motions before the Governing Council shall be decided by a majority vote of the Council members present, however, no meeting shall be counted as official unless a quorum of the members is present. Proxy voting shall not be permitted.

ARTICLE VIII - ELECTRONIC MEETING ATTENDANCE

All Governing Council meetings shall comply with the Illinois Open Meetings Act, as amended from time to time. With regard to electronic attendance at Governing Council meetings, such electronic attendance shall be allowed only as permitted by Section 7 of the Illinois Open Meetings Act, or as otherwise permitted by amendment to the Illinois Open Meetings Act.

ARTICLE IX -- OFFICERS

A. OFFICERS

The officers of the Council shall be the Chair, Vice-Chair, Secretary and Treasurer.

B. <u>ELECTION AND TERMS OF OFFICE</u>

The officers shall be elected by the Council during the April meeting and shall take office at the first Council meeting following election. Term of office shall be for one year. Each officer shall hold office until his/her successor has been duly elected or appointed by terms set forth in item D below or until said officer shall resign or shall have been removed in the manner hereinafter provided.

C. REMOVAL

Any officer elected by the Council may be removed by the Council with two-third majority vote present and voting.

D. <u>VACANCY</u>

A vacancy in the offices of Vice-Chair, Secretary and/or Treasurer of the Council, occurring within the first nine (9) months of the term, because of resignation, removal or other reason, may be filled for the unexpired portion of the term by a vote of the majority of a quorum at a regularly scheduled meeting of the Council. A vacancy in the offices of Vice Chair, Secretary and/or Treasurer of the Council, occurring within the last three (3) months of the term, because of resignation, removal or other reason, may be filled for the unexpired portion of the term by appointment of the Chair. A vacancy in the office of Chair may be filled for the unexpired portion of the term by a vote of the majority of a quorum at a regularly scheduled meeting of the Council.

E. CHAIR

The Chair shall be elected from a majority of the quorum of the Council at a regularly scheduled meeting and shall:

- Preside at all meetings of the Council
- Regularly confer with the Executive Staff of the Community Health Center and monitor the implementation of policies and procedures adopted by the Council.
- The Chair or other designated officer may sign any document or instrument requiring the signature of an officer of the Governing Council which is necessary and incident to the purposes of the Governing Council, except where the signing of such document or instrument is expressly delegated to some other officer or official by the Cooperative Agreement between the Will County Health Department and the Will County Community Health Center Governing Council or as otherwise required by law.

• In addition, the Chair shall have the usual powers, duties and authority commonly vested in the office of Chair and shall perform other duties as may be authorized by the Council.

F. VICE-CHAIR

- The Vice-Chair shall assist the Chair in the discharge of his/her duties as the Chair may direct and shall perform such other duties as from time to time may be assigned to him/her by the Chair or by the Council.
- In the absence of the Chair or in the event of his/her inability or refusal to act, the Vice Chair shall perform the duties of the Chair and when so acting, shall have all the powers of and be subject to all the restrictions upon the Chair.

G. SECRETARY

The Secretary shall be responsible for:

- The final approval of the minutes of the meetings of the Council as prepared by the Administrative Assistant to the CEO.
- Systematic tracking and filing of Governing Council reports.
- See that all notices are duly given in accordance with the provisions of these bylaws or as required by law.
- Be responsible for the maintenance of a register of the contact information of each member which shall be furnished to the secretary by such member.
- List of all committees with meeting schedule and perform all duties incident to the office of Secretary and such other duties as from time to time may be assigned to him/her by the Chair of the Council.
- In the absence of the Chair and the Vice Chair or in the event of his/her/their inability or refusal to act, the Secretary shall perform the duties of the Chair and when so acting, shall have all the powers of and be subject to all the restrictions upon the Chair. The Chief Executive Officer shall provide administrative assistance necessary in fulfilling these duties. In the absence of the Secretary, Secretary pro tern shall be appointed by the Chairperson.

H. TREASURER

- The Treasurer will serve as the Finance Committee Chairman and shall work with the Will County Board of Health and the Will County Health Department and Community Health Center staff to ensure that the affairs of the Will County Community Health Center are carried out in a proper fiduciary manner.
- The Treasurer shall perform all the duties incident to the office of Treasurer and such other duties as from time to time may be assigned to him/her by the Chair or by the Council. In the absence of the Chair, the Vice Chair and the Secretary or in the event of his/her/their inability or refusal to act, the Treasurer shall perform the duties of the Chair and when so acting, shall have all the powers of and be subject to all the restrictions upon the Chair.

I. NOMINATION OF OFFICERS

• Nomination of officers for the coming year shall be submitted upon the Chair calling for nominations from the floor during the March meeting.

ARTICLE X - COMMITTEES

The Chairperson shall appoint committee members and designate a Chair of said committee, with Council approval. The Chair, with the consent of the Council, may appoint members to these committees or ask for voluntary participation; non-Council members, who may be Center employees, may serve on committees to assist the Council in carrying out its charge. The Chair and all members of each committee shall hold office for one (1) year or until their successors are appointed and approved unless reelected to another term. The Chair of each committee shall have the power to fill any vacancies that occur on the committee for the remainder of the year, with approval of the Council. All committees of the Council shall meet at such time and place as designated by the Chair of the committee and as often as necessary to accomplish their duties, provided public notice is given at least 48 hours prior to the meeting. All meetings will be documented with minutes. The Council may appoint an advisory committee and members from a professional or community groups as deemed necessary to enhance committee effectiveness.

The following will be considered standing committees: Executive/Personnel; Finance; Governance and Quality Improvement.

A. EXECUTIVE/PERSONNEL COMMITTEE

Overall Roles and Responsibilities

The Executive Committee provides a mechanism for Governing Council leaders to engage, within the limits set by Council policy and the bylaws, in decision making, oversight, and communication on important organizational matters.

Responsibilities

The Executive Committee's specific responsibilities include:

- Overseeing the selection of the Chief Executive Officer (CEO) as defined in the Cooperative Agreement.
- Approving the position description of the CEO.
- Recommending a CEO evaluation process to the Governing Council, including annual goals for the CEO and an annual CEO performance evaluation. Governing Council members, along with the Executive Director of the Will County Health Department (WCHD), shall be involved in the review of the CEO. The WCHD Executive Performance Appraisal form will be utilized.
- Conducting the CEO evaluation process, and in a manner that promotes trust and candid communication between the Council and CEO, ensures that the CEO understands the Council's expectations, and provides constructive feedback to the CEO on his or her performance.
- Directing the CEO to prepare and annually update a CEO/management succession and management development plan to be reviewed with the committee.
- Reporting to the Governing Council in sufficient detail to assure the board that its responsibilities for executive evaluation are being fulfilled.
- Approving the dismissal of the CEO as defined in the Cooperative Agreement.
- Serving as a sounding board for management on emerging issues, problems, and initiatives.

Meetings

The committee shall meet at least once a year and additionally as needed at the call of the committee chair. Meeting dates and times should be specified a year in advance.

Members

The Executive Committee is composed of the board Chair, Vice Chair, Secretary, Treasurer, CEO, and the chairs of the Council's committees on finance, governance, and quality.

The CEO shall be excused for matters relating to the CEO evaluation.

B. GOVERNANCE COMMITTEE

Overall Roles and Responsibilities

The Governance Committee provides for the Council's effectiveness and continuing development.

Responsibilities

The specific responsibilities of the Governance Committee include:

- Recommending to the Council policies and processes designed to provide for effective and efficient governance, including but not limited to policies for:
- Evaluation of the Council and the chairperson.
- Election and re-election of Council members.
- Council member orientation and education.
- Succession planning for the Council chair and other Council leaders.
- Reviewing and recommending a position description detailing responsibilities of and expectations for Council members and the Council chairperson.
- Recommending nominees for election and reelection to the Council. To facilitate this responsibility, the committee will:
- Develop and recommend to the Council a statement of the competencies and personal attributes currently needed on the Council, to be used as a guideline for recruitment and election of Council members.
- Conduct a "gap analysis" to identify succession planning/recruitment needs.
- Develop and regularly update a list of potential Council members regardless of whether a current vacancy exists.
- Oversee a process for vetting the capability of prospective nominees.
- Develop and oversee a plan for enhancing Council diversity.
- Evaluate the performance of individual Council members eligible for reelection.
- Conducting a succession planning process for the Chairperson and other
- Council leaders. Nominating officers for election by the full board.
- Reviewing the corporate bylaws annually and recommending any needed changes to the full board.

- Advising management on plans for Council education, including new member orientation, ongoing education of present members, and a board retreat (if necessary).
- Overseeing the board's self-assessment and improvement process every year.

Meetings

The Governance Committee meets at least three (3) times a year or when necessary, at the call of the committee chair. Meeting dates and times should be specified a year in advance.

Members

The committee shall include at a minimum three members of the Council and the CEO.

C. FINANCE COMMITTEE

Overall Roles and Responsibilities

The committee is responsible for recommending financial policies, goals, and budgets that support the mission, values, and strategic goals of the organization. The committee also reviews the organization's financial performance against its goals and proposes major transactions and programs to the Council. In addition, the committee reviews the annual audit, ensuring any follow-up actions are taken, and reviews corporate compliance activities.

Responsibilities

The finance committee's specific responsibilities include:

- Recommending policies that maintain and improve the financial health and integrity of the organization.
- Reviewing and recommending a long-range financial plan for the organization.
- Reviewing and recommending an annual operating budget and annual capital budget consistent with the financial plan and financial policies.
- Reviewing and recommending capital expenditures and unbudgeted operating expenditures.
- Reviewing the financial aspects of major proposed transactions, new programs and services, as well as proposals to discontinue programs or services, and making action recommendations to the Council.
- Monitoring the financial performance of the organization as a whole and its line items against approved budgets, long-term trends, and industry benchmarks.
- Requiring and monitoring corrective actions to bring the organization into compliance with its budget and other financial targets.
- Monitoring grant budgets and expenditures and recommend corrective actions to bring organization into compliance.
- Audit responsibilities include Recommending policies and processes to the Council related to:
 - o The organization's financial statements and other financial information are provided to governmental bodies, financial institutions, and the public.
 - o The organization's systems of internal controls for finance, accounting, legal compliance and ethics, according to policies that management and the Council have established.
 - o The organization's auditing, accounting, financial reporting, and compliance processes.
 - O Discussing the results of the annual audit and closely reviewing any significant changes

- to the financial statements or changes in accounting principles and disclosure practices.
- Reviewing the external auditor's annual management letter regarding internal control weaknesses, recommendations for improvements, and management's corrective action plans. Monitoring management's implementation of corrective action plans.
- o Reviewing, with the organization's counsel, any legal matter that could have a significant impact on the organization's financial statements.
- Reporting to the Council at least annually and provide the Council with the annual external audit report.

Corporate Compliance specific responsibilities include:

- Overseeing the corporate compliance program, including policies and practices designed to ensure the organization's compliance with all applicable legal, regulatory, and ethical requirements.
- Recommending approval of the annual corporate compliance plan and reviewing processes and procedures for reporting concerns by employees, physicians, vendors, and others.
- Recommending organizational integrity guidelines and a Code of Conduct.
- Reviewing and reassessing the guidelines and Code of Conduct at least annually.
- Reviewing resources for corporate compliance with the corporate compliance officer and CEO to ensure that sufficient resources are provided.
- Reviewing and evaluating findings and recommendations from completed compliance activities and audits, including management responses and action plans.
- Reporting to the Council at least annually on the corporate compliance program.

Meetings

The committee meets quarterly and when necessary, at the call of the committee chairperson. Meeting dates and times should be specified a year in advance.

Members

The committee consists of a minimum of three Council members, one which is the Treasurer and shall serve as the Chairperson; the remaining two with backgrounds in finance, accounting, business, investment management, executive leadership, and business ownership; the CEO, Chief Medical Officer, Chief Dental Officer, Director of Operations, Corporate Compliance Officer, and Billing Supervisor.

D. QUALITY IMPROVEMENT COMMITTEE

Overall Roles and Responsibilities

The Quality Committee assists the Governing Council in overseeing and ensuring the quality of clinical care, patient safety, and customer service provided throughout the organization. The committee also assists the Council in maintaining a constructive relationship with the medical staff and approving and overseeing medical policies and professional staff appointments, reappointments, and clinical privileges.

Responsibilities

The responsibilities of the Quality Committee include:

- Reviewing and recommending a multi-year Strategic Quality Plan with long-term and annual improvement targets.
- Reviewing and recommending quality/safety-related policies and standards.
- Reviewing and recommending risk management related policies and standards.
- Approving and monitoring a dashboard of key performance indicators compared to organizational goals and industry benchmarks. Report in summary fashion to the full Council.
- Reviewing sentinel events and root cause analyses; if appropriate, recommend corrective action.
- Monitoring summary reports of hospital and medical staff quality and patient safety activities.
- Reviewing management's corrective plans with regard to negative variances and serious errors.
- Overseeing compliance with quality- and safety-related accreditation standards.
- Making recommendations to the board on all matters related to the quality of care, patient safety, customer service, and organizational culture.
- Reviewing and making recommendations to the board for approval of medically related policies developed by the committee or by a medical staff committee.

Medically related policy matters may include criteria for medical staff membership and privileges, exclusive contracting for professional medical services, on call coverage, board certification, and matters related to professional conduct.

- Overseeing the effectiveness of the medical staff credentialing process.
- Reviewing and acting on medical staff recommendations to apply for medical staff appointments, reappointments, and clinical privileges.
- Making a recommendation to Governing Council to approve appointments, reappointments, and clinical privileges that fully meet the Center and hospital's criteria, with no issues or major questions.
- Making recommendations to the Council with regard to all other credentialing applications.
- Returning a recommendation to the medical staff for further documentation or reconsideration in accordance with policies.
- Reviewing medical staff recommendations and recommending to the Council disciplinary or corrective actions involving medical staff members, as provided in the policies.
- Overseeing and supporting education and development for providers.
- Monitoring physician perceptions and satisfaction and overseeing provider relations activities.
- Serving as a forum for education and discussion of health center/hospital-medical staff relationships and concerns.

Meetings

The committee meets, at a minimum, quarterly or when necessary, at the call of the committee chair. Meeting dates and times should be specified a year in advance.

Members

The committee consists of three Council members: Chief Executive Officer, Chief Medical Officer, Chief Dental Officer, Director of Operations, Quality/Risk Management Program Coordinator, and, optionally, other management team members.

E. Additional Committees

The Council may establish whatever additional committees it deems necessary to carry out the purpose and objectives of the Center or to deliberate on the business and responsibilities of the Council.

- 1. Any member may suggest the creation of a committee or task force when it appears necessary and such committee or task force may be established upon majority approval of the board.
- 2. Standing committees shall be defined as on-going committees and task forces shall be defined as time-limited committees with designated purposes.

ARTICLE XI- RESPONSIBILITIES OF THE GOVERNING COUNCIL

A. PERSONNEL POLICIES AND PROCEDURES

The Governing Council provides leadership and guidance in support of the health center's mission. However, day-to-day direction and management responsibility for the health center must rest with staff under the direction of the Chief Executive Officer (CEO), in alignment with the Will County Health Department's personnel policies and procedures as established by the Board of Health.

B. SELECTION OF CHIEF EXECUTIVE OFFICER

In conformance with Health Department Personnel Policies, the Council shall approve the selection and dismissal of the Chief Executive Officer of the Health Center.

C. <u>DISMISSAL AND DISCIPLINE OF CHIEF EXECUTIVE OFFICER</u>

In the event that either the Will County Health Department Board of Health or the Governing Council receives information that could result in the discipline and/or dismissal of the CEO, the Coordinating Committee (with representatives of both Boards) shall be called to review and, if necessary and appropriate, investigate or cause to be investigated any allegations of misfeasance, impropriety, incompetence, criminality, or other misconduct that might warrant discipline or dismissal. The Coordinating Committee shall turn their findings and offer recommendations over to the Executive Director of the Will County Health Department. The Executive Director

shall bring the information forward to the Governing Council with a recommendation on appropriate disciplinary action if necessary. The Governing Council shall consider the matter and either accept or reject the Executive Director's recommendation or return it for further findings. However, any credible evidence of criminal behavior shall be turned over to the Will County State's Attorney.

The CEO shall be subject to discipline for any action which is incompatible with his/her duties as described by the bylaws or cause damage or violates any duties or responsibilities to the Community Health Center, Will County Health Department, or the County of Will including those obligations and prohibitions found in the Employee Handbook & Work Rules Manual and all other rules developed by the Health Department and County of Will.

D. EVALUATE CENTER PROJECT ACTIVITIES

The Council shall evaluate service utilization patterns, productivity (efficiency and effectiveness), patient satisfaction, and achievement of project objectives, and shall develop a process for hearing and resolving patient grievances.

E. <u>COMPLIANCE WITH LAWS</u>

The Council shall ensure that the Center is operated in compliance with applicable Federal, State and local laws and regulations.

F. HEALTH CARE POLICIES

The Council shall at a minimum approve policies which include scope and availability of services, service site locations and hours of services, and quality of care audit procedures.

The Council shall adopt, evaluate at least once every three years, and as needed, approve updates to policies in the following areas: Sliding Fee Discount Program, Quality Improvement/ Assurance, and Billing and Collections. (Policies related to billing and collections that require board approval include those that address the waiving or reducing of amounts owed by patients due to inability to pay, and if applicable those that limit or deny services due to refusal to pay.)

The co-applicant Board of Health shall have the authority for adopting policies for financial management practices and a system to ensure accountability for center resources, including

periodically reviewing the financial status of the health center and the results of the annual audit to ensure appropriate follow-up actions are taken.

As described in the Co-Applicant Agreement, the Board of Health shall establish and maintain general personnel policies for the health center, including those addressing selection and dismissal procedures, salary and benefit scales, employee grievance procedures, and equal opportunity practices.

G. <u>APPROVAL OF APPLICATIONS. BUDGET, AND OTHER ITEMS</u>

In addition to the duties listed herein, the Governing Council shall be responsible for considering the following items:

- Applications for Health Center Program projects, including decisions to subaward or contract for a substantial portion of the services.
- Grants and grant designations and applications.
- All health center services the location of services, and hours of operation at health center sites.
- The annual budget and audit for the Health Center. (The Board of Health shall ensure appropriate follow-up actions are taken).
- Adoption of policies for eligibility for services including criteria for partial payment schedules.
- Approval of all Health Center agreements and contracts.

H. LONG-TERM AND STRATEGIC PLANNING

The Governing Council shall be responsible for the long term and strategic planning of the Community Health Center. As such, the Governing Council shall set benchmarks and specific goals, including those prescribed by law and regulations, for the Community Health Center. These goals shall be updated as needed to reflect the current situation of the Community Health Center. The long-range planning shall include but not be limited to identifying health center priorities and adopting a three-year plan for financial management and capital expenditures.

Additionally, the Governing Council shall be responsible for monitoring the Community Health Center's progress in meeting its annual and long-term goals.

ARTICLE XII - AMENDMENTS/REVISIONS

These Bylaws may be amended or revised at a regular meeting of the Council by a two-thirds vote, and any such changes shall be reported to the Will County Board of Health.

ARTICLE XIII - AUTHORITY

The Parliamentary Authority of the Council shall be the current edition of <u>Robert's Rules of Order</u>. <u>Newly Revised</u>.

ARTICLE XIV - CONFLICT OF INTEREST

Conflict of interest or the appearance of conflict of interest by Council members, employees, consultants and those who provide services or furnish goods to the Center is prohibited. No Council member may be an employee of the Center or spouse or child, parent, brother or sister by blood or marriage of such an employee. The Chief Executive Officer may be a non-voting, ex-officio member of the Council, and as such shall be bound by this article.

A. Conflict of Interest: A conflict of interest shall be considered to arise when any matter under consideration by the Governing Council involves the potential for a significant or material benefit; or a compensation arrangement exists to a Council Member or any member of his or her immediate family to any business, financial, or professional organization of which the Council Member or any member of his or her immediate family is an officer, director, member, owner, or employee. No member of the Council shall use his or her position to influence any

decision or action in any matter in which he or she has any economic interest distinguishable from that of the public generally.

- **B.** Gifts: No member of the Council shall accept any gift based upon any understanding, either explicit or implicit, that a judgment or decision will be influenced.
- C. Advice or Assistance: No member of the Council shall solicit or accept any gift in return for advice or assistance on any matter concerning the operation or business of the Center.
- **D.** Use of County Owned Property: No member of the Council shall engage in or permit unauthorized use of County owned property.
- E. Use or Disclosure of Confidential Information: No member of the Council shall disclose confidential information or use confidential information gained in the course of his or her position for financial gain.
- F. Interest in Center Business: Council members will refrain from recommending products or services supplied by any vendor which is owned or operated by a family member, or in which they have an economic interest. Should such vendors be considered by the Council, members should disclose any familial or economic interest, and refrain from voting on related subjects.
- G. Nepotism: No member of the Council shall hire or advocate for hire in any county agency, any person who is a relative as defined as spouse, partner, parent, child, brother, sister, aunt uncle, niece, nephew, grandparent, grandchild, solely because of that relationship.
- H. Compensation: Members shall serve without compensation, except those expenses actually incurred by reason of participation in Governing Council activities, e.g. travel expenses, meals, and incidentals as outlined in the Will County Business/Travel Reimbursement Regulations and within limits of available funds.
 - The Health Center will not compensate members of the Governing Council for services rendered in the ordinary course of service as members of the Governing Council.
- I. Resolution of alleged conflicts of interest: Whenever any matter comes before the Governing Council, which any Council member recognizes may give rise to a conflict of interest, the Governing Council shall not approve any action or transaction bearing upon the conflict unless the following are observed:
 - a. The affected Council Member shall have aduty to disclose, or other member shall make known the conflict. Should the matter be brought to a vote of the Members, the affected Member shall not cast a vote.
 - b. The Governing Council shall not go forward with a transaction or arrangement, in which an affected Council member acknowledges that a conflict of interest exists, or other Members determine that a conflict of interest exists, unless it is determined that no other alternative transaction or arrangement is available and not going forward with the transaction or arrangement would impede the Center's ability to carry out its mission.
 - c. If the Governing Council determines that the Member has in fact failed to disclose an

d. actual or possible conflict of interest, it may take disciplinary and corrective action, up to and including termination of Governing Council membership.

ARTICLE XV-DISSOLUTION

If at some point it is determined that the purposes of the Will County Community Health Center are no longer needed, are not being provided for, or for any other reason the entity may be voluntarily dissolved.

- A. Voluntary dissolution may not occur until:
 - a. All debts of the Will County Community Health Center have been paid; and
 - **b.** Written notice has been delivered to all members, indicating that a vote will be taken on the matter. Said notice must be delivered no less than 3 business days before the taking of any vote.
- **B.** Upon the satisfaction of the conditions found in subsection A., a vote may be taken on the subject of voluntary dissolution. Upon an affirmative vote of the majority of all members, the Will County Community Health Center will enter the process of dissolution.
- C. If a vote for dissolution passes, the Will County Community Health Center shall cause the distribution of all assets of the corporation as provided in 805 ILCS 105/112.16, or any successor statute.

Plan of Distribution: Upon completing the requisite distributions as found in 805 ILCS 105/112.16, a plan of distribution shall be adopted to distribute the remaining assets of the corporation, if any exist. Such plan shall be adopted by a vote of the majority of all members. Such plan shall provide that distribution shall only be to a registered 501(c)(3) under the Internal Revenue Code, whose primary function is the provision of medical services, or another unit of State, federal, or local government.

D. Articles of Dissolution: Upon completion of the foregoing, the Secretary shall cause the Articles of Dissolution to be filled with the Secretary of State, in the same manner as other filings are made pursuant to applicable law. The Articles shall contain all information required by State law and shall be signed by all necessary parties. Additionally, the Secretary shall cause all other documents regarding dissolution and transfer of assets required by State or federal law to be filed.

ADOPTED:
Dr. Matthew Glowiak, Governing Council Chairperson Will County Community Health Center
Date
Ms. Vernice Warren, Governing Council, Vice Chairperson Will County Community Health Center
Date
ATTEST:
Mr. Frank Sandoval, Governing Council Secretary Will County Community Health Center
Date
RECEIVED:
Paul Hertzmann, Board of Health President Will County Health Department
Date

Adopted by the Community Health Center Governing Council, March 1, 2006: Approved by the Will County Board of Health, March 15, 2006: Adopted by the Community Health Center Governing Council, April 4, 2012: Approved by the Will County Board of Health, April 18, 2012: Adopted by the Community Health Center Governing Council, May 2, 2012: Approved by the Will County Board of Health, May 16, 2012: Adopted by the Community Health Center Governing Council, June 6, 2012: Approved by the Will County Board of Health, June 20, 2012: Adopted by the Community Health Center Governing Council, May 1, 2013: Approved by the Will County Board of Health, May 15, 2013 Adopted by the Community Health Center Governing Council, May 6, 2015; Approved by the Will County Board of Health, May 20, 2015 Adopted by the Community Health Center Governing Council, August 19, 2015; Approved by the Will County Board of Health, August 19, 2015 Adopted by the Community Health Center Governing Council, May 4, 2016, Approved by the Will County Board of Health, June 15, 2016 Adopted by the Community Health Center Governing Council, July 5, 2017, Approved by the Will County Board of Health, August 16, 2017 Adopted by the Community Health Center Governing Council July 5, 2018, Approved by the Will County Board of Health, August 15, 2018 Adopted by the Community Health Center Governing Council January 9, 2019, Approved by the Will County Board of Health, February 29, 2019 Adopted by the Community Health Center Governing Council January 6, 2021, Approved by the Will County Board of Health, April 21, 2021 Adopted by the Community Health Center Governing Council January 6, 2021, Approved by the Will County Board of Health, April 21, 2021 Adopted by the Community Health Center Governing Council January 6, 2021, Approved by the Will County Board of Health, April 21, 2021 Adopted by the Community Health Center Governing Council January 8, 2022 Adopted by the Community Health Center Governing Council April 3, 2024, Adopted by the Community Health Center Governing Council May 1, 2024, Received by the Will County Board Adopted by the Community Health Center Governing Council Option 3, 2025, Received by the Will County Board Approved by the Will County Board of Health, May 15, 2013 Adopted by the Community Health Center Governing Council, May 6, 2015, Approved by the Will

Adopted by the Community Health Center Governing Council October 3, 2025, Received by the Will County Board



PERSONNEL STATUS REPORT OCTOBER 2025

<u>EMPLOYEES</u> <u>DATE</u>

NEW

Alicia Sanchez 10/14/25

Family Health Services

Administration Clerk I

Phillip Ha 10/14/25

Family Health Services

Nutrition Specialist

Isabella Dahlheimer 10/27/25

Behavioral Health

Mental Health Counselor II-School Based

Ariana Aguilera 10/27/25

CHC

Staff Nurse II

Pamela Burket 10/27/25

FHS

Program Coordinator-Maternal Child Case Mgmt.

PROMOTION

Mugdha 10/13/25

Family Health Services (promoted from Nutrition Specialist)

WIC Program Manager

Emilie Brazinski 10/13/25

BH (promoted from MHC I)

Mental Health Counselor III

RETIREMENT

Gayle Perkins 9/23/25

Family Health Services
Patient Registration Clerk

TRANSFER

Michelle DeMato 9/29/25

Behavioral Health (trans./lateral move from MHC School Based)

Mental Health Counselor II

CONTRACTUAL EMPLOYEES

Efrain Flores 10/11/25

CHC (1st yr. of 3 yr. contract 10/11/25-10/11/28 & change from PT to FT)

Pediatrician

CONTRACTUAL

Dr. Dalvina Sharma 11/24/25

CHC, Dental (resignation effective date)

Dentist

OTHER			
Mary Hayes		10/6/25	
Administra	ation	(temp. position ended)	
Health Na	vigator		
Kevin Juday		10/6/25	
Administra		(change in title only)	
Communi	cation Program Mgr.		
Approved:			
. фр. от от.	Chief Paul Hertzmann, Presi	dent, Board of Health	Date
Recommended:			

Elizabeth Bilotta, Executive Director, WCHD

Date