

HEALTH CARE SERVICES - JAIL FACILITY 2019	VITALCORE HEALTH STRATEGIES LLC	ADVANCED CORRECTIONAL HEALTHCARE INC
	719 SW VAN BUREN ST STE 100 TOPEKA KS 66603	3922 W BARING TRACE PEORIA IL 61615
TOTAL ANNUAL COST	YEAR ONE 250-350 INMATES \$595,631.52	\$568,209.21
REQUIRED DOCUMENTS		
NOTARIZED WORK AFFIDAVIT COMPLETED	Y	Y
E-VERIFICATION DOCUMENTATION (Y/N):	Y	Y
COPY OF INSURANCE PROVIDED	Y	Y
TAX RECEIPTS OR NOTARIZED LETTER STATING NO REAL OR PERSONAL PROPERTY OWNED IN JEFFERSON COUNTY	Y	Y
COOPERATIVE BID FORM (Y/N)	Y	Y
COOPERATIVE CONTACT INFO:	Y	Y
COMPANY INFORMATION AND SIGNATURE	N	Y
BID DEPOSIT REQUIRED	N/A	N/A
COMMENTS:	SEE ATTACHED FOR ADDITIONAL PRICING	SEE ATTACHED FOR ADDITIONAL PRICING



JEFFERSON COUNTY
DEPARTMENT OF ADMINISTRATIVE SERVICES
 729 MAPLE ST / PO BOX 100
 HILLSBORO MO 63050
WWW.JEFFCOMO.ORG

BID #: 18-0078

Request for Proposal: HEALTH CARE SERVICES – JAIL FACILITY **Date Issued:** 10-23-2018
2019

PROPOSALS SHALL BE ACCEPTED UNTIL: TUESDAY, NOVEMBER 20, 2018, AT 2:00 P.M. LOCAL TIME.

**Specification
Contact:**

LT. COL. TIM WHITNEY
 Jefferson County Sheriff's Office
 636-797-5528
 twhitney@jeffcomo.org

**Contract
Contact:**

VICKIE PRATT
 Department of Administrative Services
 636-797-5380

**Mail (3) Three
Complete Copies
With Vendor And
Proposal
Information As
Shown In Sample:**


SAMPLE ENVELOPE

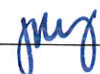
<i>VENDOR NAME</i>	
<i>VENDOR ADDRESS</i>	
<i>CONTACT NUMBER</i>	DEPARTMENT OF THE COUNTY CLERK
	JEFFERSON COUNTY MISSOURI
	729 MAPLE ST / PO BOX 100
	HILLSBORO MO 63050-0100
SEALED PROPOSAL: (PROPOSAL NAME)	

Contract Term:
**ONE YEAR CONTRACT
WITH A ONE YEAR
RENEWAL OPTION
UPON APPROVAL OF THE
COUNTY COUNCIL AND
COUNTY EXECUTIVE**

The undersigned certifies that he/she has the authority to bind this company in an agreement/contract to supply the commodity or service in accordance with all terms, conditions, and pricing specified. This Proposal, if accepted, will constitute an Agreement and Contract with Jefferson County, Missouri, upon approval of the County Council and County Executive. Prices are firm during this agreement term, unless agreed upon in writing by the County. The County has the option to renew this agreement at the same terms and conditions as the original agreement for one additional one-year term with the written consent of the successful bidder. Price increases for renewals are not authorized unless approved in writing by the County.

**Vendor
Information:**

Advanced Correctional Healthcare, Inc.	Jessica Young, Esq., CCHP
Company Name	Authorized Agent (Print)
3922 W Baring Trace	
Address	Signature
Peoria, IL 61615	President
City/State/Zip Code	Title
309-692-8100	11/19/2018 36-4495255
Telephone #	Date Tax ID #
alex.kinzinger@advancedch.com	309-214-9977
E-mail	Fax #



5. Require that this agreement may be terminated by either the Jefferson County Sheriff's Office, the physician or his/her agency for any reason by giving written notice to the other parties 60 days prior to termination date, provided all fees have been paid in full. This agreement shall be renewed each year and remain in force until an additional agreement can be made.

TOTAL ANNUAL COST: \$ 568,209.21

\$ 590,273.03

\$ 686,383.81

\$ 704,827.63

\$ 729,248.94

\$ 747,692.76

\$ 910,376.86

\$ 928,820.68



JEFFERSON COUNTY
DEPARTMENT OF ADMINISTRATIVE SERVICES
 729 MAPLE ST / PO BOX 100
 HILLSBORO MO 63050
WWW.JEFFCOMO.ORG

BID #: 18-0078

Request for Proposal: HEALTH CARE SERVICES – JAIL FACILITY Date Issued: 10-23-2018
2019

PROPOSALS SHALL BE ACCEPTED UNTIL: TUESDAY, NOVEMBER 20, 2018, AT 2:00 P.M. LOCAL TIME.

**Specification
Contact:**

LT. COL. TIM WHITNEY
 Jefferson County Sheriff's Office
 636-797-5528
 twhitney@jeffcomo.org

**Contract
Contact:**

VICKIE PRATT
 Department of Administrative Services
 636-797-5380

**Mail (3) Three
Complete Copies
With Vendor And
Proposal
Information As
Shown In Sample:**

SAMPLE ENVELOPE

<i>VENDOR NAME</i>	
<i>VENDOR ADDRESS</i>	
<i>CONTACT NUMBER</i>	DEPARTMENT OF THE COUNTY CLERK
	JEFFERSON COUNTY MISSOURI
	729 MAPLE ST / PO BOX 100
	HILLSBORO MO 63050-0100
SEALED PROPOSAL: (PROPOSAL NAME)	

Contract Term:
**ONE YEAR CONTRACT
WITH A ONE YEAR
RENEWAL OPTION
UPON APPROVAL OF THE
COUNTY COUNCIL AND
COUNTY EXECUTIVE**

The undersigned certifies that he/she has the authority to bind this company in an agreement/contract to supply the commodity or service in accordance with all terms, conditions, and pricing specified. This Proposal, if accepted, will constitute an Agreement and Contract with Jefferson County, Missouri, upon approval of the County Council and County Executive. Prices are firm during this agreement term, unless agreed upon in writing by the County. The County has the option to renew this agreement at the same terms and conditions as the original agreement for one additional one-year term with the written consent of the successful bidder. Price increases for renewals are not authorized unless approved in writing by the County.

**Vendor
Information:**

<u>VitalCore Health Strategies, LLC</u>	<u>Roger Haden</u>
Company Name	Authorized Agent (Print)
<u>719 SW Van Buren St., Ste 100</u>	<u><i>Roger L. Haden</i></u>
Address	Signature
<u>Topeka, KS 66604</u>	<u>Director of Marketing</u>
City/State/Zip Code	Title
<u>785-230-3580</u>	<u>11/15/2018</u>
Telephone #	Date
<u>RHaden @VitalCoreHS.com</u>	<u>32-0558007</u>
E-mail	Tax ID #
	<u>785-408-5617</u>
	Fax #

5. Require that this agreement may be terminated by either the Jefferson County Sheriff's Office, the physician or his/her agency for any reason by giving written notice to the other parties 60 days prior to termination date, provided all fees have been paid in full. This agreement shall be renewed each year and remain in force until an additional agreement can be made.

TOTAL ANNUAL COST: \$ _____

PSA

Annual Allocation Year 1				
Description	250 TO 350	350 TO 399	400 TO 499	
Staffing	\$ 443,131.52	\$ 443,131.52	\$ 443,131.52	
Employee Education, Recruiting, Orientation				
Lab, Diagnostics and on-site services	\$ 6,000.00	\$ 6,000.00	\$ 8,000.00	
Medical Supplies	\$ 8,000.00	\$ 8,000.00	\$ 9,000.00	
Telephones, Communications, Computers, Office Supplies, and Equipment	\$ 1,000.00	\$ 1,000.00	\$ 2,500.00	
Pharmacy	\$ 47,000.00	\$ 47,000.00	\$ 53,000.00	
Out of Facility Care	\$ 46,000.00	\$ 46,000.00	\$ 56,000.00	
Insurance	\$ 8,000.00	\$ 8,000.00	\$ 8,000.00	
Administration, Overhead and Margin	\$ 35,000.00	\$ 35,000.00	\$ 35,000.00	
Taxes				
Software License, Hardware, Installation, and Training	\$ 1,000.00	\$ 1,000.00	\$ 3,000.00	
Software Usage Fee	\$ 500.00	\$ 500.00	\$ 1,000.00	
Total Annual Cost by Population:	\$ 595,631.52	\$ 595,631.52	\$ 618,631.52	
COST PER INMATE PER DAY				

Annual Allocation Year 2				
Description	250 TO 350	350 TO 399	400 TO 499	
Staffing	\$ 451,994.15	\$ 451,994.15	\$ 451,994.15	
Employee Education, Recruiting, Orientation				
Lab, Diagnostics and on-site services	\$ 6,120.00	\$ 6,120.00	\$ 8,160.00	
Medical Supplies	\$ 8,160.00	\$ 8,160.00	\$ 9,180.00	
Telephones, Communications, Computers, Office Supplies, and Equipment	\$ 1,020.00	\$ 1,020.00	\$ 2,550.00	
Pharmacy	\$ 47,940.00	\$ 47,940.00	\$ 54,060.00	
Out of Facility Care	\$ 46,920.00	\$ 46,920.00	\$ 57,120.00	
Insurance	\$ 8,160.00	\$ 8,160.00	\$ 8,160.00	
Administration, Overhead and Margin	\$ 35,700.00	\$ 35,700.00	\$ 35,700.00	
Taxes				
Software License, Hardware, Installation, and Training	\$ 1,020.00	\$ 1,020.00	\$ 3,060.00	
Software Usage Fee	\$ 510.00	\$ 510.00	\$ 1,020.00	
Total Annual Cost by Population:	\$ 607,544.15	\$ 607,544.15	\$ 631,004.15	

Annual Allocation Year 3				
Description	250 TO 350	350 TO 399	400 TO 499	
Staffing	\$ 461,034.03	\$ 461,034.03	\$ 461,034.03	
Employee Education, Recruiting, Orientation				
Lab, Diagnostics and on-site services	\$ 6,242.40	\$ 6,242.40	\$ 8,323.20	
Medical Supplies	\$ 8,323.20	\$ 8,323.20	\$ 9,363.60	
Telephones, Communications, Computers, Office Supplies, and Equipment	\$ 1,040.40	\$ 1,040.40	\$ 2,601.00	
Pharmacy	\$ 48,898.80	\$ 48,898.80	\$ 55,141.20	
Out of Facility Care	\$ 47,858.40	\$ 47,858.40	\$ 58,262.40	
Insurance	\$ 8,323.20	\$ 8,323.20	\$ 8,323.20	
Administration, Overhead and Margin	\$ 36,414.00	\$ 36,414.00	\$ 36,414.00	
Taxes				
Software License, Hardware, Installation, and Training	\$ 1,040.40	\$ 1,040.40	\$ 3,121.20	
Software Usage Fee	\$ 520.20	\$ 520.20	\$ 1,040.40	
Total Annual Cost by Population:	\$ 619,695.03	\$ 619,695.03	\$ 643,624.23	

Annual Allocation Year 4				
Description	250 TO 350	350 TO 399	400 TO 499	
Staffing	\$ 470,254.71	\$ 470,254.71	\$ 470,254.71	
Employee Education, Recruiting, Orientation				
Lab, Diagnostics and on-site services	\$ 6,367.25	\$ 6,367.25	\$ 8,489.66	
Medical Supplies	\$ 8,489.66	\$ 8,489.66	\$ 9,550.87	
Telephones, Communications, Computers, Office Supplies, and Equipment	\$ 1,061.21	\$ 1,061.21	\$ 2,653.02	
Pharmacy	\$ 49,876.78	\$ 49,876.78	\$ 56,244.02	
Out of Facility Care	\$ 48,815.57	\$ 48,815.57	\$ 59,427.65	
Insurance	\$ 8,489.66	\$ 8,489.66	\$ 8,489.66	
Administration, Overhead and Margin	\$ 37,142.28	\$ 37,142.28	\$ 37,142.28	
Taxes				
Software License, Hardware, Installation, and Training	\$ 1,061.21	\$ 1,061.21	\$ 3,183.62	
Software Usage Fee	\$ 530.60	\$ 530.60	\$ 1,061.21	
Total Annual Cost by Population:	\$ 632,088.93	\$ 632,088.93	\$ 656,496.72	

Annual Allocation Year 5				
Description	250 TO 350	350 TO 399	400 TO 499	
Staffing	\$ 479,659.81	\$ 479,659.81	\$ 479,659.81	
Employee Education, Recruiting, Orientation				
Lab, Diagnostics and on-site services	\$ 6,494.59	\$ 6,494.59	\$ 8,659.46	
Medical Supplies	\$ 8,659.46	\$ 8,659.46	\$ 9,741.89	
Telephones, Communications, Computers, Office Supplies, and Equipment	\$ 1,082.43	\$ 1,082.43	\$ 2,706.08	
Pharmacy	\$ 50,874.31	\$ 50,874.31	\$ 57,368.90	
Out of Facility Care	\$ 49,791.88	\$ 49,791.88	\$ 60,616.20	
Insurance	\$ 8,659.46	\$ 8,659.46	\$ 8,659.46	
Administration, Overhead and Margin	\$ 37,885.13	\$ 37,885.13	\$ 37,885.13	
Taxes				
Software License, Hardware, Installation, and Training	\$ 1,082.43	\$ 1,082.43	\$ 3,247.30	
Software Usage Fee	\$ 541.22	\$ 541.22	\$ 1,082.43	
Total Annual Cost by Population:	\$ 644,730.71	\$ 644,730.71	\$ 669,626.65	

Annual Allocation Year 6				
Description	250 TO 350	350 TO 399	400 TO 499	
Staffing				
Employee Education, Recruiting, Orientation				
Lab, Diagnostics and on-site services				
Medical Supplies				
Telephones, Communications, Computers, Office Supplies, and Equipment				
Pharmacy				
Out of Facility Care				
Insurance				
Administration, Overhead and Margin				
Taxes				
Software License, Hardware, Installation, and Training				
Software Usage Fee				
Total Annual Cost by Population:				

% Increase From Year 3
2%

% Increase From Year 5
2%

% Increase From Year 1
2%

% Increase From Year 2
2%

VitalCore Health Strategies <small>COMMUNITY HEALTH CARE</small>					Direct Labor for Base Year														
		Direct Labor Costs																	
Personnel Costs cover all Contract Line Items (CLINs)		Regular Hours				Night Shift Differential				Sundays Differential				Back Fill		Total Labor Hour Cost	Total Benefit Percent: 16%	Labor Overhead: 0%	Total Annual Direct Labor
Estimated Labor Hours Auto Imported From Tab2	Regular Hourly Rate \$	Current RATE	Regular Hours Cost	Estimated Night Shift Hours***	Night Shift Differential Rate \$1.00	Estimated Sunday Hours***	Sunday Differential Cost* \$1.00	Backfill Hours 0.00 of FTE	Regular Hourly rate	Back Fill Costs									
Administrative Assistant		\$ 17.00		\$ -	\$ -	\$ -	\$ -	0	\$ -	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Mid-level Provider	0	\$ 55.00		\$ -	\$ -	\$ -	\$ -		\$ 55.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Case Managers		\$ 25.00		\$ -	\$ -	\$ -	\$ -		\$ 25.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Chief Psychiatrist	4	\$ 130.00		\$ 520.00	\$ -	\$ -	\$ -		\$ 130.00	\$ -	\$520.00	\$0.00	\$0.00	\$0.00	\$520.00	\$0.00	\$520.00		
Certified Medication Aide	0	\$ 15.00		\$ -	\$ -	\$ -	\$ -		\$ 15.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Dental Assistant		\$ 16.00		\$ -	\$ -	\$ -	\$ -		\$ 16.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Dentist		\$ 95.00		\$ -	\$ -	\$ -	\$ -		\$ 95.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Mental Health Coordinator	40	\$ 29.00		\$ 1,160.00	\$ -	\$ -	\$ -		\$ 29.00	\$ -	\$1,160.00	\$0.00	\$0.00	\$0.00	\$1,345.60	\$0.00	\$1,345.60		
Director of Nursing	0	\$ 33.00		\$ -	\$ -	\$ -	\$ -		\$ 33.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Health Services Administrator	40	\$ 35.00		\$ 1,400.00	\$ -	\$ -	\$ -	0	\$ 35.00	\$ -	\$1,400.00	\$0.00	\$0.00	\$224.00	\$0.00	\$1,624.00	\$1,624.00		
LPN Admissions	40	\$ 21.00		\$ 840.00	\$ -	\$ -	\$ -		\$ 21.00	\$ -	\$840.00	\$0.00	\$0.00	\$134.40	\$0.00	\$974.40	\$974.40		
LPN Clinic		\$ 26.00		\$ -	\$ -	\$ -	\$ -		\$ 26.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
LPN Health Care Practitioner		\$ 26.00		\$ -	\$ -	\$ -	\$ -		\$ 26.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Rounds		\$ 26.00		\$ -	\$ -	\$ -	\$ -		\$ 26.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
LPN Infirmiry		\$ 26.00		\$ -	\$ -	\$ -	\$ -		\$ 26.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
LPN Medication Room		\$ 26.00		\$ -	\$ -	\$ -	\$ -		\$ 26.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Medical Director (Physician)	4	\$ 105.00		\$ 420.00	\$ -	\$ -	\$ -	0	\$ 105.00	\$ -	\$420.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$420.00		
Medical Records Clerk		\$ 17.00		\$ -	\$ -	\$ -	\$ -	0	\$ 17.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Medical Records Supervisor		\$ 22.00		\$ -	\$ -	\$ -	\$ -		\$ 22.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Physician		\$ 125.00		\$ -	\$ -	\$ -	\$ -		\$ 125.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
PSYCH APRN		\$ 60.00		\$ -	\$ -	\$ -	\$ -		\$ 60.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Unlicensed Mental Health Professional		\$ 30.00		\$ -	\$ -	\$ -	\$ -		\$ 30.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Psychiatric Social Worker		\$ 28.00		\$ -	\$ -	\$ -	\$ -		\$ 28.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Supervisor		\$ 165.00		\$ -	\$ -	\$ -	\$ -		\$ 165.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Psychiatrist		\$ 32.00		\$ -	\$ -	\$ -	\$ -		\$ 32.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN Admissions (Physicals)		\$ 31.00		\$ -	\$ -	\$ -	\$ -		\$ 31.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN Clinic	112	\$ 28.00		\$ 3,136.00	\$ -	\$ -	\$ -		\$ 28.00	\$ -	\$3,136.00	\$0.00	\$0.00	\$501.76	\$0.00	\$3,637.76	\$3,637.76		
RN Clinic- Treatments		\$ 35.00		\$ -	\$ -	\$ -	\$ -		\$ 35.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN Infectious Disease		\$ 38.00		\$ -	\$ -	\$ -	\$ -		\$ 38.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN Infirmiry		\$ 35.00		\$ -	\$ -	\$ -	\$ -		\$ 35.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN Mental Health		\$ 35.00		\$ -	\$ -	\$ -	\$ -		\$ 35.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN QAPI		\$ 38.00		\$ -	\$ -	\$ -	\$ -		\$ 38.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN Staff Development/Recruiter		\$ 38.00		\$ -	\$ -	\$ -	\$ -		\$ 38.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
RN Supervisor		\$ 35.00		\$ -	\$ -	\$ -	\$ -		\$ 35.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Unit Clerks		\$ 18.00		\$ -	\$ -	\$ -	\$ -		\$ 18.00	\$ -	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
240 HOURS					0.00		\$ 0.00				\$0.00				\$0.00	\$0.00	\$0.00		
																Weekly	\$8,521.76		
																Yearly	\$443,131.52		

JEFFERSON COUNTY STAFFING PLAN PROPOSAL

Position	FTE	Backfill 0.2 of FTE	Hours	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	FTE SUM	Check vs Column B
Administrative Assistant																										0.00	TRUE
Mid-level Provider		0.00																								0.00	TRUE
Case Managers		0.00	0																							0.00	TRUE
Chief Psychiatrist	0.10	0.02	4			4																				0.10	TRUE
Certified Medication Aide																										0.00	TRUE
Dental Assistant																										0.00	TRUE
Dentist																										0.00	TRUE
Mental Health Coordinator	1.00	0.20	40			8	8	8	8																	1.00	TRUE
Director of Nursing		0.00	0																							0.00	TRUE
Health Services Administrator	1.00		40			8	8	8	8																	1.00	TRUE
LPN Admissions	1.00		40			8	8	8	8																	1.00	TRUE
LPN Clinic																										1.00	TRUE
LPN Health Care Practitioner Rounds		0.00	0																							0.00	TRUE
LPN Infirmity		0.00	0																							0.00	TRUE
LPN Medication Room		0.00																								0.00	TRUE
Medical Director (Physician)	0.10	0.02	4						4																	0.10	TRUE
Medical Records Clerk																										0.00	TRUE
Medical Records Supervisor																										0.00	TRUE
Physician																										0.00	TRUE
PSYCH APRN																										0.00	TRUE
Unlicensed Mental Health Professional																										0.00	TRUE
Psychiatric Social Worker Supervisor																										0.00	TRUE
Psychiatrist																										0.00	TRUE
Psychologist																										0.00	TRUE
RN Admissions (Physicals)		0.00																								0.00	TRUE
RN Clinic	2.80	0.56																								2.80	TRUE
RN Clinic - Treatments		0.00																								0.00	TRUE
RN Infectious Disease		0.00																								0.00	TRUE
RN Infirmity		0.00																								0.00	TRUE
RN Mental Health		0.00																								0.00	TRUE
RN QAPI		0.00																								0.00	TRUE
RN Staff Development/Recruiter		0.00																								0.00	TRUE
RN Supervisor		0.00																								0.00	TRUE
Unit Clerks																										0.00	TRUE
TOTALS:	6.00	0.80	240	0	24	28	24	24	28	0	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	6.00	TRUE
Backfill	0.80																									0.80	TRUE
	6.80																									6.80	TRUE

11:00 p.m. to 7:30 a.m.

3:00 p.m. to 11:30 p.m.

7:00 a.m. to 3:30 p.m.

Hours

Backfill

Check vs Column B

FTE SUM

LPN Booking

Physicals

Charge Nurse

HRZ/WK NIGHT = 56 = 1.4

HRZ/WK EVENING = 56 = 1.4

HRZ/WK DAY = 128 = 3.2