

**STAFF MEETING MINUTES
LANCASTER COUNTY BOARD OF COMMISSIONERS
THURSDAY, OCTOBER 5, 2023, AT 8:30 A.M.
COUNTY CITY BUILDING, 555 S. 10TH STREET
ROOM 112 – CITY COUNTY CHAMBERS**

Advanced public notice of the meeting was posted on the County-City Building bulletin board and the Lancaster County, Nebraska, website and emailed to the media on October 4, 2023. Notice was also published in the Lincoln Journal Star print and digital editions on October 2, 2023.

Commissioners Present: Christa Yoakum, Chair; Sean Flowerday, Vice Chair; Roma Amundson, and Rick Vest

Commissioners Absent: Matt Schulte

Others Present: Dave Derbin, Chief Administrative Officer, Kristy Bauer, Deputy Chief Administrative Officer, and Leslie Brestel, County Clerk's Office

Yoakum noted the location of the Open Meetings Act and opened the meeting at 8:34 a.m.

AGENDA ITEM

1. APPROVAL OF MINUTES FOR SEPTEMBER 28, 2023

MOTION: Amundson moved and Vest seconded approval of the staff meeting minutes for September 28, 2023. Vest, Amundson, Flowerday and Yoakum voted yes. Schulte was absent. Motion carried 4-0.

2. MENTAL HEALTH CRISIS CENTER (MHCC) DIRECTOR REPORT – Scott Etherton, Director, Mental Health Crisis Center

Etherton reviewed his director report (Exhibit 1). He noted the department has received more income from Medicaid than anticipated as the reimbursement rates were increased during the legislative session. Additional revenues are available through the Mental Health Professional position because it allows for longer authorizations and increased services for clients.

Etherton stated his department was under budget last year by \$170,000. This was due to a staff member's retirement and an increase in private insurance use for clients. Also, there was a reclassification of the psychologist position, which has been filled since May. The psychiatrist position needs reviewed. There is still an open Registered Nurse position.

Vest asked if the tuition reimbursement program has helped any MHCC employees. Etherton answered they have had an employee submit paperwork, but he does not believe that benefit was a major factor in her decision to work for the County.

Etherton said trainings and presentations are held, including presentations given by Region V. The

on-call staff have a quarterly meeting. The MHCC will be conducting its accreditation process. Etherton stated the biggest hurdle the MHCC faces is bedspace at the Lincoln Regional Center (LRC). Last year, 37 individuals were committed to the LRC on an inpatient basis. Of the 37 committed, 16 were admitted to the LRC. Three individuals were released to Mary Lanning and the remaining were stabilized at the MHCC and then released to the community at a lower level of care. The 18 that remained at the MHCC had an average length of stay of 81 days.

3. YOUTH SERVICES CENTER DIRECTOR (YSC) DISCUSSION – Laura Leppky, Talent Acquisition Division Leader, Lincoln-Lancaster County Human Resources

Leppky said the candidates had department tours on Monday in addition to the interviews.

Amundson stated she felt that while both candidates had strong attributes, she would support moving forward with Brad Alexander. The other Commissioners agreed with Amundson.

MOTION: Flowerday moved and Amundson seconded to extend an offer to Brad Alexander. Flowerday, Vest, Amundson and Yoakum voted yes. Schulte was absent. Motion carried 4-0.

Leppky asked the Board what salary amount between \$120,000 and \$130,000 the Board would like to extend with the offer. It was the consensus of the Board to extend an offer of \$130,000.

Leppky noted Alexander was willing to relocate for the position if required. It was the consensus of the Board to not require relocation as long as Alexander is available to the YSC and has a presence in the community.

4. EXECUTIVE SESSION

- A. POTENTIAL LITIGATION (WHICH IS IMMINENT AS EVIDENCED BY COMMUNICATION OF A CLAIM OR THREAT OF LITIGATION TO OR BY THE PUBLIC BODY);**
- B. REAL ESTATE PURCHASES; and**
- C. LEGAL ADVICE.**

MOTION: Vest moved and Amundson seconded to enter Executive Session at 9:17 a.m. for the purposes of potential litigation, real estate purchases, receiving legal advice and to protect the public interest.

The Chair said it had been moved and seconded that the Board enter Executive Session.

ROLL CALL: Flowerday, Vest, Amundson and Yoakum voted yes. Schulte was absent. Motion carried 4-0.

The Chair restated the purpose for the Board to enter Executive Session.

MOTION: Vest moved and Amundson seconded to exit Executive Session at 9:30 a.m. Amundson, Flowerday, Vest and Yoakum voted yes. Schulte was absent. Motion carried 4-0.

5. DISCUSSION OF BOARD MEMBER MEETINGS ATTENDED

A. Chamber Coffee

Amundson reported there were discussions concerning the Intern Nebraska grant funds, Beer Week, the Assemble Lincoln Committee, the Lincoln airport and Lincoln Electric System.

6. SCHEDULE OF BOARD MEMBER MEETINGS

See agenda.

7. EMERGENCY ITEMS

None.

8. ADJOURNMENT

MOTION: Vest moved and Amundson seconded to adjourn at 9:34 a.m. Vest, Amundson, Flowerday and Yoakum voted yes. Schulte was absent. Motion carried 4-0.



Matt Hansen
Lancaster County Clerk





Director's Report

Submitted on 29 September 2023, 1:56PM
 Receipt number 31
 Related form version 12

Department Leadership

County Department Mental Health Crisis Center
 Director's Full Name Scott Etherton
 Is there an Assistant or Deputy to the Director? No--There is NOT an Assistant or Deputy

Department Strategy

Do you prefer to Type or Upload your Department's Mission and Vision Statement(s)? I prefer to UPLOAD
 You can drag and drop your document files here. [Mental Health Crisis Center mission vision statement.docx](#)

Department Staff

Please attach your department's organizational chart here: [Crisis Center Organizational chart.docx](#)
 Number of Grant-funded Positions 1
 Overtime Budget for Prior Fiscal Year 98000
 Actual Overtime Costs in Prior Fiscal Year 69137.23
 Did your Department reclassify any positions during the Prior Fiscal Year? Yes

Reclassified Positions

Item 1	Original position classification title	Original position classification annual salary (dollars)	New position classification title	New position classification annual salary (dollars)	Difference in salary between original and new position classifications	Was the classification of the new position budgeted in the prior fiscal year?	Explanation regarding reclassification of the position
	Psychologist	119410	Psychologist	152956	\$33546.00		Market for salary is greater than the past. unable to hire under existing structure

Do you have any other comments regarding your Department's Staff or Staffing Budget?

Current pay for the psychiatrist does not meet market standards. I would prefer to look at this prior to retirement of current provider.
RN position was looked at 2 years ago but we are reaching the top of the pay scale and have been unable to fill a FT position for the last 1.5 years.
Looking at the need to increase overnight staffing with 1 technician.

Department Locations

Please upload your department's Telework Policy here:

List the addresses of each of your offices / locations.

825 J St
We do not have a separate Telework policy. Some duties can be performed remotely but only for some positions.

Department Services

List your Department's Divisions/Programs

Emergency Protective Custody - Crisis Stabilization
One Mental Health Professional position is funded through DHHS through Region V. It provides additional programming/discharge planning and brief community follow up for clients. Position is funded due to increase in length of stay for inpatient committed persons and their continued care/stabilization at the MHCC.

Additional Comments

Department Budget

Please paste your OpenGov Departmental Budget Link here

https://controlpanel.opengov.com/reports#/lancaster/35605/accountType=revenuesVersusExed=n&breakdown=types¤tYearAmount=cumulative¤tYearPeriod=months&graphSort=desc&month=8&proration=false&saved_view=112512&selection=C750899537C8BE97A694&projections=null&projectionType=null&highlighting=null&highlightingVariance=null&yearCtedDataSetIndex=null&fiscal_start=earliest&fiscal_end=latest

Prior fiscal year budget	4072001
Prior fiscal year actual	3898930
Prior Fiscal Year Surplus/Deficit	\$173071.00
Do you have additional appropriations for the prior fiscal year?	No

Additional Comments

Some group benefit expenses were lower. Retirement of a position and new hires did not take the same benefits as those they replaced.
Revenues were greater under Medicaid & private insurance. Medicaid rates were increased by 15% this FY & revenue will probably decrease this year due to changes in who is covered. Pvt insurance just depends upon coverage by admitted clients.

Department Risk: Worker's Compensation

Attach Worker's Comp Reports here (if applicable)

[Crisis Center WC report.pdf](#)

Number of Worker's Comp claims paid	1
How much did your department pay in Worker's Comp claims?	769.41

Additional Comments

Department Risk: Auto and General Liability

Attach Loss Run Reports for Auto and GL

Number of Auto Claims	0
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How much was paid out for Auto Claims?	0
Number of General Liability Claims	0
How much was paid out for General Liability Claims?	0
Number of Property Claims	0
How much was paid out for Property claims?	0
Additional Comments	no issues

Department Wellness

Attach Sick Leave Report	Sick Leave_Crisis.Center.2023.pdf
Additional Comments	The percentages reported also include hours worked by on-call staff, mental health technicians & nurses, that do not earn nor use sick time.

Department Awards and Recognition

Prior Fiscal Year Departmental Award Winners	None
Prior Fiscal Year Department Commissioner's Award Winners	None
Other Recognition from the Prior Fiscal Year	
Additional Comments	Our service does not lend itself to be recognized much in this area. It is an unsung part of the mental health system.

Department Training

Please List any Department-wide Training Sessions	<p>Held a day long FTE staff training in January. First time it has been held since COVID pandemic. Covered required yearly trainings, introduced new documentation for client charts and Team Building exercises.</p> <p>Conducted annual Crisis Prevention Institute-Physical non-violent intervention along with CPR as needed, in May. This was completed in about 6 separate sessions throughout the month, all full time and on-call staff.</p> <p>New RN & MHT trainings were held as needed throughout the year. 6 days of classroom followed by shadowing of unit staff prior to starting to work shifts.</p>
Please List Other Staff Training Opportunities	<p>Attended trainings as offered through Region V, EMDR, CBT, Motivational Interviewing. MD attended a national APA conference.</p> <p>Credible/Qualifacts Partner Conference-September 2022 - three days of sessions & on-line viewable for the next three months. Various staff attended sessions in interested areas of education.</p>
Additional Comments	<p>May look into Relias, a training of record keeping software product, used by numerous other providers.</p> <p>Credible/Qualifacts may offer a similar product.</p>

Department Accreditation

Is your department accredited?	Yes
Is your department pursuing accreditation?	
Accrediting Body	Commission on Accreditation of Rehabilitation Facilities - CARF
Accreditation Renewal Date	10/31/2024
Additional Comments	Halloween seems appropriate.

Application is due in the spring.

Overview and Accomplishments

When were you appointed as a Director?	7/1/2013
Do you serve on any internal committees or boards?	Yes
Please List any Internal Committees you serve	Health & Safety Performance Improvement Administrative Committee
Please List any Internal Boards you serve	Mental Health Advisory Board
Do you serve on any external boards or committees?	Yes
Please List any External Committees you serve	Region V Network Provider Committee Woods Award Committee - State of NE DHHS LRC awards Region V Emergency Management Credible NE users group
Please List any External Boards you serve	Qualifacts Provider Advisory Board - NE representative
Please list your Education	BS - Nebraska Wesleyan University Business & Psychology
Please list any Continuing Education you've taken in the past year	Continuum training on Supervision & Team building Credible/Qualifacts - Business Intelligence & Administrative functions Motivational Interviewing
Do you have any active licenses or certifications?	No
Please list any publications you have written or contributed to	
Please list any presentations you have made	BETA - Behavioral Health Threat Assessment - training for law enforcement & providers HIPAA/Corporate Compliance to MHCC staff Mental Health Board - Law & Decision Making - MHCC staff
Please list any department accomplishments for the prior fiscal year	Advanced in our offering of Groups & Therapy sessions for all clients.

Review 1 - Sustainable Government

Please list your department's goal from last year	Maximize revenue from applicable sources and monitor progress.
What is the status of this goal?	Partially Completed
When was this goal's target completion date?	06/30/2023
When was this goal's actual completion date?	
What were the tangible or intangible deliverables for this goal, and were they realized?	This is always an on-going process, that is why it is listed as Partially Completed. Medicaid revenue was 25% over budgeted numbers & Private Insurance revenue was up significantly.
What were the interim milestones toward achieving this goal, and were they reached?	We did review services as needed during the FY to adjust billing parameters & monitor.
How was success measured, and based on that standard, was this goal successful?	It was considered successful as we measure outcomes.
Were there any external factors that affected achieving this goal?	Always depends upon what coverage our clients admitted have. Length of stay & acuity of the client affects the insurance authorizations & therefore payment.

Were there any resources and/or plans that affected achieving this goal?

The added Mental Health Professional position at this time, conducts more groups than individual therapy sessions, but the group processes and client participation in those, allows for longer authorizations to occur and thus leads to increased revenue.

Do you have any additional comments on this goal?

Review 2 - Safe Community

Please list your department's goal from last year

Continue goal from last year of conduct evaluations on every admission to determine a level of care needed to prevent harm from occurring. Discharge with a plan that can be as effective as possible with the circumstances of the community and individual.

What is the status of this goal?

Partially Completed

When was this goal's target completion date?

06/30/2023

When was this goal's actual completion date?

What were the tangible or intangible deliverables for this goal, and were they realized?

Discharge plans & referral statistics. We readily track inpatient & outpatient commitments, but not everyone else discharged.

What were the interim milestones toward achieving this goal, and were they reached?

We usually look at commitments quarterly to view length of stay and other measures.

How was success measured, and based on that standard, was this goal successful?

The basic measure of maintaining safety of clients during and after discharge is met. During this FY the MHP position has started conducting a basic follow up with clients placed on outpatient commits, to help them make contact with their scheduled provider.

Were there any external factors that affected achieving this goal?

Limited control over follow through of clients past discharge. Mental Health Board can initiate legal process to ensure follow up when needed.

Were there any resources and/or plans that affected achieving this goal?

Competent MH professionals to conduct assessments and provide on-going care.

Do you have any additional comments on this goal?

Review 3 - Healthy Community

Please list your department's goal from last year

Maintain a healthy work environment for employees and clients that we serve.

What is the status of this goal?

Partially Completed

When was this goal's target completion date?

06/30/2023

When was this goal's actual completion date?

What were the tangible or intangible deliverables for this goal, and were they realized?

Continued goal from last year. Operate fully staffed at all times regardless of a pandemic or other infectious disease. Ability to accept admissions and maintain a nonquarantined facility. The goals were met this year

What were the interim milestones toward achieving this goal, and were they reached?

We continue to do a screening prior to admission. We have moved this process into the intake area of the building, rather than outside, during the pandemic. Staff continues to monitor themselves and self reports illness.

How was success measured, and based on that standard, was this goal successful?

Our ability to accept new admissions and maintain a healthy environment for staff & clients. I believe we have been effective in maintaining this goal.

Were there any external factors that affected achieving this goal?

Staffing levels or availability to cover shifts effectively. Symptomatic clients screened timely and prior to admission. Ability to test & isolate as necessary.

Were there any resources and/or plans that affected achieving this goal?

Cooperativeness of local resources for screening when needed.

Do you have any additional comments on this goal?

Review 4 - Diverse Community

Please list your department's goal from last year	Continued from last year. Maintain training requirements for CARF accreditation and have a workforce that reflects the makeup of the community.
What is the status of this goal?	Partially Completed
When was this goal's target completion date?	06/30/2023
When was this goal's actual completion date?	
What were the tangible or intangible deliverables for this goal, and were they realized?	On-going trainings offered and participated in by staff. Clients feel welcomed in the inpatient environment of our unit due to the diverse and knowledgeable workforce. Translation services available to communicate effectively with clients. We have been able to access translation services when necessary & utilize our internal resources as needed. We were able able to conduct our first all day training in three years.
What were the interim milestones toward achieving this goal, and were they reached?	Staff are trained effectively in aspects of culture & diversity. Translation services are contacted for services when needed for clients. I believe we were able to meet these goals.
How was success measured, and based on that standard, was this goal successful?	All staff were able to be trained in the needed areas. Most languages were able to be accommodated in this area.
Were there any external factors that affected achieving this goal?	It can take time to find a translator for some languages. All tablets & devices are reviewed for translation functions.
Were there any resources and/or plans that affected achieving this goal?	No.
Do you have any additional comments on this goal?	

Goal 1 - Community Well-Being and Safety

Please list your department's goal	Continue goal from last year of conduct evaluations on every admission to determine a level of care needed to prevent harm from occurring. Discharge with a plan that can be as effective as possible with the circumstances of the community and individual.
When is this goal's completion date?	06/30/2024
What are the tangible or intangible deliverables for this goal?	Discharge plans reflect the available use of resources and account for the safety of the client and their wishes while accounting for the legal determinates of the Mental Health Board proceedings. The MH Professional is following up with clients placed on outpatient commitments to help ensure they engage with their scheduled community provider.
What are the interim milestones toward achieving this goal?	Participate in the H.U.R.T meetings to assist or monitor progress of clients in the community.
How will success be measured?	Continued review of known occurrences of violence/suicide. Participation in the local High Utilizers Review Team. May provide more known occurrences after discharge. Review of discharges based on placements and readmissions to MHCC.
Upon what external factors does achieving this goal depend?	We have limited control over follow through of clients past discharge. Mental Health Board can initiate legal process to ensure follow up when needed. Legal determinants of Commitment Act can move persons who demonstrate illness back into the community.
What resources and/or plans are needed to support this goal?	Competent mental health professionals to conduct assessments and provide care.

Goal 2 - Welcoming and Diverse Communities

Please list your department's goal	Continued from last year. Maintain training requirements for CARF accreditation and have a workforce that reflects the makeup of the community.
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When is this goal's completion date?	06/30/2024
What are the tangible or intangible deliverables for this goal?	On-going trainings offered and participated in by staff. Clients feel welcomed in the inpatient environment of our unit due to the diverse and knowledgeable workforce. Translation services available to communicate effectively with clients.
What are the interim milestones toward achieving this goal?	Staff are trained effectively in aspects of culture & diversity. Translation services are contacted for services when needed for clients.
How will success be measured?	Enough offerings are available so all staff has documentation & competence of participation. Evaluations are conducted via a translator when needed.
Upon what external factors does achieving this goal depend?	It can be difficult to find a person to translate a dialect for certain languages. We cannot control who applies for positions to work for the MHCC.
What resources and/or plans are needed to support this goal?	I believe they are in place. During the last year we hired staff who have multiple different backgrounds. We also receive some reimbursement for translation services through Region V.

Goal 3 - Employer of Choice

Please list your department's goal	Participate in external education & trainings offered to enhance employees' skills and growth for advancement.
When is this goal's completion date?	06/30/2024
What are the tangible or intangible deliverables for this goal?	To have employee participation in the County Leadership Academy that is offered annually. To have employees attend trainings & education during the year.
What are the interim milestones toward achieving this goal?	We have had three employees participate in the Leadership Academy. Encouragement to attend available trainings and making events known to employees.
How will success be measured?	Participation in events external to the agency.
Upon what external factors does achieving this goal depend?	The availability of the employee to attend and staffing coverage for the event.
What resources and/or plans are needed to support this goal?	Disbursement of upcoming trainings & staff available to cover shifts.

Goal 4 - Climate Smart and Resilient Infrastructure

Please list your department's goal	To decrease our office environmental footprint by reduce, reuse and recycle whenever possible.
When is this goal's completion date?	06/30/2024
What are the tangible or intangible deliverables for this goal?	Use of technology to use electronic methods rather than printing. Be able to use reusable dishes/trays rather than disposable.
What are the interim milestones toward achieving this goal?	Continue to monitor cost & use of products. Dishwasher useable, rather than Styrofoam.
How will success be measured?	Decreased cost of hard materials reflected by associated costs.
Upon what external factors does achieving this goal depend?	Everyone's effort to use less products.
What resources and/or plans are needed to support this goal?	Alternative products and staff training if needed.

Goal 5 - Thriving Economy

Please list your department's goal	Fostering ongoing relationships with other direct care service providers & community
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partners.

When is this goal's completion date?

06/30/2024

What are the tangible or intangible deliverables for this goal?

What are the interim milestones toward achieving this goal?

How will success be measured?

Upon what external factors does achieving this goal depend?

What resources and/or plans are needed to support this goal?

Almost Finished

I would like to receive an email copy of this form

Email address

setherton@lancaster.ne.gov

Mental Health Crisis Center Of Lancaster County

Mission Statement

The Mental Health Crisis Center is dedicated to providing quality mental health care to adults in Region V who experience acute psychological distress for evaluation under the Nebraska Mental Health Commitment Act.

Core Values

We believe services should be...

- *Responsive to client and stakeholder needs*
- *Client informed*
- *Culturally aware and responsive*
- *Considerate of a client's trauma history*

We believe staff who deliver services should be...

- *Caring*
- *Highly qualified*
- *Effective team members*
- *Individuals who have ethical and strong professional standards*

We believe the provision of mental health services should be...

- *Individualized*
- *Timely without bias*
- *Cost effective*

Vision

The Mental Health Crisis Center will enhance its role as one of the leading advocates for the delivery of a coordinated community response to individuals in an emergent mental health crisis

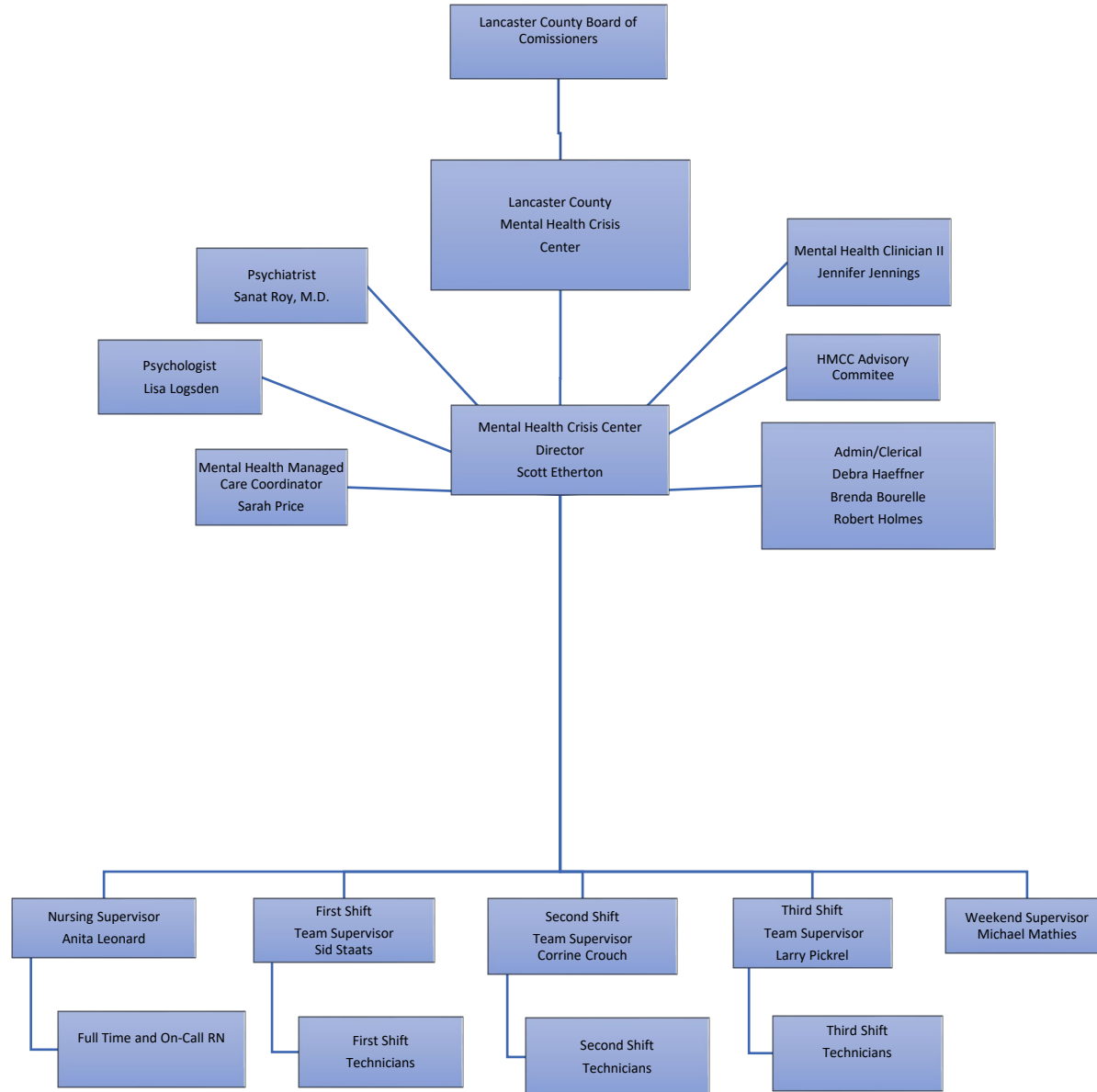
We will become an organization committed to continuous quality improvement that is client and stakeholder focused

We will be united in our commitment to provide an environment that is caring, secure, responsive and safe

We will enable staff to grow and attain professional excellence

We will continue to strive to decrease if not eliminate the use of Seclusion/ Restraint whenever possible.

Organizational Chart: Mental Health Crisis Center 2023



Fiscal Year 2022-2023 Employee Data - Prepared by the County Clerk's Office

Department	Total Number of Employees	Number of Actual Full-Time Equivalent Employees at the End of Prior Fiscal Year	Number of Employees at the End of Prior Fiscal Year	Number of Retirements in the Prior Fiscal Year	Number of Other Voluntary and Involuntary Employee Separations in Prior Fiscal Year	Total Number of Employee Separations in the Prior Fiscal Year	Average Number of Employees	Prior Fiscal Year Employee Turnover Rate
01.County Assessor/Register of Deeds	49	39	39	3	8	11	41.62	26.43
02.County Attorney	90	74.5	80	1	9	10	74.89	13.35
03.County Extension Service	11	8	8	0	0	0	8.00	0.00
04.Community Corrections	51	33.73	37	1	10	11	35.10	31.34
05.County Clerk	17	13	13	0	2	2	13.00	15.38
06.Clerk of the District Court	38	26	26	3	4	7	25.41	27.55
08.Budget and Fiscal	4	2	2	0	2	2	2.78	71.85
09.Election Commissioner	62	10.5	11	3	1	4	10.85	36.87
10.Risk Management	2	1.53	2	0	0	0	2.00	0.00
12.Juvenile Court	11	8.75	9	0	2	2	8.31	24.06
14.County Sheriff	122	109	109	0	13	13	108.38	12.00
16.Human Services	11	10	10	0	0	0	10.00	0.00
17.County Treasurer	42	39	39	1	2	3	38.57	7.78
18.Veterans Services	7	5	5	0	2	2	4.11	48.70
19.Public Defender	57	43.59	45	2	9	11	41.21	26.69
20.Administrative Services	3	2.8	3	0	0	0	2.80	0.00
22.Emergency Management	5	3	3	0	2	2	2.73	73.15
23.Records and Info Management	8	6.15	7	0	1	1	5.58	17.93
27.Mental Health Crisis Center	31	27.5	28	1	2	3	26.30	11.41
29.Weed Control Authority	3	3	3	0	0	0	3.00	0.00
30.County/City Property Management	66	53.75	54	0	12	12	55.88	21.48
38.District Court	16	14	14	1	1	2	13.78	14.52
40.County Engineer	130	98	98	3	21	24	101.89	23.55
58.Youth Services Center	50	39	39	1	10	11	39.93	27.55
59.Corrections	235	199	203	3	29	32	202.39	15.81

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Accident Type	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
020 STRUCK BY (FALLING OR FLYING OBJECT)	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Age Group Of Claimant	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
7 35 years but less than 40 years	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Day Of The Week	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
7 Sunday	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Fatigue Factor	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
1 1ST HOUR	1	100.0%	\$769.41	100.0%
	<hr/>		<hr/>	
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Length Of Employment	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
3 6 months but less than 12 months	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Month Of The Year	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
10 October	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Nature Of Accident	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
140 CONCUSSION, BRAIN, CEREBRAL	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Part Of Body	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
110 BRAIN, CONCUSSION	1	100.0%	\$769.41	100.0%
Report Totals	<u>1</u>		<u>\$769.41</u>	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Sex Of Claimant	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
Male	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

Consolidated Safety Report Analysis For CRISIS CENTER

From July 1, 2022 To June 30, 2023

Source Of Injury	Claims		Total Incurred	
	Count	Percent	Amount	PerCent
6020 PERSON/OTHER THAN INJURED	1	100.0%	\$769.41	100.0%
Report Totals	1		\$769.41	

COUNTY OF LANCASTER NEBRASKA

Sick Leave Usage Report

Wages Paid in Calendar Year 2023

Department (All)

Sum of Amount	Column Labels					
Row Labels	Gross Hours	Gross Pay	Sick Hours	Sick Pay		
12/28/2022	74,102.06	2,559,647.05	2,798.08	88,372.28	3.45%	
1/11/2023	74,877.22	2,587,001.71	2,299.25	70,876.35	2.74%	
1/25/2023	74,799.89	2,576,684.46	2,173.81	67,993.63	2.64%	
2/8/2023	72,266.42	2,466,925.43	2,802.73	88,484.44	3.59%	
2/22/2023	74,690.12	2,584,255.36	2,567.82	85,539.56	3.31%	
3/8/2023	74,042.53	2,526,169.69	2,635.94	86,675.44	3.43%	
3/22/2023	73,373.91	2,505,876.39	2,436.61	79,522.63	3.17%	3.19%
4/5/2023	73,123.09	2,472,304.85	2,614.04	88,054.08	3.56%	
4/19/2023	72,198.74	2,458,907.83	2,543.00	81,246.57	3.30%	3.43%
5/3/2023	73,524.14	2,504,420.25	2,244.88	70,493.66	3.03%	
5/17/2023	71,918.68	2,469,710.07	2,357.37	73,286.52	2.97%	
5/31/2023	73,580.86	2,539,981.69	1,865.00	58,708.99	2.31%	
6/14/2023	72,486.22	2,478,421.47	2,232.34	72,187.46	2.91%	
6/28/2023	73,978.19	2,563,495.00	1,969.15	58,607.88	2.29%	
Grand Total	1,028,962.07	35,293,801.25	33,540.02	1,070,049.49	3.03%	

Average FTEs Out on Sick Leave 29.95

COUNTY OF LANCASTER NEBRASKA

Sick Leave Usage Report

Wages Paid in Calendar Year 2023

Department Mental Health Crisis Center

Sum of Amount	Column Labels					
Row Labels	Gross Hours	Gross Pay	Sick Hours	Sick Pay		
12/28/2022	2,809.08	96,637.08	77.75	2,908.26	3.01%	
1/11/2023	2,827.25	97,681.54	14.75	417.36	0.43%	
1/25/2023	2,975.08	100,984.67	11.00	274.98	0.27%	
2/8/2023	2,858.49	94,933.17	55.50	1,853.58	1.95%	
2/22/2023	2,853.84	97,567.28	82.07	2,504.22	2.57%	
3/8/2023	2,737.37	92,411.66	52.42	1,870.70	2.02%	
3/22/2023	2,729.98	91,747.28	38.50	1,220.28	1.33%	1.64%
4/5/2023	2,738.40	91,740.52	56.00	1,610.26	1.76%	
4/19/2023	2,618.64	89,214.37	40.00	1,275.05	1.43%	1.59%
5/3/2023	2,635.50	90,729.70	53.50	1,605.22	1.66%	
5/17/2023	2,753.91	96,149.90	56.25	1,511.05	1.57%	
5/31/2023	2,929.00	103,320.00	58.75	1,819.27	1.76%	
6/14/2023	2,921.63	102,213.38	81.25	2,916.19	2.85%	
6/28/2023	2,901.83	103,936.44	24.25	615.75	0.59%	
Grand Total	39,290.00	1,349,266.99	701.99	22,402.17	1.66%	

Average FTEs Out on Sick Leave 0.63