

CFY 2023 ANNUAL PLAN CHAMPAIGN COUNTY



Supreme Court of Illinois ADMINISTRATIVE OFFICE OF THE ILLINOIS COURTS

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March 29, 2023

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Ms. Shannon Siders, Director
Champaign County Probation and Court Services
Champaign County Courthouse
101 E. Main Street
Urbana, Illinois 61801

Dear Ms. Siders.

The Administrative Office of the Illinois Courts (AOIC) has approved Champaign County Probation and Court Services' County Fiscal Year 2023 Annual Probation Plan. The department's revised compensation plan for union employees which includes a salary range adjustment of 8.3% increase to salary ranges for Court Services Officer (Supervision) and a 7.5% increase to salary ranges for Court Services Officer (Detention) and Senior Court Services Officer (Supervision) has been reviewed. These salary range increases will allow Champaign County to match the starting salaries within the Sixth Judicial Circuit and be competitive with other counties identified as comparison counties. Due to the information provided, this good cause justification request is approved. In addition, a 4% increase to salary ranges for non-union employees has been reviewed and approved. Furthermore, salary increases in the amount of 7% for union employees and 4% for non-union employees as well have been reviewed and approved.

Champaign County Probation and Court Services' Fiscal Year 2023 probation's goal and objectives are focused on continuing to work towards implementing Core Correctional Practices and Probation Casework Standards along with developing an emerging adult caseload. In January 2023, Champaign County Juvenile Detention Center had a Detention Review completed by the Administrative Office and the report was sent out March 6. 2023. The Administrative Office is available to provide training and technical assistance to assist in obtaining these goals and objectives. The receipt of the Juvenile Detention Center's Detainee Handbook is acknowledged, and review was conducted where Administrative Office Juvenile Detention Standards are applicable.

The following table outlines Champaign County Probation and Court Services staff that did not complete the annual training requirement of 20 hours for probation staff and 40 hours for detention staff. These hours will be added to their minimum requirement of 20 hours or 40 hours for next year. For example, if a person has 3.75 hours to make up from this year, they will be expected to complete a minimum of 23.75 hours for probation staff or 43.75 hours for detention staff of training next year.

Jarvis, Jennifer Completed 16.25 out of 20 hours (1.75 hours needed)

Allah, Patricia Completed 16.75 completed of 40 (23.25 hours needed)

Tutter, Skye E. Completed 4.5 of 40 required hours (35.5 hours needed)

Watkins. Alison M. Completed 30.75 hours of 40 hours (9.25 hours needed)

In reviewing proposed expenditures from the Probation and Court Services Fund. \$55,750 is allocated for the purchase of chairs, desks, equipment maintenance, firearm ammunition, office supplies, postage, printing, officer's uniforms, employee assistance program, a vehicle, and the reimbursement to the capital asset replacement fund. Please note the use of fees for this purpose is not in line with the Administrative Office's Probation Services Fees Policies and Guidelines effective (March 1, 2012) and does not fall within statutory provisions as provided by 730 ILCS 110-15(11) which reads in part, "The respective counties shall be responsible for capital and space costs, fringe benefits, clerical costs, equipment, telecommunications, postage, commodities and printing".

The Administrative Office has received, reviewed, and analyzed the Data Variance included in the Fiscal Year 2023 Annual Probation Plan. The variance requests to extend both the July 1, 2022, deadline for implementation of the data variables into your case management system (CMS), JANO, and the January 1, 2023, deadlines for integration of the department's CMS with the Administrative Office's data management system (DMS). The July 1, 2022, deadline request requires an extension because of partial implementation. The vendor has identified that they are finalizing probation and will begin PSC as soon as probation has been completed, but everything should be ready to review in late January. The January 1, 2023, deadline request requires an extension because the department CMS vendor was waiting for the Administrative Office DMS to release specifications on the API requirements. The vendor has identified that they will not be able to determine the length of time to finalize until the API documentation has been reviewed. The extension is approved until July 1, 2023, to allow the contracted vendor the opportunity to continue to finalize development of the case management system. Please provide an update to the supplement folder every 30 days on the progress of implementation in your department.

The Administrative Office will follow up with the department and provide technical assistance regarding these elements of the Annual Probation Plan and the CFY 2023 Strategic Plan. As always, the Annual Probation Plan approval is based upon a department's continued compliance with the provisions of the Probation and Probation Officers Act (730 ILCS 110), and with applicable administrative, operational, and program standards and guidelines established by the Administrative Office of the Illinois Courts. We look forward to working with Champaign County Probation and Court Services in the upcoming year especially in the continued implementation of Core Correctional Practices, Probation Casework Standards, and emerging adult caseloads. In addition, improving evidence-based practice programing and addressing the recent critical findings within the juvenile detention center.

Sincerely,

Michael J. Torchia

Kadd Hod

Field Services Coordinator

Michael Tardia

Daniel S. Hunt

Assistant Director

Probation Services Division

C: Honorable Randall B. Rosenbaum, Chief Judge, Sixth Judicial Circuit Marcia Meis, Director Honorable Kyle Patterson, Champaign County Board Chairperson

COUNTY FISCAL YEAR 2023 ANNUAL PROBATION PLAN SIGNATORIES

DIRECTOR OF COURT SERVICES

As Director of Court Services of the Sixth Judicial Circuit Probation Department serving Champaign County, I hereby submit this County Fiscal Year 2023 Annual Probation Plan. I certify that the information in this plan is true and correct to the best of my knowledge. I further certify that my department will comply with all standards, policies and regulations established by the Supreme Court under provisions of the Probation and Probation Officers Act (730 ILCS 110), and acknowledge that compliance is subject to monitoring, auditing, and qualitative review by staff of the Administrative Office of the Illinois Courts.

| Shannan L. Inday |
|----------------------------|
| Shannon L. Siders |
| Director of Court Services |

Dated: 2/13/23

CHIEF CIRCUIT JUDGE

As Chief Judge of the Sixth Judicial Circuit, I hereby certify that I have reviewed and approve the County Fiscal Year 2023 Annual Probation Plan submitted by the Court Services Department serving Champaign County.

Randall B Rosebaum
Chief Circuit Judge

Dated: 2-/13/23

COUNTY BOARD CHAIR OF THE COUNTY BOARD

As Chair of the County Board of Champaign County, I hereby acknowledge the County Fiscal Year 2023 Annual Probation Plan submitted by the Sixth Judicial Circuit Probation Department serving Champaign County. I understand that submission of the Annual Probation Plan and compliance with the provisions of the Probation and Probation Officers Act (730 ILCS 110) are conditions of state reimbursement.

| Chair Champaign County Board | Dated: 2/20/23 |
|---------------------------------|----------------|
| Kyle Patterson Print Name | |

County Fiscal Year 2023 Salary Ranges

| Table I (Union Staff) | 1 Staff) | Department: Champa | ng. | County | | | | | | | |
|---------------------------------|-------------|--------------------|------------------------|----------|--------------------------|-------|----------|----------|------------|-----------|----------|
| | Pocition | Ann | Annual Salary Range(s) | (s) | Union Position | % of | 70% of | | Recognized | (C) W (C) | Range |
| Position Title | Class/Grade | Minimum | Midpoint | Maximum | (c.g. AFSCNE, FOP, etc.) | Range | Minimum | | Midpoint | Maximum | over 70% |
| Senior Court | N/A | \$48,497 | | \$82,445 | FOP | 70% | \$82,444 | \$48,497 | \$65,470 | \$82,444 | 70% |
| Court Services Officer-Juvenile | A/N | \$48,419 | | \$82,311 | FOP | 70% | \$82,311 | \$48,419 | \$65,365 | \$82,311 | 70% |
| Court Services Officer- | A'Z | \$44,012 | | \$74,820 | FOP | %02 | \$74,820 | \$44,012 | \$59,416 | \$74,820 | 70% |
| Supervision | | | | | | | | | | | |

| | Range must be equal | | 727 70% | 152 70% | 152 70% | 382 70% | 382 70% | 582 70% | 582 70% | 847 70% |
|------------------------------|-------------------------|----------|-----------|------------------------|---|-------------------------------------|------------------|----------------------------------|--|--------------------------|
| | d Recognized Maximum | | \$133,727 | \$105,152 | \$105,152 | \$93.582 | \$93,582 | \$93.582 | \$93,582 | \$81,847 |
| | Recognized Midpoint | | \$106,195 | \$83,503 | \$83,503 | \$74,315 | \$74,315 | \$74,315 | \$74.315 | \$64,996 |
| | Minimum | | \$78,663 | \$61,854 | \$61,854 | \$55,049 | \$55,049 | \$55,049 | \$55,049 | \$48,146 |
| | 70% of Minimum | | \$133,727 | \$105,152 | \$105,152 | \$93,582 | \$93,582 | \$93,582 | \$93,582 | \$81,847 |
| | % of Range | | 70% | 407 | 70% | 70% | 20% | 70% | 70% | 70% |
| | Union Position | | N.A | N/A | N/A | N/A | N/A | NA | N/A | N/A |
| unty | (\$) | Maximum | \$118,014 | \$92,801 | \$92,80! | \$82,544 | \$82,544 | \$82,544 | \$82,544 | \$72,228 |
| Department: Champaign County | Annual Salary Range(s) | Midpoint | \$98,339 | \$77,337 | \$77,337 | \$68,796 | \$68,796 | \$68,796 | \$68.796 | \$60,197 |
| Department: | An | Minimum | \$78,663 | \$61,854 | \$61,854 | \$55,049 | \$55,049 | \$55,049 | \$55,049 | \$48,146 |
| Union Staff) | Position Class/Grade | | Σ | × | ¥ | -, | 1 | | 5 | |
| Table 2 (Non-Union Staff) | Position Title | | Director | Superintendent- JDC | Supervisor- Administrative Services | Assistant Superintendent- IDC | Supervisor-Adult | Supervisor- Juvenile Services | Supervisor- Specialized Services | Problem Solving Court |

County Fiscal Year Organizational Chart

| | Department: | Champaign County | ntv | | | Date | 1/27/2023 | |
|-----------------------|-----------------------|------------------|---------------|-----------|----------------|----------------------------------|-------------------------|------------|
| Prop | Proposed or Existing: | | | | | | 1,11,1000 | |
| Funding Source | Position # | First Name | Last Name | Title | Responsibility | Unit/ Division | Supervisor | Union Name |
| GIA | 100 | John | Doe | Dir/CMO | В | N/A | N/A | N/A |
| GIA | 100 | Shannon | Siders | Dir/CMO | В | N/A | N/A | N/A |
| GIA | 200 | Heather | Rumple-Stahl | PO | Þ | Specialized Servi | ized Servi Julie Roesch | FOP |
| GIA | 1000 | Jennifer | Crites | PO | Α | Adult Services | Amanda Wells | FOP |
| GIA | 1100 | Alesia | Zander | PO | Α | ervices | Amanda Wells | FOP |
| GIA | 1200 | Lucas | Roush | PO | A | Specialized Servi | ized Servi Julie Roesch | FOP |
| GIA | 1300 | Jeremy | Jessup | Sr.PO/JDO | A | Specialized Servi | ized Servi Julie Roesch | FOP |
| GIA | 1400 | Abigail | Cary | PO | Α | Specialized Servi | ized Servi Julie Roesch | FOP |
| GIA | 1500 | Lacey | Busboom | PO | Þ | Specialized Servi | ized Servi Julie Roesch | FOP |
| GIA | 1700 | Heidi | Slough | Sr.PO/JDO | J | Juvenile Services | e Services Teresa Zebe | FOP |
| GIA | 1750 | Kyle | Schiebert | | PSC | PSC | N/A | N/A |
| GIA | 1800 | Paul | McKinney | PO | A | Specialized Servi Julie Roesch | Julie Roesch | FOP |
| SS | 2100 | David | Cardani | PO | Α | Adult Services | Amanda Wells | FOP |
| SS | 2200 | Teresa | Zebe | dnS | | Juvenile Services Shannon Siders | | N/A |
| SS | 2300 | VACANT | | PO | A | Adult Services | Amanda Wells | FOP |
| SS | 2400 | Timothy | Worman | РО | Α | Adult Services | Amanda Wells | FOP |
| GIA | 2500 | Kimberley | Easton-Morris | РО | Α | Adult Services | Amanda Wells | FOP |
| GIA | 2600 | Max | White | PO | Þ | Specialized Servi Julie Roesch | | FOP |
| SS | 2800 | Siobhan | Reynolds | PO | _ | Juvenile Services | | FOP |
| SS | 2900 | Nicki | Roelfs | Sr.PO/JDO | Α | Specialized Servi Julie Roesch | | FOP |
| SS | 3100 | VACANT | | PO | J | Juvenile Services Teresa Zebe | | FOP |
| SS | 3200 | Jeff | Nugent | РО | Α | Adult Services | Amanda Wells | FOP |
| SS | 3300 | Julie | Roesch | dns | A | Specialized Servi | S | N/A |
| SS | 3400 | Amanda | Wells | dnS | A | Adult Services | Shannon Siders | N/A |
| SS | 3500 | Thomas | Foster | Ю | L | Juvenile Services Teresa Zebe | | FOP |
| SS | 3600 | Jennifer | Jarvis | dnS | В | Administrative S Shannon Siders | | N/A |
| SS | 3700 | John | Naese | Od | Α | Adult Services | Amanda Wells | FOP |

Organizational Chart Worksheet

| | | | | | 5 | GIA | GIA | SS |
|--|--|--|--|--|------|-------------------------------|----------------|--------------------------------|
| | | | | | 1000 | 4800 | 3900 | 3800 |
| | | | | | | Cale | Daryl | Amber |
| | | | | | | Robertson | Jackson | Davis |
| | | | | | | PO | РО | РО |
| | | | | | | _ | A | Α |
| | | | | | | Juvenile Services Teresa Zebe | Adult Services | Specialized Servi Julie Roesch |
| | | | | | | Teresa Zebe | Amanda Wells | Julie Roesch |
| | | | | | | FOP | FOP | FOP |

| Funding Source Categories | Categories | Title Categories | egories | Job Function | ion | Union Name |
|---------------------------|------------|---------------------------|---------|-------------------------|-----|------------|
| Grants-in-Aid | GIA | Director/CMO Dir/CMO | Dir/CMO | Both Adult & Juvenil B | B | Teamsters |
| Salary Subsidy | SS | Supervisor | Sup | Adult | Α | AFSCME |
| Pretrial | PT | Prob. Officer PO | PO | Juvenile | - | FQ |
| Grant Funded | GF | Detention Off. JDO | ODL | Detention | D | Etc. |
| County Funded | CF | Senior Officers Sr.PO/JDO | | Problem Solving Cou PSC | PSC | N/A |
| | ı | | | Pretrial | PŢ | |
| | | | | Other | 5 | |



CHAPTER 9 - SALARY ADMINISTRATION GUIDELINES

9-1 DEFINITIONS

- 9-1.1 Position Description A written set of criteria regarding the essential duties and responsibilities performed in a position and the minimum knowledge, skills, abilities, education, training and experience required to perform the job. Position descriptions will be written and maintained by the Salary Administrator, in consultation with the appropriate Department Heads.
- 9-1.2 Authorized Position A single job slot allocated to a County department authorized by the Board as full time or part time. Part-time positions are stated as a percentage of full-time, or average hours worked. All authorized positions shall be identified by a specified County position description.
- 9-1.3 New Position Description Creation of a new job and, therefore, a new position description.
- 9-1.4 New Position Creation of a new authorized position in a County department or increase in an existing position based upon an existing or a new position description, which has been documented by a position questionnaire and has been evaluated by the Job Evaluation Committee.
- 9-1.5 <u>Transfer</u> The process of hiring or moving a current County employee from one authorized position and position description to a new authorized position and/or position description within the County personnel system.
- 9-1.6 **Reclassification/Position Re-Evaluation** The process of deleting an existing authorized position in a County department and creating a new authorized position based upon an existing or new position description.
- 9-1.7 <u>Midpoint</u> The midpoint as a control point, represents the dollar value that the County is willing to pay an experienced employee for performing consistently competent work that fully meets all position requirements in a job of a given level of difficulty and responsibility. It also reflects favorable competitive rates paid in the employment market for experienced employees in similar jobs.
- 9-1.8 **Maximum** The maximum salary is the highest salary paid for a particular position. The maximum is expressed as 120% of the midpoint.
- 9-1.9 **Minimum** The minimum salary is beginning salary for a particular position. The minimum is expressed as 80% of the midpoint.
- 9-1.10 <u>Salary Administrator</u> A Department Head or employee who has been appointed by the Champaign County Board and whose responsibilities include the implementation of and compliance with the Salary Administration Guidelines.
- 9-1.11 Salary Range A salary range is established based on the midpoint, which represents the dollar value the County is willing to pay an experienced employee for performing consistently competent work that fully meets all position requirements. The salary range represents the normally expected variation in individual performance. The salary minimum is 80% of the midpoint, and the maximum is 120% of the midpoint. The range, from minimum to maximum is 150%. The established salary range for the Attorney grade varies in that the range from minimum to maximum is 172%, with the minimum established at 77.3% of the midpoint; and the maximum established at 133% of the mid-point for this grade.

- 9-1.12 <u>Experienced</u> A candidate whose Knowledge, Skills, Abilities; and Education and Experience substantially exceed the minimum requirements as stated in the appropriate position description.
- 9-1.13 **Inexperienced** A candidate whose Knowledge, Skills, Abilities; and Education and Experience meet the minimum requirements as stated in the appropriate position description.
- 9-1.14 Exempt/Non-Exempt Pay Practice Status Determination made by the State's Attorney's Office, according to Fair Labor Standards Act (FLSA) Guidelines, of the salary grid applicable to a position.
- 9-1.15 **Job Content Evaluation Committee** A selected group of County employees who have been trained in the Champaign County Salary Administration System. The Committee, as convened by the Salary Administrator, meets to review existing or proposed County position documentation and establish a job point evaluation to the position. The Job Content Evaluation Committee will be comprised of the following positions with Champaign County government:
 - a. County Administrator
 - b. Deputy County Administrator
 - c. Director of Probation/Court Services
 - d. Chief Deputy Sheriff
 - e. Chief Deputy Treasurer
 - f. Assistant County Engineer
 - g. Supervisor of Grounds Maintenance
 - h. Senior Assistant State's Attorney Labor & Personnel
- 9-1.16 **Job Content Evaluation Points** The expression of a position's relative importance to the County as it compares to the contribution made by all other positions. Job points are established by utilizing the Employers' Association of Illinois Plan. The four areas of basic criteria used to determine the "total point value" are: Working Conditions, Effort, Knowledge/Skill and Responsibility.

9-2 SCHEDULE OF AUTHORIZED POSITIONS & SALARY GRID

- 9-2.1 The Schedule of Authorized Positions reflects the quantity and position title of all permanent positions in every County Department as approved by the Champaign County Board. Temporary positions are controlled solely by a Department's line item in their appropriated budget. The County Board's appropriations for salaries to Department's budgets will only be made to positions approved for the Schedule of Authorized Positions. No full-time, part-time, or per diem employee may be paid except through service in a position which is authorized to the Schedule of Authorized Positions. Recommendation for additions or deletions to the Schedule of Authorized Positions will be made by committee approval initiated by the Finance Committee for recommendation to the County Board. The Salary Administrator will be responsible for maintaining the Schedule of Authorized Positions.
- 9-2.2 The Salary Grids reflect every position title in the County personnel system, with the exception of positions represented by bargaining units, with a minimum, midpoint, and maximum salary for each position. Per Diem employees are reflected in the salary grids with a single daily per diem figure.

An employee's salary may be between the minimum and maximum, but may not exceed the maximum.

9-3 HIRING

- 9-3.1 **Beginning Salary** Unless otherwise authorized under these guidelines or recommended by the Policy, Personnel, & Appointments Committee, a new or promoted employee's beginning salary shall be paid at the minimum salary for an approved authorized position.
- 9-3.2 <u>Salary Administration</u> In order to assure consistent and uniform salary administration program application and maintenance, the hiring Department Head shall advise the Salary Administrator of all planned salary actions for new hires, promotions, transfers, etc. At the time of hire, an employee should be informed of the salary range of the position.
- 9-3.3 Prior to Offer of Employment at Salary Above Minimum Prior to Offering a salary above the minimum to a candidate the Department Head shall verify that the proposed starting salary meets the Salary Administration Guidelines and that adequate appropriations exist in the Department's appropriate current or proposed budget line item. The hiring Department Head may confer with the Salary Administrator regarding these issues.
- 9-3.4 Beginning Salary Above Minimum For Inexperienced Candidate Normally, an inexperienced candidate (a candidate who meets the minimum Knowledge, Skills, Abilities; and Education and Experience requirements as stated in the position description) should be hired at the minimum salary for the position.
 - However, in order to meet market conditions or to offer a competitive salary appropriately exceeding the current salary of a qualified candidate, the hiring Department Head may offer a salary up to 90% of the position's salary range midpoint, after following the provisions of 9-3.3.
- 9-3.5 Beginning Salary Above Minimum For Experienced Candidates A candidate with previous directly applicable work experience should be carefully evaluated. Candidates with previous experience acquired elsewhere should not normally be considered of any greater value than comparable experience at Champaign County. Starting salaries should reflect experience as it relates to the specific job and staffing requirements for which the candidate is being considered.
 - a. In the case of an experienced candidate (a candidate who substantially exceeds the minimum Knowledge, Skills, Abilities; and Education and Experience requirements as stated in the position description) a hiring Department Head may offer a starting salary up to the position's salary range midpoint, after following the provisions of 9-3.3.
 - b. Any request by a Department Head to hire an experienced candidate at a salary exceeding the position's midpoint will be referred by the Salary Administrator to the Finance Committee for approval.
 - d. The Attorney grade positions are not subject to the requirements of 9-3.5 (a) and (b), but shall be managed as follows: a candidate who has been licensed to practice law for less than ten years may be hired at a salary between the minimum and mid-point based on the affected department head's determination and current fiscal year budget limitations; and a candidate who has been licensed to practice law for more than ten years may be hired at a salary above the mid-point based on the affected department head's determination and current fiscal year budget limitations.

- 9-3.6 **Promotion** A promotion exists when an employee is proposed to be hired to an open position or a re-evaluation of a current position has been accepted by the Finance Committee where the job content has increased, resulting in placement at a higher grade range in the salary grade scale.
 - a. The hiring Department Head shall confirm compliance with the Salary Administration Guidelines, and budget requirements before promoting an employee to a new position. Promotions include movement between positions in all County departments.
 - b. An employee receiving a promotion shall receive up to a 10% increase in salary at the Department Head discretion or increase to the new salary range minimum, whichever is greater and which normally shall not exceed the new position's salary range midpoint. If such adjustment places the employee's salary above the midpoint, the Salary Administrator will refer the request to the Finance Committee for approval.
- 9-3.7 Transfer To a Lower Salary Range Transfer to a lower salary range is defined as a permanent change from a position in one salary range to a position where the job is placed in a lower salary range, as expressed by job content evaluation points. An employee will also be considered to have been reassigned when, as a result of reevaluation, total job size results in placement in a lower salary range.
 - a. In such instances, the Department Head must follow the provisions of 9-3.3 and 9-3.4 or 9-3.5, as applicable; however, the current salary may not be exceeded.
- 9-3.8 <u>Lateral Transfer</u> A lateral transfer occurs when an employee moves to a new position, which is assigned to the same grade range as the employee's previous position.
 - a. An employee who makes a lateral transfer to a position in the same grade range will not receive a salary increase or decrease, and shall be credited with years of experience in that grade/range.
- 9-3.9 Exceptional Situations Although the Salary Administration Program is designed to be flexible enough to accommodate most specific situations, there will be occasions that require techniques or solutions outside the established guidelines. In order to ensure internal consistency, however, some control must be maintained over exceptional situations. Therefore, proposed salary administration actions deviating from established guidelines will be referred by the Salary Administrator to the Policy, Personnel, and Appointments Committee for recommendation to the Finance Committee and County Board for final approval.
- 9-3.10 New Employee Training Period For purposes of training and subject to budgetary restraints, an authorized position may be filled by two County employees for a period of no longer than two weeks prior to the last day worked by the employee who is terminating employment or taking a Leave of Absence Without Pay (LOA).

9-4 PROCEDURE

The effective planning and control of salary costs requires a systematic procedure which includes:

 Review and adjustment of the midpoint salary policy consistent with competitive and economic conditions;

- b. Determination of funds required for policy implementation;
- c. Distribution of allocated funds among departments;
- d. Efficient control of fund utilization throughout the budget period.

No change or addition to the Schedule of Authorized Positions of a department or Salary Grid will be made except in accordance with the following procedures or the Reduction in Force procedure (Section 5-2).

- 9-4.1 Market Adjustments Each year in March-April, Salary Administration will conduct a salary survey to review the mid-point valuation of jobs in Champaign County. In May, Salary Administration will provide a recommendation to the Finance Committee of any recommended mid-point changes pursuant to market to be implemented on the following January 1st for the ensuing fiscal year.
- 9-4.2 Movement Through Salary Ranges In June of each year, Salary Administration will present to the Finance Committee the anticipated cost of implementation of the following compa-ratio schedule for non-bargaining employees (with the exception of the Attorney Grade) to be implemented the following January 1st.

| Years Completed as of December 1st | Compa-Ratio |
|------------------------------------|-------------|
| | |
| 0 | 80% |
| 1 | 83% |
| 2 | 86% |
| 3 | 89% |
| 4 | 92% |
| 5 | 95% |
| 6 | 98% |
| 7 | 100% |

The compa-ratio schedule insures that each employee moves toward compensation at the full market value of their position upon completion of seven years worked in that position or grade.

The Compa-ratio schedule for the Attorney Grade is established as follows:

| Years Completed as of January 1st | Compa-Ratio |
|-----------------------------------|-------------|
| 1 | 77.31% |
| 2 | 79.56% |
| 3 | 81.86% |
| 4 | 84.24% |
| 5 | 86.68% |
| 6 | 89.19% |
| 7 | 91.78% |
| 8 | 94.44% |
| 9 | 97.18% |
| 10 | 100% |

- 9-4.3 <u>Merit Adjustments</u> In June of each year, Salary Administration will present to the Finance Committee a recommendation for a percentage allowance for merit increases to be awarded non-bargaining employees the following January 1st. Determination of individual merit increases will be made by Department Heads based on employee performance.
- 9-4.4 New Positions, Position Descriptions and Salary Ranges will be proposed by a Department Head in most instances.

- a. The Department Head, after presenting the new proposed concept to the Policy, Personnel, and Appointments Committee and receiving a recommendation to proceed, should consult the Salary Administrator and complete a Position Description Questionnaire for the proposed new position.
- b. After receipt of the completed questionnaire, the Salary Administrator will convene the Job Content Evaluation Committee and a job point evaluation will be made to determine the job size.
- c. The Salary Administrator will consult the State's Attorney's Office in order to receive a determination of the exempt/non-exempt status of the proposed position.
- d. If necessary, the Salary Administrator will prepare a new position description.
- e. The Salary Administrator will forward the Job Content Evaluation Committee Report documenting the job point evaluation, proposed salary range and position description to the Policy, Personnel & Appointments Committee and to the Department Head.
- f. The Salary Administrator is responsible for presenting the report of the Job Content Evaluation Committee to the Policy, Personnel, and Appointments Committee, which shall determine whether the new position, position classification and recommended salary range should be approved and make a recommendation to the Finance Committee.
- g. The Finance Committee shall review the new position, position classification, and recommended salary range and recommend to the County Board final approval of any New Position to be added to the Schedule of Authorized Positions.
- h. Unless otherwise specified, the new position, will take effect immediately upon approval by the Board.
- 9-4.5 <u>Reclassifications/Job Re-Evaluations</u> Reclassifications/Job Re-Evaluations may be requested of the Policy, Personnel, & Appointments Committee by a Department Head.
 - a. The Department Head, after presenting the justification for position reevaluation review to the Policy, Personnel, & Appointments Committee and receiving a recommendation to proceed, should contact the Salary Administrator and receive a Position Description Questionnaire.
 - b. The questionnaire should be completed by the employee working in the position to be reclassified/re-evaluated.
 - c. After the receipt of completed questionnaires for all positions to be reevaluated for reclassification purposes, the Salary Administrator will convene the Job Content Evaluation Committee. The Job Evaluation Committee will evaluate all positions for which documentation has been received.
 - d. The results will be presented to the Policy, Personnel, & Appointments Committee for approval.
 - e. After approval, the re-evaluations will be forwarded to the Finance Committee for approval of the resulting change to the Schedule of Authorized Positions, and then to the County Board for final approval.



OFFICE OF THE CHAMPAIGN COUNTY EXECUTIVE

1776 East Washington Street, Urbana, Illinois 61802-4581

Darlene A. Kloeppel, County Executive

MEMORANDUM

TO: County Board Members

FROM: Darlene Kloeppel, County Executive

DATE: September 16, 2023 RE: 2023 County Budget

The IL Counties Code (55ILCS 5/2-5009(c)) provides for the County Executive to prepare the annual county budget for board approval. Following budget meetings with all departments and legislative budget hearings, I present the attached 2023 Budget for the board's approval.

This is a balanced budget, reflecting all revenues and expenses to perform the county's required operations and complies with the County's fiduciary obligation to the public. A Truth in Taxation Hearing is required this year, due to the increased levy at 7.79%. We have achieved a healthy General Fund balance, projected at 25% - county financial policy recommends a minimum of 16.7 %. In summary, this budget incorporates the following considerations:

Operating Budgets -

- Unless justified for higher increases, department increases for commodities were capped at 5% and services are budgeted at existing contract amounts.
- Transfer nursing home levy to general fund to repay nursing debt to other accounts (\$3.6m remains)
- Estimated amounts for unresolved issues with allocation of courthouse fees disbursements
- Estimated impacts of CTAA legislation and bond reform by reducing justice fees/fines
- \$3m for out-of-county boarding for jail
- Recommended use of the County Board's \$130,000 former County Administrator allocation for personnel (continued ERP Project Manager and part-time Grant Writer @ \$100,000), CDAP annual membership fee (\$5,000) and professional services (potential legal or other consulting \$25,000)

Physical Plant -

- Consolidation of the county jails at the satellite jail location, with construction/renovation costs to be split among issuance of new bonds and ARPA fund
- Transition of offices of County Board, County Executive, Clerk/Recorder, Auditor, Treasurer, Public Defender and Sheriff to the County Plaza, with issuance of new bonds for renovation
- Continuing support of the county's facility routine maintenance and deferred maintenance plan

Technology -

- ERP implementation for human resource management modules
- Projects in the 6-Year IT Plan. It is recommended that another IT Task Force be convened in 2023 to extend the IT Plan for the next 5-6 years.

Workforce -

Personnel costs are the largest ongoing expense in the county's budget, and I expect workforce issues to be the biggest challenge for all county departments in the next few years. Recommendations for a multi-year workforce plan based on identified department concerns, the Gallagher workforce study recommendations and the 5-year financial forecast will be brought to the board for consideration by November and incorporation into future budgeting decisions. This 2023 budget includes the following:

- A \$20,000 placeholder for some type of recruitment strategy
- A 5% COLA for non-bargaining employees, to remain equitable to negotiated bargaining unit increases and to incorporate adjustments of 4% to the wage scales to move all starting entry-level positions to at least \$16.26/hr.
- One new position in IT, primarily to support courthouse operations
- County's share for employee health insurance benefit premiums; FICA, unemployment insurance, workers' compensation, retirement benefits

American Rescue Plan Act funding

The 2023 Budget is an anomaly for the county, due to the continued influx of state and federal COVID-related grants for client services and the second half of the county's \$41m American Rescue Plan Act (ARPA) allocation. Receipt of additional COVID funds is expected to end by 2024.

Based on early discussion with board finance committee leadership, budgeted 2023 funds include carry-over funding from any unspent funds allocated in 2022, appropriation for all new department funding requested for 2023, previously discussed commitments for second tranche ARPA funds, and \$7m additional funding for broadband expansion (achieved by reduction the previously proposed water projects allocation by \$1.5m). The spreadsheet for the currently proposed ARPA project allocations will be distributed at the meeting, as the county's budget line items do not detail the individual projects to be funded.

Remaining items that require a board decision:

- Confirmation of the County Board's \$130,000 budget line appropriations
- Confirmation of the planned ARPA commitments

This budget currently does not record final amounts for the county's debt service and capital projects, as these are pending final decisions and timing of obligations for the bonding of the jail consolidation and County Plaza renovations. Numbers will be adjusted to reflect current status prior to the final approval of the budget in November.

It has been another complicated budgeting year, with several challenges to work out to keep county operations moving forward successfully, including transition during 2022 to the new ERP platform. I am pleased to see that the board has worked to reach agreement on funding some very important projects that will have a major impact on county operations and on our community for years to come.

I also wish to thank my staff, particularly Tami Ogden, Bill Colbrook and Rita Kincheloe, and the other county officials for their diligent and committed efforts in preparing this 2023 Budget for your approval.

CHAMPAIGN COUNTY CFY 2022 ANNUAL PROBATION PLAN SUPPLEMENT

SECTION II. ADMINISTRATION

- C. Compensation Management
- 2. Salary Increases
- 3. Salary Ranges
- 4. Collective Bargaining Agreement

On December 20, 2022, Chief Judge Randall Rosenbaum entered into the attached Collective Bargaining Agreement (CBA) with the Fraternal Order of Police representing Champaign County Adult and Juvenile Probation Officers. The renewed CBA is effective January 1, 2023 through December 31, 2025.

Three position classifications are covered by the CBA:

- Court Services Officer (Supervision)
- Court Services Officer (Juvenile Detention)
- Senior Court Services Officer

The starting salaries for each of these positions will be increased by \$3,373.50 in Year One, and \$1,248.00 in Years Two and Three:

| | ST | ARTING SALAR | IES (WAGE RA | ΓES) |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| POSITION | CURRENT | EFFECTIVE 01/01/2023 | EFFECTIVE 01/01/2024 | EFFECTIVE 01/01/2025 |
| Court Services Officer (Supervision) | \$40,638.00 (\$20.84/hour) | \$44,011.50 (\$22.57/hour) | \$45,259.50 (\$23.21/hour) | \$46,507.50 (\$23.85/hour) |
| Court Services Officer (Juvenile Detention) | \$45,045.00 (\$23.10/hour) | \$48,418.50 (\$24.83/hour) | \$49,666.50 (\$25.47/hour) | \$50,914.50 (\$26.11/hour) |
| Senior Court Services Officer (Supervision) | \$45,123.00 (\$23.14/hour) | \$48,496.50 (\$24.87/hour) | \$49,744.50 (\$25.51/hour) | \$50,992.50 (\$26.15/hour) |

In accordance with the provisions of the CBA, the starting wage rate for Court Services Officer (Supervision) will increase by 8.3%, effective January 1, 2023. The starting hourly wage rates for Court Services Officer (Juvenile Detention) and Senior Court Services Officer (Supervision) will each increase by 7.5%, effective January 1, 2023. Attached is a revised Salary Worksheet for FY2023.

Current employees in each of the position classifications covered by the CBA will receive the following annual salary increases:

P:\jchase\My Documents\AOIC Info\2022 Annual Plan\Champaign County CFY2022 Supplement #5 (CBA and CFY23 Salaries for Bargaining Positions).docx

| • | Effective January 1, 2023 | 7.00%* |
|---|---------------------------|--------|
| • | Effective January 1, 2024 | 4.75% |
| • | Effective January 1, 2025 | 4.50% |

*Employees earning less than the applicable starting wage rate on January 1, 2023 will receive an increase to that amount. This applies to three officers in the Supervision Division and 11 officers in the Juvenile Detention Division, all of whom were hired in 2022. The starting wages for all existing vacancies will be increased to the applicable amounts.

Increasing the starting salary for Champaign County Probation Officers to \$44,011.50 in FY2023 will allow us to match the starting salary in the four smallest counties in the Sixth Judicial Circuit (DeWitt, Douglas, Moultrie and Piatt), and will bring us closer to the FY2023 starting salary of \$45,422.00 offered in Macon County, an amount which we will match in Year Two and surpass in Year Three of the CBA. Remaining competitive with other counties in the Sixth Judicial Circuit as well as those counties identified as "comp counties" (Madison, McLean, Peoria, Rock Island and Sangamon) is essential to our efforts to recruit and retain staff.

For the reasons stated, we respectfully request an exemption of the 8.0% limit on annual increases as provided in the *Probation Compensation Standards* revised March 2022.

Response Summary:

AP1. Annual Plan Reporting Year (e.g. XXXX format) 2023

AP2. Director/CMO First Name Shannon

AP3. Director/CMO Last Name Siders

AP4. Department/County

• Champaign

AP5. Circuit

AP6. Director/CMO Work Email ssiders@co.champaign.il.us

AP7. Director/CMO Phone Number (217) 384-3753

AP8. Consider the following and select "yes" or "no" for each: Have documents changed since last year? Is the department making a request?

Please ensure that all documents which need to be submitted for review are uploaded to the applicable Secure Drive folder.

| Salary Shortfall | No |
|--|-----|
| New/Revised Compact Fee Administrative Order | No |
| New/Revised Compensation Plan | Yes |
| Variance to the Compensation Plan | Yes |
| Salary Increase | Yes |
| Range Adjustments | Yes |
| Performance Management Quality Assurance Plan | Yes |
| Performance Appraisal | No |
| Organizational Structure | Yes |
| Reorganization Request | No |
| New/Updated Policies & Procedures | No |
| New/Updated Interstate Compact Policies & Procedures | No |
| Justice Stakeholder List | No |
| Justice Stakeholder Meeting Involvement | No |
| Quality Assurance Process Policy and Procedure | Yes |

The Probation and Court Services Annual Probation Plan, as referenced in the Illinois statutes [730 ILCS 110/15(6)], requires probation and court services departments "have on file with the Supreme Court an annual probation plan for continuing, improved, and new Probation and Court Services Programs approved by the Supreme Court or its designee. This plan shall indicate the manner in which Probation and Court Services will be delivered and improved, consistent with the minimum standards and regulations for Probation and Court Services, as established by the Supreme Court...The annual probation plan shall seek to generally improve the quality of probation services and to reduce the commitment of adult and juvenile offenders to the Department of Corrections..."

The purpose of the Probation and Court Services Annual Probation Plan is to provide a road map for ongoing organizational development for probation and court services departments across the state. The AOIC believes better planning leads to better outcomes as evidenced by the development of the Judicial Branch Operational Strategic Plan and the AOIC Probation Services Division Strategic Plan. Traditionally, strategic planning has four or more elements built upon a mission/vision statement and a department's core values to drive long-term goals. In that spirit, the Organizational Development section of the Probation and Court Services Annual Plan will focus on elements of a strategic plan.

Organizational Plan

AP11. Please enter the goals as shown in the previous annual plan cycle on the Organizational Plan Worksheet.

| Goal 1 Full Implementation of Probation Casework Standards | In Progress |
|--|-------------|
| Goal 2 Full Implementation of Core Correctional | In Progress |

AP12. In the previous question, it was indicated that one or more goals for the previous plan year were not completed. Please explain what work is needed to complete unfinished goal(s) or why it was discontinued.

We have yet to incorporate use of additional screening instruments into the Adult Risk Assessment process.

Completion of this goal will require additional training for officers on the use of those tools.

All officers, including supervisors, will complete "Core Correctional Practices for Established PO's" in February and March 2023. In addition, all supervisors will complete "Core Correctional Practices-Coaches Training" in March 2023. Following completion of training, we will implement the Department's approved CCP Policy and Procedures.

A key part of the Probation and Court Services Annual Plan is the development of goals and objectives for the coming year with regard to the implementation of Probation Casework, Operational, and Hiring, Compensation and Promotion Standards. The following questions will build your plan for the coming year.

AP14. What area of the Statute, Standard, or program development is addressed with your first goal?

Other:

Core Correctional Practices

AP15. Please provide the first goal for the coming fiscal year.

Full Implementation of Core Correctional Practices (CCP)

AP16. Please list the objectives, or steps, responsible parties, and goal dates for each objective that will lead to the attainment of this goal.

| to the attainment of this you. | Responsible Parties | Goal Date |
|--|-----------------------------|-----------|
| Objective 1 All veteran officers will complete a 2-day CCP training in accordance with the training schedule set by the Department and the AOIC. | AOIC; Supervisors, Officers | 3/15/2023 |
| Objective 2 All new officers will attend a 3 day AOIC Module 2 training within their first 6 months of employment, where they will learn all components of CCP as well as how to incorporate CCP in case planning. | AOIC; Supervisors, Officers | Ongoing |
| Objective 3 Supervisors will complete mandatory training on the use of the CCP Feedback Form and providing coaching and feedback in a way that creates a learning environment for improvement. | AOIC; Supervisors | 3/15/2023 |
| Objective 4 Supervisors will incorporate random analyses of CCP skills on moderate and/or high-risk clients into existing case audit procedures. | Supervisors | Ongoing |
| Objective 5 Twice per quarter, each officer will be observed | | |

| recording or by live observation for training purposes. Following each observation, the officer and their supervisor will participate in a one-on-one feedback session. Feedback will be provided using the CCP Feedback Form. | Supervisors; Officers | Ongoing | |
|--|-----------------------|-----------|--|
| Objective 6 Officers will attend training boosters at least once per quarter | Officers; Supervisors | Ongoing | |
| Objective 7 Supervisors will develop a professional development plan in conjunction with the officer, for any officer who does not achieve basic CCP performance standards. | Supervisors | As needed | |
| Objective 8 | N/A | N/A | |
| Objective 9 | N/A | N/A | |
| Objective 10 | N/A | N/A | |
| Objective 11 | N/A | N/A | |
| Objective 12 | N/A | N/A | |

AP17. Do you have an additional goal?

yes

AP18. What area of the Statute, Standard, or program development is addressed with your next goal?

• Probation Operational Standard

AP19. Please provide the next goal for the coming fiscal year. Establish Emerging Adult caselod.

AP20. Please list the objectives, or steps, responsible parties, and goal dates that will lead to the attainment of this goal. Poononaible David

| | Responsible Parties | Goal Date | |
|---|-----------------------|------------------------|--|
| Objective 1 Research other departments with Emerging Adult Caseload. | Director; Supervisors | 3/28/2023 4/30/2023 | |
| Objective 2 Identify clients in the potential age range. | Supervisors | | |
| Objective 3 Identify officer to manage the caseload. | Director; Supervisors | 6/30/2023 | |
| Objective 4 Apply for Variance for Reorganization Request if necessary | Director | 7/30/2023 | |
| Objective 5 Reassignment of Adult Probation cases to Emerging Adult Officer | Supervisors | 9/1/2023 | |
| Objective 6 | N/A | N/A | |
| Objective 7 | N/A | N/A | |
| Objective 8 | N/A | N/A | |
| Objective 9 | N/A | N/A | |
| Objective 10 | N/A | N/A | |
| Objective 11 | N/A | N/A | |
| Objective 12 | N/A | N/A | |

AP21. Do you have an additional goal?

yes

AP22. What area of the Statute or Standard is addressed with your goal?

• Other:

Performance appraisals

AP23. Please provide the next goal for the coming fiscal year.

Revise performance appraisals to be more relevant to current practices.

AP24. Please list the objectives, or steps that will lead to the attainment of this goal. Responsible Parties

| | Responsible Parties | Guai Date |
|--|---|------------|
| Objective 1 Obtain examples from other departments. | btain examples from Director; Supervisors | |
| Objective 2 Research best practices for performance appraisals. | Director; Supervisors | 08/31/2023 |
| Objective 3 Create performance appraisals that match Departmental policies and procedures. | Director; Supervisor | 09/30/2023 |
| Objective 4 | N/A | N/A |
| Objective 5 | N/A | N/A |
| Objective 6 | N/A | N/A |
| Objective 7 | N/A | N/A |
| Objective 8 | N/A | N/A |
| Objective 9 | N/A | N/A |
| Objective 10 | N/A | N/A |
| Objective 11 | N/A | N/A |
| Objective 12 | N/A | N/A |

Goal Date

AP25. Do you have an additional goal?

No

Operational Reviews

AP42. Has the department received an Operational Review from the Administrative Office of the Illinois Courts?

No

Probation Casework Standards

AP68. What areas of the AOIC Probation Casework Standards have been implemented by your department?

- 3.1 REFERRAL PROCESS AND CASE ASSIGNMENT (and related sub-sections)
- 3.2 ORIENTATION (and related sub-sections)3.3 ASSESSMENT (and related sub-sections)
- 4.1 FEEDBACK (and related sub-sections)
- 4.2 TIMEFRAME (and related sub-sections)
- 4.3 CASE PLANNING (and related sub-sections)
- 4.4 SUPERVISION STRATEGIES (and related sub-sections)
- 4.5 CASE TERMINATION (and related sub-sections)

Annual Report

AP74. The department completes a separate annual report for the county board.

Note: If this plan is being completed as a circuit wide plan and only some departments within the circuit submit an annual report, select "some" and identify the department(s) of the circuit in the box provided and upload the reports that apply to the applicable Secure Drive folder.

Variance Compensation Plan

AP79. Compensation Plan [730 ILCS 110/15(4); 730 ILCS 110/15(70)]: A variance is being requested, please designate below what aspect of the compensation plan is requested to be waived. (select all that apply) N/A

AP80. Compensation Plan [730 ILCS 110/15(4); 730 ILCS 110/15(70)]: Provide at least one rationale for the variance.

- Collective Bargaining Agreement was negotiated with the County and Chief Judge
- Flat increases are provided to all employees this fiscal year regardless of performance

AP81. Please explain the rationale for the variance request in further detail. N/A

Salary Increases

AP83. Will there be salary increases for non-exempt or exempt staff?

- Exempt
- Non-Exempt

Salary Increases for Non-Exempt Staff

AP85. Non-Exempt: Provide the total increase below: Percentage (%) and/or amount (\$) of the increase.

Please indicate the position title and classification for each probation officer group if increases vary by title or classification. If a uniform increase occurs for all positions, please indicate "All" in the first box in column 1 and indicate the percentage and/or dollar amount.

| | Percentage | Dollar Amount |
|--------------------------------|------------|---------------|
| Position/Classification All | 7.0 | N/A |
| Position/Classification | 7.0 | N/A |
| Position/Classification | 7.0 | N/A |
| Position/Classification | N/A | N/A |

AP86. Non-Exempt: Which of the following factors are associated with this increase? Please explain "other" in the box below.

Union Negotiated Increases

Salary Increases for Exempt staff

AP88. Exempt: Provide the total increase below: Percentage (%) and/or amount (\$) of the increase.

Please indicate the position title and classification for each exempt staff classification if increases vary by title or classification. If a uniform increase occurs for all positions, please indicate "All" in the first box in column 1 and indicate the percentage and/or dollar amount.

| | Percentage | Dollar Amount |
|--------------------------------|------------|---------------|
| Position/Classification All | 5.0% | N/A |
| Position/Classification | N/A | N/A |

AP89. Exempt: Which of the following factors are associated with the increase? Please explain "other" in the box below.

- COLA
- County Board Declaration

Salary Range Adjustment

AP91. Provide the total adjustment for each position level, use a "minus sign (-) if there is a red uction in the salary range.

Please indicate the position title and classification for each probation officer group if increases vary by title or classification.

If a uniform increase occurs for all positions, please indicate "All" in the first box in column 1 and indicate the percentage and/or dollar amount.

| | Percentage | Dollar Amount | Exempt/Non-Exempt |
|--------------------------------|------------|----------------------|-------------------|
| Position/Classification All | N/A | \$3,373.50 | Non-Exempt |
| Position/Classification All | 4.0 | N/A | Exempt |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |
| Position/Classification | N/A | N/A | N/A |

AP92. Provide below the rationale to support the needed adjustment and why the ranges were adjusted by the indicated amount.

Other

AP93. Please explain how the issue cited above establishes the need for an adjustment to the salary range(s). For "other" also please identify the issue establishing and supporting information for how this issue establishes the need for an adjustment to the salary range(s). Additionally, please indicate whether existing staff will receive an adjustment in the form of a compression increase due to the range adjustment.

Increases to the salary ranges for non-exempt employees was the result of negotiations with the Fraternal Order of Police. Increasing the starting salary for Champaign County Probation Officers allows us to remain competitive with other counties in the Sixth Judicial Circuit as well as those counties identified as "comp counties" (Madison, McLean, Peoria, Rock Island and Sangamon) and is essential to our efforts to recruit and retain staff.

The Champaign County Board authorized a 5% COLA for non-bargaining employees, to remain equitable to negotiated bargaining unit increases and to incorporate adjustments of 4% to the wage scales to move all starting entry-level positions to at least \$16.26 per hour.

Collective Bargaining Agreement [730 ILCS 110/15(4)]

AP95. Staff are covered under collective bargaining agreement? (Check all that apply)

Yes

AP98. Please indicate the Quality Assurance Policy and Procedure currently in place within the department.

Still in process of implementing Core Correctional Practices.

Rights of Crime Victims [730 ILCS 110/15(6)(d)]

AP107. How does the department support the rights of crime victims? (Select all that apply)

State's Attorney has a victim's advocate on staff

Victim Impact Statements in sentencing reports

AP108. Describe how the requirements of the statute are implemented regarding crime victim rights and how the department coordinates that support with other criminal justice agencies within the jurisdiction.

Although the Champaign County Probation Department does not operate a formal pretrial services program, until the Office of Statewide Pretrial Services is in a position to provide electronic monitoring ordered by the Court, the Department will continue to assist by providing exclusion zone information to the GPS monitoring agency and to local

law enforcement to help promote victim safety.

During the COVID-19 pandemic, the Department has suspended quarterly in-person Victim Impact Panels. Clients are currently being referred to Mothers Against Drunk Driving for completion of an online Victim Impact Panel. The Department continues to hold periodic in-person Victim Impact Panels for Spanish-speaking clients. Those panels are facilitated by an interpreter contracted by the Department.

Victim Impact Statements in adult cases and in juvenile cases involving felony offenses are completed by victims with the assistance of the State's Attorney's Victim Services Division and filed with the Court. In some cases, the State's Attorney's Office provides the Victim Impact Statement to the Juvenile Probation Division prior to the Sentencing Hearing. In those cases, the Victim Impact Statement is attached to the Social Investigation Report.

To the extent permitted by law, the Department provides victims with information about their individual cases, including, but not limited to, information about payment of restitution. The Department also provides victims with information about other agencies and organizations providing assistance to victims of crime, including the State's Attorney's Victim Services Division, the Champaign County Children's Advocacy Center, Courage Connection, Land of Lincoln Legal Aid, RACES (Rape Advocacy, Counseling & Education Services), and VINELink.

Thank you for taking the time to complete the Probation and Court Services Annual Plan. Once completed, an email containing your responses will be sent to the email address that was provided. Please download these responses and provide to the chief judge for approval.

Please be sure to complete the **Probation Services Fee Expenditure Proposal** and all applicable **Addendums**.

AP111. I certify that I will upload my Attachments and Signature Page to the designated Google Drive folder under the Annual Plan section. (Select all that apply).

CLICK HERE to download a copy of the signature page. CLICK HERE to download necessary attachments.

Please ensure that all documents which need to be submitted for review are upload to the applicable Secure Drive folder.

- Signature Page
- Probation Fee Budget
- Organizational Chart
- Salary Range Worksheet
- Applicable Addendums
- Collective Bargaining Agreement
- Compensation Plan

Embedded Data:

Login ID

9342

Annual Probation Plan

annualprobationplan@illinoiscourts.gov < AOICPSD_reporting@illinoiscourts.gov > Fri 2/10/2023 9:48 AM

To: Shannon Siders <ssiders@co.champaign.il.us>

CAUTION: External email, be careful when opening.

Hello, **Shannon Siders**, thank you for completing the **CFY Probation and Court Services Annual Plan. Below are your responses.**

Note that responses to addendums will be contained in separate emails.

Recipient Data:

Time Finished: 2023-02-10 09:48:40 CST

IP: 209.174.185.101

ResponseID: R_1QnBuXrGaxTzott Link to View Results: <u>Click Here</u>

URL to View Results: https://aoic.gov1.qualtrics.com/apps/single-response-

reports/reports/8ebkqlwUl4zCTPuVXc6%2EHD7Ba8MQULNzJi5TnGyou8u%2E24DcS%2ETnsQG

byV%2EGXQ9htDMjsnRoHuQQXTLTR4Gaf2JrOAcsZMESBEtWvKWScq-

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X%2EO5Ie%2EeUfw4LXZ9edx4NoanEEgsZJbGgQDOMCEtVnWFxSEqIhG-ESiPx3GfBD5BMd7XE

Response Summary:

Annual Plan Reporting Year (e.g. XXXX format) 2023

Director/CMO First Name Shannon

Director/CMO Last Name Siders

Department/County Champaign

Circuit

6

Director/CMO Work Email

ssiders@co.champaign.il.us

Director/CMO Phone Number (217) 384-3753

Consider the following and select "yes" or "no" for each: Have documents changed since last year? Is the department making a request? Please ensure that all documents which need to be submitted for review are uploaded to the applicable Secure Drive folder.

Salary Shortfall

No

New/Revised Compact Fee Administrative Order

No

New/Revised Compensation Plan

Yes

Variance to the Compensation Plan

Yes

Salary Increase

Yes

Range Adjustments

Yes

Performance Management Quality Assurance Plan

Yes

Performance Appraisal

No

Organizational Structure

Yes

Reorganization Request

No

New/Updated Policies & Procedures

No

New/Updated Interstate Compact Policies & Procedures

No

Justice Stakeholder List

No

Justice Stakeholder Meeting Involvement

No

Quality Assurance Process Policy and Procedure

Yes

Please enter the goals as shown in the previous annual plan cycle on the Organizational Plan Worksheet.

Goal 1

In Progress

Goal 2

In Progress

In the previous question, it was indicated that one or more goals for the previous plan year were not completed. Please explain what work is needed to complete unfinished goal(s) or why it was discontinued.

We have yet to incorporate use of additional screening instruments into the Adult Risk Assessment process. Completion of this goal will require additional training for officers on the use of those tools.

All officers, including supervisors, will complete "Core Correctional Practices for Established PO's" in February and March 2023. In addition, all supervisors will complete "Core Correctional Practices-Coaches Training" in March 2023. Following completion of training, we will implement the Department's approved CCP Policy and Procedures.

What area of the Statute, Standard, or program development is addressed with your first goal? Other -- Core Correctional Practices

Please provide the first goal for the coming fiscal year.
Full Implementation of Core Correctional Practices (CCP)

Please list the objectives, or steps, responsible parties, and goal dates for each objective that will lead to the attainment of this goal.

Objective 1

Responsible Parties AOIC; Supervisors, Officers

Goal Date 3/15/2023

Objective 2

Responsible Parties AOIC; Supervisors, Officers

Goal Date Ongoing

Objective 3

Responsible Parties AOIC; Supervisors

Goal Date 3/15/2023

Objective 4

Responsible Parties Supervisors

Goal Date Ongoing

Objective 5

Responsible Parties Supervisors; Officers

Goal Date Ongoing

Objective 6

Responsible Parties Officers; Supervisors

Goal Date Ongoing

Objective 7

Responsible Parties Supervisors

Goal Date As needed

Do you have an additional goal?

yes

What area of the Statute, Standard, or program development is addressed with your next goal? Probation Operational Standard

Please provide the next goal for the coming fiscal year. Establish Emerging Adult caselod.

Please list the objectives, or steps, responsible parties, and goal dates that will lead to the

attainment of this goal.

Objective 1
Responsible Parties Director; Supervisors
Goal Date 3/28/2023
Objective 2
Responsible Parties Supervisors
Goal Date 4/30/2023
Objective 3
Responsible Parties Director; Supervisors
Goal Date 6/30/2023
Objective 4
Responsible Parties Director
Goal Date 7/30/2023
Objective 5

Do you have an additional goal? yes

Goal Date 9/1/2023

Responsible Parties Supervisors

What area of the Statute or Standard is addressed with your goal?

Other -- Performance appraisals

Please provide the next goal for the coming fiscal year.

Revise performance appraisals to be more relevant to current practices.

Please list the objectives, or steps that will lead to the attainment of this goal.

Objective 1

Responsible Parties Director; Supervisors

Goal Date 07/31/2023

Objective 2

Responsible Parties Director; Supervisors

Goal Date 08/31/2023

Objective 3

Responsible Parties Director; Supervisor

Goal Date 09/30/2023

Do you have an additional goal?

No

Has the department received an Operational Review from the Administrative Office of the Illinois Courts?

No

What areas of the AOIC Probation Casework Standards have been implemented by your department?

- 3.1 REFERRAL PROCESS AND CASE ASSIGNMENT (and related sub-sections)
- 3.2 ORIENTATION (and related sub-sections)
- 3.3 ASSESSMENT (and related sub-sections)

- 4.1 FEEDBACK (and related sub-sections)
- 4.2 TIMEFRAME (and related sub-sections)
- 4.3 CASE PLANNING (and related sub-sections)
- 4.4 SUPERVISION STRATEGIES (and related sub-sections)
- 4.5 CASE TERMINATION (and related sub-sections)

The department completes a separate annual report for the county board. Note: If this plan is being completed as a circuit wide plan and only some departments within the circuit submit an annual report, select "some" and identify the department(s) of the circuit in the box provided and upload the reports that apply to the applicable Secure Drive folder.

No

Compensation Plan [730 ILCS 110/15(4); 730 ILCS 110/15(70)]: A variance is being requested, please designate below what aspect of the compensation plan is requested to be waived. (select all that apply)

Compensation Plan [730 ILCS 110/15(4); 730 ILCS 110/15(70)]: Provide at least one rationale for the variance.

Collective Bargaining Agreement was negotiated with the County and Chief Judge Flat increases are provided to all employees this fiscal year regardless of performance

Will there be salary increases for non-exempt or exempt staff?

Exempt

Non-Exempt

Non-Exempt: Provide the total increase below: Percentage (%) and/or amount (\$) of the increase. Please indicate the position title and classification for each probation officer group if increases vary by title or classification. If a uniform increase occurs for all positions, please indicate "All" in the first box in column 1 and indicate the percentage and/or dollar amount.

Position/Classification

Percentage 7.0

Position/Classification

Percentage 7.0

Position/Classification

Percentage 7.0

Non-Exempt: Which of the following factors are associated with this increase? Please explain "other" in the box below.

Union Negotiated Increases

Exempt: Provide the total increase below: Percentage (%) and/or amount (\$) of the increase. Please indicate the position title and classification for each exempt staff classification if increases vary by title or classification. If a uniform increase occurs for all positions, please indicate "All" in the first box in column 1 and indicate the percentage and/or dollar amount.

Position/Classification

Percentage 5.0%

Exempt: Which of the following factors are associated with the increase? Please explain "other" in the box below.

COLA County Board Declaration

Provide the total adjustment for each position level, use a "minus sign (-) if there is a reduction in the salary range. Please indicate the position title and classification for each probation officer group if increases vary by title or classification. If a uniform increase occurs for all positions, please indicate "All" in the first box in column 1 and indicate the percentage and/or dollar amount.

Position/Classification
Dollar Amount \$3,373.50
Exempt/Non-Exempt Non-Exempt
Position/Classification
Percentage 4.0
Exempt/Non-Exempt Exempt

Provide below the rationale to support the needed adjustment and why the ranges were adjusted by the indicated amount.

Other

Please explain how the issue cited above establishes the need for an adjustment to the salary range(s). For "other" also please identify the issue establishing and supporting information for how this issue establishes the need for an adjustment to the salary range(s). Additionally, please indicate whether existing staff will receive an adjustment in the form of a compression increase due to the range adjustment.

Increases to the salary ranges for non-exempt employees was the result of negotiations with the Fraternal Order of Police. Increasing the starting salary for Champaign County Probation Officers allows us to remain competitive with other counties in the Sixth Judicial Circuit as well as those counties identified as "comp counties" (Madison, McLean, Peoria, Rock Island and Sangamon) and is essential to our efforts to recruit and retain staff.

The Champaign County Board authorized a 5% COLA for non-bargaining employees, to remain equitable to negotiated bargaining unit increases and to incorporate adjustments of 4% to the wage scales to move all starting entry-level positions to at least \$16.26 per hour.

Staff are covered under collective bargaining agreement? (Check all that apply)
Yes

Please indicate the Quality Assurance Policy and Procedure currently in place within the department.

Still in process of implementing Core Correctional Practices.

How does the department support the rights of crime victims? (Select all that apply)
State's Attorney has a victim's advocate on staff
Victim Impact Statements in sentencing reports

Describe how the requirements of the statute are implemented regarding crime victim rights and how the department coordinates that support with other criminal justice agencies within

the jurisdiction.

Although the Champaign County Probation Department does not operate a formal pretrial services program, until the Office of Statewide Pretrial Services is in a position to provide electronic monitoring ordered by the Court, the Department will continue to assist by providing exclusion zone information to the GPS monitoring agency and to local law enforcement to help promote victim safety.

During the COVID-19 pandemic, the Department has suspended quarterly in-person Victim Impact Panels. Clients are currently being referred to Mothers Against Drunk Driving for completion of an online Victim Impact Panel. The Department continues to hold periodic inperson Victim Impact Panels for Spanish-speaking clients. Those panels are facilitated by an interpreter contracted by the Department.

Victim Impact Statements in adult cases and in juvenile cases involving felony offenses are completed by victims with the assistance of the State's Attorney's Victim Services Division and filed with the Court. In some cases, the State's Attorney's Office provides the Victim Impact Statement to the Juvenile Probation Division prior to the Sentencing Hearing. In those cases, the Victim Impact Statement is attached to the Social Investigation Report.

To the extent permitted by law, the Department provides victims with information about their individual cases, including, but not limited to, information about payment of restitution. The Department also provides victims with information about other agencies and organizations providing assistance to victims of crime, including the State's Attorney's Victim Services Division, the Champaign County Children's Advocacy Center, Courage Connection, Land of Lincoln Legal Aid, RACES (Rape Advocacy, Counseling & Education Services), and VINELink.

I certify that I will upload my Attachments and Signature Page to the designated Google Drive folder under the Annual Plan section. (Select all that apply). CLICK HERE to download a copy of the signature page. CLICK HERE to download necessary attachments. Please ensure that all documents which need to be submitted for review are upload to the applicable Secure Drive folder.

Signature Page
Probation Fee Budget
Organizational Chart
Salary Range Worksheet
Applicable Addendums
Collective Bargaining Agreement
Compensation Plan

Embedded Data
Login ID 9342
RecipientEmail mwilliams@co.champaign.il.us
RecipientFirstName Mike
RecipientLastName Williams



Annual Plan Addendum - Data Variance

annualprobationplan@illinoiscourts.gov <noreply@qemailserver.com>

Mon 1/23/2023 4:55 PM

To: Shannon Siders <ssiders@co.champaign.il.us>

CAUTION: External email, be careful when opening.

Thank you, **Shannon Siders**, for your response to the Data Variance Addendum. Please see below for your responses to this addendum.

Recipient Data:

Time Finished: 2023-01-23 16:54:53 CST

IP: 209.174.185.101

ResponseID: R_tQi0ldDp1DFF5Gp **Link to View Results:** <u>Click Here</u>

URL to View Results: https://aoic.gov1.qualtrics.com/apps/single-response-reports/reports/aiZKSt1K9rU4OUCfPQUkJ2eIFi43qd%2Eo5kzTf6dsJevyDcdhVQ1z6wQsql%2EOsd7lCdbeScSBjOTxzqlf7QIrv1TXCaKO0HGs40q%2Eh1hEA%2Eel4uNyjNv7gFkgyMrmUNg1BkIRAF-R29xVZBumB6WJvP%2EYmdkKwoWefosJVNe3Rt9Hayz%2E5vebX1I5gQS5LSEw9Q-7ju9zR-k-gZWAdRuHyD-LD3FWJaER0-dAtE9DJq1ELyfDrli09puNa893hzhlVCLTzXTlJk4O7t055tmdpoPaxa3DITthqz-9Y7vAks

Response Summary:

Director/CMO First Name Shannon

Director/CMO Last Name Siders

Department/County Champaign

Circuit

6

Director/CMO Work Email ssiders@co.champaign.il.us

Director/CMO Phone Number 217-384-3753

Has your Data Variance been approved? No. Submitted, pending review

Department Training Records

annual probation plan@illinois courts.gov < nor eply@qemailserver.com >

Tue 1/24/2023 10:06 AM

To: Shannon Siders <ssiders@co.champaign.il.us>

CAUTION: External email, be careful when opening.

Hello, **Shannon Siders**, thank you for completing the **2023**CFY Probation and Court Services Annual Plan Department Training Records. Below are your responses.

Recipient Data:

Time Finished: 2023-01-24 09:06:17 MST

IP: 209.174.185.101

ResponseID: R_3dRKW0PU02AXUiu **Link to View Results:** Click Here

URL to View Results: https://aoic.gov1.qualtrics.com/apps/single-response-

reports/reports/mQj89gxP0iqnATdMxYMS6lmr6-

ssqRRy1y3M5L1mpPhaobDZ4LBmIq50KRR77g0GEDy4ssUJaBSRDvt6ZKgTy0F237niG3ieijHn2kkTt3J4nFB1Pkvcon-

eXauSfqiOFc2twzBUhZBjOXQGdp7EBz2MJQMincQ1rVGfT8L3UPn3cQwcS9QQJ9ouqQXBWUB9d9yuekE8RIHWkd9Ec4ZtWRkkt4rZCwL70p91vka2hBzJxbyj7PQt%2E4X9IEPsJoCPuT-

QM57TFazhOA2Aw5yX26Of2bAukeCG5CwPb90a8uA

Response Summary:

Annual Plan Reporting Year (e.g. 2024, 2025) 2023

Director/CMO First Name Shannon

Director/CMO Last Name Siders

Department/County Champaign

Circuit

6

Director/CMO Work Email ssiders@co.champaign.il.us

Director/CMO Phone Number

217-384-3753

Training logs will be reviewed and verified by the AOIC through Relias only. Training logs that are submitted separately, or in other formats will not be accepted or reviewed. Prior to submission of the Probation and Court Service, training records need to be reviewed by the department(s). I certify that the training hours recorded in the Relias system are a full and complete record of all trainings completed during the current reporting period by Probation and Court Services staff. The current reporting period for training is July 1 through June 30 of the state's most recent fiscal year.

Not all staff have completed the minimum AOIC training requirement. Staff not completing the training requirement will be listed in question nine, along with a list of requirements not completed for each staff.

Please list all Probation and Court Services Staff who did not meet their training requirements along with a list of requirements not completed (hours, specific coursed, etc.)

Staff Person 1

Unmet Training Requirement .75 hours

Staff Title Supervisor-Administrative Services

Staff Person 2

Unmet Training Requirement .25 hours

Staff Title Superintendent Juvenile Detention Center

Staff Person 3

Unmet Training Requirement 23.25 hours; Did resign effective 5/10/22 and returned effective 6/12/22

Staff Title Assistant Superintendent Juvenile Detention Center

Staff Person 4

Unmet Training Requirement Did participate in Virtual Basic training in May 2022, but was sick on the final day so has not been given credit for any of the hours of training and still needs to make up the last day of Virtual Detention Basic. Detention Basic hasn't been offered again.

Staff Title Detention Officer

Staff Person 5

Unmet Training Requirement 35.5 hours, has been out on FMLA since 9/2021

Staff Title Detention Officer

Last year, the department indicated that there were staff who did not meet their training requirements. Please list those staff below and provide an update on training requirement completion for these staff. Please note, training credit submit here may not be counted for the current plan year. Remediation of unmet training requirements shall occur in addition to current training requirements.

Staff Person 1

unmet training requirement from previous Probation and Court Services Annual Plan 7.75 hours Action taken to achieve outstanding training requirement Completed an additional 12.2 hours

Staff Person 2

unmet training requirement from previous Probation and Court Services Annual Plan 17.75 hours Action taken to achieve outstanding training requirement Completed an additional 7.90 hours Staff Person 3

unmet training requirement from previous Probation and Court Services Annual Plan .25 hours Action taken to achieve outstanding training requirement Did not complete additional hours

If any staff have not met training requirements for the reporting year, please provide a plan to ensure that staff achieve compliance with AOIC training requirements in both the near and long terms.

Staff will be allowed time to complete Relias training and encouraged to participate in trainings offered by AOIC and the Judicial College. All Probation Staff will be attending CCP training which will help tremendously with their hours. Training requirements for Detention Staff are greater and more difficult to attain due to staffing difficulties. We will continue to work with JDC staff to ensure they obtain their required hours. At this point, nearly all line officers completed their required hours for the reporting year. All outstanding hours were from Supervisors other than one Detention Officer who was not given any credit for Detention Basic due to being sick on the final day of the training and no makeup date being provided as of now. The other Detention Officer listed has been on FMLA the majority of the reporting period.

Embedded Data
Login ID 3647
RecipientEmail mwilliams@co.champaign.il.us
RecipientFirstName Mike
RecipientLastName Williams

We thank you for your time spent taking this survey.
Your response has been recorded.

| Below is a summary of your responses | <u>Download PDF</u> |
|---|--|
| This survey requires a password. | |
| •••• | |
| TA1. Annual Plan Reporting Year (e.g. 2024, 2025) | |
| 2023 | Store 1. Then SENEDAY Deline demonstrates 3.55 Mars. |
| TA2. Director/CMO First Name | |
| Shannon | |
| TA3. Director/CMO Last Name | |
| Siders Siders A STATE OF THE | |
| TA4. Department/County | |
| Champaign | |
| TA5. Circuit | |

6

TA6. Director/CMO Work Email

ssiders@co.champaign.il.us

TA7. Director/CMO Phone Number

217-384-3753

TA8. **Training logs** will be reviewed and verified by the AOIC through Relias only. Training logs that are submitted separately, or in other formats will not be accepted or reviewed.

Prior to submission of the Probation and Court Service, training records need to be reviewed by the department(s). I certify that the training hours recorded in the Relias system are a full and complete record of all trainings completed during the current reporting period by Probation and Court Services staff. The current reporting period for training is July 1 through June 30 of the state's most recent fiscal year.

- I have verified that all staff have completed the minimum AOIC training requirements and trainings completed to meet the standard training are recorded in Relias all staff.
- Not all staff have completed the minimum AOIC training requirement. Staff not completing the training requirement will be listed in question nine, along with a list of requirements not completed for each staff.

TA9. Please list all Probation and Court Services Staff who did not meet their training requirements along with a list of requirements not completed (hours, specific coursed, etc.)

Add Additional Staff Person

Unmet Training Requirement

Staff Title

Staff Person 1

Jennifer Jarvis

.75 hours

Supervisor-Administrative Services

Staff Person 2

Keith Willis

.25 hours

Superintendent Juvenile Detention Center

Patricia Allah

TA10. Last year, the department indicated that there were staff who did not meet their training requirements. Please list those staff below and provide an update on training requirement completion for these staff. Please note, training credit submit here may not be counted for the current plan year. Remediation of unmet training requirements shall occur in addition to current training requirements.

| d Additional Staff Person | | |
|---------------------------|---|--|
| | unmet training requirement from previous Probation and Court Services Annual Plan | Action taken to achieve outstanding training requirement |
| Staff Person 1 | | Output lated up and thin yet 12.2 hours |
| Jeremy Jessup | 7.75 hours | Completed an additional 12.2 hours |
| Staff Person 2 | | The state of the s |
| Jeff Nugent | 17.75 hours | Completed an additional 7.90 hours |
| Staff Person | | |
| 3 | .25 hours | Did not complete additional hours |
| | | |

TA11. If any staff have not met training requirements for the reporting year, please provide a plan to ensure that staff achieve compliance with AOIC training requirements in both the near and long terms.

Staff will be allowed time to complete Relias training and encouraged to participate in trainings offered by AOIC and the Judicial College. All Probation Staff will be attending CCP training which will help tremendously with their hours. Training requirements for Detention Staff are greater and more difficult to attain due to staffing difficulties. We will continue to work with JDC staff to ensure they obtain their required hours. At this point, nearly all line officers completed their required hours for the reporting year. All outstanding hours were from Supervisors other than one Detention Officer who was not given any credit for Detention Basic due to being sick on the final day of the training and no makeup date being provided as of now. The other Detention Officer listed has been on FMLA the majority of the reporting period.

containing your responses to this addendum will be sent to the email address that was provided. Please download the responses and include in the plan provided to the chief judge for approval.

Powered by Qualtrics [3]



We thank you for your time spent taking this survey.
Your response has been recorded.

Below is a summary of your responses

Download PDF

This survey requires a password.

• • • • • •



Probation Services Fee Expenditure Proposal

Department Information

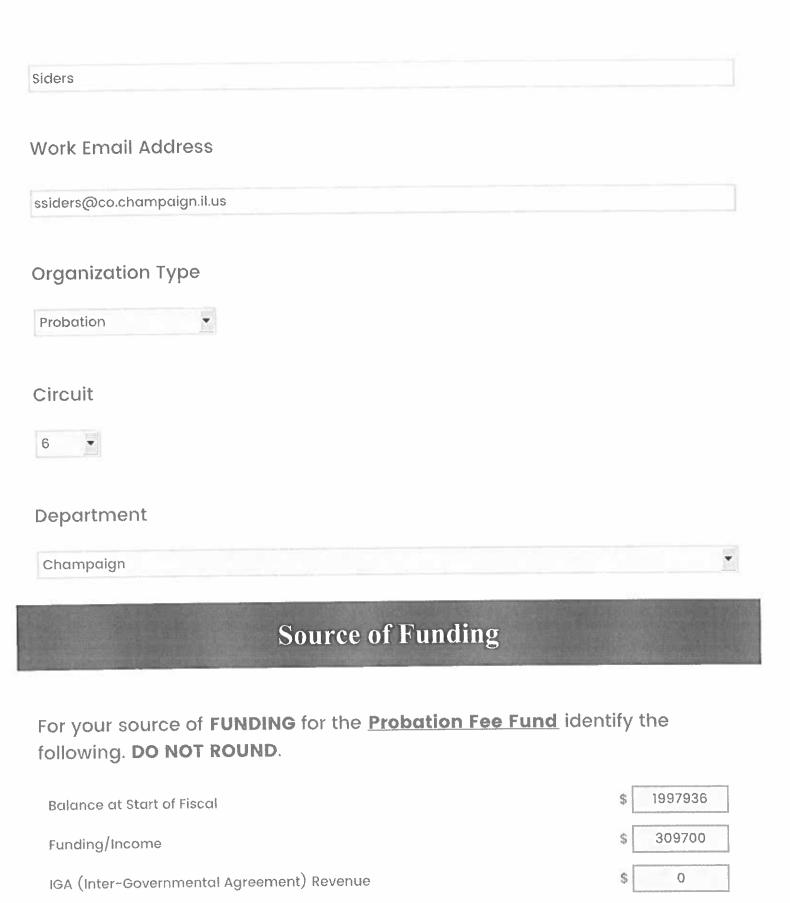
| Reportin | g Year |
|----------|--------|
|----------|--------|

(e.g., 2022, 2023)

2023

First Name

Shannon



5000

2,312,636

Other Receivables

Total

Investment Interest and Miscellaneous Revenue

For CFY 2023 you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for **DEPARTMENT FISCAL OPERATIONS** from the reported total dollar amount.

| Bonuses | \$ | 0 | |
|---|----------------------------|---|--|
| Contingency | \$ | 0 | |
| Department Fringe Benefits - (FICA, Worker's Compensation, Unemployment, IMRF, Medical, Dental, and Life Insurance) | \$ | 0 | |
| Longevity | \$ | 0 | |
| Merit | \$ | 0 | |
| Overtime | \$ | 0 | |
| Personnel Payouts | \$ | 0 | |
| Reimbursements to Staff | \$ | 0 | |
| Salaries | \$ | 0 | |
| Salary Shortfall | \$ | 0 | |
| Tuition Reimbursement | \$ | 0 | |
| OTHER - Salary | \$ anning of the second | 0 | |
| Total | \$ | 0 | |
| | | | |

For CFY **2023** you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for **DEPARTMENT OPERATIONS** from the reported total dollar amount.

Advertising

| | Ψ. | 10000 |
|--|----------|-------|
| Testing/Evaluations | _ | |
| Auto Expenses | \$ | 1000 |
| Boilers | \$ | 0 |
| Building Rent/Mortgage/Bond | \$ | 1500 |
| Capital Expenses | -\$ | 10000 |
| Annual Contribution to Capital Asset Replacement Fund | * L | 10000 |
| Car Communication Systems | \$ | 0 |
| Case Management System Development (e.g., implementing, building complianc with data requirements) | e \$[| 0 |
| Case Management License (e.g., new software) | \$ | 0 |
| Case Management Services (e.g., maintaining) | \$ | 0 |
| Cell Phone Chargers | \$ | 0 |
| Chairs | \$ | 1000 |
| Computer Hardware (e.g., laptops, printers) | \$ | 5000 |
| Computer Software (e.g., MS Office, Adobe Suite, Video conferencing) | \$ | 2500 |
| Computer Video Equipment | \$ | 2500 |
| Conducted Energy Devices (CEDs) | \$ | 0 |
| COVID Expenses - (e.g., cleaning) | \$ | 0 |
| COVID Testing | \$ | 0 |
| Desks | \$ | 1000 |
| Destruction of Records Service | \$ | 0 |
| Document Shredding | \$ | O |
| Dues | \$ | O |
| Electric | \$ | 0 |

| Equipment Maintenance (identify type of "equipment") | \$ 3500 |
|--|---------|
| | 4 |
| Equipment Rentals | \$ 4000 |
| Firearm Ammunition | \$ 1000 |
| Firearms | \$ 0 |
| Gas - Auto | \$ 0 |
| Gas - Building | \$ 0 |
| Hotspot/Wi-Fi Services | \$ 0 |
| Icemaker | \$ 0 |
| Improvements to Buildings | \$ 0 |
| Ink | \$ 0 |
| IT Support Contract | \$ 0 |
| Job Posting/Hiring Ad | \$ 0 |
| Kitchen Appliances | \$ 0 |
| Laundry Services | \$ 0 |
| Laundry & Cleaning Supplies | \$ 0 |
| Maintenance/Cleaning Staff Salaries & Benefits | \$ 0 |
| Medical Waste Disposal | \$ 0 |
| Memberships (e.g., IPCSA) | \$ 3400 |
| Microfilming | \$ 0 |
| Notary Services | \$ 0 |
| Office Cleaning/Custodial Services | \$ 0 |
| Office | \$ 0 |

| Office Copier/Printer/Scanner Lease | \$ 0 |
|---|---------|
| | |
| Office Copier/Printer/Scanner Maintenance | \$ 0 |
| Officer Safety Equipment | \$ 0 |
| Office Supplies | \$ 500 |
| Officer | \$ 500 |
| Uniforms Oil changes | \$ 0 |
| Oleoresin Capsicum: Pepper Spray | \$ 0 |
| Operation Service Contracts | \$ 0 |
| Paper | \$ O |
| Pens | \$ 0 |
| Phones - Cell | \$ 0 |
| Phones - Landline | \$ 0 |
| Police Radios | \$ 0 |
| Postage | \$ 250 |
| Printing/Duplication | \$ 500 |
| Printer Toner | \$ 0 |
| Property & Employee Liability Insurance | \$ 0 |
| Public/Community Service Supplies | \$ 5000 |
| Publications, Printing, & Binding | \$ 5000 |
| Record/File Storage | \$ 0 |
| Reimbursements to Other Probation Department(s) | \$ O |
| | |
| Roofs | \$ 0 |

| Equipment | |
|--|----------|
| Stamps | \$ 0 |
| Subscriptions (e.g., journals, news papers) | \$ 0 |
| Tracker Contract | \$ 0 |
| Training - (accommodation reimbursements) | \$ 3400 |
| Training - (mileage) | \$ 1000 |
| Training - (per diem) | \$ 6000 |
| Training - (registration) | \$ 6000 |
| Travel Expenses - (accommodation reimbursements) | \$ 3400 |
| Travel Expenses - (home visits mileage) | \$ 0 |
| Travel Expenses - (per diem) | \$ 0 |
| Travel Expenses - (work meetings mileage) | \$ 250 |
| Utilities | \$ 250 |
| Vehicle Lease | \$ 0 |
| Vehicle Maintenance | \$ 0 |
| Vehicle Purchase | \$ 36500 |
| Vests | \$ 0 |
| Waste Disposal & Recycling | \$ 500 |
| Water - Building | \$ 0 |
| Water - Coolers / Bottled | \$ 0 |
| Water Heaters | \$ 0 |
| Web-cams | \$ 0 |
| Work Release | \$ 0 |
| Other Operations | • 0 |

| Other Expenditures | \$ 1500 |
|-----------------------------|------------|
| Employee Assistance Program | |
| Total | \$ 116,950 |

Services

For CFY 2023 you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for <u>CLIENT SERVICES</u> from the reported total dollar amount.

| Alcohol Testing | \$ 0 |
|--|----------|
| Alcohol Treatment | \$ 0 |
| ASL - Language | \$ 0 |
| Bus Fare / Tokens (Incentives) | \$ 0 |
| Bus Fare / Tokens - Non-Incentive | \$ 1250 |
| Cash (Incentives) | \$ 0 |
| Client Birth Records | \$ 0 |
| Client Records | \$ 0 |
| Cognitive Programming & Supplies | \$ 32800 |
| Cognitive Programming | \$ 0 |
| Cognitive Supplies | \$ 0 |
| Community Service Supervision Contract | \$ 0 |
| Contracted Services | \$ 0 |
| COVID-19 Testing | \$ 0 |
| Drug/Alcohol | |

| Drug/Alcohol Treatment | \$ 45000 |
|--|----------|
| Drug Testing | \$ 0 |
| Drug Treatment | \$ 0 |
| DVI Assessments | \$ 0 |
| Educational Programs & Supplies | \$ 20000 |
| Educational Programs | \$ 0 |
| Educational Supplies | \$ 0 |
| Electronic Monitoring/GPS | \$ 45700 |
| Employment Services | \$ 15000 |
| Food - Non-Incentive | \$ 10000 |
| Food/Snacks/Candy (Incentives) | \$ 0 |
| Foreign Language Interpreters | \$ 0 |
| Foster Care Placement | \$ 0 |
| Gloves - Medical | \$ 0 |
| Good-time Credit (Incentives) | \$ 0 |
| GPS Equipment | \$ 0 |
| Graduation Ceremony | \$ 0 |
| Group Counseling Services | \$ 0 |
| Hospital Miscellaneous | \$ 0 |
| Incentives | \$ 0 |
| In County Detention | \$ 0 |
| Individual Counseling Services | \$ 0 |
| Individual & Group Counseling Services | \$ 21500 |
| Inpatient Alcohol | \$ 0 |

| Inpatient Drug Treatment | \$ 0 | |
|-----------------------------------|----------|--|
| IPPC Sex Offender Contract | \$ 0 | |
| JSOP - Counseling | \$ 0 | |
| Language Access Services | \$ 25000 | |
| Legal Notice(s) | \$ 0 | |
| LexisNexis Contract | \$ 0 | |
| Medical Miscellaneous | \$ 0 | |
| Medications/Prescriptions | \$ 5000 | |
| Medical Supplies | \$ 5000 | |
| Medical Treatment | \$ 0 | |
| Medical Waste Disposal | \$ 2500 | |
| Movie Tickets (Incentives) | \$ 0 | |
| Other Detention Cost | \$ O | |
| Out of County Detention | \$ 0 | |
| Outpatient Alcohol Treatment | \$ 10000 | |
| Outpatient Drug Treatment | \$ 10000 | |
| Oxford Housing | \$ 0 | |
| Polygraph Testing | \$ 3000 | |
| Prescriptions | \$ O | |
| Project Stipends | \$ 0 | |
| Psychological Evaluations | \$ 0 | |
| Psychological Testina/Evaluations | \$ 25000 | |

| Testing | \$ 0 |
|--|------------|
| Psychological Treatment | \$ 0 |
| Public/Community Service Supervision Contract | \$ 0 |
| Public Service Supervision Contract | \$ O |
| RANT Assessments | \$ 0 |
| Redeploy Programming | \$ 0 |
| Residential Facilities | \$ 0 |
| Residential Placement | \$ О |
| Risk Assessment | \$ 0 |
| Salaries - (Contracted specific to client/resident services) | \$ 0 |
| Shipping - Alc/Drug Tests | \$ 0 |
| SNAP Contracts | \$ 0 |
| STD Testing | \$ 0 |
| Television (Incentives) | \$ 0 |
| Text Message Appointment Reminders | \$ 1500 |
| Track Phones (Incentives) | \$ 0 |
| Track Phone Minutes (Incentives) | \$ 0 |
| Transportation | \$ 1000 |
| Treatment Services | \$ 0 |
| Vaccines | \$ 0 |
| Water Coolers / Water | \$ 0 |
| Water Dyes - Alc/Drug Testing | \$ 0 |
| Other Contracts | \$ n |

| Other Services | \$ 2500 |
|-------------------|------------|
| Emergency Housing | |
| Total | \$ 306,750 |

"Other" Expenses

For CFY 2023 you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for "Other" Expenses* from the reported total dollar amount

* Items which have not been already identified above and do not necessarily fall under client/resident services or department operations.

| Chief Judge | \$ 0 |
|--------------------|---------|
| Juror Fees | \$ 0 |
| Lawyer | \$ 0 |
| Legal Notice(s) | \$ 0 |
| Statute Updates | \$ 0 |
| Security Services | \$ 0 |
| Witness Fees | \$ 0 |
| "Other" Expenses | \$ 0 |
| Total | \$ 0 |

How Expenses Are Covered | Services

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming

You indicated \$32800 of <u>Cognitive Programming & Supplies</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$32800 per account/department.

| Probation Fees Fund | \$ 32800 |
|---------------------|-----------|
| Total | \$ 32,800 |

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming

Please confirm that these two numbers match:

- \$32800 to be spent on Cognitive Programming & Supplies
- \$32800 in How "Cognitive Programming & Supplies" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| | Yes | |
|---|-----|--|
| 0 | No | |
| | | |

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping

You indicated \$25000 of <u>Alcohol/Drug Testing</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

| Probation Fees Fund | \$ 25000 |
|---------------------|--------------|
| Total | \$ 25,000 |

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping

- \$25000 in How "Drug/Alcohol Testing" Will be Covered
- \$25000 in How "Drug/Alcohol Testing" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| | Yes | | | | |
|---|-----|--|--|--|--|
| 0 | No | | | | |
| | | | | | |

Alcohol/Drug Treatment: Drug Treatment, Alcohol Treatment, Inpatient Drug Treatment, Inpatient Alcohol Treatment, Outpatient Alcohol Treatment, Outpatient Drug Treatment, Oxford Housing

You indicated \$65000 of <u>Alcohol/Drug Treatment</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$65000 per account/department.

| Probation Fees Fund | \$ 65000 | |
|---------------------|--------------|--|
| Total | \$ 65,000 | |

Alcohol/Drug Treatment: Drug Treatment, Alcohol Treatment, Inpatient Drug Treatment, Inpatient Alcohol Treatment, Outpatient Alcohol Treatment, Outpatient Drug Treatment, Oxford Housing

Please confirm that these two numbers match:

- \$65000 in How "Drug/Alcohol Treatment" Will be Covered
- \$65000 in How "Drug/Alcohol Treatment" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain



Educational Programs & Supplies: Educational Programs, Educational Supplies

You indicated \$20000 of Educational Programs & Supplies will be spent. Please indicate which account/department will cover this expense, and how much of the \$20000 per account/department.

| Probation Fees Fund | \$ 20000 |
|---------------------|-----------|
| Total | \$ 20,000 |

Educational Programs & Supplies: Educational Programs, Educational Supplies

Please confirm that these two numbers match:

- \$20000 in How "Educational Programs & Supplies" Will be Covered
- \$20000 in How "Educational Programs & Supplies" Will be Covered

Do the two numbers match? If these two numbers do NOT match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Electronic Monitoring/GPS: GPS Equipment

You indicated \$45700 of Electronic Monitoring & GPS Equipment will be spent. Please indicate which account/department will cover this expense.

| Probation Fees Fund | \$ 45700 |
|---------------------|-----------|
| Total | \$ 45,700 |

Electronic Monitoring/GPS: GPS Equipment

Please confirm that these two numbers match:

- \$45700 in How "Electronic Monitoring/GPS" Will be Covered
- \$45700 in How "Electronic Monitoring/GPS" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | |
|------|--|
| ○ No | |
| | |

Employment Services

You indicated \$15000 of <u>Employment Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$15000 per account/department.

| Probation Fees Fund | \$ 15000 |
|---------------------|-----------|
| Total | \$ 15,000 |

Employment Services

Please confirm that these two numbers match:

- \$15000 in How "Employment Services" Will be Covered
- \$15000 in How "Employment Services" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| () | Yes |
|-----------|-----|
| 0 | No |

Incentives: Bus Fare/Tokens, Food, Food/Snacks/Candy, Good-Time Credit, Movie Tickets, Television, Cash, Track Phones, Track Phone Minutes, Graduation Ceremony

You indicated \$10000 of <u>Incentives</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$10000 per account/department.

| Probation Fees Fund | \$ 10000 |
|---------------------|-----------|
| Total | \$ 10,000 |

Incentives: Bus Fare/Tokens, Food, Food/Snacks/Candy, Good-Time Credit, Movie Tickets, Television, Cash, Track Phones, Track Phone Minutes, Graduation Ceremony

Please confirm that these two numbers match:

- \$10000 in How "Incentives" Will be Covered
- \$10000 in How "Incentives" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP - Counseling

You indicated \$21500 of <u>Group & Individual Counseling Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$21500 per account/department.

| Probation Fees Fund | \$ 21500 |
|---------------------|--------------|
| Total | \$ 21,500 |

Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP - Counseling

Please confirm that these two numbers match:

- \$21500 in How "Group & Individual Counseling Services" Will be Covered
- \$21500 in How "Group & Individual Counseling Services" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | | | | |
|------|--|--|--|--|
| ○ No | | | | |
| | | | | |

Language Access Services: ASL - Language, Foreign Language Interpreters

You indicated \$25000 of <u>Language Access Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

Language Access Services: ASL - Language, Foreign Language Interpreters

Please confirm that these two numbers match:

- \$25000 in How "Language Access Services" Will be Covered
- \$25000 in How "Language Access Services" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| | Yes | |
|---|-----|--|
| 0 | No | |
| | | |

Medical & Health Related Expenses: Hospital Miscellaneous, Medical Miscellaneous, COVID-19 Testing, STD Testing, Medications/Prescriptions, Medical Supplies, Medical Waste Disposal, Gloves, Prescriptions

You indicated \$12500 of Medical & Health Related Expenses will be spent. Please indicate which account/department will cover this expense, and how much of the \$12500 per account/department.

| Probation Fees Fund | \$ 12500 |
|---------------------|--------------|
| Total | \$ 12,500 |

Medical & Health Related Expenses: Hospital Miscellaneous, Medical Miscellaneous, COVID-19 Testing, STD Testing, Medications/Prescriptions, Medical Supplies, Medical Waste Disposal, Gloves, Prescriptions

Please confirm that these two numbers match:

- \$12500 in How "Medical & Health Related Expenses" Will be Covered
- \$12500 in How "Medical & Health Related Expenses" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| ○ No | |
|------|--|

Psychological Testing & Evaluations: Psychological Evaluations, Psychological Testing, DVI Assessments, RANT Assessments, Risk Assessments

You indicated \$25000 of <u>Psychological Testing & Evaluations</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

| Probation Fees Fund | \$ 25000 |
|---------------------|--------------|
| Total | \$ 25,000 |

Psychological Testing & Evaluations: Psychological Evaluations, Psychological Testing, DVI Assessments, RANT Assessments, Risk Assessments

Please confirm that these two numbers match:

- \$25000 in How "Psychological Testing & Evaluations" Will be Covered
- \$25000 in How "Psychological Testing & Evaluations" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Polygraph Testing

You indicated \$3000 of <u>Polygraph Testing</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$3000 per account/department.

Probation Fees Fund \$ 3000

Total \$ 3,000

Polygraph Testing

Please confirm that these two numbers match:

- \$3000 in How "Polygraph Testing" Will be Covered
- \$3000 in How "Polygraph Testing" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

● Yes

○ No

Transportation

You indicated \$1000 of <u>Transportation</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$1000 per account/department.

Probation Fees Fund

Transportation

Please confirm that these two numbers match:

- \$1000 in How "Transportation" Will be Covered
- \$1000 in How "Transportation" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| | Yes | |
|---|-----|--|
| 0 | No | |
| | | |

Other Services: Client Records, Client Birth Records, Appointment Text Reminders, Water Coolers, JRI (Household Needs)

You indicated \$4000 of <u>Other Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$4000 per account/department.

| 4,000 | |
|-------|-------|
| 4 | 4,000 |

Other Services: Client Records, Client Birth Records, Appointment Text Reminders, Water Coolers, JRI (Household Needs)

Please confirm that these two numbers match:

- \$4000 in How "Other Services" Will be Covered
- \$4000 in How "Other Services" Will be Covered

the Services and How this Expense will be Covered sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Y | es |
|---|----|
|---|----|

O No

How Expenses Are Covered | Department Operations

Auto Expenses: Car Communication Systems, Gas - Auto, Vehicle Lease, Vehicle Purchase, Oil Changes, Vehicle Maintenance, Auto Expenses

You indicated \$37500 of <u>Auto Expenses</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$37500 per account/department.

| Probation Fees Fund | \$ 37500 |
|---------------------|-----------|
| Total | \$ 37,500 |

Auto Expenses: Car Communication Systems, Gas - Auto, Vehicle Lease, Vehicle Purchase, Oil Changes, Vehicle Maintenance, Auto Expenses

Please confirm that these two numbers match:

- \$37500 to be spent on Auto Expenses
- \$37500 in How "Auto Expenses" Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Building Rent/Mortgage/Bond

You indicated \$1500 of <u>Building Rent/Mortgage/Bond</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$1500 per account/department.

| Probation Fees Fund | \$ 1500 |
|---------------------|----------|
| Total | \$ 1,500 |

Building Rent/Mortgage/Bond

Please confirm that these two numbers match:

- \$1500 will be spent on Building Rent/Mortgage/Bond
- \$1500 in How "Building Rent/Mortgage/Bond" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Technology Expenses: Computer Hardware, Software, Video Equipment, Security Computer & Video Equipment, Web-Cams, Record/File Storage

You indicated \$10000 of <u>Technology Expenses</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$10000 per account/department.

| Probation Fees Fund | \$ 10000 |
|---------------------|-----------|
| Total | \$ 10,000 |

Technology Expenses: Computer Hardware, Software, Video Equipment, Security Computer & Video Equipment, Web-Cams, Record/File Storage

Please confirm that these two numbers match:

- \$10000 will be spent on Technology Expenses
- \$10000 in How "Technology Expenses" Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| • | Yes |
|------------|-----|
| \bigcirc | No |
| | |

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions

You indicated \$3400 of Memberships, Dues, & Subscriptions will be spent. Please indicate which account/department will cover this expense, and how much of the \$3400 per account/department.

| Probation Fees Fund | \$ 3400 |
|---------------------|----------|
| Total | \$ 3,400 |

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions

Please confirm that these two numbers match:

- \$3400 will be spent on Memberships, Dues, Subscriptions
- \$3400 in How "Memberships, Dues, Subscriptions" Expense Will be Covered

Do the two numbers match? If they do NOT match, review the

sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

) No

Office Supplies: Chairs, Desks, Ink, Office Supplies, Microfilming, Office Copier/Printer/Scanner, Paper, Pens, Postage, Printing/Duplication, Publications, Printing, & Binding, Stamps, Hotspot/Wi-Fi Services, Notary Services, Advertising, Water-Coolers/Bottled, Icemaker, Printer Toner, Cell Phone Chargers, Job Posting/Hiring Ad

You indicated \$8250 of Office Supplies will be spent. Please indicate which account/department will cover this expense, and how much of the \$8250 per account/department.

| Probation Fees Fund | \$ 8250 |
|---------------------|----------|
| Total | \$ 8,250 |

Office Supplies: Chairs, Desks, Ink, Office Supplies, Microfilming, Office Copier/Printer/Scanner, Paper, Pens, Postage, Printing/Duplication, Publications, Printing, & Binding, Stamps, Hotspot/Wi-Fi Services, Notary Services, Advertising, Water-Coolers/Bottled, Icemaker, Printer Toner, Cell Phone Chargers, Job Posting/Hiring Ad

Please confirm that these two numbers match:

- \$8250 will be spent on Office Supplies
- \$8250 in How "Office Supplies" Expense Will be Covered

Do the two numbers match? If they do NOT match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Safety Equipment: Firearm Ammunition, Firearms, Officer Safety Equipment, Oleoresin Capsicum: Pepper Spray, Police Radios, Vests, Conducted Energy Devices (CEDs)

You indicated \$1000 of <u>Officer Safety Equipment</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$1000 per account/department.

| Probation Fees Fund | \$ 1000 |
|---------------------|----------|
| Total | \$ 1,000 |

Safety Equipment: Firearm Ammunition, Firearms, Officer Safety Equipment, Oleoresin Capsicum: Pepper Spray, Police Radios, Vests, Conducted Energy Devices (CEDs)

Please confirm that these two numbers match:

- \$1000 in How "Safety Equipment" Expense Will be Covered
- \$1000 in How "Safety Equipment" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Officer Uniforms

You indicated \$500 of <u>Officer Uniforms</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$500 per

| Probation Fees Fund | \$ 500 |
|---------------------|-----------|
| Total | \$ 500 |

Officer Uniforms

Please confirm that these two numbers match:

- \$500 in How "Officer Uniforms" Expense Will be Covered
- \$500 in How "Officer Uniforms" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | | |
|------|--|--|
| O No | | |
| | | |

Operation Service Contracts: Equipment Maintenance, Equipment Rentals, IT Support Contract, Office Copier/Printer/Scanner Maintenance, Office Copier/Printer/Scanner Lease

You indicated \$**7500** of <u>Operation Service Contracts</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$**7500** per account/department.

| Probation Fees Fund | \$ 7500 |
|---------------------|-------------|
| Total | \$ 7,500 |

Operation Service Contracts: Equipment Maintenance, Equipment Rentals, IT Support Contract, Office Copier/Printer/Scanner Maintenance, Office Copier/Printer/Scanner Lease

- \$7500 in How "Operation Service Contracts" Expense Will be Covered
- \$7500 in How "Operation Service Contracts" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | | | | |
|------|--|--|--|--|
| O No | | | | |
| | | | | |

Applicant & Employee Psychological Testing/Evaluations

You indicated \$10000 of Applicant & Employee Psychological

Testing/Evaluations will be spent. Please indicate which account/department will cover this expense, and how much of the \$10000 per account/department.

| Probation Fees Fund | \$ 10000 |
|---------------------|-----------|
| Total | \$ 10,000 |

Applicant & Employee Psychological Testing/Evaluations

Please confirm that these two numbers match:

- \$10000 in How "Applicant & Employee Psychological Testing/Evaluations" Expense Will be Covered
- \$10000 in How "Applicant & Employee Psychological Testing/Evaluations" Expense Will be Covered

Do the two numbers match? If they do NOT match, review the "Department Operations" and "How This Expense Will be Covered"

| Yes | |
|--|--|
| ○ No | |
| | |
| Work Release/Public/Community Service Supplies: Work Release | |

You indicated \$5000 of Work Release/Public/Community Service Supplies will be spent. Please indicate which account/department will cover this expense, and how much of the \$5000 per account/department.

| Probation Fees Fund | \$ 5000 | |
|---------------------|----------|--|
| Total | \$ 5,000 | |

Work Release/Public/Community Service Supplies: Work Release

Please confirm that these two numbers match:

- \$5000 in How "Work Release/Public/Community Service Supplies"
 Expense Will be Covered
- \$5000 in How "Work Release/Public/Community Service Supplies" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| 0 | Yes | |
|---|-----|--|
| 0 | No | |
| | | |

Training: Accommodation Reimbursements, Mileage, Per diem, Registration

| per account/department. | |
|-------------------------|-----------|
| Probation Fees Fund | \$ 16400 |
| Total | \$ 16,400 |

Training: Accommodation Reimbursements, Mileage, Per diem, Registration

Please confirm that these two numbers match:

- \$16400 in How "Training" Expense Will be Covered
- \$16400 in How "Training" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Travel Expenses: Accommodation Reimbursements, Home Visits Mileage, Per Diem, Work Meetings Mileage

You indicated \$3650 of <u>Travel Expenses</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$3650 per account/department.

| Probation Fees Fund | \$ 3650 |
|---------------------|-------------|
| Total | \$ 3,650 |

Travel Expenses: Accommodation Reimbursements, Home Visits Mileage, Per Diem, Work Meetings Mileage

- \$3650 in How "Travel Expenses" Expense Will be Covered
- \$3650 in How "Travel Expenses" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | ; | | | | |
|------|---|--|--|--|--|
| O No | | | | | |
| | | | | | |

Utilities: Electric, Gas - Building, Phones - Cell, Phones - Landline, Water - Building, Waster Disposal & Recycling, Document Shredding, Destruction of Records Service, Medical Waster Disposal

You indicated \$750 of <u>Utilities</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$750 per account/department.

| Probation Fees Fund | \$ 750 |
|---------------------|--------|
| Total | \$ 750 |

Utilities: Electric, Gas - Building, Phones - Cell, Phones - Landline, Water - Building, Waste Disposal & Recycling, Document Shredding, Destruction of Records Service, Medical Waste Disposal

Please confirm that these two numbers match:

- \$750 in How "Utilities" Expense Will be Covered
- \$750 in How "Utilities" Expense Will be Covered

Do the two numbers match? If they do NOT match, review the "Department Operations" and "How This Expense Will be Covered"

| Yes | | | | |
|------|--|--|--|--|
| O No | | | | |
| | | | | |

Capital Expense: Boilers, Improvements to Buildings, Kitchen Appliances, Roofs, Water Heaters

You indicated \$10000 of <u>Capital Expense</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$10000 per account/department.

| Probation Fees Fund | \$ 10000 |
|---------------------|-----------|
| Total | \$ 10,000 |

Capital Expense: Boilers, Improvements to Buildings, Kitchen Appliances, Roofs, Water Heaters

Please confirm that these two numbers match:

- \$10000 in How "Capital Expense" Expense Will be Covered
- \$10000 in How "Capital Expense" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes No | | | |
|--------|--|--|--|
| O No | | | |
| | | | |

Other Expenditures

You indicated \$1500 of Other Expenditures will be spent. Please indicate

| Probation Fees Fund | \$ 1500 |
|---------------------|-------------|
| Total | \$ 1,500 |

Other Expenditures

Please confirm that these two numbers match:

- \$1500 in How "Other Expenditures" Expense Will be Covered
- \$1500 in How "Other Expenditures" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | | | |
|------|--|--|--|
| O No | | | |
| | | | |

Thank you, <u>Director Siders</u>, for submitting your CFY 2023 <u>Probation and</u> <u>Court Services Financial Proposal</u> data!

Upon completion of this data submission, the Qualtrics System will send you and the Annual Probation Plan an email providing notification of completion that will include a link where you can generate a PDF to print your responses. Upon receipt of this email, Missy Dean and your Field Coordinator will verify completion of all submission requirements and email you with any questions of concerns.

Thank You Field Services Unit We thank you for your time spent taking this survey.
Your response has been recorded.

Below is a summary of your responses

Download PDF

This survey requires a password.

• • • • •



Probation Services Fee Expenditure Proposal

Department Information

| R | е | p | 0 | rt | į | n | g | Υ | e | a | r |
|---|---|---|---|----|---|---|---|---|---|---|---|
|---|---|---|---|----|---|---|---|---|---|---|---|

(e.g., 2022, 2023)

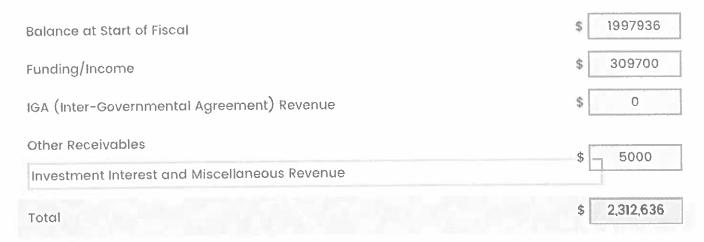
2023

First Name

Shannon

| LUST NOTHE | | | |
|----------------------------|--------------|--------|---|
| Siders | | | |
| Work Email Address | | | |
| ssiders@co.champaign.il.us | | | |
| Organization Type | | | |
| Probation | | | |
| Circuit | | | |
| 6 | | | |
| Department | | | |
| Champaign | | | × |
| | Source of Fu | ınding | |

For your source of **FUNDING** for the **Probation Fee Fund** identify the following. **DO NOT ROUND**.



Department Operations & Lersonner

For CFY 2023 you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for <u>DEPARTMENT FISCAL OPERATIONS</u> from the reported total dollar amount.

| Bonuses | \$ | 0 |
|---|--------|---|
| Contingency | \$ | 0 |
| Department Fringe Benefits - (FICA, Worker's Compensation, Unemployment, IMRF, Medical, Dental, and Life Insurance) | \$ | 0 |
| Longevity | \$ | 0 |
| Merit | \$ | 0 |
| Overtime | \$ | 0 |
| Personnel Payouts | \$ | 0 |
| Reimbursements to Staff | \$ | 0 |
| Salaries | \$ | 0 |
| Salary Shortfall | \$ | 0 |
| Tuition Reimbursement | \$ | 0 |
| OTHER - Salary | \$ | 0 |
| Total | \$ | 0 |

For CFY **2023** you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for **DEPARTMENT OPERATIONS** from the reported total dollar amount.

Advertising \$ 0

| Applicant & Employee Psychological Testing/Evaluations | \$ | 10000 |
|--|--------|-------|
| Auto Expenses | \$ | 1000 |
| Boilers | \$ | 0 |
| Building Rent/Mortgage/Bond | \$ | 1500 |
| Capital Expenses | \$ _ | 10000 |
| Annual Contribution to Capital Asset Replacement Fund | | |
| Car Communication Systems | \$ | 0 |
| Case Management System Development (e.g., implementing, building compliand with data requirements) | e \$ [| 0 |
| Case Management License (e.g., new software) | \$ | 0 |
| Case Management Services (e.g., maintaining) | \$ | 0 |
| Cell Phone Chargers | \$ | 0 |
| Chairs | \$ | 1000 |
| Computer Hardware (e.g., laptops, printers) | \$ | 5000 |
| Computer Software (e.g., MS Office, Adobe Suite, Video conferencing) | \$ | 2500 |
| Computer Video Equipment | \$ | 2500 |
| Conducted Energy Devices (CEDs) | \$ | 0 |
| COVID Expenses - (e.g., cleaning) | \$ | 0 |
| COVID Testing | \$ | 0 |
| Desks | \$ | 1000 |
| Destruction of Records Service | \$ | 0 |
| Document Shredding | \$ | 0 |
| Dues | \$ | 0 |
| Electric | \$ | 0 |
| Employee Drug | 6 | |

| Testing | a |
|--|-----------|
| Equipment Maintenance (identify type of | politonia |
| "equipment") | \$ 3500 |
| | |
| Equipment Rentals | \$ 4000 |
| Firearm Ammunition | \$ 1000 |
| Firearms | \$ 0 |
| Gas – Auto | \$ 0 |
| Gas – Building | \$ 0 |
| Hotspot/Wi-Fi Services | \$ 0 |
| Icemaker | \$ 0 |
| Improvements to Buildings | \$ 0 |
| Ink | \$ 0 |
| IT Support Contract | \$ 0 |
| Job Posting/Hiring Ad | \$ 0 |
| Kitchen Appliances | \$ 0 |
| Laundry Services | \$ 0 |
| Laundry & Cleaning Supplies | \$ 0 |
| Maintenance/Cleaning Staff Salaries & Benefits | \$ 0 |
| Medical Waste Disposal | \$ 0 |
| Memberships (e.g., IPCSA) | \$ 3400 |
| Microfilming | \$ 0 |
| Notary Services | \$ 0 |
| Office Cleaning/Custodial Services | \$ 0 |
| Office Copier/Printer/Scanner | \$ 0 |

| Office Copier/Printer/Scanner Lease | \$ 0 | |
|--|--------------------|----|
| Office Copier/Printer/Scanner Maintenance | \$ 0 | |
| Officer Safety Equipment | \$ 0 | |
| Office Supplies | \$ 500 | |
| Officer Uniforms | \$ 500 | |
| Oil changes | \$ 0 | |
| Oleoresin Capsicum: Pepper Spray | \$ 0 | |
| Operation Service Contracts | \$ 0 | |
| Paper | \$ 0 | |
| Pens | \$ 0 | |
| Phones - Cell | \$ 0 | |
| Phones - Landline | \$ 0 | |
| Police Radios | \$ 0 | |
| Postage | \$ 250 | |
| Printing/Duplication | \$ 500 | 0 |
| Printer Toner | \$ 0 | |
| Property & Employee Liability Insurance | \$ 0 | |
| Public/Community Service Supplies | \$ 500 | 00 |
| Publications, Printing, & Binding | \$ 500 | 00 |
| Record/File Storage | \$ 0 | |
| Reimbursements to Other Probation Department(s) | \$ 0 | |
| Roofs | \$ 0 | |
| Cantille Camputar C Hidas | Quality-parameters | |

| Security Computer a video Equipment | \$ 0 |
|--|----------|
| Stamps | \$ 0 |
| Subscriptions (e.g., journals, news papers) | \$ 0 |
| Tracker Contract | \$ 0 |
| Training - (accommodation reimbursements) | \$ 3400 |
| Training - (mileage) | \$ 1000 |
| Training - (per diem) | \$ 6000 |
| Training - (registration) | \$ 6000 |
| Travel Expenses - (accommodation reimbursements) | \$ 3400 |
| Travel Expenses - (home visits mileage) | \$ 0 |
| Travel Expenses - (per diem) | \$ 0 |
| Travel Expenses - (work meetings mileage) | \$ 250 |
| Utilities | \$ 250 |
| Vehicle Lease | \$ 0 |
| Vehicle Maintenance | \$ 0 |
| Vehicle Purchase | \$ 36500 |
| Vests | \$ 0 |
| Waste Disposal & Recycling | \$ 500 |
| Water - Building | \$ 0 |
| Water - Coolers / Bottled | \$ 0 |
| Water Heaters | \$ 0 |
| Web-cams | \$ 0 |
| Work Release | \$ 0 |
| Other Operations | \$ 0 |
| | energy . |

| Other Expenditures | \$ 1500 |
|-----------------------------|------------|
| Employee Assistance Program | |
| Total | \$ 116,950 |

Services

For CFY 2023 you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for **CLIENT SERVICES** from the reported total dollar amount.

| Alcohol | \$ | 0 |
|--|--------------------------|--|
| Testing | Touchest Address Control | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Alcohol Treatment | \$ | 0 |
| ASL - Language | \$ | 0 |
| Bus Fare / Tokens (Incentives) | \$ | 0 |
| Bus Fare / Tokens - Non-Incentive | \$ | 1250 |
| Cash (Incentives) | \$ | 0 |
| Client Birth Records | \$ | 0 |
| Client Records | \$ | O |
| Cognitive Programming & Supplies | \$ | 32800 |
| Cognitive Programming | \$ | 0 |
| Cognitive Supplies | \$ | 0 |
| Community Service Supervision Contract | \$ | 0 |
| Contracted Services | \$ | 0 |
| COVID-19 Testing | \$ | 0 |
| Drug/Alcohol | \$ | 25000 |

| Drug/Alcohol Treatment | \$ 45000 |
|--|----------|
| Drug Testing | \$ 0 |
| Drug Treatment | \$ 0 |
| DVI Assessments | \$ 0 |
| Educational Programs & Supplies | \$ 20000 |
| Educational Programs | \$ 0 |
| Educational Supplies | \$ 0 |
| Electronic Monitoring/GPS | \$ 45700 |
| Employment Services | \$ 15000 |
| Food - Non-Incentive | \$ 10000 |
| Food/Snacks/Candy (Incentives) | \$ 0 |
| Foreign Language Interpreters | \$ 0 |
| Foster Care Placement | \$ 0 |
| Gloves - Medical | \$ 0 |
| Good-time Credit (Incentives) | \$ 0 |
| GPS Equipment | \$ 0 |
| Graduation Ceremony | \$ 0 |
| Group Counseling Services | \$ 0 |
| Hospital Miscellaneous | \$ 0 |
| Incentives | \$ 0 |
| In County Detention | \$ 0 |
| Individual Counseling Services | \$ 0 |
| Individual & Group Counseling Services | \$ 21500 |
| Inpatient Alcohol Treatment | \$ 0 |

| Inpatient Drug Treatment | \$ 0 |
|---------------------------------|----------|
| IPPC Sex Offender Contract | \$ 0 |
| JSOP - Counseling | \$ 0 |
| Language Access Services | \$ 25000 |
| Legal Notice(s) | \$ 0 |
| LexisNexis Contract | \$ 0 |
| Medical Miscellaneous | \$ 0 |
| Medications/Prescriptions | \$ 5000 |
| Medical Supplies | \$ 5000 |
| Medical Treatment | \$ 0 |
| Medical Waste Disposal | \$ 2500 |
| Movie Tickets (Incentives) | \$ 0 |
| Other Detention Cost | |
| Out of County Detention | \$ 0 |
| Outpatient Alcohol Treatment | \$ 10000 |
| Outpatient Drug Treatment | \$ 10000 |
| Oxford Housing | \$ O |
| | |
| Polygraph Testing | \$ 3000 |
| | \$ 3000 |
| Testing | |
| Testing Prescriptions Project | \$ 0 |

| Psychological Testing | \$ | 0 |
|--|------|------|
| Psychological Treatment | \$ | 0 |
| Public/Community Service Supervision Contract | \$ | 0 |
| Public Service Supervision Contract | \$ | 0 |
| RANT Assessments | \$ | 0 |
| Redeploy Programming | \$ | 0 |
| Residential Facilities | \$ | 0 |
| Residential Placement | \$ | 0 |
| Risk Assessment | \$ [| 0 |
| Salaries - (Contracted specific to client/resident services) | \$ | 0 |
| Shipping - Alc/Drug Tests | \$ | 0 |
| SNAP Contracts | \$ | 0 |
| STD Testing | \$ | 0 |
| Television (Incentives) | \$ | 0 |
| Text Message Appointment Reminders | \$ | 1500 |
| Track Phones (Incentives) | \$ | 0 |
| Track Phone Minutes (Incentives) | \$ | 0 |
| Transportation | \$ | 1000 |
| Treatment Services | \$ | 0 |
| Vaccines | \$ | 0 |
| Water Coolers / Water | \$ | 0 |
| Water Dyes - Alc/Drug Testing | \$ | 0 |
| Other Contracts | \$ | 0 |
| | | |

| Other Services | \$ 2500 |
|-------------------|------------|
| Emergency Housing | |
| Total | \$ 306,750 |

"Other" Expenses

For CFY 2023 you reported a total of \$2312636 available for department spending. Please identify how much will be expended across each of the following for "Other" Expenses* from the reported total dollar amount

* Items which have not been already identified above and do not necessarily fall under client/resident services or department operations.

| Chief Judge | \$ 0 |
|--------------------|------|
| Juror Fees | \$ 0 |
| Lawyer | \$ 0 |
| Legal Notice(s) | \$ 0 |
| Statute Updates | \$ 0 |
| Security Services | \$ 0 |
| Witness Fees | \$ 0 |
| "Other" Expenses | \$ 0 |
| Total | \$ 0 |

How Expenses Are Covered | Services

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming

You indicated \$32800 of <u>Cognitive Programming & Supplies</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$32800 per account/department.

| Probation Fees Fund | \$ 32800 |
|---------------------|-----------|
| Total | \$ 32,800 |

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming

Please confirm that these two numbers match:

- \$32800 to be spent on Cognitive Programming & Supplies
- \$32800 in How "Cognitive Programming & Supplies" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| | 'es |
|---|-----|
| 0 | lo |
| | |

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping

You indicated \$25000 of <u>Alcohol/Drug Testing</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

| Probation Fees Fund | \$ 25000 |
|---------------------|-----------|
| Total | \$ 25,000 |

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping

riegse cominn ingi mese two numbers match.

- \$25000 in How "Drug/Alcohol Testing" Will be Covered
- \$25000 in How "Drug/Alcohol Testing" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | | | |
|------|--|--|--|
| O No | | | |
| | | | |

Alcohol/Drug Treatment: Drug Treatment, Alcohol Treatment, Inpatient Drug Treatment, Inpatient Alcohol Treatment, Outpatient Alcohol Treatment, Outpatient Drug Treatment, Oxford Housing

You indicated \$65000 of <u>Alcohol/Drug Treatment</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$65000 per account/department.

| Probation Fees Fund | \$ 65000 |
|---------------------|-----------|
| Total | \$ 65,000 |

Alcohol/Drug Treatment: Drug Treatment, Alcohol Treatment, Inpatient Drug Treatment, Inpatient Alcohol Treatment, Outpatient Alcohol Treatment, Outpatient Drug Treatment, Oxford Housing

Please confirm that these two numbers match:

- \$65000 in How "Drug/Alcohol Treatment" Will be Covered
- \$65000 in How "Drug/Alcohol Treatment" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain

which thou do not motah

| No No | |
|--|---|
| | |
| Educational Programs & Supplies: Educational Pro Supplies | grams, Educational |
| You indicated \$20000 of Educational Programs & S Please indicate which account/department will cove how much of the \$20000 per account/department. | Supplies will be spent. er this expense, and |
| Probation Fees Fund | \$ 20000 |
| Total | \$ 20,000 |
| Educational Programs & Supplies: Educational Pro- Supplies | grams, Educational |
| Please confirm that these two numbers match: | |
| \$20000 in How "Educational Programs & Supple \$20000 i | lies" Will be Covered lies" Will be Covered |
| Do the two numbers match? If these two numbers the "Services" and "How This Expense Will be Covered determine where corrections might need to be made why they do not match. | d" sections to |
| Yes | |
| () No | |
| | |

Electronic Monitoring/GPS: GPS Equipment

with they do not match.

You indicated \$45700 of <u>Electronic Monitoring & GPS Equipment</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$45700 per account/department

Probation Fees Fund \$ 45700

Total

Electronic Monitoring/GPS: GPS Equipment

Please confirm that these two numbers match:

- \$45700 in How "Electronic Monitoring/GPS" Will be Covered
- \$45700 in How "Electronic Monitoring/GPS" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | |
|------|--|
| ○ No | |
| | |

Employment Services

You indicated \$15000 of <u>Employment Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$15000 per account/department.

| Probation Fees Fund | \$ 15000 |
|---------------------|-----------|
| Total | \$ 15,000 |

Employment Services

Please confirm that these two numbers match:

- \$15000 in How "Employment Services" Will be Covered
- \$15000 in How "Employment Services" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Yes
 No

Incentives: Bus Fare/Tokens, Food, Food/Snacks/Candy, Good-Time Credit, Movie Tickets, Television, Cash, Track Phones, Track Phone Minutes, Graduation Ceremony

You indicated \$10000 of <u>Incentives</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$10000 per account/department.

| Probation Fees Fund | \$ 10000 |
|---------------------|-----------|
| Total | \$ 10,000 |

Incentives: Bus Fare/Tokens, Food, Food/Snacks/Candy, Good-Time Credit, Movie Tickets, Television, Cash, Track Phones, Track Phone Minutes, Graduation Ceremony

Please confirm that these two numbers match:

- \$10000 in How "Incentives" Will be Covered
- \$10000 in How "Incentives" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP - Counseling

You indicated \$21500 of <u>Group & Individual Counseling Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$21500 per account/department.

| Probation Fees Fund | \$ 21500 |
|---------------------|-----------|
| Total | \$ 21,500 |

Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP – Counseling

Please confirm that these two numbers match:

- \$21500 in How "Group & Individual Counseling Services" Will be Covered
- \$21500 in How "Group & Individual Counseling Services" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Language Access Services: ASL - Language, Foreign Language Interpreters

You indicated \$25000 of <u>Language Access Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

Probation Fees Fund \$ 25000

Language Access Services: ASL - Language, Foreign Language Interpreters

Please confirm that these two numbers match:

- \$25000 in How "Language Access Services" Will be Covered
- \$25000 in How "Language Access Services" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| | Yes | | | | |
|---|-----|--|--|--|--|
| 0 | No | | | | |
| | | | | | |

Medical & Health Related Expenses: Hospital Miscellaneous, Medical Miscellaneous, COVID-19 Testing, STD Testing, Medications/Prescriptions, Medical Supplies, Medical Waste Disposal, Gloves, Prescriptions

You indicated \$12500 of Medical & Health Related Expenses will be spent. Please indicate which account/department will cover this expense, and how much of the \$12500 per account/department.

| Probation Fees Fund | \$ 12500 |
|---------------------|-----------|
| Total | \$ 12,500 |

Medical & Health Related Expenses: Hospital Miscellaneous, Medical Miscellaneous, COVID-19 Testing, STD Testing, Medications/Prescriptions, Medical Supplies, Medical Waste Disposal, Gloves, Prescriptions

Please confirm that these two numbers match:

- \$12500 in How "Medical & Health Related Expenses" Will be Covered
- \$12500 in How "Medical & Health Related Expenses" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | |
|------|--|
| O No | |
| | |

Psychological Testing & Evaluations: Psychological Evaluations, Psychological Testing, DVI Assessments, RANT Assessments, Risk Assessments

You indicated \$25000 of <u>Psychological Testing & Evaluations</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

| Probation Fees Fund | \$ 25000 |
|---------------------|-----------|
| Total | \$ 25,000 |

Psychological Testing & Evaluations: Psychological Evaluations, Psychological Testing, DVI Assessments, RANT Assessments, Risk Assessments

Please confirm that these two numbers match:

- \$25000 in How "Psychological Testing & Evaluations" Will be Covered
- \$25000 in How "Psychological Testing & Evaluations" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Polygraph Testing

You indicated \$3000 of <u>Polygraph Testing</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$3000 per account/department.

| Probation Fees Fund | \$ 3000 |
|---------------------|----------|
| Total | \$ 3,000 |

Polygraph Testing

Please confirm that these two numbers match:

- \$3000 in How "Polygraph Testing" Will be Covered
- \$3000 in How "Polygraph Testing" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Transportation

You indicated \$1000 of <u>Transportation</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$1000 per account/department.

| Probation Fees Fund | \$ 1000 |
|---------------------|----------|
| Total | \$ 1,000 |

Transportation

Please confirm that these two numbers match:

- \$1000 in How "Transportation" Will be Covered
- \$1000 in How "Transportation" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | |
|------|--|
| O No | |
| | |

Other Services: Client Records, Client Birth Records, Appointment Text Reminders, Water Coolers, JRI (Household Needs)

You indicated \$4000 of <u>Other Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$4000 per account/department.

| Probation Fees Fund | \$ 4000 |
|---------------------|-------------|
| Total | \$ 4,000 |

Other Services: Client Records, Client Birth Records, Appointment Text Reminders, Water Coolers, JRI (Household Needs)

Please confirm that these two numbers match:

- \$4000 in How "Other Services" Will be Covered
- \$4000 in How "Other Services" Will be Covered

Do the two numbers match? If these two numbers do NOT match, review

the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



How Expenses Are Covered | Department Operations

Auto Expenses: Car Communication Systems, Gas - Auto, Vehicle Lease, Vehicle Purchase, Oil Changes, Vehicle Maintenance, Auto Expenses

You indicated \$37500 of <u>Auto Expenses</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$37500 per account/department.

| Probation Fees Fund | \$ 37500 |
|---------------------|-----------|
| Total | \$ 37,500 |

Auto Expenses: Car Communication Systems, Gas - Auto, Vehicle Lease, Vehicle Purchase, Oil Changes, Vehicle Maintenance, Auto Expenses

Please confirm that these two numbers match:

- \$37500 to be spent on Auto Expenses
- \$37500 in How "Auto Expenses" Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Building Rent/Mortgage/Bond

You indicated \$1500 of <u>Building Rent/Mortgage/Bond</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$1500 per account/department.

| Probation Fees Fund | \$ 1500 |
|---------------------|----------|
| Total | \$ 1,500 |

Building Rent/Mortgage/Bond

Please confirm that these two numbers match:

- \$1500 will be spent on Building Rent/Mortgage/Bond
- \$1500 in How "Building Rent/Mortgage/Bond" Expense Will be Covered

Do the two numbers match? If they do **NOT** match, review the "**Department Operations**" and "**How This Expense Will be Covered**" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Technology Expenses: Computer Hardware, Software, Video Equipment, Security Computer & Video Equipment, Web-Cams, Record/File Storage

You indicated \$10000 of <u>Technology Expenses</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$10000 per account/department.

| Probation Fees Fund | \$ 10000 |
|---------------------|-----------|
| Total | \$ 10,000 |

Technology Expenses: Computer Hardware, Software, Video Equi pment, Security Computer & Video Equipment, Web-Cams, Record/File Storage

Please confirm that these two numbers match:

- \$10000 will be spent on Technology Expenses
- \$10000 in How "Technology Expenses" Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| () | Yes | | | | |
|-----------|-----|--|--|--|--|
| 0 | No | | | | |
| | | | | | |

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions

You indicated \$3400 of <u>Memberships, Dues, & Subscriptions</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$3400 per account/department.

| Probation Fees Fund | \$ 3400 |
|---------------------|----------|
| Total | \$ 3,400 |

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions

Please confirm that these two numbers match:

- \$3400 will be spent on Memberships, Dues, Subscriptions
- \$3400 in How "Memberships, Dues, Subscriptions" Expense Will be Covered

Do the two numbers match? If they do NOT match, review the "Department Operations" and "How This Expense Will be Covered"

sections to determine where corrections might need to be made.

Otherwise, explain why they do not match.

| • | Yes |
|---|-----|
| 0 | No |

Office Supplies: Chairs, Desks, Ink, Office Supplies, Microfilming, Office Copier/Printer/Scanner, Paper, Pens, Postage, Printing/Duplication, Publications, Printing, & Binding, Stamps, Hotspot/Wi-Fi Services, Notary Services, Advertising, Water-Coolers/Bottled, Icemaker, Printer Toner, Cell Phone Chargers, Job Posting/Hiring Ad

You indicated \$8250 of Office Supplies will be spent. Please indicate which account/department will cover this expense, and how much of the \$8250 per account/department.

| Probation Fees Fund | \$ 8250 |
|---------------------|----------|
| Total | \$ 8,250 |

Office Supplies: Chairs, Desks, Ink, Office Supplies, Microfilming, Office Copier/Printer/Scanner, Paper, Pens, Postage, Printing/Duplication, Publications, Printing, & Binding, Stamps, Hotspot/Wi-Fi Services, Notary Services, Advertising, Water-Coolers/Bottled, Icemaker, Printer Toner, Cell Phone Chargers, Job Posting/Hiring Ad

Please confirm that these two numbers match:

- \$8250 will be spent on Office Supplies
- \$8250 in How "Office Supplies" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Safety Equipment: Firearm Ammunition, Firearms, Officer Safety Equipment, Oleoresin Capsicum: Pepper Spray, Police Radios, Vests, Conducted Energy Devices (CEDs)

You indicated \$1000 of <u>Officer Safety Equipment</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$1000 per account/department.

| Probation Fees Fund | \$ 1000 |
|---------------------|----------|
| Total | \$ 1,000 |

Safety Equipment: Firearm Ammunition, Firearms, Officer Safety Equipment, Oleoresin Capsicum: Pepper Spray, Police Radios, Vests, Conducted Energy Devices (CEDs)

Please confirm that these two numbers match:

- \$1000 in How "Safety Equipment" Expense Will be Covered
- \$1000 in How "Safety Equipment" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Officer Uniforms

You indicated \$500 of <u>Officer Uniforms</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$500 per account/department.

| Probation Fees Fund | \$ 500 |
|---------------------|--------|
| Total | \$ 500 |

Officer Uniforms

Please confirm that these two numbers match:

- \$500 in How "Officer Uniforms" Expense Will be Covered
- \$500 in How "Officer Uniforms" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes | | | | |
|------|--|--|--|--|
| ○ No | | | | |
| | | | | |

Operation Service Contracts: Equipment Maintenance, Equipment Rentals, IT Support Contract, Office Copier/Printer/Scanner Maintenance, Office Copier/Printer/Scanner Lease

You indicated \$**7500** of <u>Operation Service Contracts</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$**7500** per account/department.

| Probation Fees Fund | \$ 7500 | |
|---------------------|----------|--|
| Total | \$ 7,500 | |

Operation Service Contracts: Equipment Maintenance, Equipment Rentals, IT Support Contract, Office Copier/Printer/Scanner Maintenance, Office Copier/Printer/Scanner Lease

Please confirm that these two numbers match:

- \$7500 in How "Operation Service Contracts" Expense Will be Covered
- \$7500 in How "Operation Service Contracts" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| • | Yes | |
|---|-----|--|
| 0 | No | |
| | | |
| | | |

Applicant & Employee Psychological Testing/Evaluations

You indicated \$10000 of <u>Applicant & Employee Psychological</u>
<u>Testing/Evaluations</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$10000 per account/department.

| Probation Fees Fund | \$ 10000 |
|---------------------|-----------|
| Total | \$ 10,000 |

Applicant & Employee Psychological Testing/Evaluations

Please confirm that these two numbers match:

- \$10000 in How "Applicant & Employee Psychological Testing/Evaluations" Expense Will be Covered
- \$10000 in How "Applicant & Employee Psychological Testing/Evaluations" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made.

| Work Release/Public/Community Service Supplie | es: Work Release |
|--|------------------------|
| You indicated \$5000 of Work Release/Public/Community will be spent. Please indicate which account/deparexpense, and how much of the \$5000 per account/o | rtment will cover this |
| Probation Fees Fund | \$ 5000 |
| Total | \$ 5,000 |
| Please confirm that these two numbers match: \$5000 in How "Work Release/Public/Commu Expense Will be Covered \$5000 in How "Work Release/Public/Commu Expense Will be Covered | |
| Do the two numbers match? If they do NOT match "Department Operations" and "How This Expense sections to determine where corrections might need to therwise, explain why they do not match. | Will be Covered" |
| Yes No | |

You indicated \$16400 of <u>Training</u> will be spent. Please indicate which

Otherwise, explain why they do not match.

account/department will cover this expense, and how much of the \$16400 per account/department.

| Probation Fees Fund | \$ 16400 |
|---------------------|-----------|
| Total | \$ 16,400 |

Training: Accommodation Reimbursements, Mileage, Per diem, Registration

Please confirm that these two numbers match:

- \$16400 in How "Training" Expense Will be Covered
- \$16400 in How "Training" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Travel Expenses: Accommodation Reimbursements, Home Visits Mileage, Per Diem, Work Meetings Mileage

You indicated \$3650 of <u>Travel Expenses</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$3650 per account/department.

| Probation Fees Fund | \$ 3650 |
|---------------------|----------|
| Total | \$ 3,650 |

Travel Expenses: Accommodation Reimbursements, Home Visits Mileage, Per Diem, Work Meetings Mileage

Please confirm that these two numbers match:

- \$3650 in How "Travel Expenses" Expense Will be Covered
- \$3650 in How "Travel Expenses" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| 0 | Yes | | | | | | |
|---|-----|--|--|--|--|--|--|
| 0 | No | | | | | | |
| | | | | | | | |

Utilities: Electric, Gas - Building, Phones - Cell, Phones - Landline, Water - Building, Waster Disposal & Recycling, Document Shredding, Destruction of Records Service, Medical Waster Disposal

You indicated \$750 of <u>Utilities</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$750 per account/department.

| Probation Fees Fund | \$ 750 |
|---------------------|-----------|
| Total | \$ 750 |

Utilities: Electric, Gas - Building, Phones - Cell, Phones - Landline, Water - Building, Waste Disposal & Recycling, Document Shredding, Destruction of Records Service, Medical Waste Disposal

Please confirm that these two numbers match:

- \$750 in How "Utilities" Expense Will be Covered
- \$750 in How "Utilities" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made.

| Otherwise, explain why they do not match. | |
|--|----------------------------------|
| Yes | |
| ○ No | |
| | |
| Capital Expense: Boilers, Improvements to Buildings, Kitc Roofs, Water Heaters | chen Appliances, |
| You indicated \$10000 of <u>Capital Expense</u> will be spent. Ple which account/department will cover this expense, and h \$10000 per account/department. | ease indicate now much of the |
| Probation Fees Fund | \$ 10000 |
| Total | \$ 10,000 |
| Capital Expense: Boilers, Improvements to Buildings, Kitc Roofs, Water Heaters Please confirm that these two numbers match: • \$10000 in How "Capital Expense" Expense Will be Co. • \$10000 in How "Capital Expense" Expense Will be Co. | overed |
| Do the two numbers match? If they do <u>NOT</u> match, review "Department Operations" and "How This Expense Will be sections to determine where corrections might need to be Otherwise, explain why they do not match. | e Covered" |
| Ves No | |
| Other Expenditures | |

You indicated \$1500 of Other Expenditures will be spent. Please indicate

which account/department will cover this expense, and how much of the

\$1500 per account/department.

| Probation Fees Fund | \$ 1500 |
|---------------------|-------------|
| Total | \$ 1,500 |

Other Expenditures

Please confirm that these two numbers match:

- \$1500 in How "Other Expenditures" Expense Will be Covered
- \$1500 in How "Other Expenditures" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Thank you, <u>Director Siders</u>, for submitting your CFY 2023 <u>Probation and</u> <u>Court Services Financial Proposal</u> data!

Upon completion of this data submission, the Qualtrics System will send you and the Annual Probation Plan an email providing notification of completion that will include a link where you can generate a PDF to print your responses. Upon receipt of this email, Missy Dean and your Field Coordinator will verify completion of all submission requirements and email you with any questions of concerns.

Thank You Field Services Unit We thank you for your time spent taking this survey.
Your response has been recorded.

Below is a summary of your responses

Download PDF

This survey requires a password.



Probation Services Fee Expenditure Proposal

Department Information

| Reporting | g Year |
|-----------|--------|
|-----------|--------|

(e.g., 2022, 2023)

2023

First Name

Shannon

| Siders | |
|--|--|
| Work Email Address | |
| ssiders@co.champaign.il.us | |
| Organization Type Problem Solving Court | |
| Circuit | |
| 6 | |
| Department | |
| Champaign | |
| PSC Information | |
| Population Served | |
| Adult Juvenile Both | |
| Court Type | |
| Drug Juvenile Mental Health Veteran Hybrid & | |

| O Multiple (Only choo court) | ese this option if you cannot break down finances between | |
|------------------------------|---|-----|
| Court Name | | |
| (Only use "Add Additional Co | ourt" button if selecting Multiple Courts in previous question) | |
| Add Additional Court | | |
| | Inclicate Court Name | |
| Court 1 | | |
| | | 100 |
| | Source of Funding | |

For your source of **FUNDING** for the <u>**Probation Fee Fund</u>** identify the</u>

following. **DO NOT ROUND**.

| Balance at Start of Fiscal | \$ 0 |
|--|-----------|
| Funding/Income | \$ 50300 |
| IGA (Inter-Governmental Agreement) Revenue | \$ 0 |
| Other Receivables | \$ 0 |
| Total | \$ 50,300 |

Department Operations & Personnel

For CFY 2023 you reported a total of \$50300 available for department spending. Please identify how much will be expended across each of the following for <u>DEPARTMENT FISCAL OPERATIONS</u> from the reported total dollar amount.

| Contingency | \$ | 0 | |
|---|-----|---|---|
| Department Fringe Benefits - (FICA, Worker's Compensation, Unemployment, IMRF, Medical, Dental, and Life Insurance) | \$[| 0 |] |
| Longevity | \$ | 0 | |
| Merit | \$ | 0 | |
| Overtime | \$ | 0 | |
| Personnel Payouts | \$ | 0 | |
| Reimbursements to Staff | \$ | 0 | |
| Salaries | \$ | 0 | |
| Salary Shortfall | \$ | 0 | |
| Tuition Reimbursement | \$ | 0 | |
| OTHER - Salary | \$ | 0 | |
| Total | \$ | 0 | |

For CFY **2023** you reported a total of \$50300 available for department spending. Please identify how much will be expended across each of the following for **DEPARTMENT OPERATIONS** from the reported total dollar amount.

| Advertising | \$ 0 |
|--|------|
| Applicant & Employee Psychological Testing/Evaluations | \$ 0 |
| Auto Expenses | \$ 0 |
| Boilers | \$ 0 |
| Building Rent/Mortgage/Bond | \$ |
| Capital Expenses | \$ 0 |
| Car Communication | |

| Case Management System Development (e.g., implementing, building compliance with data requirements) | \$ 0 |
|---|--|
| Case Management License (e.g., new software) | \$ 0 |
| Case Management Services (e.g., maintaining) | \$ 0 |
| Cell Phone Chargers | \$ 0 |
| Chairs | \$ 0 |
| Computer Hardware (e.g., laptops, printers) | \$ 0 |
| Computer Software (e.g., MS Office, Adobe Suite, Video conferencing) | \$ 0 |
| Computer Video Equipment | \$ 0 |
| Conducted Energy Devices (CEDs) | \$ 0 |
| COVID Expenses - (e.g., cleaning) | \$ 0 |
| COVID Testing | \$ 0 |
| Desks | \$ 0 |
| Destruction of Records Service | \$ 0 |
| Document Shredding | \$ 0 |
| Dues | \$ 0 |
| Electric | \$ 0 |
| Employee Drug Testing | \$ 0 |
| Equipment Maintenance (identify type of | g-riding states and the state of the state o |
| "equipment") | \$ 0 |
| Equipment | |
| Rentals | \$ 0 |
| Firearm Ammunition | \$ 0 |
| Firearms | \$ 0 |
| Gas - Auto | \$ 0 |

| ous - bullully | Ψ |
|--|--------|
| Hotspot/Wi-Fi Services | \$ O |
| Icemaker | \$ O |
| Improvements to Buildings | \$ O |
| Ink | \$ 0 |
| IT Support Contract | \$ 0 |
| Job Posting/Hiring Ad | \$ 0 |
| Kitchen Appliances | \$ 0 |
| Laundry Services | \$ 0 |
| Laundry & Cleaning Supplies | \$ 0 |
| Maintenance/Cleaning Staff Salaries & Benefits | \$ 0 |
| Medical Waste Disposal | \$ 0 |
| Memberships (e.g., IPCSA) | \$ 100 |
| Microfilming | \$ 0 |
| Notary Services | \$ 0 |
| Office Cleaning/Custodial Services | \$ 0 |
| Office Copier/Printer/Scanner | \$ 0 |
| Office Copier/Printer/Scanner Lease | \$ 0 |
| Office Copier/Printer/Scanner Maintenance | \$ 0 |
| Officer Safety Equipment | \$ 0 |
| Office Supplies | \$ 0 |
| Officer Uniforms | \$ |
| | |

| Oleoresin Capsicum: Pepper Spray | \$ 0 |
|---|---------|
| Operation Service Contracts | \$ 0 |
| Paper | \$ 0 |
| Pens | \$ 0 |
| Phones - Cell | \$ 0 |
| Phones - Landline | \$ 0 |
| Police Radios | \$ 0 |
| Postage | \$ 0 |
| Printing/Duplication | \$ 0 |
| Printer Toner | \$ 0 |
| Property & Employee Liability Insurance | \$ 0 |
| Public/Community Service Supplies | \$ 0 |
| Publications, Printing, & Binding | \$ 0 |
| Record/File Storage | \$ 0 |
| Reimbursements to Other Probation Department(s) | \$ 0 |
| Roofs | \$ 0 |
| Security Computer & Video Equipment | \$ 0 |
| Stamps | \$ 0 |
| Subscriptions (e.g., journals, news papers) | \$ 0 |
| Tracker Contract | \$ 0 |
| Training - (accommodation reimbursements) | \$ 2600 |
| Training - (mileage) | \$ 0 |

| Training - (registration) | \$ | 2600 |
|--|------|-------|
| Travel Expenses - (accommodation reimbursements) | \$ | 0 |
| Travel Expenses - (home visits mileage) | \$ | 0 |
| Travel Expenses - (per diem) | \$ | 0 |
| Travel Expenses - (work meetings mileage) | \$ | 0 |
| Utilities | \$ | 0 |
| Vehicle Lease | \$ | 0 |
| Vehicle Maintenance | \$ | 0 |
| Vehicle Purchase | \$ | 0 |
| Vests | \$ | 0 |
| Waste Disposal & Recycling | \$ | 0 |
| Water - Building | \$ | 0 |
| Water - Coolers / Bottled | \$ [| 0 |
| Water Heaters | \$ | 0 |
| Web-cams | \$ | 0 |
| Work Release | \$ | 0 |
| Other Operations | \$ | 0 |
| | L | |
| Other Expenditures | \$ | 0 |
| Total | \$ | 5,300 |

Services

following for <u>CLIENT SERVICES</u> from the reported total dollar amount.

| Alcohol Testing | \$ 0 |
|--|----------|
| Alcohol Treatment | \$ 0 |
| ASL - Language | \$ 0 |
| Bus Fare / Tokens (Incentives) | \$ 0 |
| Bus Fare / Tokens - Non-Incentive | \$ 0 |
| Cash (Incentives) | \$ 0 |
| Client Birth Records | \$ 0 |
| Client Records | \$ 0 |
| Cognitive Programming & Supplies | \$ 12200 |
| Cognitive Programming | \$ 0 |
| Cognitive Supplies | \$ 0 |
| Community Service Supervision Contract | \$ 0 |
| Contracted Services | \$ 0 |
| COVID-19 Testing | \$ 0 |
| Drug/Alcohol Testing | \$ 25000 |
| Drug/Alcohol Treatment | \$ 0 |
| Drug Testing | \$ 0 |
| Drug Treatment | \$ 0 |
| DVI Assessments | \$ 0 |
| Educational Programs & Supplies | \$ 0 |
| Educational Programs | \$ 0 |

| Electronic Monitoring/GPS | \$ 0 |
|---|------------|
| Employment Services | \$ 0 |
| Food - Non-Incentive | \$ 0 |
| Food/Snacks/Candy (Incentives) | \$ 0 |
| Foreign Language Interpreters | \$ 0 |
| Foster Care Placement | \$ 0 |
| Gloves - Medical | \$ 0 |
| Good-time Credit (Incentives) | \$ 0 |
| GPS Equipment | \$ 1300 |
| Graduation Ceremony | \$ 0 |
| Group Counseling Services | \$ 0 |
| Hospital Miscellaneous | \$ 0 |
| Incentives | \$ 0 |
| In County Detention | \$ 0 |
| Individual Counseling Services | \$ 0 |
| Individual & Group Counseling Services | \$ 3500 |
| Inpatient Alcohol Treatment | \$ 0 |
| Inpatient Drug Treatment | \$ 0 |
| IPPC Sex Offender Contract | \$ 0 |
| JSOP - Counseling | \$ 0 |
| Language Access Services | \$ 0 |
| Legal Notice(s) | \$ 0 |
| LexisNexis Contract | \$ 0 |

| Medical Miscellaneous | Ψ |
|---|------|
| Medications/Prescriptions | \$ 0 |
| Medical Supplies | \$ 0 |
| Medical Treatment | \$ 0 |
| Medical Waste Disposal | \$ 0 |
| Movie Tickets (Incentives) | \$ 0 |
| Other Detention Cost | \$ 0 |
| Out of County Detention | \$ 0 |
| Outpatient Alcohol Treatment | \$ 0 |
| Outpatient Drug Treatment | \$ 0 |
| Oxford Housing | \$ 0 |
| Polygraph Testing | \$ 0 |
| Prescriptions | \$ 0 |
| Project Stipends | \$ 0 |
| Psychological Evaluations | \$ 0 |
| Psychological Testing/Evaluations | \$ 0 |
| Psychological Testing | \$ 0 |
| Psychological Treatment | \$ 0 |
| Public/Community Service Supervision Contract | \$ 0 |
| Public Service Supervision Contract | \$ 0 |
| RANT Assessments | \$ 0 |
| Redeploy Programming | \$ 0 |

| Residential Placement | \$ 0 |
|--|-----------|
| Risk Assessment | \$ 0 |
| Salaries - (Contracted specific to client/resident services) | \$ 0 |
| Shipping - Alc/Drug Tests | \$ 0 |
| SNAP Contracts | \$ 0 |
| STD Festing | \$ 0 |
| Television (Incentives) | \$ 0 |
| Text Message Appointment Reminders | \$ 0 |
| Track Phones (Incentives) | \$ 0 |
| Track Phone Minutes (Incentives) | \$ 0 |
| Transportation | \$ 0 |
| Treatment Services | \$ 0 |
| Vaccines | \$ 0 |
| Water Coolers / Water | \$ 0 |
| Water Dyes - Alc/Drug Testing | \$ 0 |
| Other Contracts | \$ 0 |
| Other Services | \$ _ 0 |
| Total | \$ 45,000 |
| lotal | |

"Other" Expenses

For CFY 2023 you reported a total of \$50300 available for department

* Items which have not been already identified above and do not necessarily fall under client/resident services or department operations.

| Chief Judge | \$ 0 |
|--------------------|------|
| Juror Fees | \$ 0 |
| Lawyer | \$ 0 |
| Legal Notice(s) | \$ 0 |
| Statute Updates | \$ 0 |
| Security Services | \$ 0 |
| Witness Fees | \$ 0 |
| "Other" Expenses | \$ 0 |
| Total | \$ 0 |

How Expenses Are Covered | Services

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming

You indicated \$12200 of <u>Cognitive Programming & Supplies</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$12200 per account/department.

| Probation Fees Fund | \$ 12200 |
|---------------------|-----------|
| Total | \$ 12,200 |

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming

- \$12200 to be spent on Cognitive Programming & Supplies
- \$12200 in How "Cognitive Programming & Supplies" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| () | Yes | | |
|-----------|-----|--|--|
| 0 | No | | |
| | | | |

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping

You indicated \$25000 of <u>Alcohol/Drug Testing</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

| Probation Fees Fund | \$ 25000 |
|---------------------|-----------|
| Total | \$ 25,000 |

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping

Please confirm that these two numbers match:

- \$25000 in How "Drug/Alcohol Testing" Will be Covered
- \$25000 in How "Drug/Alcohol Testing" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Electronic Monitoring/GPS: GPS Equipment

You indicated \$4300 of <u>Electronic Monitoring & GPS Equipment</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$4300 per account/department.

| Probation Fees Fund | \$ 4300 |
|---------------------|----------|
| Total | \$ 4,300 |

Electronic Monitoring/GPS: GPS Equipment

Please confirm that these two numbers match:

- \$4300 in How "Electronic Monitoring/GPS" Will be Covered
- \$4300 in How "Electronic Monitoring/GPS" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP - Counseling

You indicated \$3500 of <u>Group & Individual Counseling Services</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$3500 per account/department.

| Probation Fees Fund | \$ 3500 |
|---------------------|----------|
| Total | \$ 3,500 |

Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP – Counseling

Please confirm that these two numbers match:

- \$3500 in How "Group & Individual Counseling Services" Will be Covered
- \$3500 in How "Group & Individual Counseling Services" Will be Covered

Do the two numbers match? If these two numbers do <u>NOT</u> match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Yes No | | |
|--------|--|--|
| O No | | |

How Expenses Are Covered | Department Operations

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions

You indicated \$100 of <u>Memberships, Dues, & Subscriptions</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$100 per account/department.

| Probation Fees Fund | \$ 100 |
|---------------------|-----------|
| Total | \$ 100 |

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions

Please confirm that these two numbers match:

a \$100 will be enent on Memberchine Duce Cubecrintione

Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

| Ye | 98 | |
|------|----|--|
| O No | | |
| | | |

Training: Accommodation Reimbursements, Mileage, Per diem, Registration

You indicated \$5200 of <u>Training</u> will be spent. Please indicate which account/department will cover this expense, and how much of the \$5200 per account/department.

| Probation Fees Fund | \$ 5200 |
|---------------------|----------|
| Total | \$ 5,200 |

Training: Accommodation Reimbursements, Mileage, Per diem, Registration

Please confirm that these two numbers match:

- \$5200 in How "Training" Expense Will be Covered
- \$5200 in How "Training" Expense Will be Covered

Do the two numbers match? If they do <u>NOT</u> match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.



Thank you, <u>Director Siders</u>, for submitting your CFY 2023 <u>Probation and</u> <u>Court Services Financial Proposal</u> data!

Upon completion of this data submission, the Qualtrics System will send you and the Annual Probation Plan an email providing notification of completion that will include a link where you can generate a PDF to print your responses. Upon receipt of this email, Missy Dean and your Field Coordinator will verify completion of all submission requirements and email you with any questions of concerns.

Thank You Field Services Unit

Powered by Qualtrics 🖸

Probation and Court Services Financial Proposal

annualprobationplan@illinoiscourts.gov < AOICPSD_reporting@illinoiscourts.gov > Fri 2/10/2023 1:49 PM

To: Shannon Siders <ssiders@co.champaign.il.us>

CAUTION: External email, be careful when opening.

Thank you, **Director Siders**, for submitting your CFY **2023** CFY Probation and Court Services Financial Proposal for the Annual Plan. Below are your responses. Someone may follow-up with you if questions arise.

Thank You
Annual Probation Plan Administrator(s)

Recipient Data:

Time Finished: 2023-02-10 12:48:54 MST

IP: 209.174.185.101

ResponseID: R_pnRlHRu78eZbTe9 **Link to View Results:** <u>Click Here</u>

URL to View Results: https://aoic.gov1.qualtrics.com/apps/single-response-

reports/reports/Eq11rUUiJ3KCJ9hU9K4ZVRAHE6WHCP9DY37bgX0vomfZuVPXmRhFx6kTb2xmECfOQiXaN0qMO9FdShcZSluXBEdsH%2EyoJ2Jtk%2ECvwZjUZQMO2nY9vM1iuj3hbTs1jPV3w8pbKu%2EGllqgdm25uHDX4MsYOOls4snAu5SE566gTqPeZOd9YlxyW8m5ZDL0%2EX9xOe3gqRLaT0GAZhMsgNlP3Z0pjHDdhcyuxo3FlCovr1P3j-xLYvtgTfCSMqCn1K%2EGH13Cc2zJdKLcVzNn0eSRI1cbaleLThJ8k94ec6nlstU

Response Summary:

Reporting Year (e.g., 2022, 2023) 2023

First Name Shannon

Last Name Siders

Work Email Address ssiders@co.champaign.il.us

Organization Type
Problem Solving Court

Circuit

```
10/23, 1:49 PM
```

6

Department

Champaign

Population Served

Adult

Court Type

Drug

Court Name (Only use "Add Additional Court" button if selecting Multiple Courts in previous question)

For your source of FUNDING for the Probation Fee Fund identify the following. DO NOT ROUND.

Balance at Start of Fiscal 0

Funding/Income 50300

IGA (Inter-Governmental Agreement) Revenue 0

Other Receivables 0 --

For CFY 2023 you reported a total of \$50300 available for department spending. Please identify how much will be expended across each of the following for DEPARTMENT FISCAL OPERATIONS from the reported total dollar amount.

Overtime 0

Department Fringe Benefits - (FICA, Worker's Compensation, Unemployment, IMRF, Medical, Dental, and Life Insurance) 0

OTHER - Salary 0 --

Personnel Payouts 0

Salary Shortfall 0

Contingency 0

Bonuses 0

Longevity 0

Salaries 0

Tuition Reimbursement 0

Reimbursements to Staff 0

Merit 0

For CFY 2023 you reported a total of \$50300 available for department spending. Please identify how much will be expended across each of the following for DEPARTMENT OPERATIONS from the reported total dollar amount.

Advertising 0

Applicant & Employee Psychological Testing/Evaluations 0

Auto Expenses 0

Boilers 0

Building Rent/Mortgage/Bond 0

Capital Expenses 0 --

Car Communication Systems 0

Case Management System Development (e.g., implementing, building compliance with data requirements) 0

Chairs 0

Computer Hardware (e.g., laptops, printers) 0 Computer Software (e.g., MS Office, Adobe Suite, Video conferencing) 0 Computer Video Equipment 0 Conducted Energy Devices (CEDs) 0 COVID Testing 0 Desks 0 Dues 0 Electric 0 Employee Drug Testing 0 Equipment Maintenance (identify type of "equipment") 0 --Equipment Rentals 0 Firearm Ammunition 0 Firearms 0 Gas - Auto 0 Gas - Building 0 Hotspot/Wi-Fi Services 0 Improvements to Buildings 0 Ink 0 Kitchen Appliances 0 Laundry Services 0 Memberships (e.g., IPCSA) 100 Microfilming 0 Notary Services 0 Office Cleaning/Custodial Services 0 Office Copier/Printer/Scanner 0 Office Copier/Printer/Scanner Maintenance 0 Officer Safety Equipment 0 Office Supplies 0 Officer Uniforms 0 Oleoresin Capsicum: Pepper Spray 0 Oil changes 0 Operation Service Contracts 0 Paper 0 Pens 0 Phones - Cell 0 Phones - Landline 0 Police Radios 0 Postage 0 Printing/Duplication 0 Public/Community Service Supplies 0 Publications, Printing, & Binding 0 Roofs 0 Security Computer & Video Equipment 0 Stamps 0 Subscriptions (e.g., journals, news papers) 0 Training - (accommodation reimbursements) 2600 Training (mileage) 0 Training - (per diem) 0

Training - (registration) 2600

```
Travel Expenses - (accommodation reimbursements) 0
Travel Expenses - (home visits mileage) 0
Travel Expenses - (per diem) 0
Travel Expenses - (work meetings mileage) 0
Utilities 0
Vehicle Lease 0
Vehicle Purchase 0
Vests 0
Waste Disposal & Recycling 0
Water - Building 0
Water - Coolers / Bottled 0
Water Heaters 0
Web-cams 0
Other Expenditures 0 --
Vehicle Maintenance 0
Icemaker 0
Document Shredding 0
Office Copier/Printer/Scanner Lease 0
 Printer Toner 0
 Destruction of Records Service 0
 COVID Expenses - (e.g., cleaning) 0
 Record/File Storage 0
 Cell Phone Chargers 0
 Medical Waste Disposal 0
 Tracker Contract 0
 IT Support Contract 0
 Job Posting/Hiring Ad 0
 Maintenance/Cleaning Staff Salaries & Benefits 0
 Reimbursements to Other Probation Department(s) 0 --
 Case Management License (e.g., new software) 0
 Case Management Services (e.g., maintaining) 0
 Laundry & Cleaning Supplies 0
 Work Release 0
 Other Operations 0 --
 Property & Employee Liability Insurance 0
```

For CFY 2023 you reported a total of \$50300 available for department spending. Please identify how much will be expended across each of the following for CLIENT SERVICES from the reported total dollar amount.

Bus Fare / Tokens (Incentives) 0
Cognitive Programming & Supplies 12200
Cognitive Programming 0
Cognitive Supplies 0
Contracted Services 0
Client Birth Records 0
Drug/Alcohol Testing 25000
Drug/Alcohol Treatment 0
DVI Assessments 0

Educational Programs & Supplies 0

Electronic Monitoring/GPS 0

Employment Services 0

Incentives 0

In County Detention 0

Individual & Group Counseling Services 3500

Language Access Services 0

Medical Treatment 0

Other Detention Cost 0

Other Contracts 0 --

Out of County Detention 0

Psychological Testing/Evaluations 0

Public/Community Service Supervision Contract 0

Polygraph Testing 0

Psychological Treatment 0

RANT Assessments 0

Residential Placement 0

Text Message Appointment Reminders 0

Treatment Services 0

Water Coolers / Water 0

Food/Snacks/Candy (Incentives) 0

Movie Tickets (Incentives) 0

Cash (Incentives) 0

Television (Incentives) 0

Good-time Credit (Incentives) 0

Graduation Ceremony 0

Legal Notice(s) 0

Food - Non-Incentive 0

STD Testing 0

Transportation 0

Client Records 0

JSOP - Counseling 0

Medical Supplies 0

Medications/Prescriptions 0

Medical Miscellaneous 0

Hospital Miscellaneous 0

Track Phones (Incentives) 0

Track Phone Minutes (Incentives) 0

Risk Assessment 0

Gloves - Medical 0

Water Dyes - Alc/Drug Testing 0

Shipping - Alc/Drug Tests 0

Medical Waste Disposal 0

SNAP Contracts 0

IPPC Sex Offender Contract 0

LexisNexis Contract 0

GPS Equipment 4300

Drug Testing 0

Drug Treatment 0

Alcohol Testing 0

```
Alcohol Treatment 0
Oxford Housing 0
Outpatient Drug Treatment 0
Outpatient Alcohol Treatment 0
Inpatient Alcohol Treatment 0
Inpatient Drug Treatment 0
Educational Programs 0
Educational Supplies 0
Individual Counseling Services 0
Group Counseling Services 0
ASL - Language 0
Foreign Language Interpreters 0
Psychological Testing 0
Psychological Evaluations 0
 Community Service Supervision Contract 0
 Public Service Supervision Contract 0
 Residential Facilities 0
 Foster Care Placement 0
 COVID-19 Testing 0
 Salaries - (Contracted specific to client/resident services) 0
 Project Stipends 0
 Prescriptions 0
 Vaccines 0
 Other Services 0 ---
 Redeploy Programming 0
 Bus Fare / Tokens - Non-Incentive 0
```

For CFY 2023 you reported a total of \$50300 available for department spending. Please identify how much will be expended across each of the following for "Other" Expenses* from the reported total dollar amount * Items which have not been already identified above and do not necessarily fall under client/resident services or department operations.

Chief Judge 0
Juror Fees 0
Lawyer 0
Legal Notice(s) 0
Security Services 0
Witness Fees 0
"Other" Expenses 0 -Statute Updates 0

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming You indicated \$12200 of Cognitive Programming & Supplies will be spent. Please indicate which account/department will cover this expense, and how much of the \$12200 per account/department.

Probation Fees Fund 12200

Cognitive Programming & Supplies: Cognitive Programming, Cognitive Supplies, Redeploy Programming Please confirm that these two numbers match: \$12200 to be spent on Cognitive Programming & Supplies \$12200 in How "Cognitive Programming & Supplies" Will be Covered Do

the two numbers match? If these two numbers do NOT match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Yes

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping You indicated \$25000 of Alcohol/Drug Testing will be spent. Please indicate which account/department will cover this expense, and how much of the \$25000 per account/department.

Probation Fees Fund 25000

Drug/Alcohol Testing: Alcohol Testing, Drug Testing, Water Dyes, Shipping Please confirm that these two numbers match: \$25000 in How "Drug/Alcohol Testing" Will be Covered \$25000 in How "Drug/Alcohol Testing" Will be Covered Do the two numbers match? If these two numbers do NOT match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match. Yes

Electronic Monitoring/GPS: GPS Equipment You indicated \$4300 of Electronic Monitoring & GPS Equipment will be spent. Please indicate which account/department will cover this expense, and how much of the \$4300 per account/department.

Probation Fees Fund 4300

Electronic Monitoring/GPS: GPS Equipment Please confirm that these two numbers match: \$4300 in How "Electronic Monitoring/GPS" Will be Covered \$4300 in How "Electronic Monitoring/GPS" Will be Covered Do the two numbers match? If these two numbers do NOT match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Yes

Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP - Counseling You indicated \$3500 of Group & Individual Counseling Services will be spent. Please indicate which account/department will cover this expense, and how much of the \$3500 per account/department.

Probation Fees Fund 3500

Group & Individual Counseling Services: Group Counseling Services, Individual Counseling Services, JSOP - Counseling Please confirm that these two numbers match: \$3500 in How "Group & Individual" Counseling Services" Will be Covered \$3500 in How "Group & Individual Counseling Services" Will be Covered Do the two numbers match? If these two numbers do NOT match, review the "Services" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Yes

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions You indicated \$100 of Memberships, Dues, & Subscriptions will be spent. Please indicate which account/department will cover this expense, and how much of the \$100 per account/department.

Probation Fees Fund 100

Memberships, Dues, Subscriptions: Dues, Memberships, Subscriptions Please confirm that these two https://outlook.office365.com/mail/inbox/id/AAQkAGM5ODYxZmQzLTA3Y2UtNDhlOS1iNzA3LTl2YTVhY2MyMTQ1ZgAQAGcKQwwAYYhPpLoPQv5il... numbers match: \$100 will be spent on Memberships, Dues, Subscriptions \$100 in How "Memberships, Dues, Subscriptions" Expense Will be Covered Do the two numbers match? If they do NOT match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Yes

Training: Accommodation Reimbursements, Mileage, Per diem, Registration You indicated \$5200 of Training will be spent. Please indicate which account/department will cover this expense, and how much of the \$5200 per account/department.

Probation Fees Fund 5200

Training: Accommodation Reimbursements, Mileage, Per diem, Registration Please confirm that these two numbers match: \$5200 in How "Training" Expense Will be Covered \$5200 in How "Training" Expense Will be Covered Do the two numbers match? If they do NOT match, review the "Department Operations" and "How This Expense Will be Covered" sections to determine where corrections might need to be made. Otherwise, explain why they do not match.

Yes

Annual Plan - Detention Addendum

annualprobationplan@illinoiscourts.gov < AOICPSD_reporting@illinoiscourts.gov > Mon 2/6/2023 1:52 PM

To: Shannon Siders <ssiders@co.champaign.il.us>

CAUTION: External email, be careful when opening.

Hello, **Shannon Siders**, thank you for completing the **2023**CFY Probation and Court Services Annual Plan Detention Addendum. Below are your responses.

Recipient Data:

Time Finished: 2023-02-06 13:52:43 CST

IP: 209.174.185.101

ResponselD: R_1Lio8TmKQK45T73 **Link to View Results:** <u>Click Here</u>

URL to View Results: https://aoic.gov1.qualtrics.com/apps/single-response-reports/reports/-aqh4ndFP5iuPWmOR8N%2EB18uk-l-4lRBNiaGmxOTQxJkMEnay8UVwJ3QDp0OHJ3OZZx9vWl-hXJ%2Eo0kAtuo9MlmVLEoDC1EJrK0SsAZ2iZPJAl%2EPmxLLsfx9qTSRC7lHszEsyZsugYT35ehl8CYFR5aXw0YKvQ4ohQlejuZ80ZVgD8o5CU%2ELB5cfl0A87Jnmm6Jl2TlbO8At2c3ByTvTCxKplZnlVasNU6iNZiPZRHSpQkYvZNcidXZUnS1SdS6xqSeP4NF8xe8omt5EdXGmmlGJ9vFcOYaGhBwkxMuGu%2E4

Response Summary:

County of Facility
Champaign

Circuit of Facility

6

Facility Name
Juvenile Detention (Center)

First Name Shannon

Last Name Siders

Work Email ssiders@co.champaign.il.us

Phone Number 217-384-3753

Indicate the County Fiscal Year for this Detention Addendum plan period (e.g., XXXX format): The answer to this question can be found in your instructions.

2023

Consider the following and select "yes" or "no" for each: Have documents changed since last year? Is the department making a request? Does the department utilize, participate, or have had any of the following? Please ensure that all documents which need to be submitted for review are uploaded to the applicable Secure Drive folder.

Revised performance appraisals?

No

Variance to the Compensation Plan?

No

New/updated certification or review by a third party organization?

Yes

Incorporate behavioral modification programming?

Yes

Incorporate evidence-based programming and treatment?

Yes

Incorporate cognitive behavioral skill development?

Yes

Report any unusual/critical incidents?

Yes

Implemented new policy and/or procedure since the previous annual plan approval?

Yes

Have a reorganization request?

No

Does the detention center complete exit interviews for staff who leave employment at the detention center?

No

Please enter the goal(s) that your detention center worked on, as shown in the previous annual plan cycle, on the Detention Organizational Plan.

Goal 1

In Progress

In the previous question, it was indicated that one or more goals for the previous plan year were not "Not Addressed", "Discontinued", or remain "In Progress". Please explain what work is needed to complete unfinished goal(s) or why it was discontinued.

The Juvenile Detention Center Policies and Procedures Manual is still in the revision process. Due to the staffing issues in 2022, the Superintendent and Assistant Superintendents have had to focus more time on staffing and working on the floor themselves.

Please provide the first Detention Plan Goal for the coming fiscal year. Revise Juvenile Detention Center Policies and Procedures Manual

What area of the Statute, Standard, or program development is addressed with your first goal? 999 Other Statute/Standard -- Introductions--Policies and Procedures Please list the objectives, or steps, responsible parties, and goal dates for each objective that will lead to the attainment of this goal.

Objective 1

Responsible Parties Superintendent; Assistant Superintendents

Goal Date April 30, 2023

Objective 2

Responsible Parties Superintendent; Assistant Superintendents

Goal Date July 31, 2023

Objective 3

Responsible Parties Director; Superintendent; Assistant Superintendents

Goal Date September, 30, 2023

Objective 7

Responsible Parties Superintendent; Supervisor of Adminstrative Services

Goal Date November 1, 2023

Objective 8

Responsible Parties Superintendent; Assistant Superintendents; JDC staff

Goal Date November 30, 2023

Objective 9

Responsible Parties Superintendent; Assistant Superintendents

Goal Date December 31, 2023

Do you have an additional Detention Plan Goal?

Yes

Please provide the next Detention Plan Goal for the coming fiscal year.

Implement additional outside agency programming

What area of the Statute, Standard, or program development is addressed with your goal?

5.1 Evidence-based Practices (programming)

5.6 Volunteer and Outside Agency Programs

Please list the objectives, or steps, responsible parties, and goal dates for each objective that will lead to the attainment of this goal.

Objective 1

Responsible Parties Director

Goal Date January 31, 2023

Objective 2

Responsible Parties Director; Superintendent; Assistant Superintendent

Goal Date Ongoing

Objective 3

Responsible Parties Director

Goal Date February 28, 2023

Objective 4

Responsible Parties Director; Superintendent; Assistant Superintendent

Goal Date March 31, 2023

Objective 5

Responsible Parties Director; Superintendent; Assistant Superintendents

Goal Date April 30, 2023

Do you have an additional Detention Plan Goal?

No

Has the detention center received a Detention Review from the Administrative Office of the Illinois Courts?

No

Is the detention center PREA Certified?

No, The Center is PREA Compliant

Indicate third party organization that completed certification or review.

IDJJ

What behavioral modification programs are used?

Levels

Points

Incentives

Timeouts

Tokens

What evidence-based programming and treatments are used?

Moral Reasoning

Skill Streaming

Anger Management

What cognitive skill development programs are incorporated into the daily activities of residents? Curriculum based skill development groups led by licensed professional staff (psychologists, social workers, nurses, doctors)

Curriculum based skill development groups led by detention staff (juvenile detention officer or equivalent)

Curriculum based skill development groups led by community agency/volunteers

Total number of incident reports completed in the reporting year (include both internal and IDJJ UOR):

69

Nature and Number of Incidents*: Please indicate the number of incidents of each nature that occurred during the most recent reporting period, being the most recently completed state fiscal year (July 1 to June 30)

Escape 0

Confinement/Isolation 29

Suicide Attempt 0

Suicide Completion 0

Physical Assault/Resident on Resident 20

Physical Assault/Resident on Staff 9

Physical Restraint of Resident 35

Other 16

I certify that I will upload my Attachments to the designated Google Drive folder under the Annual https://outlook.office365.com/mail/inbox/id/AAQkAGM5ODYxZmQzLTA3Y2UtNDhIOS1iNzA3LTI2YTVhY2MyMTQ1ZgAQADjKgWY%2BMPtBuQ%2BI...

Plan section. (Select all that apply). CLICK HERE to download necessary attachments. Please ensure that all documents which need to be submit for review are upload to the applicable Secure Drive folder.

New/Updated Policies/Procedures with strike throughs and highlights Variance to the Compensation Plan Behavioral management programs
Third party detention center review/certification

Embedded Data

RecipientEmail mwilliams@co.champaign.il.us RecipientFirstName Mike RecipientLastName Williams





We thank you for your time spent taking this survey.
Your response has been recorded.

Below is a summary of your responses

Download F

This survey requires a password.

DA1. The **Detention Addendum**, has traditionally been incorporated into the Annual Probation Plan as referenced in the Illinois statutes [730 ILCS 110/15(6)] that requires probation and couservices departments to "have on file with the Supreme Court an annual probation plan for continuing, improved, and new Probation and Court Services Programs approved by the Supreme Court or its designee. This plan shall indicate the manner in which Probation and Court Services will be delivered and improved, consistent with the minimum standards and regulations for Probation and Court Services, as established by the Supreme Court...The annu probation plan shall seek to generally improve the quality of probation (and court) services and to reduce the commitment of adult and juvenile offenders to the Department of Corrections..."

The purpose of the **Detention Addendum** is to simplify and enhance the process by which the AOIC supports ongoing organizational development and compliance with Illinois Supreme Cou Juvenile Detention Standards. All financial, grant award, salary, contractual, and budgetary information will be reported as part of the Probation and Court Services Annual Plan. The **Detention Addendum** will focus on planning for the enhancement of programming and identifying ways in which the AOIC can support employee recruitment and retention.

DEPARTMENT INFORMATION

| 3. County of Facility |
|---|
| nampaign 💌 |
| 14. Circuit of Facility |
| |
| ₹5. Facility Name |
| uvenile Detention (Center) |
| A6. First Name |
| nannon |
| A7. Last Name |
| iders |
| A8. Work Email |
| siders@co.champaign.il.us |
| A9. Phone Number |
| !17-384-3753 |
|)A10. Indicate the County Fiscal Year for this Detention Addendum plan period (e.g., XXX) ormat): The answer to this question can be found in your instructions. |

2023

DA13. Consider the following and select "yes" or "no" for each: Have documents changed since last year? Is the department making a request? Does the department utilize, participate, or have had any of the following?

Please ensure that all documents which need to be submitted for review are uploaded to the applicable <u>Secure Drive</u> folder.

| | Yes | No |
|--|------------|------------|
| | | 0 |
| Revised performance appraisals? | | • |
| Variance to the Compensation Plan? | | • |
| New/updated certification or review by a third party organization? | • | 0 |
| Incorporate behavioral modification programming? | | 0 |
| Incorporate evidence-based programming and treatment? | | \circ |
| Incorporate cognitive behavioral skill development? | • | 0 |
| Report any unusual/critical incidents? | • | \bigcirc |
| Implemented new policy and/or procedure since the previous annual plan approval? | • | 0 |
| Have a reorganization request? | \bigcirc | • |
| | | |
| A16. | | |
| EXIT INTERVIEWS | | |
| | | |
| | | |

DA17. Does the detention center complete exit interviews for staff who leave employment at tr detention center?



DA19.

ORGANIZATIONAL DEVELOPMENT
(Compliance with AOIC Detention Standards)

| vious annual plan cycle, on the Detent | ion Organi | zationai Pia | ın. | |
|---|---------------------------|----------------------------|-----------------------------|--|
| d Additional Goal | | | | |
| | Completed | In Progress | Not Addressed | Discontinued |
| Goal 1 Revise Juvenile Detention Center Policies and Procedures Manual | 0 | • | 0 | 0 |
| Goal 2 | 0 | 0 | 0 | 0 |
| Goal 3 | | 0 | 0 | 0 |
| A21. In the previous question, it was income ar were not "Not Addressed", "Discontinuation of the previous question, it was income ar were not "Not Addressed", "Discontinuation of the previous question, it was income ar were not "Discontinuation of the previous question, it was income ar were not "Discontinuation of the previous question, it was income ar were not "Discontinuation of the previous question, it was income ar were not "Not Addressed", "Discontinuation of the previous question, it was income ar were not "Not Addressed", "Discontinuation of the previous question, it was income ar were not "Not Addressed", "Discontinuation of the previous question, and previous question of the previous | inued", or roal(s) or w | remain "In F hy it was dis | Progress". Pscontinued. | Please explain what |
| A22. A key part of the Detention Adder oming year with regard to the implement ill help to build the plan for the coming cus on bringing the center policy, proceatute, standard, and best practice. | ntation of E year. Whe | etention St enever com | andards. T pliance iss∪ | he following section les exist, goals should |
| A23. Please provide the first Detention | | I for the con | ning fiscal y | ear. |
| Revise Juvenile Detention Center Policies and Proces | dures Manual | | | |
|)A24. What area of the Statute, Standa loal? | ard, or prog | ıram develo | pment is ac | ddressed with your first |
| 3.1 Hiring | | 6.7 Suicid | e Prevention ar | nd Intervention |

| 3.2 Personnel | 6.8 Notification and Consent |
|--|---------------------------------------|
| 3.3 Training | 6.9 Medical Records and Information |
| 4.1 Intake Process | 6.10 Internal Review |
| 4.2 Assessment | 7.1 Release Packet |
| 4.3 Resident Orientation | 8.1 Critical Incident Reports |
| 5.1 Evidence-based Practices (programming) | 8.2 Other Documentation |
| 5.2 Behavior Management | 9.1 Nondiscriminatory |
| 5.3 Educational Services | 9.2 Constitutional Rights of Minors |
| 5.4 Recreational Services | 9.3 Federal Laws |
| 5.5 Special Populations | 9.4 American Correctional Association |
| 5.6 Volunteer and Outside Agency Programs | 9.5 Court Process |
| 6.1 Medical Professional | 9.6 Use of Restraints |
| 6.2 Health Screening | 9.7 Searches |
| 6.3 Medical Examination | 9.8 Visitation |
| 6.4 Medical Care and Treatment | 9.9 Correspondence |
| | |

Introductions--Policies and Procedures

6.6 Medical Isolation

25. Please list the objectives, or steps, responsible parties, and goal dates for each jective that will lead to the attainment of this goal.

| Responsible Parties | Goal Date |
|--|---|
| | |
| | |
| Superintendent: Assistant Superintendents | April 30, 2023 |
| | |
| | |
| Superintendent; Assistant Superintendents | July 31, 2023 |
| | |
| Director; Superintendent; Assistant Superintendents | September, 30, 2023 |
| | Superintendent: Assistant Superintendents Superintendent; Assistant Superintendents Director; Superintendent; Assistant |

A26. Do you have an additional Detention Plan Goal?

Yes

No

)A27. Please provide the next Detention Plan Goal for the coming fiscal year.

| DA28. What area of the Statute, Standard, or progoal? | ogram development is addressed with your |
|---|--|
| 3.1 Hiring | 6.7 Suicide Prevention and Intervention |
| 3.2 Personnel | 6.8 Notification and Consent |
| 3.3 Training | 6.9 Medical Records and Information |
| 4.1 Intake Process | 6.10 Internal Review |
| 4.2 Assessment | 7.1 Release Packet |
| 4.3 Resident Orientation | 8.1 Critical Incident Reports |
| 5.1 Evidence-based Practices (programming) | 8.2 Other Documentation |
| 5.2 Behavior Management | 9.1 Nondiscriminatory |
| 5.3 Educational Services | 9.2 Constitutional Rights of Minors |
| 5.4 Recreational Services | 9.3 Federal Laws |
| 5.5 Special Populations | 9.4 American Correctional Association |
| 5.6 Volunteer and Outside Agency Programs | 9.5 Court Process |
| 6.1 Medical Professional | 9.6 Use of Restraints |

| 6.2 Health Screening | | 9.7 Searches |
|--|---|--|
| 6.3 Medical Examination | | 9,8 Visitation |
| 6.4 Medical Care and Treatm | ent | 9.9 Correspondence |
| 6.5 Pharmaceuticals | | Other |
| 6.6 Medical Isolation | | |
| | jectives, or steps, respo the attainment of this g | nsible parties, and goal dates for each oal. |
| dd Additional Objective | | |
| | Responsible Parties | Goal Date |
| Objective 1 | | |
| Contact University of Illinois COAST (Community Outreach | | 04.0000 |
| and Support) regarding I-PAWS (Providing Assistance With Support) Therapy K9s to visit the Juvenile Detention Center. | Director | January 31, 2023 |
| Objective 2 | | |
| Schedule monthly or bi-monthly dates for I- PAWS Therapy K9s to visit the residents and staff at the Juvenile Detention Center. | Director; Superintendent; Assist Superintendent | ant Ongoing |
| Objective 3 | | |
| Meet with University of Illinois staff regarding Urban Arts & Music programming at the Juvenile Detention Center. | Director | February 28, 2023 |

| DA30. Do you have an additional Detention Plan Goal? |
|---|
| Yes No |
| DA53. Has the detention center received a Detention Review from the Administrative Office o the Illinois Courts? |
| Yes, but the report has not yet been received No |
| DA132. |
| CERTIFICATIONS, COMPLIANCE AND EXTERNAL REVIEWS |
| Please note, this section is included for information gathering purposes and to allow the AOIC support improved programming within detention centers in the state. Inclusion of this information does not suggest an endorsement or expectation by the AOIC that detention centers be involved in any/all of the following. |
| DA133. Is the detention center PREA Certified? |
| Yes, PREA Certified (Certified Reviewer) |
| No, The Center is PREA Compliant No, not PREA Certified nor Compliant |
| DA134. Indicate third party organization that completed certification or review. |
| IDJJ ACA Other |
| |
| DA135. COGNITIVE BEHAVIORAL PROGRAMMING, TREATMENT, & MANAGEMENT |

| oo. vvnat penaviorai modification programs are used? |
|--|
| |
| entives |
| vels |
| ints neouts |
| kens |
| ner: Please Describe |
| |
| |
| 37. What evidence-based programming and treatments are used? |
| 3Cs |
| ninking Reports |
| ognitive Interventions |
| oral Reasoning |
| kill Streaming |
| ubstance Abuse |
| nger Management |
| ore Correctional Practices (CCP) |
| ther: Please Describe |
| 138. What cognitive skill development programs are incorporated into the daily activities of idents? Surriculum based skill development groups led by licensed professional staff (psychologists, social workers, nurses, doctors) Surriculum based skill development groups led by detention staff (juvenile detention officer or equivalent) Surriculum based skill development groups led by community agency/volunteers Workbook, written assignments reviewed with the resident by licensed professional staff (psychologists, social workers, nurses, doctors) Workbook, written assignments reviewed with the resident by detention staff (juvenile detention officer or equivalent) Workbook, written assignments reviewed with the resident by community agency/volunteers) |
| Other: Please Describe |
| unusual/critical incident reports |

Probation and Court Services Departments are required by standard to submit unusual/critical

incident reports the Administrative Office for review. Incidents that require reporting are defined

reporting process for detention, a copy of the IDJJ UOR may be submitted to the AOIC fo incidents occurring in the detention center.

| DA140. Total number of incident reports completed in the reporting year (include both inter | ים מי |
|---|-------|
| and IDJJ UOR): | Ha |
| | |

| 69 | |
|--|---|
| DA141. Nature and Number of Incidents*: Ple nature that occurred during the most recent re state fiscal year (July 1 to June 30) | ase indicate the number of incidents of each porting period, being the most recently complete |
| Escape | 0 |
| Confinement/Isolation | 29 |
| Suicide Attempt | 0 |
| Suicide Completion | 0 |
| Physical Assault/Resident on Resident | 20 |
| Physical David Assault/Resident on Staff | 9 |
| Physical Restraint of Resident Other | 35 |
| Other | 16 |

DA142.

Thank you for taking the time to complete the Probation and Court Services Detention Addendum. An email containing the responses to this addendum will be sent to the email address that was provided. Please download the responses and include in the plan provided to the chief judge for approval.

143. I certify that I will upload my Attachments to the designated Google Drive folder under Annual Plan section. (Select all that apply).

CK HERE to download necessary attachments.

ase ensure that all documents which need to be submit for review are upload to the blicable Secure Drive folder.

Revised performance appraisals

/ariance to the Compensation Plan

[hird party detention center review/certification]

Behavioral management programs

Cognitive skill development workbooks, assignments, and curriculums Unusual/Critical Incident Reports

New/Updated Policies/Procedures with strike throughs and highlights

Reorganization Request

Powered by Qualtrics ☐

County Fiscal Year Detention Center Organizational Chart

| | Donations, Cham | 90,00 | ╢. | | | | | 200, 20, 0 |
|----------------|-----------------------|---------------------|-------------------|---------|----------------|----------------|--------------|------------|
| | הבשמו וווובוווי | 5 | Julity | | | Date: | | 1/2//2023 |
| Propt | Proposed or Existing: | Existing | | | | | | |
| Funding Source | Position # | First Name | Last Name | Title | Responsibility | Unit/ Division | Supervisor | Union Name |
| GIA | 100 | 100 John | Doe | Dir/CMO | 8 | N/A | N/A | N/A |
| GIA | 300 | 300 Keith | Willis | Dir/CMO | D | Detention | Shannon Side | |
| GIA | 1900 | Laverne | Williams | odr | D | Detention | Keith Willis | FOP |
| GIA | 5000 | 5000 VACANT 11/2 | NT 11/2 (Ziegler) | OQI | D | Detention | Keith Willis | FOP |
| GIA | 5100 | 5100 VACANT 11/1 | (Marshall) | ogr | Q | Detention | Keith Willis | FOP |
| GIA | 5300 | 5300 Emily | Ziegler | Sup | D | Detention | Keith Willis | N/A |
| GIA | 5301 | 5301 Antonio | Cruz | Sup | D | Detention | Keith Willis | N/A |
| GIA | 5302 | 5302 Patricia | Allah | Sup | D | Detention | Keith Willis | N/A |
| GIA | 5303 | Andrew | Griffeth | Sup | D | Detention | Keith Willis | N/A |
| GIA | 5304 | 5304 Haley | Hickenbottom JDO | ogr | D | Detention | Keith Willis | FOP |
| GIA | 5305 | NT 1/13 | (Grice) | OQI | D | Detention | Keith Willis | FOP |
| GIA | 5306 | 5306 VACANT 12/2 | (Lowe) | odr | О | Detention | Keith Willis | FOP |
| GIA | 5310 | 5310 Takela | Lucas | odr | D | Detention | Keith Willis | FOP |
| GIA | 5311 | Skye | Tutter | OQI | D | Detention | Keith Willis | FOP |
| GIA | 5313 | Max | Hanzlik | ogr | D | Detention | Keith Willis | FOP |
| GIA | 5314 | 5314 Alicia | Williams | OQI | D | Detention | Keith Willis | FOP |
| GIA | 5315 | 5315 Chantelle | Jasper | ogr | D | Detention | Keith Willis | FOP |
| GIA | 5316 | Shatarra | Raggs | ogr | D | Detention | Keith Willis | FOP |
| GIA | 5317 | 5317 Jarvis | Robinson | ogr | D | Detention | Keith Willis | FOP |
| GIA | 5318 | VACANT 01/0 (Lenow) | (Lenow) | ogr | D | Detention | Keith Willis | FOP |
| GIA | 5319 | VACANT 10/3 (Evans) | (Evans) | OQI | D | Detention | Keith Willis | FOP |
| GIA | 5320 | Courtney | Baker | OQI | D | Detention | Keith Willis | FOP |
| GIA | 5321 | Jeffrey | Dosier | odr | D | Detention | Keith Willis | FOP |
| GIA | 5322 | VACA | NT 11/2 (Bradley) | ogr | D | Detention | Keith Willis | FOP |
| GIA | 5400 | Angela | Cobb | OOI | D | Detention | Keith Willis | FOP |
| GIA | 5500 | James | Madison | ogr | D | Detention | | FOP |
| GIA | 5600 | 5600 Jessica | Hendrix | ogr | D | | Keith Willis | FOP |
| GIA | 2700 | 5700 Briene | Wileaver | Sup | D | | П | N/A |

| | Т | 연 | 연 | G P | L | 1 | Ļ | | 4 | | 1 | |
|---------------|--------------|---------------------------------------|--------------|--------------|---|---|---|----|---|--|---|--|
| val. varille. | Keith Willis | Keith Willis | Keith Willis | Keith Willis | | | | | | | | |
| Γ | T | Detention | Detention | Detention | | | | | | | | |
| | D | D | ٥ | D | | | | 36 | | | | |
| | Sup | odr | OQI | ogr | | | | | | | | |
| | Lowe | Watkins | Yanders | Schwab | | | | | | | | |
| | 5800 Nicole | | 6000 Anivah | 6100 Charles | | | | | | | | |
| | 5800 | 2900 | 6000 | 6100 | | | | | | | | |
| | GIA | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | VID 0 | VID VIE | | | | | | | | |

| Funding Source Categories | Categories | Title Categories | gories | Job Function | | Inion Name |
|---------------------------|-------------------|--------------------|-----------|---|----------|------------|
| Grants-in-Aid GIA | GIA | Director/CMO | Dir/CMO | Director/CMO Dir/CMO Both Adult & Juvenile B | 8 | Teamsters |
| Salary Subsidy SS | SS | Supervisor | Sup | Adult | ∀ | AFSCME |
| Pretrial | ρŢ | Prob. Officer PO | PO | Juvenile | - | 9 G |
| Grant Funded GF | GF | Detention Off, JDO | ogr | Detention | ۵ | Etc. |
| County Funded CF | CF | Senior Officers | Sr.PO/JDO | Senior Officers Sr. PO/JDO Problem Solving Cout PSC | PSC | N/A |
| | | | | Pretrial | PT | |
| | | | | Other | 0 | |

