



# ***GREEN LAKE COUNTY***

*571 County Road A, Green Lake, WI 54941*

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**Original Post Date: 04/29/16**

**Amended\* Post Date:**

**The following documents are included in the packet for the P&I Committee on May 3, 2016:**

- 1) Agenda
- 2) Draft minutes from the 04/05/16 meeting
- 3) Info on Use of County Property
- 4) Disposal of IT list
- 5) Purchase Requests
- 6) Maintenance Report
- 7) Near Miss Reporting Policy
- 8) Bloodborne Pathogen Policy
- 9) Communication Policy



**GREEN LAKE COUNTY**  
**OFFICE OF THE COUNTY CLERK**

*Margaret R. Bostelmann, WCPM*  
*County Clerk*

*Office: 920-294-4005*  
*FAX: 920-294-4009*

**Property & Insurance Committee**  
**Meeting Notice**

**Date: May 3<sup>rd</sup>, 2016 Time: 5:00 PM**  
**Location: Government Center, County Board Room, 571 County Road A, Green Lake WI**

**Amended\* AGENDA**

**Committee**  
**Members**

*Michael Starshak*  
*Patti Garro*  
*Robert Lyon*  
*Vicki Bernhagen*  
*Richard Trochinski*

*Margaret R. Bostelmann*  
*Secretary*

*\*Notice is hereby given that a majority of the Green Lake County Board of Supervisors may be present at this meeting to gather information about a subject over which they have decision making responsibility. This constitutes a meeting of the County Board pursuant to the Badke Decision and must be noticed as such although the County Board will not take any formal action at this meeting.*

1. Call to Order
2. Certification of Open Meeting Law
3. Pledge of Allegiance
4. Agenda
5. Election of Officers
6. Minutes: 04/05/16
7. Correspondence
8. Public Comments (3 min limit)
9. Izaak Walton League Gift of Property to Green Lake County
10. Use of County Property
  - Norton's Dry Dock Youth Angler Tournament
  - Post 306 American Legion
  - Catamaran Racing of Wisconsin - 4th Annual Regatta
  - \*Dale Stephens-Princeton Public School
11. \*Disposal of County Property- UWEX Kitchen Stove, IT List
12. Purchase Requests
13. Monthly Vouchers
14. Resolutions/Ordinances
15. Green Lake Multi Use Trail
16. Maintenance Report
  - Monthly Activities
17. Parks & Recreation Report
18. Clerk's Report
  - \*Near Miss Reporting Policy
  - Bloodborne Pathogen Policy
  - Communication Policy
  - Voicemail Update
19. Consider motion to convene into closed session pursuant to Wis. Stat. section 19.85(1)(g)(Conferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigations in which it is or is likely to become involved) The closed session is regarding a trespass to county land by adjacent land owner.
20. Reconvene to open session to take action, if appropriate, on matters discussed in closed session.
21. Committee Discussion
  - Future Meeting Dates: Regular Meeting June 7, 2016 at 5:00 PM
  - Future Agenda items for action & discussion
22. Adjourn

Kindly arrange to be present, if unable to do so, please notify our office. Sincerely, Margaret R. Bostelmann, County Clerk

**Please note: Meeting area is accessible to the physically disabled. Anyone planning to attend who needs visual or audio assistance, should contact the County Clerk's Office, 294-4005, not later than 3 days before date Of the meeting.**

## **PROPERTY AND INSURANCE COMMITTEE**

**April 5, 2016**

The meeting of the Property and Insurance Committee was called to order by Chair Gene Thom on Tuesday, April 5, 2016 at 5:00 PM in the Green Lake County Board Room, Green Lake County Government Center, 571 County Road A, Green Lake, WI. The requirements of the open meeting law were certified as being met. The pledge of allegiance was recited.

Present: Gene Thom  
Harley Reabe  
Vicki Bernhagen  
Richard Trochinski  
Patti Garro

Also Present: Marge Bostelmann, County Clerk  
Jack Meyers, Board Chair  
Scott Weir, Maintenance  
Linda Van Ness, HHS  
Ed Schuh, FRI  
Tony Daley, Berlin Journal

Dawn Klockow, Corporation Counsel  
Joy Waterbury, Supervisor  
Sheriff Podoll  
Amy Brooks, Highway  
Lauree Renaud

### **AGENDA**

*Motion/second (Trochinski/Garro)* to approve the amended agenda. Motion carried.

### **MINUTES**

*Motion/second (Reabe/Bernhagen)* to approve the minutes of March 1, 2016 and March 15, 2016. Motion carried.

### **CORRESPONDENCE** – None

### **PUBLIC COMMENT** – None

### **DISCUSSION ON FRI BUILDING, LEASE AGREEMENT AND RESPONSIBILITY OF TENANT**

Linda Van Ness provided minutes from the special HHS Board meeting. The HHS Board believes that a new building would be better than trying to repair the current building. Weir has looked at a few building in Berlin and Princeton. The HHS Board will continue to look for a building that may be possible solution.

### **IZAAK WALTON LEAGUE GIFT OF PROPERTY TO GREEN LAKE COUNTY**

Corporation Counsel reported that the Izaak Walton League is working on an easement for the golf tee (leased area) and the other encroachment in order to provide the county with a property free from a lease and other encroachments.

### **USE OF COUNTY PROPERTY**

Clean Sweep – Land Conservation requests use of Highway grounds and forklift August 12, 2016.

*Motion/second(Reabe/Bernhagen)* to approve the requests. Motion carried.

### **PURCHASE REQUESTS** – None

## **MONTHLY VOUCHERS**

Vouchers were presented:

Purchasing:	2016 – \$22,640.00
Maintenance:	2016 – \$9,392.36
Radio Tower:	2016 – \$ 2,369.80
Parks:	2016 – \$13,323.51

*Motion/second(Garro/Trochinski)* to approve the vouchers as presented. Motion carried.

## **RESOLUTIONS/ORDINANCES** – None

## **GREEN LAKE MULTI USE TRAIL**

- Memorandum of Agreement between Green Lake County and DOT

Lauree Renaud explained that an agreement is needed between DOT and Green Lake County because of easements that need to be obtained. Discussion was held. If the agreement is received in the next two weeks, a special meeting will be called to approve it.

## **MAINTENANCE REPORT**

The Report was submitted to the Committee.

- Monthly activities – The report was reviewed.

Weir explained the problem at the Princeton radio tower which used additional LP.

## **PARKS & RECREATION**

The Parks report was reviewed.

- Monthly activities – The report was reviewed. Samples of park signs were provided for review.
- Greenways request for assistance on sign installation – Discussion on the need for township permission. Renaud explained that permission has been granted by the towns. Klockow stated the need for an agreement with the towns to avoid liability questions. Renaud stated that they have been working on this for 4 years. These signs would be put on existing post. Greenway is responsible to call diggers hotline and maintain them. Weir stated it is not much time to invest for the Parks & Rec staff. Klockow will develop an agreement that will be brought back to the Committee.

## **CLERKS REPORT**

Job Shadow Policy: The policy was reviewed by the Committee and corrections were made.

*Motion/second(Reabe/Garro)* to approve and send on to the Personnel Committee for approval to be included in the Personnel Policy and Procedures Manual. Motion carried.

## **COMMITTEE DISCUSSION**

**Future Meeting Date:** Regular Meeting: May 3, 2016 at 5:00 pm.

**Future Agenda items for action & discussion:**

## **ADJOURNMENT**

*Motion/second(Trochinski/Garro)* to adjourn at 5:38 pm. Motion carried.

Submitted by,

Marge Bostelmann  
County Clerk

DRAFT

**Use of County Property & Equipment**  
**Green Lake County Highway Department**

Location:

Equipment to be used:

Start Date:

End Date:

Requested By:

Event:

Additional Information:

Approved by Highway:

Approved by P&I:

# **Use of County Property & Equipment**

## **Green Lake County Highway Department**

Location: Shop 1 - Green Lake

Equipment to be used: None

Start Date: 7/18/16

End Date: 7/18/16

Requested By: Post 306 American Legion

Event: Memorial wall for the Iraq/Afghanistan War Veterans

Additional Information: Request to use the fair grounds for parking. Open Hill St. gate.

Approved by Highway: 4/13/16

Approved by P&I:

## **Weir, Scott**

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**From:** Bostelmann, Marge  
**Sent:** Monday, April 18, 2016 9:07 AM  
**To:** Stobbe, Samantha; Weir, Scott  
**Subject:** FW: Catamaran Racing of Wisconsin - 4th annual regatta

For the P&I meeting on May 3<sup>rd</sup>.

Scott, let me know if this is ok with you.

Marge

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**From:** Mike Jankowski [<mailto:mikejank@charter.net>]  
**Sent:** Monday, April 18, 2016 8:57 AM  
**To:** [clerk@co.green-lake.wi.us](mailto:clerk@co.green-lake.wi.us)  
**Subject:** Catamaran Racing of Wisconsin - 4th annual regatta

TO Whom it May Concern,

I would like to have permission, for the 4th year in a row, to hold the C.R.A.W. regatta out of Sunset Park on County A. The boats and trailers will start arriving Friday, June 17 and depart Sunday after races. Due to the difficulty of setting the boats up, I am again asking that they have permission to leave them intact on their trailers or parked on the lawn, for the weekend, as they have these past 3 years. They will stay to the North of the bathrooms to leave parking for the fishermen on the gravel areas. The head of the regatta will gather the parking/ launching fees from the racers and make sure they are deposited before the regatta is over. The group welcomes anyone with a catamaran to join in... a handicap scoring system is used so that any catamaran can participate! Spread the word and encourage racing or viewing. Thank you. Any questions or concerns please contact me as the Green Lake sponsor. Thank you,  
Julie Jankowski  
920-295-9835



# **Use of County Property & Equipment**

## **Green Lake County Highway Department**

Location: Other

Equipment to be used: Truck 36, 1 or 2 Highway Laborers

Start Date: 5/25/16

End Date: 5/25/16

Requested By: Dale Stephens - Princeton Public School

Event: Careers on Wheels (COWS)

Additional Information: Request for county truck and worker to attend COWS event for students to tour and look at vehicle and hear about work performed. Event held from 8:30am-11:30am rain date 5/26/16.

Approved by Highway: 4/13/16

Approved by P&I:

Asset Tag	Description	Asset Type	Purchase Date
1654	Micron ClientPro CR S	computer	1/9/2002
1753	Dell OptiPlex 620	computer	2/21/2006
1784	Dell OptiPlex GX520	computer	6/26/2006
1920	Dell ClientPro 585B	computer	3/24/2008
1980	Dell Precision T3400	computer	1/14/2009
1984	Dell Precision T3400	computer	1/14/2009
1985	Dell Precision T3400	computer	1/14/2009
1987	Dell Precision T3400	computer	1/14/2009
1990	Dell Precision T3400	computer	1/14/2009
1992	Dell Precision T3400	computer	1/14/2009
1993	Dell Precision T3400	computer	1/14/2009
2019	Dell Precision T3400	computer	1/14/2009
2024	Dell Precision T3400	computer	1/14/2009
2029	Dell Precision T3400	computer	1/14/2009
2030	Dell Precision T3400	computer	1/14/2009
2056	Dell Precision T3400	computer	1/14/2009
2068	Dell OptiPlex 360	computer	10/9/2009
2072	Dell Precision T3400	computer	1/14/2009
2169	AsRock Ion330	computer	5/17/2010
1825	Apple MacBook	laptop	7/10/2006
1826	Apple MacBook	laptop	7/10/2006
1607	HP L1730	monitor	2/19/2004
1966	Planar PX212M	monitor	1/13/2009
1967	Planar PX212M	monitor	1/13/2009
1968	Planar PX212M	monitor	1/13/2009
2002	Dell 1908FP	monitor	1/12/2009
2140	Dell 2208WFP	monitor	1/9/2009
1112	APC Back-UPS 650MC	UPS	11/21/2002
2226	APC Back-UPS 900	UPS	1/4/2010
2499	APC Back-UPS 900	UPS	1/4/2010
	Neovo SX19A	monitor	
	Neovo SX19A	monitor	
	Fargo DTC 550	printer	

## Request for Purchase Approval

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**Item to be purchased:** (2) Apple iPhones

**Sheriff's Recommendation:** US Cellular

**Account Name and Number:**

**Governing Committee:** Judicial and Law Enforcement

**Governing Committee Approval Date:** April 13, 2016

**Property and Insurance Approval Date:**

**Reason for Purchase:** The two Sgt. can get their county emails at all times and keep up on day to day office work with Deputies.

**Bid Information each:** US Cellular \$.1  
County cell phone carrier

## **Request for Purchase Approval**

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**Item to be purchased:** (4) Radars

**Sheriff's Recommendation:** To Purchase them from Stalker Radar

**Account Name and Number:** 16-100-09-52150-810-003 S&SE Outlay

**Governing Committee:** Judicial and Law Enforcement

**Governing Committee Approval Date:** April 13, 2016

**Property and Insurance Approval Date:** May 2, 2016

**Reason for Purchase:** Normal replacement of outdated equipment. This is 38% funded under the 2016 BOTS grant.

**Bid Information each:** Laser Technology \$2,450.00  
State Bid



applied concepts, inc.

2609 Technology Dr.  
Plano, TX 75074  
Phone: 972-398-3780  
Fax: 972-398-3781

National Toll Free: 1-800- STALKER

Inside Sales Mgr | Donna Russell  
972-801-4803

**QUOTE**  
**# 189456**

Page 1 of 1

Date: 03/29/16

Reg Sales Mgr: | Paul Spano  
972-489-6701

Effective From : 03/29/2016

Valid Through: 06/27/2016

Lead Time: 21 working days

<b>Bill To:</b> Green Lake County Sheriff's Office PO Box 586 Green Lake, WI 54941-0586	<b>Customer ID:</b> p298  Accounts Payable	<b>Ship To:</b> Green Lake County Sheriff's Office 486 Hill St Green Lake, WI 54941-8829	<b>UPS Ground</b>  Sergeant Kevin Manning
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Grp	Qty	Package	Description	Wrnty/Mo	Price	Ext Price
1	1	806-0022-00	DSR - 2-Antenna Radar System	36	\$2,450.00	\$9,800.00

Ln	Qty	Part Number	Description	Price	Ext Price
1	4	200-0999-00	DSR Enhanced Counting Unit, 1.5 PCB		\$0.00
2	4	200-1000-00	DSR Modular Display		\$0.00
3	8	200-0326-30	DSR KA Antenna		\$0.00
4	4	200-0921-00	DSR Ergonomic Remote Control w/Screw Latch		\$0.00
5	4	200-0769-00	25 MPH/40 KPH KA Tuning Fork		\$0.00
6	4	200-0770-00	40 MPH/64 KPH KA Tuning Fork		\$0.00
7	4	200-0243-00	Counting/Display Tall Mount		\$0.00
8	4	200-0244-00	Antenna Dash Mount		\$0.00
9	4	200-0245-00	Antenna Tall Deck Mount		\$0.00
10	4	200-0648-00	Display Sun Shield		\$0.00
11	4	155-2055-04	Antenna Cable, 4 Ft		\$0.00
12	4	155-2055-20	Antenna Cable, 16 Ft		\$0.00
13	4	155-2283-70	CAN/VSS Cable with Voltage Detection		\$0.00
14	4	200-0821-00	DSR Manual Kit		\$0.00
15	4	035-0361-00	Shipping Container, Dash Mounted Radar		\$0.00
16	4	060-1000-36	36 Month Warranty		\$0.00

**Group Total** \$9,800.00

Product	\$2,450.00	Sub-Total:	\$9,800.00
Discount	\$0.00	Sales Tax 0%	\$0.00
Payment Terms:		Shipping & Handling:	\$0.00
		<b>Total:</b>	<b>\$9,800.00</b>

WI State Contract 01611

2015 Dodge Charger & 2017 Tahoe ??

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# REQUEST FOR PURCHASE APPROVAL

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ITEM TO BE PURCHASED: Air Conditioning Equipment.

A/C Recharger - Robinair Cooltech 34788

DEPARTMENT: Highway Department

ACCOUNT NUMBER: 16-701-29-53230-314-000

GOVERNING COMMITTEE: Highway Committee

Approval Date: 4/13/16

PROPERTY AND INSURANCE APPROVAL DATE:

REASON FOR PURCHASE:

We have three employees certified to perform AC work. If we purchased the equipment Highway Personnel could complete this work. The cost to outsource in 2015 was \$1,400 for service work completed on various machines.

BID INFORMATION:

Federated Auto Parts	\$4,187.10 - Recommended
Fleet pride	\$4,774.37
Humphrey's	\$5,037.38

**Federated**

## BILL TO

GREEN LAKE COUNTY  
HIGHWAY DEPARTMENT  
PO BOX 159  
GREEN LAKE WI 54941

## SHIP TO

GREEN LAKE COUNTY  
HIGHWAY DEPARTMENT  
570 SOUTH STREET  
GREEN LAKE WI 54941

CUST PHONE: 920-294-4064

SHIP VIA:

PG 1

STORE : F

PMT TYPE: CHARGE

INVOICE #	CUSTOMER #	DATE	TERMS	CUSTOMER PO#	TRANS TYPE	CLERK	SLS
030394295	34860	04/07/16 16:20	NET 10TH		CHRG QUOTE HOLD	470	XX

MFG	PART #	DESCRIPTION	ORDERED	SHIPPED	BKC	LIST	NET	CORE	EXT. AMOUNT	TRC
OTC	34788NI	PREMIER R-134A	1	-		9254.80	3818.00		3818.00	Q N
OTC	22791	ROBINAIR INFRAR	1	1		703.05	369.10		369.10	Q N

SUBTOTAL	FREIGHT	LABOR	MISC	TOTAL CORE	TAXABLE AMT	SALES TAX	TOTAL
4187.10							4187.10
**Store Copy**				LIST			
				TOTAL	9957.85		

Note: Returns are subject to a 15% restocking charge. No credit or refund will be issued without your sales slip. No returns on installed items.  
Terms: Net 10th finance charge will be 2% per month applied to all past due invoices.

Sign Here: \_\_\_\_\_

**Federated**

## BILL TO

GREEN LAKE COUNTY  
HIGHWAY DEPARTMENT  
PO BOX 159  
GREEN LAKE WI 54941

## SHIP TO

GREEN LAKE COUNTY  
HIGHWAY DEPARTMENT  
570 SOUTH STREET  
GREEN LAKE WI 54941

CUST PHONE: 920-294-4064

SHIP VIA:

PG 1

STORE : F

PMT TYPE: CHARGE

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OTC	34788NI	PREMIER R-134A	1	1		9254.80	3818.00		3818.00	Q N
OTC	22791	ROBINAIR INFRAR	1	1		703.05	369.10		369.10	Q N

SUBTOTAL	FREIGHT	LABOR	MISC	TOTAL CORE	TAXABLE AMT	SALES TAX	TOTAL
4187.10							4187.10
**Customer Copy**				LIST			
				TOTAL	9957.85		

Note: Returns are subject to a 15% restocking charge. No credit or refund will be issued without your sales slip. No returns on installed items.  
Terms: Net 10th finance charge will be 2% per month applied to all past due invoices.



81048384

REMIT TO:

FLEETPRIDE

PO BOX 847118

DALLAS TX 75284-7118

(361) 883-4358 EXT 4000

WWW.FLEETPRIDE.COM

FOND DU LAC WI 385 N PIONEER RD (920) 923-3444

STORE NO.	SHIP LOC.	INVOICE TYPE	INVOICE DATE	INVOICE NUMBER
582	FDL	CHARGE SALE	04/07/16	81048384

SOLD TO GREEN LAKE COUNTY HIGHWAY  
PO BOX 159  
GREEN LAKE WI 54941-0159  
(920)-294-4060

SHIP TO QQQ U U 000 TTTT EEEE  
Q Q U U O O T E  
Q Q U U O O T EEEE  
Q Q U U O O T E  
QQQ UUU 000 T EEEE

CHECK NO.	SHIPPER NAME	ORIG. INVOICE NO.	FREIGHT	BILL OF LADING	TERMS
				WILL CALL	NET 30

PURCHASE ORDER NO.		REQUISITION/JOB NUMBER		ORDERED BY		ACCOUNT	SALESMAN
QUOTE						504371	5721
QUANTITY		MFG. CODE	PART NUMBER	DESCRIPTION		UNIT PRICE	AMOUNT
ORD.	SHIPPED						

1	0	4842	34788NI	PREMIER R-134A REFRIGERANT REC (EA)	4,774.37	4,774.37
B/O		4842	34788NI	** CANCELLED **		

INVOICE

TOTAL \$ 4,774.37

Parts & Service	Freight	Taxes
\$ .00	\$ .00	\$ .00

FleetPride makes NO WARRANTY OF MERCHANTABILITY with respect to any goods sold. There are no warranties which extend beyond the description of any goods sold on the invoice describing them. It is expressly agreed that Applicant's sole remedy for breach of any warranty with respect to goods or work is limited to the money actually received by FLEETPRIDE for the goods or work; the remedy of consequential damages is expressly excluded.

It is agreed that payment of the cash price is due within the terms stated above. A SERVICE CHARGE OF 1.5% per month (18% PER ANNUM) shall be due upon the amount of any charge which has not been paid when due. PLEASE PAY FROM THIS INVOICE.

CORES MUST BE RETURNED WITHIN 60 DAYS TO BE ELIGIBLE FOR CREDIT.

507 FDL FDL\_D9 SNITSCHKE 04/07/16 13.49.38

All Claims and returned goods MUST be accompanied by this bill.





4978 SOUTH 13TH STREET  
MILWAUKEE, WISCONSIN 53221  
PH: 414-282-0700 800-236-5367 FAX: 414-282-3080

SERVICE PARTS, INC. 248 WILSHIRE BLVD-NORTH  
STEVENS POINT, WISCONSIN 54481  
PH: 715-345-0700 800-236-5368 FAX: 715-345-1078

INVOICE DATE 04/07/2016 02:00PM  
INVOICE NO. \*\* QUOTE \*\*  
PAGE 1  
CUSTOMER NO. 27600  
BRANCH \* 2 \*

COUNTY OF GREEN LAKE  
\*HWY DEPT  
P O BOX 159  
GREEN LAKE WI 54941-0159

SOLD  
TO

SHIP  
TO

COUNTY OF GREEN LAKE  
HWY DEPT  
570 SOUTH ST  
GREEN LAKE WI 54941

CUSTOMER P.O. P.S. ORDER NO.

QUOTE 979172 MON (920) 294-4064 15 400/15 000  
PRICE PER EXTENSION

1 MED 34788NI

\*THIS IS A QUOTE MESSAGE\*  
PREMIER RECYCLER

EXPIRES: 05/07/2016  
BIL 5037.38EA

5037.38

\*\*\*\* QUOTE \*\*\*\*

\*THIS IS A QUOTE MESSAGE\* EXPIRES: 05/07/2016

FREIGHT	TAXABLE SUB TOTAL	TAX STATUS/STATE	SALES TAX	PLEASE PAY
	5037.38	EXEMPT WI	0.00	5037.38

NO CORE RETURNS AFTER 60 DAYS.  
ALL GOODS RETURNED FOR CREDIT SUBJECT TO 10% HANDLING CHARGE  
WE CHARGE 1% INTEREST PER MONTH FOR ACCOUNTS MORE THAN 30 DAYS PAST DUE

\*\*\* QUOTE \*\*\*

CUSTOMER SIGNATURE

# REQUEST FOR PURCHASE APPROVAL

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ITEM TO BE PURCHASED: Power Seat added to Etnyre Chip Spreader

DEPARTMENT: Highway Department

ACCOUNT NUMBER: 16-701-29-53281-810-000 (Capital Equipment)

GOVERNING COMMITTEE: Highway Committee

Approval Date: 4/13/16

PROPERTY AND INSURANCE APPROVAL DATE:

REASON FOR PURCHASE:

Requesting a change order to Etnyre Chip Spreader purchased from Aring Equipment. After attending a Chip Spreader training it was determined that a power seat would be a benefit to the chip spreading process. This option will save time and allow for efficiency. It is something that will be used on all chip sealing jobs whether on a highway or a city street.

BID INFORMATION:

Aring Equipment Company, Inc.      \$3,000.00 - Recommended



**EQUIPMENT COMPANY, INC.**

**13001 W. SILVER SPRING DR. • BUTLER, WI 53007**

MAILING ADDRESS: P.O. BOX 912 BUTLER, WISCONSIN 53007-0912  
PHONE (262) 781-3770  
FAX (262) 781-3495

**BRANCH OFFICES:**

MADISON, WI  
5005 Cake Parkway  
DeForest, WI 53532  
(608) 846-9600

GREEN BAY WI  
1800 N. Ashland Ave.  
P.O. Box 5276  
DePere, WI 54115-5276  
(920) 336-3601

EAU CLAIRE, WI  
2727 Alpine Rd.  
P.O. Box 478  
Eau Claire, WI 54702-0478  
(715) 835-6133

April 8, 2016

GREEN LAKE COUNTY HIGHWAY DEPARTMENT  
P.O. Box 159  
Greenlake, WI 54941

Price to install a Power Seat on Etnyre Chip Spreader is \$3,000.00 if installed at the factory.

Sincerely,  
ARING EQUIPMENT COMPANY

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Eric Peterson, Sales Representative

# REQUEST FOR PURCHASE APPROVAL

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ITEM TO BE PURCHASED: Crack Seal all drives and all parking areas at 571 County Road A

DEPARTMENT: Maintenance

ACCOUNT NUMBER: 16-101-06-51600-999-004

GOVERNING COMMITTEE: Property & Insurance

PROPERTY AND INSURANCE APPROVAL DATE: 05/03/16

REASON FOR PURCHASE: Maintain all drives and parking

BID INFORMATION: Precision Seal Coating Inc.-\$12,250.00

Green Lake County Highway Dept.-\$13,324.2

Wolf River Seal Coating Inc.-\$6525.00-Recomended

# Proposal WOLF RIVER SEAL COATING INC

W7764 Peterson Rd • Shiocton, WI 54170

Kyle (920) 858-3717 • Lauren (920) 716-3245 • Fax (920) 757-5817

WolfRiverSealCoating.com • WolfRiverSealCoating@gmail.com

PROPOSAL SUBMITTED TO  
Green Lake County

PHONE  
920-229-5119

DATE  
4-22-16

STREET  
571 County Rd A

CITY, STATE, ZIP CODE  
Green Lake WI 54941

CONTACT  
Scott Weir

FAX

EMAIL  
Sweir@co.green-lake.wi.us

We hereby submit specifications and estimates for all labor and materials as specified on plans for:

Asphalt crack filling to include:

- Crack fill approximately 0800 lineal feet.
- All cracks will be cleaned and filled with hot rubber.
- Structural cracks will be routed to a 1:1 ratio. ☒ Yes ☐ No

Asphalt seal coating to include:

- Seal coat an area of approximately — Sq. Ft.
- Clean asphalt of all debris before seal coat is applied.
- Clean and treat oil spots with oil spot primer.
- Apply commercial grade pavement sealer, federally specified coal tar emulsion sealer.
- Our seal coat is professionally applied with additives such as rubber and silica sand.

Asphalt patching to include:

- Remove and replace approximately — square feet with compacted asphalt.

Striping is to be completed and included in price. ☐ Yes ☒ No

All materials meet Wisconsin Department of Transportation Standard Specifications.

NOTICE TO BIDDERS: CONTRACTORS SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND LICENSES FOR THE CONSTRUCTION OF THIS PROJECT. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND LICENSES FOR THE CONSTRUCTION OF THIS PROJECT. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND LICENSES FOR THE CONSTRUCTION OF THIS PROJECT.

We Propose hereby to furnish material and labor - complete in accordance with above specifications, for the sum of:

\$ 6525.00

Balance due upon completion.

ANY QUESTIONS PLEASE CALL

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays are beyond our control. Owner to carry fire, tornado, and other necessary insurance.

Authorized  
Signature Lauren Boelter

Note: This proposal may be withdrawn by us if not accepted within 30 days.

Acceptance of Proposal – The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of acceptance \_\_\_\_\_

Signature \_\_\_\_\_

Crackfilling\*  
PROPOSAL

# PRECISION SEALCOATING, INC.



YOUR SEALCOAT SPECIALISTS 1-920-

P.O. BOX 24 - PRINCETON

• DRIVEWAYS

• PARKING LOTS 295-6109 FAX

54968

295-6006 • 1-800-358-7777

PROPOSAL SUBMITTED TO:

DESCRIPTION OF JOB:

Scott Wein\* (maintenance Dept.)  
571 South Street  
Green Lake, WI. 54941  
Phone # 920-229-5119 CELL.

JOB At: 571 County Road A.  
ADDRESS Court House Area & All  
CITY (G.L. Government Center) STATE Blkt. Area.  
DATE 3-31-2016.

WE HEREBY PROPOSE TO DO THE FOLLOWING Complete sealcoating program includes clean the entire  
(No) area, apply ( ) coats of coal tar emulsion sealer with silica sand  
blended in. (Crack Filling only.)

- ☒ Approximate square feet All Blkt. Area. Sq. Ft. \$  
☐ Rubber additive -Top Tuff- → Router out all cracks \* 3/4" x 3/4"  
☒ Clean cracks (Hot & Cold Crack Filler) Blow out, cracks \* \$ Fill with  
☐ Striping stalls ( ) other: Hot Rubberized Crack Filler Put  
☐ Patchwork approximate square feet time, paper over, for traffic  
☒ Additional work or comments Control & Pick up. \$

\$ ATTN: Can do 2016 year,  
on Sat. or Sunday \* Best \* ATTN: Look At:  
A lot of cracks All over the Place. Job complete \$ 12,250.00

Fed. ID# 39-18-14017-----State ID# 514407

☒ Call if you want job done!

WE HEREBY PROPOSE TO FURNISH LABOR AND MATERIALS  
COMPLETE IN ACCORDANCE WITH THE ABOVE SPECIFICA-  
TIONS, FOR THE SUM OF \$ 12,250.00 (2016)  
WITH PAYMENT TO BE MADE AS FOLLOWS

- ☒ Payable upon completion  
☐ Net 30 days

Thank you, Bob - owner & wife  
Ret. ME. Knows & so on. Put

NOTE THIS PROPOSAL MAY BE WITHDRAWN BY US you on  
IF NOT ACCEPTED WITHIN 30 DAYS. the list!

ALL MATERIAL IS GUARANTEED TO BE AS SPECIFIED. ALL  
WORK IS TO BE COMPLETED IN A WORKMANLIKE MANNER  
ACCORDING TO STANDARD PRACTICES. ANY ALTERATION  
OR DEVIATION FROM ABOVE SPECIFICATIONS INVOLVING  
EXTRA COSTS WILL BE EXECUTED ONLY UPON WRITTEN  
ORDERS, AND WILL BECOME AN EXTRA CHARGE OVER AND  
ABOVE THE ESTIMATE. ALL AGREEMENTS CONTINGENT  
UPON STRIKES, ACCIDENTS OR DELAYS BEYOND OUR  
CONTROL.

AUTHORIZED SIGNATURE Bob Weidner  
Co. Representative owner & wife  
3-31-2016

ACCEPTANCE OF PROPOSAL

THE ABOVE PRICES, SPECIFICATIONS AND CONDITIONS ARE SATISFACTORY AND ARE HEREBY ACCEPTED.  
YOU ARE AUTHORIZED TO DO THE WORK AS SPECIFIED. PAYMENT WILL BE MADE AS OUTLINED ABOVE.

SIGNATURE

SIGNATURE

DATE ACCEPTED



## GREEN LAKE COUNTY HIGHWAY COMMISSION

Amy M. Brooks, P.E.  
Highway Commissioner

Office: 920-294-4060  
Fax: 920-294-4066  
Email: [abrooks@co.green-lake.wi.us](mailto:abrooks@co.green-lake.wi.us)

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### Crack Sealing Government Center Parking Lot Estimate.

Estimate crack seal all asphalt areas, including north and east driveways, all traffic lanes, and all parking lots. Combined total area of 186,552 square feet.

Estimate does not include asphalt to concrete joints.

Lump sum \$13,324.25

**Aaron Wagner**  
**Highway Superintendent**  
**920-294-4065**  
**[awagner@co.green-lake.wi.us](mailto:awagner@co.green-lake.wi.us)**

May 3<sup>rd</sup>, 2016  
Property & Insurance Committee  
Monthly Report  
Maintenance Department/Parks & Recreation Department

#### Highway Departments-1 & 2

Replaced 2- ¾" water hose bibs-2  
Repaired sink drain men's restroom ground level-1  
Replaced washer/seat hot water valve/ sink lower level-1  
Replaced damaged and outdated 8/2'x4' light shields breakroom-1  
General Maintenance performed  
Scheduled Maintenance performed

#### Towers

Replaced utility operation indicator light on transfer panel-Princeton  
Reset over crank alarm/ generator-Kingston  
General Maintenance performed  
Scheduled Maintenance performed

#### FRI

Maintenance Requests performed

#### 571 County Road A

Repaired swing door reception-UWEX  
Repaired slight leak on diaphragm vac. flush women's staff restroom- 2<sup>nd</sup> floor -HHS  
Repaired (welded) broken chair room 2131-HHS  
Extracted 6 soiled chairs- 2<sup>nd</sup> floor- HHS  
Unplugged toilet Rec #2-Corrections  
Unplugged left sink drain unit N-Corrections  
Replaced bulb in light unit D -#5-Corrections  
Unplugged right sink drain unit N-Corrections  
Unplugged toilet D-#1-Corrections  
Unplugged toilet C-#3-Corrections  
Replaced light bulb Rec. # 2-Corrections  
Replaced bolt on lock arm door #11-Corrections  
Shimmed gearbox/drive down 3/32" to have drive gear mesh properly with track-door # 14-Corrections  
Assisted kitchen staff with cleaning upright freezer and overheads for License Inspection-Corrections  
Unplugged toilet C-#9-Corrections  
Repaired roll pin in drive overhead door sally port south-Corrections  
Unplugged toilet unit C#3-Corrections  
Unplugged toilet Rec. #2-Corrections  
Adjusted lock mech. (bolt/latch) Door#4-Corrections  
Unplugged toilet unit C-#3-Corrections




Reported a lack of light by corrections dumpster or not working. Checked all 4 security lights within the 65' area from sally port to dumpster all functioning properly-Corrections  
Resealed with uratheane/ entrance and exit ends of dishwasher-kitchen-Corrections  
Adjusted shower head to spray different per request Unit #J-Corrections  
Added top soil and grass seed in depleted areas on grounds  
Put out seasonal delineators for traffic channelizing  
Replaced outside wireless access point (squad parking )-IT/SO  
Request for purchase approval attached-Crack Seal parking and drives  
General Maintenance performed  
Scheduled maintenance performed

#### Parks

Installed new water totalizer-pavilion-Dodge Memorial  
All boat launches front and side protectors stained  
New corner bumpers installed on all boat launches  
Boat launches installed-Dodge Memorial  
Boat launches installed-Sunset Park  
Boat launch installed-Spring Valley Park  
Boat launch installed-Twin Lakes Park  
ADA fishing pier installed -Dodge Memorial  
General Maintenance performed  
Scheduled Maintenance performed

Office Supply Requests-45  
Maintenance Supply Requests-16  
Maintenance Work Order Requests-36

Submitted by:

  
Scott A. Weir  
Maintenance Supervisor/Parks Director  
Green Lake County

Green Lake County

NEAR MISS REPORT

A near miss is a potential hazard or incident that has NOT resulted in a personal injury or damages. All accidents must be reported to management A.S.A.P. If injury occurred *Worker's Compensation Notification of Injury Form* or *Incident-Emergency Report* must be filled out.

-----To be filled out by Employee or Supervisor-----

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Location: \_\_\_\_\_ Time: \_\_\_\_\_ am/pm

Description of near miss: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use back of form or attach another sheet if more space needed)

Was this near miss the result of any of the following: (Check all that apply)

☐ Unsafe Equipment      ☐ Unsafe Act      ☐ Violation of Policy  
☐ Unsafe Worksite      ☐ Unsafe Condition      ☐  
☐ Other \_\_\_\_\_

Could this have been prevented, how? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Corrective Action: \_\_\_\_\_  
\_\_\_\_\_

Date of Corrective Action: \_\_\_\_\_

Result of Investigation: \_\_\_\_\_  
\_\_\_\_\_

-----  
Reported By Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Investigator Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# **Near Miss Reporting Policy**

## **I. Purpose**

Incidents occur every day in the workplace that could result in serious injury or damage. In order to ensure a safe, healthful, and efficient work environment for our employees, Green Lake County has established the following near miss reporting policy.

## **II. Reporting**

Employees are required to report to their supervisor any job-related near miss incidents that occur at the workplace so that action can be taken to investigate the causes and to prevent recurrence.

Near Misses: Unplanned events that could have, under slightly different circumstances, caused injury, illness, death, property damage, loss of materials, or environmental damage.

- Near misses must be reported immediately or within 24 hrs. to the employee's direct supervisor.
- Any employee completing a near miss report may remain anonymous.
- Each report will be investigated to identify the cause.
- Upon investigation the results are to be used to improve safety.

## **III. Enforcement**

Any employee who violates this policy will be subject to discipline, up to and including discharge.



## **GREEN LAKE COUNTY**

# **BLOODBORNE PATHOGEN EXPOSURE CONTROL POLICY**

For Compliance with OSHA CFR 1910.1030  
Occupational Exposure to Bloodborne Pathogens

Approved by  
Loss Control Committee April, 2016

## **GREEN LAKE COUNTY BLOODBORNE PATHOGEN/ EXPOSURE CONTROL POLICY**

**POLICY:** Green Lake County is committed to providing a safe and healthy work environment for our entire staff. In pursuit of this endeavor, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with the Department of Safety and Professional Services who has adopted OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document to assist our firm in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- \*Determination of employee exposure

- \*Implementation of various methods of exposure control, including:

- Universal precautions

- Safety/Engineering and work practice controls

- Personal protective equipment

- Housekeeping

- \*Hepatitis B vaccination

- \*Post-exposure evaluation and follow-up

- \*Communication of hazards to employees and training

- \*Recordkeeping

- \*Procedures for evaluating circumstances surrounding an exposure incident

The methods of implementation of these elements of the standard are discussed in the subsequent pages of this ECP.

### **Definitions**

**Biological Hazard.** The term biological hazard or biohazard is taken to mean any viable infectious agent that presents a risk, or a potential risk, to the well being of humans.

**Medical Wastes/Infectious Wastes.** All waste emanating from human or animal tissues, blood or blood products or fluids. This includes used first aid bandages, syringes, needles, sharps, material used in spill cleanup and contaminated PPE or clothing.

**Universal Precautions.** Refers to a system of infectious disease control that assumes that every direct contact with body fluids is infectious and requires every employee exposed to be protected as though such body fluids were infected with blood-borne pathogens. All infectious/medical material must be handled according to Universal Precautions (OSHA Instruction CPL 2-2.44A)

## **Hazards**

Unprotected exposure to body fluids presents the possible risk of infection from a number of bloodborne pathogens notably Hepatitis and HIV.

## **Hazard Control**

**Safety/Engineering Controls** - prevention of exposure to bloodborne pathogens engineering controls include proper storage facilities and containers, syringes designed to prevent accidental needle sticks, and disinfectant equipment.

**Administrative Controls** - prevention of exposure to bloodborne pathogen administrative controls include universal precautions, assignment of PPE, employee training, use of spill kits specifically designed for blood and body fluids, restricted access to waste collection points and waste disposal procedures

## **PROGRAM ADMINISTRATION**

- ❖ **The Loss Control Committee** is responsible for the implementation of the ECP. **The Loss Control Committee** will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact the Green Lake County Clerk's office at 920-294-4007.
- ❖ Those employees who it is determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.
- ❖ **Each Department Head** will maintain and provide all necessary personal protective equipment (PPE), safety/engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. Each Department Head will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.
- ❖ **Each Department Head** will be responsible for ensuring that all medical actions required are performed and that appropriate employee health and OSHA records are maintained.

- ❖ **Each Department Head** will be responsible for assuring training, documentation of training, and making the written ECP available to employees and Department of Safety and Professional Services.

## **EMPLOYEE EXPOSURE DETERMINATION**

The following is a list of all job classifications at our establishment in which **all** employees have occupational exposure:

<b><u>JOB TITLE</u></b>	<b><u>DEPARTMENT/LOCATION</u></b>
<b><u>All Staff</u></b>	<b><u>Human Services and Fox River Industries</u></b>
<b><u>All Staff</u></b>	<b><u>Maintenance</u></b>
<b><u>All Staff</u></b>	<b><u>Sheriff's Office and Coroner's Office</u></b>

The following is a list of job classifications in which **some** employees at our establishment have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

<b><u>JOB TITLE</u></b>	<b><u>DEPARTMENT/LOCATION</u></b>	<b><u>TASK/PROCEDURE</u></b>
<b><u>Some Highway</u></b> (Highway Patrol & Labor)	<b><u>Highway Department</u></b>	<b><u>Handling Regulated Waste</u></b>

**Part-time, temporary, contract and per diem employees are covered by the standard. Supervisors are responsible for ensuring proper training of these individuals.**

## **METHODS OF IMPLEMENTATION AND CONTROL**

### **Universal Precautions**

All employees will utilize universal precautions.

### **Exposure Control Plan**

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial employee orientation . It will also be reviewed in their annual refresher training. All employees have an opportunity to review this plan at any time during their work shifts by contacting **their supervisor**. If requested, we will provide an employee with a copy of the ECP free of charge upon request.

**The Loss Control Committee** is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

### **Safety/Engineering Controls and Work Practices**

Safety/Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

- ❖ **Safety syringes will be used by staff**
- ❖ **Spill kits that contains, gloves, protective eye wear, bleach or other appropriate antibacterial solution, absorbent toweling, and red or regular disposal bags with biohazard labels will be available at all worksite locations.**

Sharps disposal containers in public areas are inspected and maintained or replaced by **Maintenance** every **six months** or whenever necessary to prevent overfilling.

This facility identifies the need for changes in engineering control and work practices through the Loss Control Committee by: **review of incident reports, employee interviews, committee activities, etc.**

We evaluate the need for new procedures or new products by **soliciting input from staff annually. The suggestions are then presented to the Loss Control Committee by the Department Heads for review at their meetings.**

The following staff are involved in this process: **Public Health, Sheriff's Office, Maintenance, Emergency Services, County Clerk, and Highway will evaluate any new engineering control and work practices and will give input as to best options. In the event of new products, company representatives will be contacted to demonstrate proper use to staff if possible.**

**Each Department Head** will ensure effective implementation of these recommendations.

### **Personal Protective Equipment (PPE)**

PPE is provided to our employees at no cost to them. Training is provided by **Department Heads of each department** in the use of the appropriate PPE for the tasks or procedures employees will perform. Department Heads are responsible for verifying the integrity of the PPE's in their respective departments.

The types of PPE available to employees are as follows:



### **Gloves, eye protection, masks, protective suits, CPR masks, boots, shoe covers**

PPE is located **in various places throughout the county facilities. See attached list for Protective Equipment Location.** A listing of PPE locations may be obtained by contacting your Department Head/Unit Manager. Department Heads/Unit Managers are responsible for ensuring that employees are aware of how to obtain PPE, and are responsible for ensuring that it is available.

All employees using PPE must observe the following precautions:

- \* Wash hands immediately or as soon as feasible after removal of gloves or other PPE.
- \* Remove PPE after it becomes contaminated, and before leaving the work area.
- \* Used PPE may be disposed of in **designated sites in each facility i.e. Sharps containers, red biohazard bags clearly marked trash bags with a biohazard label.**
- \* Wear gloves when it can be reasonably anticipated that there may be hand contact with blood or OPIM (Other Potentially Infectious Materials), and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, contaminated, or if their ability to function as a barrier is compromised.
- \* Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- \* Never wash or decontaminate disposable gloves for reuse.
- \* Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- \* Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

The procedure for handling used PPE is as follows:

**All personal protective equipment must be removed immediately upon leaving the work area. If overtly contaminated, it must be placed in an appropriate container or bag for storage, washing, decontamination, or disposal.**

**Contaminated clothing must not be worn in clean areas or outside the building.**

**All procedures involving blood or other potentially infectious agents must be performed in a manner that will minimize splashing, spraying, and aerosolization.**

**Contaminated vehicles and components, such as the seats, radios and doors, shall be washed with soap and warm water and disinfected with an approved germicide as soon as feasible.**

**Additional information for Sheriff's Office: Please see Sheriff's Department for policy.**

## ***Personal Protective Equipment for Worker Protection Against HIV and HBV Transmission***

<b>TASK</b>	<b>GLOVES</b>	<b>APRON</b>	<b>MASK</b>	<b>EYEWEAR</b>
Control of Bleeding w/ spurting blood	X	X	X	X
Bleeding control with minimal bleeding	X			
Emergency Child Birth	X	X	X	X
Blood Drawing	X			
Handling & Cleaning Instruments	X			
Cleaning Bio Spills	X			
Taking Temperature				
Giving Injection	X			
Measuring Blood Pressure				

**The examples provided in this table are based on application of universal precautions. Universal precautions are intended to supplement rather than replace recommendation for routine infection control, such as hand washing and using gloves to prevent gross microbial contamination of hands (e.g., contact with urine or feces). TRAINED PERSONAL SHALL BE CALLED IN FOLLOWING CONTAMINATION FOR CLEANUP.**

## **Housekeeping**

**Regulated waste** is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded and closed prior to removal to prevent spillage or protrusion of contents during handling.

**Contaminated sharps** are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and labeled or color-coded appropriately. Sharps disposal containers are available through the Maintenance Department. Health Department will be responsible for obtaining their own containers.

The procedure for handling sharps container disposal: **Full containers are to be locked and delivered to ThedaCare/Berlin or any Theda Care clinic in Green Lake County for property disposal.**

The procedure for handling **other regulated** waste is:

Medical/infectious waste must be segregated from other waste at the point of origin.

Medical/infections waste, except for sharps, must be double bagged and labeled conspicuously with a biohazard label.

Used needles or other sharps (razor blades, broken glass, scalpels, etc.) must not be sheared, bent, broken, recapped, or re-sheathed.

Infectious sharps (i.e., razor blades, broken glass, needles, etc.) must be contained for disposal in leak-proof, rigid puncture-resistant containers.

All infectious items, or equipment, must be disinfected before being washed or disposed of. Each individual working with infectious bio-hazardous materials is responsible for disinfection and proper disposal.

Liquid bio-hazardous waste may be disposed of in the sewage system following chemical decontamination.

Reusable glassware must be decontaminated with a suitable germicide or disinfectant prior to washing. The glassware must then be sterilized in an autoclave.

Floors, and other surfaces in buildings where infectious agents are handled must be disinfected with a suitable germicide, or disinfectant as often as necessary as determined by the supervisor.

**Bins and pails** (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.

**Broken glassware** which may be contaminated is picked up using mechanical means, such as a brush and dust pan.

### **Laundry**

Contaminated articles will be laundered by the Sheriff's Office and at Fox River Industries (FRI).

**This includes: General Laundry from the jail, including bedding, inmate clothing and contaminated items from FRI clients etc.**

Laundering will be performed by **Sheriff's staff at the Correction Center and FRI staff. Grossly contaminated laundry will be double bagged, and labeled.**

The following laundering requirements must be met:

- \* handle contaminated laundry as little as possible, with minimal agitation
- \* place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use **red bags or double bag and label "Biohazard"**
- \* wear the following PPE when handling and/or sorting contaminated laundry: **Gloves always and eye protection if splashing is anticipated.**

### **Labels**

The following labeling method(s) is used in this facility:

<u>EQUIPMENT TO BE LABELED</u>	<u>LABEL TYPE (size, color, etc.)</u>
<b><u>Blood or urine samples for mailing</u></b>	<b><u>Plastic bag, biohazard label</u></b>
<b><u>Contaminated Laundry</u></b>	<b><u>Red bag, biohazard label</u></b>
<b><u>Sharps Containers</u></b>	<b><u>Biohazard label</u></b>

**All Staff** will ensure warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify **their supervisor** if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc. without proper labels.

### **HEPATITIS B VACCINATION**

The hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified in the exposure determination section of this plan. Vaccination to this group is encouraged unless: 1) documentation exists that the employee has previously received the series, 2) antibody testing reveals that the employee is immune, or 3) medical evaluation shows that vaccination is contraindicated.

If an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept at **the County Clerks office.**

Vaccination will be **provided by the Green Lake County Health Department staff.**

Health Department staff, in collaboration with the department head will determine whether the employee is to be offered the hepatitis B vaccine based on occupational risk.

## **POST-EXPOSURE EVALUATION AND FOLLOW-UP**

Should an exposure incident occur, contact **your Department Head/Unit Manager immediately.**

A confidential medical evaluation and follow-up is to be conducted by **a Licenced health care professional as soon as possible**. Following the initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- \* Document the route(s) of exposure and how the exposure occurred.
- \* Identify and document the source individual (unless the employer can establish that identification is not feasible or prohibited by state or local law).
- \* Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- \* If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- \* Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- \* After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV, HCV and HIV serological status
- \* If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

## ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

The County Clerk's Office ensures that following an exposure, the employee is provided with a post-exposure evaluation and a copy of OSHA's bloodborne pathogens standard.

The County Clerk's Office ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- \* a description of the employee's job duties relevant to the exposure incident
- \* route(s) of exposure
- \* circumstances of exposure
- \* if possible, results of the source individual's blood test
- \* relevant employee medical records, including vaccination status

The County Clerk's Office will provide the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

## PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The County Clerk's Office and Department Head will review the circumstances of all exposure incidents to determine:

- ❖ Whether engineering controls were being used at the time of the exposure
- ❖ That work practices were being followed
- ❖ That protective equipment or clothing was in use at the time of the exposure incident (gloves, eye shields, etc.)
- ❖ Location of work being performed at the time of the incident
- ❖ Employee's training needs

If it is determined that revisions need to be made to that department, the Department Head will ensure that corrective actions are taken to bring the department into compliance. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.)

## EMPLOYEE TRAINING

Supervisors are to assure that all employees who have occupational exposure to bloodborne pathogens receive annual training. Training is conducted by Green Lake County Public Health.

If employees are unable to attend an annual presentation, their Supervisor may authorize approval for them to meet this requirement by viewing Wisconsin County Mutual's Bloodborne Pathogen training video and passing a quiz.

[www.wisconsincountymutual.org/training/login](http://www.wisconsincountymutual.org/training/login)

All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the in-person training program provided by the Public Health Nurse covers, at a minimum, the following elements:

- \* an explanation of our ECP and how to obtain a copy
- \* an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- \* an explanation of the use and limitations of engineering controls, work practices, and PPE
- \* an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- \* an explanation of the basis for PPE selection
- \* information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- \* information on the appropriate actions to be taken and persons to contact in a work related exposure
- \* an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- \* information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- \* an explanation of the signs and labels and/or color coding required by the standard and what is in use at this facility
- \* an opportunity for interactive questions and answers with the person conducting the training session.

**A copy of this policy is available for review on the Green Lake County Intranet.**



## RECORDKEEPING

### Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least **three years** by **Department Heads, with copies sent to the County Clerk's Office.**

The training records include:

- ❖ The dates of the training sessions
- ❖ The contents or a summary of the training sessions
- ❖ The names and qualifications of persons conducting the training
- ❖ The names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee. Such requests should be addressed to **the individual's Department Head.**

### Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.20, "**Access to Employee Exposure and Medical Records.**"

**The Green Lake County Clerk's Office** is responsible for maintenance of the required medical records. These **confidential** records are kept at **the County Clerk's Office** for at least the **duration of employment plus 30 years.**

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee. Such requests should be sent to **the Green Lake County Clerk's Office.**

### OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by **the County Clerk's Office.**

### **HEPATITIS B VACCINE DECLINATION (MANDATORY)**

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**PERSONAL PROTECTIVE  
EQUIPMENT (PPE)  
LOCATIONS**

**Human Service Center – Clean up Kits located in first aid kit on second floor and in Nurses storage Room 1150.**

**Fox River Industries – Clean Up Kit is in janitorial closet.**

**County Offices – Clean Up Kits are located at each reception desk.**

**Highway Dept.- in Maintenance area in Shop 1 in G.L. and Shop 2 in Manchester. First aid kits with masks and gloves are in crew trucks and state vehicles.**

**Sheriff's Office – Clean Up Kits are located in each patrol vehicle, patrol boat, tactical unit, Communications area, at the reception desk and in the jail.**

**Sheriff's Biohazard closet (#1221)**

Current as of 3/14/2016

## Green Lake County Department Heads

<b>Child Support</b>	Jeanne Theune (interim)	294-4147
<b>Circuit Court Probate</b>	Judge Slate	294-4042
<b>Clerk of Courts</b>	Amy Thoma	294-4145
<b>Coroner</b>	Amanda Thoma	294-1229
<b>County Clerk</b>	Marge Bostelmann	294-4007
<b>County Treasurer</b>	Elizabeth Amend	294-4019
<b>District Attorney</b>	Andrew Christenson	294-4046
<b>Emergency Management:</b>	Gary Podoll	361-5416
<b>Fox River Industries</b>	Ed Schuh	361-3484
<b>Health &amp; Human Services</b>		
<b>Administrative</b>	Linda Van Ness	294-4073
<b>Aging &amp; Long Term Care</b>	Betty Bradley	294-4121
<b>Behavior Health</b>	Paul Vander Sande	294-4098
<b>Economic Support Unit</b>	Shelby Jensen	294-4091
<b>Health Unit</b>	Kathy Munsey	294-4109
<b>Children &amp; Family Services</b>	Sue Sleezer	294-4075
<b>Highway Department</b>	Amy Brooks	294-4062
<b>IT</b>	Bill Hutchinson	294-4161
<b>Land Conservation</b>	Paul Guderson	294-4055
<b>Land Use Planning &amp; Zoning:</b>	Matt Kirkman	294-4175
<b>Maintenance</b>	Scott Weir	294-4012
<b>Register of Deeds</b>	Sarah Guenther	294-4024
<b>Sheriff Department</b>	Mark Podoll	294-4134
<b>UWEX</b>	Nav Ghimire	294-4037
<b>Veterans Service</b>	Jon Vandeyacht	294-4124

Current as of 4/6/2016



# **GREEN LAKE COUNTY**

## **OFFICE OF THE COUNTY CLERK**

*Margaret R. Bostelmann, WCPM*  
*County Clerk*

*Office: 920-294-4005*  
*FAX: 920-294-4009*

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## **GREEN LAKE COUNTY COMMUNICATIONS POLICY**

### **POLICY**

- A. The purpose of this policy and procedure is to establish and maintain a legal, efficient, and consistent means of releasing potentially news worthy information to the media.

### **INFORMATION**

- A. Green Lake County, as a public service entity, acknowledges the role media plays in society and desires to maintain a positive working relationship with all media contacts.
- B. Green Lake County will release information as deemed necessary or as requested.
- C. Any media release information will be within the scope of the law, open records law, and may have investigatory and/or ethical considerations applied.

### **PROCEDURE**

- A. Media Releases.
  - 1. Media releases may be prepared by the Sheriff, Chief Deputy, Health Officer, appropriate Department Heads or their designees.
  - 2. Immediate postings to the County website by the designated department with assistance as needed from the IT Department.
  - 3. If a non-designee employee receives request for information, obtain a name and call back number of the representative, and advise the appropriate Department Head.
- B. Preparing Media Releases and Speaking with the Media (Authorized Staff).
  - 1. Physically and mentally prepare for the encounter.
  - 2. Look and act professionally.
  - 3. Speak or write in short, easy to understand sentences.
  - 4. Address the event directly.
  - 5. Avoid drawing conclusions on events you are not certain about. If you don't know the answer state, "I do not know", ask to answer the question later.
  - 6. Do not mislead the media, be honest, polite, and courteous; remain composed.
  - 7. Be sensitive to media needs and deadlines.
  - 8. Specifics on department staff matters may be subject to "open records" or employment law.

Information which could damage an investigation, further injure victims, or compromises the safety of anyone should be withheld.

Individual departments may have more specific requirements under a separate department policy which would take precedence to the County wide policy. The policy should be reviewed by the Loss Control Committee to insure it is not in conflict.

April 2016