

R. Kent Snider, Chairman



Adams County Board
507 Vermont Street
Quincy, IL. 62301

ADAMS COUNTY BOARD

COUNTY BOARD MEETING

October 12, 2021

7 P.M.

**PROCEEDINGS
OF THE COUNTY BOARD
ADAMS COUNTY, ILLINOIS**

**COUNTY OF ADAMS)
STATE OF ILLINOIS)**

The County Board of Adams County, Illinois met at the Courthouse, Quincy, Illinois, on Tuesday, October 12th, 2021 at 7:00 P.M., pursuant to recess.

PRESENT: Kent Snider, Chairman
Ryan Niekamp, County Clerk

Mr. Obert gave the invocation which was followed by the Pledge of Allegiance to the flag of the United States of America.

Chairman Snider called the meeting to order.

The County Clerk called the roll and the following members were present: Mark Peter, Matt Obert, Robert Reich, John Brady, David McCleary, Les Post, Theresa Bockhold, Joe Zanger, David Hoskins, Bret Austin, Steven Demoss, Megan Howell, Barbara Fletcher, Ryan Hinkamper, Dave Bellis, Marvin Kerkhoff, Raquel Sparrow, Travis Cooley and Kent Snider.

Total Present: 19 Absent: 2

Absent were: Todd Duesterhaus and Taylor Rakers, both excused.

Chairman Snider declared a quorum present.

Officeholders, department heads, and/or their representatives also present were: Georgene Zimmerman- Supervisor of Assessments, Lori Geschwandner-Circuit Clerk, Anthony Foster- Director of Court Services, Todd Nelson- Public Defender, John Simon-EMA & Ambulance Director, Jim Frankenhoff- County Engineer, David Hochgraber-Director of IT and Dave Bockhold- Highway Department.

Mr. Bellis moved to approve the minutes of the September 14th, 2021 county board meeting as printed and distributed.

Mr. Austin seconded the motion.

Motion to approve the minutes of the September 14th, 2021 meeting as printed was adopted.

Transportation, Building & Technology

Committee Report (Mr. Bellis)

Bills – The committee met on Tuesday, October 12th to review the bills for the Highway Department, the Maintenance Department, and the Technology Department. All of the bills were in order.

Reports

David Hochgraber, director of IT presented prices on fiber to hook up all of the buildings. Mr. Hochgraber stated this would be a dedicated connection from the courthouse to all of the buildings for a secure connection. All cameras would be connected. He reported the upfront cost would be within ARPA, but now they need to choose which term with Adams to go with.

The committee's next meeting is scheduled for November 9th, 2021.

Legislative & Judicial

Committee Report (Mr. Peter)

Bills – The committee met on October 12th to review the bills from the circuit Clerk, Juvenile Detention Center, Probation Department, Public Defender, State's Attorney, and the Supervisor of Assessments. All of the bills were in order.

County Code

Mr. Peter stated they had a good presentation by Mr. Obert talking about the 708 Mental health wording in our code. They would like to re-do some of the wording on the 708 Board. He stated they would have the Holiday and County Board schedules to present next month for the year 2022. Mr. Foster also submitted a proposal for a vehicle they are needing to be purchased. They are needing the county to fund 39% of it.

Mr. Peter made a motion to approve the funding.

Mr. Obert seconded the motion.

The motion was approved.

Event Liquor License

- a. One-day special permit request for the Grove Inn Inc. for October 16th, 2021.

Mr. Peter made a motion to approve the one-day special liquor permit. (Attachment A-1)

Mrs. Bockhold seconded the motion.

The one-day special liquor permit was approved.

The committee's next meeting is scheduled for November 9th, 2021.

Public Health & Safety

Committee Report (Mrs. Fletcher)

Bills – The committee met on September 21st and October 12th, 2021 and reviewed the bills for the Sheriff's Office, Coroner's Office, Emergency Management Agency and Animal Control. All of the bills were in order.

Reports-

Mrs. Fletcher read the following reports that were submitted to committee by department heads:

- 1) Sheriff Wagner's report on the jail- The current jail population 9/21/21 was 134. The numbers have been holding fairly steady. There are 3 new hires pending. 1 Corrections Officer has been terminated.
- 2) Coroner Scott Graham's report- There were 83 reported deaths, 3 autopsies, no abandoned cremations and 39 cremation permits in August 2021. The department is slightly over budget on autopsies for this year due to an increase in autopsies.
- 3) Ambulance report by John Simon- They are at full staff for now. They will have 2 leaving to join the Military. They have a EMT class schedules for November 1st.
- 4) Emergency Management report by John Simon- COVID Numbers are decreasing and booster shots are done. Testing will conclude on 10/29/2021.

Resolution-

- a. 2021-10-621-023- Intergovernmental Agreement between the Illinois Department of Healthcare and Family Services and the County of Adams. (Attachment B-1)

Mr. McCleery made a motion to approve the resolution.

Mr. Demoss seconded the motion.

Discussion: Mr. Simon reported that they just learned of the program on October 1st. The deadline was also October 1st, but it was extended. He stated our bills to Illinois Medicaid would be reimbursed. He stated two years ago, the ambulance industry was the only one carved out of the managed care organizations under Medicaid. This program establishes cost-reporting to Illinois Medicaid. He stated they will be between \$1,000 to \$1,200 per call. We would get our cost reimbursed. The catch would be that every quarter we will get an invoice from the state to send half of the money back in the form of a refund. Mr. Simon stated that if our costs are 1000-1200 per trip, our retention would be \$500 rather than \$90-160 which puts us in the positive. Mr. Obert asked if this would require more staff-time to do the reports. Mr. Simon stated that the annual report takes a little bit, but they do not know what to expect yet.

The resolution was approved.

****The committee voted to move the meetings to the Tuesday before the county board meetings at 6:00 PM.**

****The committee made a correction to clarify it is the Tuesday of the county board meeting rather than the Tuesday before.**

The committee's next meeting is scheduled for Tuesday, November 9th, 2021.

Finance

Committee Report (Mr. Austin)

Bills – The committee met on October 11th to review the bills. All of the bills were in order.

Report-

Mr. Austin stated that they would like to move their meetings to the second Monday of the month at 6:00 in the county board room.

Resolution –

The following tax sale resolutions were approved together:

- a. Tax Sale Resolution – Parcel Number 23-2-0895-000-00 located in the Quincy Township (Attachment C-1)
- b. Tax Sale Resolution – Parcel Number 23-2-1028-000-00 located in the Quincy Township (Attachment C-2)
- c. Tax Sale Resolution – Parcel Number 23-4-0902-000-00 located in the Quincy Township (Attachment C-3)
- d. Tax Sale Resolution – Parcel Number 23-4-1100-000-00 located in the Quincy Township (Attachment C-4)
- e. Tax Sale Resolution – Parcel Number 23-4-1147-000-00 located in the Quincy Township (Attachment C-5)
- f. Tax Sale Resolution – Parcel Number 23-4-1398-000-00 located in the Quincy Township (Attachment C-6)
- g. Tax Sale Resolution – Parcel Number 23-5-0745-000-00 located in the Quincy Township (Attachment C-7)
- h. Tax Sale Resolution – Parcel Number 23-5-0908-000-00 located in the Quincy Township (Attachment C-8)
- i. Tax Sale Resolution – Parcel Number 23-5-1002-000-00 located in the Quincy Township (Attachment C-9)
- j. Tax Sale Resolution – Parcel Number 23-5-1339-000-00 located in the Quincy Township (Attachment C-10)

Mr. Austin made a motion to approve the 10 tax sale resolutions.

Mr. Reich seconded the motion.

A roll call vote was taken to approve the tax sale resolutions. Those in favor were: Mark Peter, Matt Obert, Robert Reich, John Brady, David McCleary, Les Post, Theresa Bockhold, Joe Zanger, David Hoskins, Bret Austin, Steven Demoss, Megan Howell, Barbara Fletcher, Ryan Hinkamper, Dave Bellis, Marvin Kerkhoff, Raquel Sparrow, Travis Cooley and Kent Snider.

Total in favor was 19. Total opposed was 0. Total absent was 2.

The tax sale resolutions were approved.

Finance

The following two transfer of fund appropriations were approved together:

- a. Transfer of Fund Appropriation from Anthony Foster, Director of Court Services – in the amount of \$6,000 from line item number 001-001-5999 – Adams County Contingency – for a revised budget amount of \$59,846.67, and \$6,000 to line item

number 001-321-5506 – Building Maintenance – for a revised budget amount of \$27,500. (Attachment C-11)

- b. Transfer of Fund Appropriation from Anthony Foster, Director of Court Services – in the amount of \$20,000 from line-item number 005-001-5713 – American Rescue Plan Expense – for a revise budget amount of \$6,335,000 and \$20,000 to line-item number 055-001-5905 – A.C.E. Program Expense – for a revised budget amount of \$20,000. (Attachment C-12)

Mr. Austin made a motion to approve the two Transfer of Fund Appropriations.

Mr. Bellis seconded the motion.

A roll call vote was taken to approve the two Transfer of Fund Appropriation. Those in favor were: Mark Peter, Matt Obert, Robert Reich, John Brady, David McCleary, Les Post, Theresa Bockhold, Joe Zanger, David Hoskins, Bret Austin, Steven Demoss, Megan Howell, Barbara Fletcher, Ryan Hinkamper, Dave Bellis, Marvin Kerkhoff, Raquel Sparrow, Travis Cooley and Kent Snider.

Total in favor was 19. Total opposed was 0. Total absent was 2.

The transfer of fund appropriations were approved.

- c. Transfer of Fund Appropriation from Ryan Niekamp – County Board Office – in the amount of \$8,500 from line item 001-001-5105 – Salary County Administration – for a revised budget amount of \$59,500 and \$7,000 to line item 001-001-5110 – Salary Office Staff – for a revised budget amount of \$86,531 and \$1,500 to line item 001-001-5650 – Office Supplies – for a revised budget amount of \$6,500 (Attachment C-13)

Mr. Austin made a motion to approve the Transfer of Fund Appropriation.

Mr. Obert seconded the motion.

Discussion: Mr. Austin stated that this is to line up accounts for the end of the budget year and that it is budget-neutral.

A roll call vote was taken to approve the Transfer of Fund Appropriation. Those in favor were: Mark Peter, Matt Obert, Robert Reich, John Brady, David McCleary, Les Post, Theresa Bockhold, Joe Zanger, David Hoskins, Bret Austin, Megan Howell, Barbara Fletcher, Ryan Hinkamper, Dave Bellis, Marvin Kerkhoff, Raquel Sparrow, Travis Cooley and Kent Snider.

Those voting present: Steven Demoss.

Total in favor was 18. Total opposed was 0. Total present was 1. Total absent was .

Budget/Levy

- a. FY21-22 Budget

Mr. Austin stated we will hopefully get to a flat tax rate. He stated we will have issues to talk to about with a few departments about expenses in the General Fund as they are reaching the max almost. He stated the Ambulance Department is net-positive due to dedicated work by the staff and education. He stated the projected increase on health insurance is 32% which is not a great situation. He also reported that budget discussions are going well so far and he hopes to have the draft to the board out later this week.

- b. Discussion of ARPA Projects

Mr. Austin stated that we will speak of this in executive committee.

Insurance

a. Discussion of Medical Insurance Plan

Mr. Hoskins reiterated that the increase is 32% at least. He stated we do have a fairly large deductible that the county undertakes. He stated that unfortunately, there are not a lot of options. He stated we could increase the deductible that the county undertakes which would not make sense because of the demographic of our staff aging. He stated the number of large claimants has been on the rise. He also stated that they have talked with some schools to try to make a larger pool to leverage our buying power. Mr. Hoskins stated that this was just informed to them and the employee plan renews January 1st. He stated there are some hard decisions to be made.

The committee's next meeting will be November 8th, 2021 in the County Board Room.

Executive Committee

Committee Report (Mr. Austin)

The committee met on October 4th, 2021.

Report-

Mr. Austin stated that they spent time discussing insurance things and two specific ARPA projects.

Resolution/Action

- a. Resolution Number 2021-10-311-021- Resolution to support unemployed essential workplace skills through Adams County Empowered (A.C.E.) (Attachment D-1)
Mr. Austin made a motion to approve the resolution.

Mr. Obert seconded the motion.

Discussion: Mr. Austin stated that this was vetted through the consultant. This resolution is approve a \$50,000 pilot program to match up employment with 30 individuals in the pilot program. GREDF has 4 companies that have signed onto this. He stated that the only thing we are approving tonight is the \$50,000. Mr. Demoss asked if they have brought any families in yet. Mr. Austin stated that this is a different program with the city. He stated this is one for people on probation in our community.

A roll call vote was taken to approve the resolution. Those in favor were: Mark Peter, Matt Obert, Robert Reich, John Brady, David McCleary, Les Post, Theresa Bockhold, Joe Zanger, David Hoskins, Bret Austin, Steven Demoss, Megan Howell, Barbara Fletcher, Ryan Hinkamper, Dave Bellis, Marvin Kerkhoff, Raquel Sparrow, Travis Cooley and Kent Snider.

Total in favor was 19. Total opposed was 0. Total absent was 2.

Resolution 2021-10-311-021 was approved.

- b. Resolution Number 2021-10-001-022- Resolution to aid in negative economic impacts to the 2020 Adams County Fair. (Attachment D-2)

Mr. Austin made a motion to approve the resolution

Mr. Peter seconded the motion.

Discussion: Mr. Austin stated that the fairgrounds is for more than just one event each year. Mr. Peter stated that there will be between 2-3 events per month all year round and that the grounds get used a lot and brings people to visit our county. Mr. Demoss stated that there are people from all over the country and this is a great thing we have. Mr. Kerkhoff stated that they lost revenue last year. Mr. Peter stated they submitted a report on the revenue they lost in 2020. Mr. Austin stated that this resolution is written according to revenue loss and tourism. He stated it was approved with conditions. He stated this organization is very organized and they are within what ARPA requires. The total amount is \$137,000 as a one-time cost.

A roll call vote was taken to approve the resolution. Those in favor were: Mark Peter, Matt Obert, Robert Reich, John Brady, David McCleary, Les Post, Theresa Bockhold, Joe Zanger, David Hoskins, Bret Austin, Steven Demoss, Megan Howell, Barbara Fletcher, Ryan Hinkamper, Dave Bellis, Marvin Kerkhoff, Raquel Sparrow, Travis Cooley and Kent Snider.

Total in favor was 19. Total opposed was 0. Total absent was 2.

Resolution 2021-10-311-022 was approved.

The next meeting will be held on November 1st, 2021.

Unfinished Business

New Business

- 1) Approval of Board Member Travel Vouchers

- 2) Monthly Reports – Supervisor of Assessments/Board of Review, the Probation Department, Juvenile Detention Center, the County Clerk & Recorder’s office, Sheriff’s Department, Information Technology, the Public Defender, the Circuit Clerk, and the Treasurer’s office, Monthly check register for September 2021, and Funds Summary report for September 2021 including revenue and expenses.
Mr. Zanger made a motion to receive and file the monthly reports with the appropriate committees.
Mr. Hinkamper seconded the motion.
Motion to receive and file the monthly reports with the appropriate committee adopted.

- 3) Appointments-
 - a. Robert Shafer to the Adams County Sheriff’s Office Merit Commission. Term to expire December 31, 2021. (Attachment E-1)
Mr. Obert made a motion to approve the resolution.

Mr. Brady seconded the motion.
The appointment was approved.

Correspondence

- a. Ameren Tree Trimming (Attachment F-1)
- b. Department of Corrections (Attachment F-2)
Mr. Zanger moved to receive and file the correspondence with the appropriate committee.
Mr. Hinkamper seconded the motion.
Motion to receive and file the correspondence with the appropriate committee adopted.

The October 12th, 2021 meeting was recessed until Tuesday, November 9th, 2021.



ADAMS COUNTY

ADAMS COUNTY BOARD

Les Post, Chairman

507 Vermont Street
Quincy, IL 62301

RECEIVED

OCT 07 2021

ADAMS COUNTY CLERK

SPECIAL ONE DAY PERMIT REQUEST

FOR THE SALE AT RETAIL OF ALCOHOLIC BEVERAGES

County of Adams

State of Illinois

Request in the Name of: Grove Inn Inc. (Ashley Mettemeyer)

Event name (if different): Wedding Reception

Location of Event: Machinist Lodge

Address: 2929 North 5th

Quincy, IL

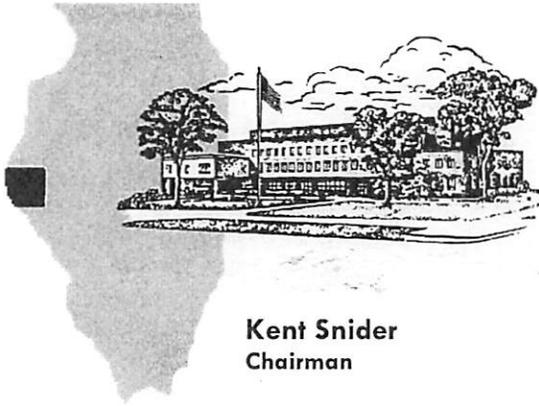
Date of Event: October 16th 2021

Hours License to be in effect: 3:00AM - 1:00AM

Ashley Mettemeyer
Applicant

10/7/21
Date

THE PERMIT IS NOT TRANSFERABLE. POST THE PERMIT IN A CONSPICUOUS PLACE



**COUNTY BOARD
COUNTY OF ADAMS Quincy, Illinois**

**Kent Snider
Chairman**

**SPECIAL ONE DAY PERMIT
FOR THE SALE AT RETAIL OF ALCOHOLIC BEVERAGES**

County of Adams, State of Illinois

This is to certify that the Grove Inn, INC. is hereby permitted to sell at retail, alcoholic liquors in the said County in the State aforesaid, with the permit issued to the following:

**MACHINIST LODGE
2929 NORTH 5TH
QUINCY, IL. 62301**

**OCTOBER 16, 2021
3:00PM until 1:00AM**

This permit is good for October 16, 2021 only from 3:00PM (CST) through 1:00AM (CST).

Witness my hand and seal this 12th day of OCTOBER, 2021.



COUNTY LIQUOR CONTROL COMMISSIONER

ATTEST:

COUNTY CLERK

THIS PERMIT IS NOT TRANSFERABLE. POST THIS PERMIT IN A CONSPICUOUS PLACE

**INTERGOVERNMENTAL AGREEMENT
BETWEEN
THE ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES
AND
THE COUNTY OF ADAMS
2021-2021**

The Illinois Department of Healthcare and Family Services (the "Department" or "HFS") and COUNTY OF ADAMS, (Local Government) pursuant to the Intergovernmental Cooperation Act, 5 ILCS 220/1 *et seq.* (the "IGA Act"), hereby enter into this Intergovernmental Agreement (the "Agreement") in connection with supplemental ambulance rates. HFS and the Local Government are collectively referred to herein as "Parties" or individually as a "Party."

**ARTICLE I
INTRODUCTION**

1.01 Background. Article XII of the Illinois Public Aid Code, 305 ILCS 5/5 *et seq.* (the "Public Aid Code"), authorizes the Department to make use of, aid and co-operate with State and local governmental agencies, and the IGA Act provides for cooperation between units of government. Local Government operates an emergency ambulance service (Provider) that is enrolled in the Medical Programs (as defined below) and provides Covered Ambulance Services (as defined below) to individuals eligible for benefits under the Medical Programs (as defined below); however, the costs of providing the referenced services is not covered by the fee schedule pursuant to which the Department and its agents pay for such services.

1.02 Purpose. In order to provide greater cost coverage to Provider for Covered Ambulance Services, the Parties enter into this Agreement.

1.03 Definitions

- (a) Agent means Managed Care Organizations and Administrative Services Organizations.
- (b) ALS means Advanced Life Support billed under CPT Code A0427.
- (c) BLS means Basic Life Support billed under CPT Code A0429.
- (d) Base Rate means the fee-schedule rate for Provider on the Department's rate sheet for the Provider as of September 30, 2021.
- (e) Covered Ambulance Services or Services means all ALS and BLS emergency ground ambulance services trips reimbursable under the Illinois Medicaid state plan, provided to beneficiaries of Medical Programs, and does not include mileage or oxygen.
- (f) Interim Rate means the payments to Provider for Covered Ambulance Services in addition to the Base Rate and calculated pursuant to Article III.
- (g) Medical Programs means programs administered by the Department under the Public Aid Code, the Children's Health Insurance Program Act (215 ILCS 106/1 *et seq.*) and the Covering All Kids Health Insurance Act (215 ILCS 170/1 *et seq.*).
- (h) Quarterly Invoice means an itemized statement provided to the Local Government by the Department regarding the agreed upon transfer amount pursuant to Article II.
- (i) Rate Year means calendar year.

ARTICLE II

INTERGOVERNMENTAL AGREEMENT

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INTERGOVERNMENTAL TRANSFER

2.01 Local Government will transfer to the Department on a quarterly basis an amount equal to 50% of the total Interim Rates, as described in Article III, received by Provider from the Department and its agents for the prior quarter.

2.02 The Department will send a Quarterly Invoice to Local Government for the transfer of 50% of the supplemental payments described in Article III and transfer shall be made within 30 days after the receipt of the Quarterly Invoice by the Local Government.

**ARTICLE III
INTERIM RATES FOR SERVICES**

3.01 Calculation. The Interim Rate will be determined as follows:

- (a) Department will calculate, using data from each Provider's most recent timely filed approved cost report, Provider's total costs for Covered Ambulance Services.
- (b) Using data from the cost report and the Department's data on Medicaid paid claims for covered ambulance services and provider's charges for those services, the Department will calculate an interim rate for ALS and BLS services that covers the cost above the Base rate for those services.

3.02 Reimbursement. The Department shall pay or cause its agents to pay Interim Rates to Provider for Covered Ambulance Services pursuant to this Article III in addition to payments made at the Provider's Base Rate. The Interim and Base Rates will be added together during claims processing and paid as a single rate.

3.03 Cost Reports. The Department will annually notify Provider of the cost report template to be used and provide instructions and a due date for submission in order for Provider to be eligible for an Interim Rate the next Rate Year.

3.04 Reconciliation. Once the Department has a cost report covering a Rate Year in which Provider received an Interim Rate, it will calculate the actual cost per trip during the Rate Year and determine whether the Interim Rate underpaid or overpaid Provider for the cost of the Services. If Provider was underpaid, the Department will make a further payment to cover costs. If Provider was overpaid, the Department will notify Provider of the net amount due to the Department, taking into account amounts already transferred to the Department pursuant to Article II.

**ARTICLE IV
TERM**

4.01 Term. This Agreement shall commence January 1, 2022, provided Provider's Cost Report was received by the Department on or before October 1, 2021, and shall continue in subsequent years provided all program requirements are met until otherwise terminated by the Parties.

**ARTICLE V
TERMINATION**

5.01 Termination on Notice. This Agreement may be terminated by either Party for any or no reason upon thirty (30) days' prior written notice to the other Party.

INTERGOVERNMENTAL AGREEMENT

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5.02 Termination for Cause. In the event either Party breaches this Agreement and fails to cure such breach within ten (10) days' written notice thereof from the non-breaching Party, the non-breaching Party may terminate this Agreement upon written notice to the breaching Party.

5.03 Availability of Appropriation; Sufficiency of Funds. This Agreement is contingent upon and subject to the availability of sufficient funds. The Department may terminate or suspend this Agreement, in whole or in part, without advance notice and without penalty or further payment being required, if (i) sufficient funds for this Agreement have not been appropriated or otherwise made available to the Department by the State or the Federal funding source, (ii) the Governor or the Department reserves funds, or (iii) the Governor or the Department determines that funds will not or may not be available for payment. The Department shall provide notice, in writing, to Provider of any such funding failure and its election to terminate or suspend this Agreement as soon as practicable. Any suspension or termination pursuant to this Section will be effective upon the date of the written notice unless otherwise indicated.

**ARTICLE VI
MISCELLANEOUS**

6.01 Renewal. This Agreement may be renewed for additional periods by mutual consent of the Parties, expressed in writing and signed by the Parties.

6.02 Amendments. This Agreement may be modified or amended at any time during its term by mutual consent of the Parties, expressed in writing and signed by the Parties.

6.03 Applicable Law and Severability. This Agreement shall be governed in all respects by the laws of the State of Illinois. If any provision of this Agreement shall be held or deemed to be or shall in fact be inoperative or unenforceable as applied in any particular case in any jurisdiction or jurisdictions or in all cases because it conflicts with any other provision or provisions hereof or any constitution, statute, ordinance, rule of law or public policy, or for any reason, such circumstance shall not have the effect of rendering any other provision or provisions contained herein invalid, inoperative or unenforceable to any extent whatsoever. The invalidity of any one or more phrases, sentences, clauses, or sections contained in this Agreement shall not affect the remaining portions of this Agreement or any part thereof. In the event that this Agreement is determined to be invalid by a court of competent jurisdiction, it shall be terminated immediately.

6.04 Records Retention. The Parties shall maintain for a minimum of six (6) years from the later of the date of final payment under this Agreement, or the expiration of this Agreement, adequate books, records and supporting documents to comply with the Illinois State Records Act. If an audit, litigation or other action involving the records is begun before the end of the six-year period, the records shall be retained until all issues arising out of the action are resolved.

6.05 No Personal Liability. No member, official, director, employee or agent of either Party shall be individually or personally liable in connection with this Agreement.

6.06 Assignment; Binding Effect. This Agreement, or any portion thereof, shall not be assigned by any of the Parties without the prior written consent of the other Parties. This Agreement shall inure to the benefit of and shall be binding upon the Parties and their respective successors and permitted assigns.

INTERGOVERNMENTAL AGREEMENT

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6.07 Precedence. In the event there is a conflict between this Agreement and any of the exhibits hereto, this Agreement shall control. In the event there is a conflict between this Agreement and relevant statute(s) or Administrative Rule(s), the relevant statute(s) or rule(s) shall control.

6.08 Entire Agreement. This Agreement constitutes the entire agreement between the Parties; no promises, terms, or conditions not recited, incorporated or referenced herein, including prior agreements or oral discussions, shall be binding upon either Party.

6.09 Notices. All written notices, requests and communications may be made by electronic mail to the e-mail addresses set forth below.

To HFS: Mary.Doran@illinois.gov

Kiran.Mehta@illinois.gov

To Local Government: COUNTY OF ADAMS

6.10 Headings. Section and other headings contained in this Agreement are for reference purposes only and are not intended to describe, interpret, define or limit the scope, extent or intent of this Agreement or any provision hereof.

6.11 Counterparts. This Agreement may be executed in one or more counterparts, each of which shall be considered to be one and the same agreement, binding on all Parties hereto, notwithstanding that all Parties are not signatories to the same counterpart. Duplicated signatures, signatures transmitted via facsimile, or signatures contained in a Portable Document Format (PDF) document shall be deemed original for all purposes.

INTERGOVERNMENTAL AGREEMENT

IN WITNESS WHEREOF, the Parties hereto have caused this Agreement to be executed by their duly authorized representatives.

LOCAL GOVERNMENT



SIGNATURE _____

[Handwritten Signature]

NAME: R.KENT SNIDER _____

TITLE: CHAIRMAN OF THE BOARD _____

DATE: 10-12-2021 _____

ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

THERESA EAGLESON
DIRECTOR

DATE: _____

10-21-001

RESOLUTION

0821012L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-2-0895-000-00

As described in certificate(s) : 2017-0186 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Clear Vision LLC, has bid \$5,420.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$3,979.50 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$32.25 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$5,420.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$3,979.50 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST:

CLERK

COUNTY BOARD CHAIRMAN



SALE TO NEW OWNER

10-21-001

10-21-002

RESOLUTION

0821013L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-2-1028-000-00

As described in certificates(s) : 2017-0190 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Clear Vision LLC, has bid \$4,819.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$3,514.95 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$46.05 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$4,819.00.

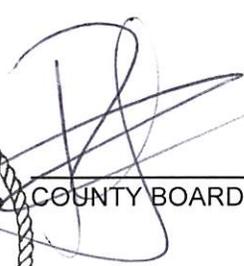
WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$3,514.95 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST:

CLERK


COUNTY BOARD CHAIRMAN


SALE TO NEW OWNER

10-21-002

10-21-003

RESOLUTION

0821019L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-4-0902-000-00

As described in certificates(s) : 2017-0244 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Clear Vision LLC, has bid \$3,519.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$2,539.95 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$46.05 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$3,519.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$2,539.95 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST:

CLERK



COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER

10-21-003

10-21-004

RESOLUTION

0821020L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-4-1100-000-00

As described in certificates(s) : 2017-0251 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Victoria Dameron, has bid \$2,567.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$1,846.65 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$25.35 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$2,567.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$1,846.65 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST:

[Handwritten signature]
CLERK



[Handwritten signature]
COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER

10-21-004

10-21-005

RESOLUTION

0821021L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-4-1147-000-00

As described in certificate(s) : 2010-00296 sold October 2011

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Todd Eyler, has bid \$975.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$441.17 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$12.83 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$975.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

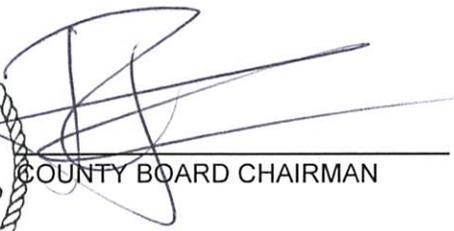
BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$441.17 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST: 

CLERK




COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER

10-21-005

10-21-006

RESOLUTION

0821024L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-4-1398-000-00

As described in certificate(s) : 2017-0266 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Shanekia Scott, has bid \$821.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$274.65 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$25.35 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$821.00.

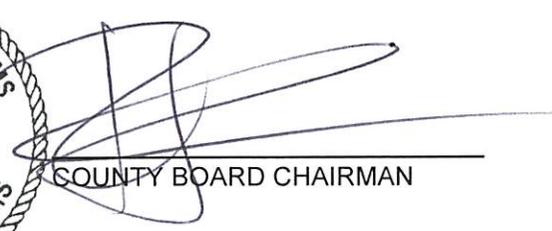
WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$274.65 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST: 
CLERK




COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER

10-21-006

10-21-007

RESOLUTION

0821029L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-5-0745-000-00

As described in certificate(s) : 2017-0295 sold October 2018

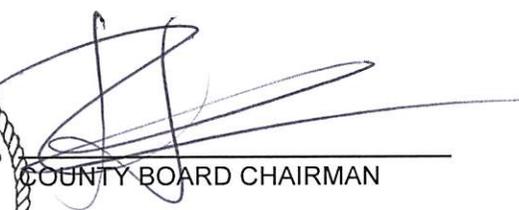
and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Clear Vision LLC, has bid \$4,923.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$3,606.75 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$32.25 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$4,923.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$3,606.75 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST:  CLERK  COUNTY BOARD CHAIRMAN 

SALE TO NEW OWNER

10-21-007

10-21-008

RESOLUTION

0821032L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-5-0908-000-00

As described in certificate(s) : 2017-0301 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Clear Vision LLC, has bid \$5,200.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$3,800.70 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$46.05 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$5,200.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$3,800.70 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST: 
CLERK




COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER

10-21-008

10-21-009

RESOLUTION

0821034L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-5-1002-000-00

As described in certificates(s) : 2017-0305 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, Clear Vision LLC, has bid \$4,720.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$3,426.90 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$59.85 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$4,720.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$3,426.90 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST:

CLERK



COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER

10-21-009

10-21-010

RESOLUTION

0821036L



WHEREAS, The County of Adams, as Trustee for the Taxing Districts therein, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Adams, as Trustee for the Taxing Districts therein, has acquired an interest in the following described real estate:

QUINCY TOWNSHIP

PERMANENT PARCEL NUMBER: 23-5-1339-000-00

As described in certificate(s) : 2017-0312 sold October 2018

and it appearing to the Finance Committee that it is in the best interest of the County to dispose of its interest in said property.

WHEREAS, US Property Holdings LLC, has bid \$1,722.00 for the County's interest, such bid having been presented to the Finance Committee at the same time it having been determined by the Finance Committee and the Agent for the County, that the County shall receive from such bid \$1,175.65 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s), the Tax Redemption Revolving Fund shall receive \$25.35 to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$71.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$1,722.00.

WHEREAS, your Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, that the Chairman of the Board of Adams County, Illinois, be hereby authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$1,175.65 to be paid to the Treasurer of Adams County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this 12 day of October, 2021

ATTEST:

[Handwritten signature]
CLERK



[Handwritten signature]
COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER

10-21-010

**TRANSFER OF BUDGET APPROPRIATION
FY 2020/2021**

Name of Department Head requesting budget change: Anthony Foster, Director Court Services

Title

WHEREAS, The County Board of Adams County, Illinois, has adopted an Annual Budget for the Fiscal period beginning December 1, 2020, and ending November 30, 2021, and

WHEREAS, it now appears desirable and necessary that certain adjustments be made between Appropriation items in the General Fund in said Annual Appropriation Ordinance,

NOW THEREFORE BE IT RESOLVED by the County Board of Adams County, Illinois, that the amounts herein below set forth be and are hereby transferred from the unexpended balance of certain appropriation items in the General Fund, as contained in said Budget and Appropriation Items within the same Fund, as follows:

| AMOUNT | FROM OR TO | APPROPRIATION NUMBER | LINE ITEM DESCRIPTION | REVISED BUDGET |
|---------|------------|----------------------|------------------------------------|----------------|
| \$6,000 | FROM | 001-001-5999 | County Administration: Contingency | \$59,846.67 |
| \$6,000 | TO | 001-321-5506 | Building Maintenance | \$27,500 |
| | TO | | | |
| | FROM | | | |
| | TO | | | |

The Revised Appropriation as herein above set forth shall be in full force and effect from and after this date.

ADOPTED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, THIS

12 DAY OF October, 2021



Chairman of the Board

[Handwritten signature in blue ink]

**TRANSFER OF BUDGET APPROPRIATION
FY 2020/2021**

Name of Department Head requesting budget change: Anthony Foster Director Court Service
Title

WHEREAS, The County Board of Adams County, Illinois, has adopted an Annual Budget for the Fiscal period beginning December 1, 2020, and ending November 30, 2021, and

WHEREAS, it now appears desirable and necessary that certain adjustments be made between Appropriation items in the General Fund in said Annual Appropriation Ordinance,

NOW THEREFORE BE IT RESOLVED by the County Board of Adams County, Illinois, that the amounts herein below set forth be and are hereby transferred from the unexpended balance of certain appropriation items in the General Fund, as contained in said Budget and Appropriation Items within the same Fund, as follows:

| AMOUNT | FROM OR TO | APPROPRIATION NUMBER | LINE ITEM DESCRIPTION | REVISED BUDGET |
|----------|------------|----------------------|-------------------------------|----------------|
| \$20,000 | FROM | | | \$6,335,000 |
| | | 005-001-5713 | American Rescue Plan Expenses | |
| \$20,000 | TO | | | \$20,000 |
| | | 055-001-5905 | A.C.E Program Expenses | |
| | TO | | | |
| | FROM | | | |
| | TO | | | |

The Revised Appropriation as herein above set forth shall be in full force and effect from and after this date.

ADOPTED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, THIS
12 DAY OF October, 2021



[Handwritten Signature]
Chairman of the Board

[Handwritten Signature]
County Clerk

**TRANSFER OF BUDGET APPROPRIATION
FY 2020/2021**

Requested by: Ryan Niekamp County Board Office
 Name Dept./Title

WHEREAS, The County Board of Adams County, Illinois, has adopted an Annual Budget for the Fiscal Year beginning December 1, 2020 and ending November 30, 2021, and

WHEREAS, it now appears desirable and necessary that certain adjustments be made between Appropriation items in the said Fund in said Annual Appropriation Ordinance,

NOW THEREFORE BE IT RESOLVED, by the County Board of Adams County, Illinois, that the amounts herein below set forth be and are hereby transferred from the unexpended balance of certain appropriation items in the said Fund, as contained in said Budget and Appropriation Items within the same Fund, as follows:

| AMOUNT | | APPROPRIATION NUMBER | LINE ITEM DESCRIPTION | REVISED BUDGET |
|--------------------|------|----------------------|--------------------------------------|---------------------|
| <u>\$ 8,500.00</u> | From | <u>001-001-5105</u> | <u>Salary - County Administrator</u> | <u>\$ 59,500.00</u> |
| <u>\$ 7,000.00</u> | To | <u>001-001-5110</u> | <u>Salary - Office Staff</u> | <u>\$ 86,531.00</u> |
| <u>\$ 1,500.00</u> | From | <u>001-001-5650</u> | <u>Office Supplies</u> | <u>\$ 6,500.00</u> |
| | To | | | |
| | From | | | |
| | To | | | |

The Revised Appropriation as herein above set forth shall be in full force and effect from and after this date.

ADOPTED BY THE COUNTY BOARD OF ADAMS COUNTY, ILLINOIS, THIS

12 DAY OF October, 2021



[Signature]
 Chairman, Adams County Board

[Signature]
 County Clerk

RESOLUTION NO. 2021-10-311-021**RESOLUTION TO SUPPORT UNEMPLOYED ESSENTIAL WORKPLACE SKILLS THROUGH ADAMS COUNTY EMPOWERED (A.C.E)**

WHEREAS, The American Rescue Plan Act provides for State And Local Fiscal Recovery Funds, a definition which includes Adams County, Illinois and authorizes \$12,709,982 in total funds for Adams County, the first half of which has been received and is under deposit, and

WHEREAS, many individuals lost employment or were unable to obtain employment due to the COVID-19 pandemic and/or resulting recession; and

WHEREAS, the Adams County Probation Department has developed the Adams County Empowered (“ACE”) Program, designed to target the underserved population of individuals presently on probation, and provide them with workplace skills and training essential to secure employment; and

WHEREAS, the American Rescue Plan Act (ARPA), 42 U.S.C. 802 *et seq.*, established the Coronavirus Local Fiscal Recovery Fund giving local governments resources to respond to the impacts of COVID-19, eligible uses of which include assisting unemployed workers with job training for employment, both those who became unemployed due to the COVID-19 pandemic or were already unemployed and remained so due to its negative economic impacts; and

WHEREAS, the Treasury Department’s Interim Final Rule, 31 C.F.R. Part 35, gives additional guidance on eligible uses of these funds, which include services like job training for unemployed workers to accelerate their hiring.

NOW THEREFORE, the Adams County Board hereby ordains the following:

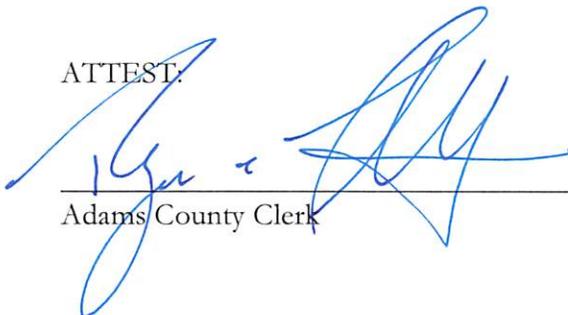
1. The Adams County Board authorizes the use of \$50,000.00 of the current balance of American Rescue Plan Act, State And Local Fiscal Recovery funds to establish and operate the Adams County Empowered (“ACE”) Program; and
2. The Adams County Board has assigned clear responsibilities for periodic reporting of progress on this project to the Adams County Board or its designated agent, Bellwether LLC.

Passed by the Board of Adams County this 12 day of October, 2021.



Adams County Chairman

ATTEST:



Adams County Clerk



RESOLUTION NO. 2021-10-001-022

RESOLUTION TO AID IN NEGATIVE ECONOMIC IMPACTS TO THE 2020 ADAMS COUNTY FAIR

WHEREAS, The American Rescue Plan Act provides for State And Local Fiscal Recovery Funds, a definition which includes Adams County, Illinois and authorizes \$12,709,982 in total funds for Adams County, the first half of which has been received and is under deposit, and

WHEREAS, tourism, travel and hospitality industries have suffered negative economic impacts of the COVID-19 public health emergency, including the loss of revenue from cancelled or postponed events; and

WHEREAS, the 2020 Adams County Fair and numerous other events held upon the Adams County Fairgrounds were cancelled due to the COVID-19 public health emergency, resulting in the loss of revenue from those events; and

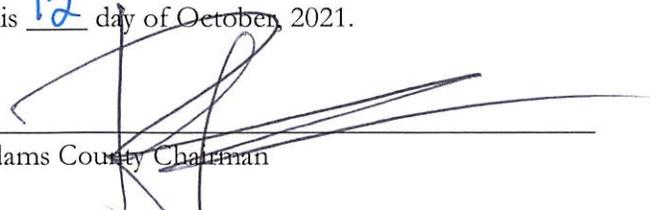
WHEREAS, the American Rescue Plan Act (ARPA), 42 U.S.C. 802 *et seq.*, established the Coronavirus Local Fiscal Recovery Fund giving local governments resources to respond to the impacts of COVID-19, eligible uses of which include assisting nonprofits and aiding impacted industries such as tourism, travel, and hospitality; and

WHEREAS, the Treasury Department’s Interim Final Rule, 31 C.F.R. Part 35, gives additional guidance on eligible uses of these funds, which include assisting tourism, travel, and hospitality industries in response to the negative economic impacts of COVID-19.

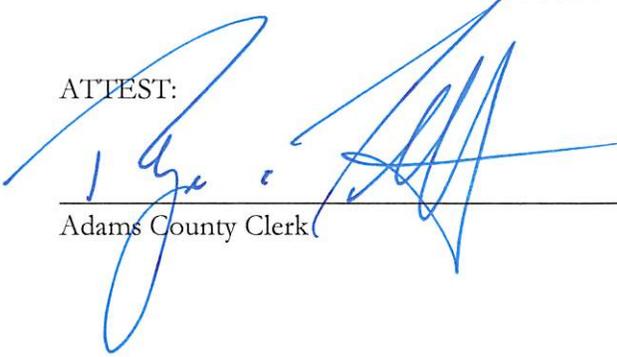
NOW THEREFORE, the Adams County Board hereby ordains the following:

1. The Adams County Board authorizes the use of \$177,000.00 of the current balance of American Rescue Plan Act, State And Local Fiscal Recovery funds to reimburse the Adams County Fairgrounds for revenue lost as a result of the COVID-19 public health emergency; and
2. The Adams County Board has assigned clear responsibilities for periodic reporting of progress on this project to the Adams County Board or its designated agent, Bellwether LLC.

Passed by the Board of Adams County this 12 day of October, 2021.



 Adams County Chairman

ATTEST:


 Adams County Clerk





Adams County Fair Association

PO Box 108 Mendon, IL 62351

Phone: 217-936-2230 Fax: 217-936-2343

www.adamsfair.org

adamsfair@adams.net

August 2, 2021

Adams County Board
507 Vermont Street
Quincy, IL. 62301

ARPA Adams County Fair Project Requests

Mr. Peters & Mr. Obert,

We appreciate your time and consideration meeting with board members a few weeks ago regarding potential for infrastructure improvement on the Adams County Fairgrounds. The fair continues to be an age-old symbol emphasizing the importance of agriculture across Adams County. Beginning in 1941 as a single day fall festival and livestock show, it has grown to a weeklong event attracting more than 50,000 people annually across the Tri-States. Programs highlight livestock shows, entertainment, 4-H programs, and the changing trends of agriculture in the county.

#1 – Revenue Shortfall

The Adams County Fair Association relies on sponsorships, donations, facility rentals, admission fees, and state grants to continue operating the annual fair. While unable to hold a fair in 2020, the anticipated revenue from that event and others routinely hosted resulted in a lost revenue of more than \$177,200.

Fair sponsorships and admissions - \$77,000

Facility Rentals - \$8,200

State Fair Grant - \$92,000

The annual fair operates generally with an estimated \$77,000 to fund infrastructure and improvements to the fairgrounds. This lost revenue is not anticipated to be recovered from any other source. Additionally, we have experienced lower crowds this year with the lingering affects from COVID-19.

The Fair Association routinely rents the facility for public and private events and during the past year, those events were cancelled resulting in \$8,200 in lost revenue. While some events will return in future years, others have re-located. The association did not withhold any deposits because circumstances were beyond their control.

Adams County Fair ARPA Proposal

The Adams County Fair Board is requesting ARPA funds for the following project:

30 ft. by 60 ft. stand-alone restroom facility with 10 stalls for the female facility and 4 stalls and 6 urinals for the men's facility.

| ITEMS | COST ESTIMATE |
|--|------------------|
| Water Line & Plumbing for New Restroom | \$70,000 |
| Septic System for New Restrooms | \$40,000 |
| Flat Concrete Restroom Work | \$15,000 |
| ICF Blocks for Restrooms | \$37,000 |
| Trusses | \$24,000 |
| Electric Work | \$10,000 |
| Insulation for Building | \$3,200 |
| Guttering | \$1,000 |
| Metal for Roof | \$7,000 |
| TOTAL | \$207,200 |



Adams County Sheriff's Office

535 Vermont Street Quincy, IL 62301

Phone (217) 277-2200

Fax (217) 277-2214

Rich Wagner, Sheriff

To: Adams County Board
Re: Merit Commission Reappointment
Date: 09-15-21

I would like to request that the Adams County Board appoint Robert (Bobby) Shafer to the Adams County Sheriff's Office Merit Commission. Mr. Shafer would replace Laura Oakman who resigned from the commission on September 1st, 2021. Laura Oakman's term was set to expire on December 31st, 2021.

Mr. Shafer brings lots of experience to the commission. He was born and raised in Quincy/Adams County Illinois. He has a Bachelor of Science degree from Western Illinois University in Law Enforcement Administration with a minor in Security. He served as an Auxiliary Police officer with the Quincy Police Department from October of 1990 to March of 1995. He was employed with the Adams County Sheriff's Office as a corrections officer from December 1994 to January of 1999 and finished out his service to Adams County working as a county probation officer from January 1999 to July 2017. He is currently employed by DCFS and has worked for them in various capacities since he retired from the county. He is a lifelong resident of Quincy and respected by members of the sheriff's office

I believe Mr. Shafer's life experiences will make him a great asset to the commission.

Please consider the appointment of Robert Shafer to fill the vacant commissioner position. If appointed his term would expire December 31st, 2021. Prior to this date I will request approval from the board to reappoint Mr. Shafer to a new 6-year term.

Sincerely,

Sheriff Rich Wagner

Ryan Niekamp

From: ILVegetationManagement <ILVegetationManagement@ameren.com>
Sent: Wednesday, September 22, 2021 1:11 PM
To: County Clerk
Subject: EXTERNAL:Notification of Future Tree Trimming
Attachments: Right Tree Right Place Flyer.pdf; Tree_Trimming_Forestry_Co19FDR04.txt; U41596 Adams County.docx

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



Dear County Official:

Crews working for Ameren Illinois will be trimming trees in and around your area in the near future. Our qualified line clearance trimmers will trim trees that could interfere with electric lines running from pole to pole. Our contractors are nationally recognized as professional arboricultural companies who meet American National Standards Institute (ANSI) pruning standards and pruning methods endorsed by the International Society of Arborists (ISA).

Attached are maps and common addresses of the areas affected. In addition to notifying you, Ameren Illinois will mail a notice to customers who may be affected by the distribution tree trimming work. We will also provide a public notice in local newspapers. To update or change your contact information, please contact us at ILVegetationManagement@Ameren.com.

We are committed to providing safe, reliable and affordable power to your community. Tree trimming helps us minimize the likelihood of power outages and safety hazards. Please visit MySafeTrees.com to learn more about our tree trimming program and tips for safely planting trees around power lines.

We recognize the importance of trees to your community, so we have established the *Right Tree, Right Place Grant Program* to help replace trees that must be removed for safety or reliability reasons. Please see the attached flyer for details.

Thank you for your patience while work is underway. If you have any questions about the upcoming distribution tree trimming work, please call **1.800.755.5000**, or visit our website at MySafeTrees.com. Should you or any of your constituents have further questions, the Consumer Services Division of the Illinois Commerce Commission may be reached at **1.800.524.0795**.

Sincerely,

Ameren Illinois
 Vegetation Management
 3490 Rupp Parkway
 Decatur, IL 62526

For more information, access your online account at AmerenIllinois.com.

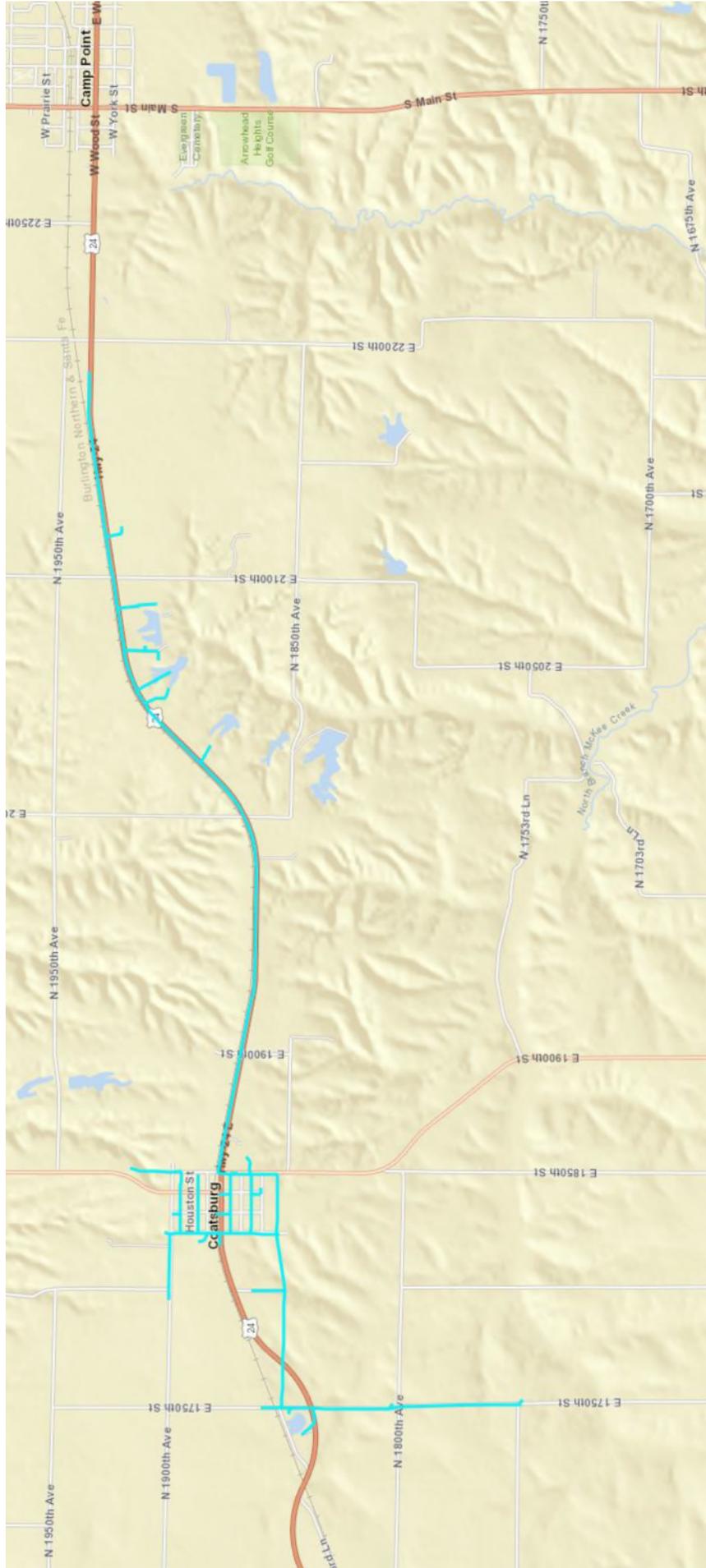
E9016

This communication and any attachments may be privileged and/or confidential and protected from disclosure, and are otherwise the exclusive property of Ameren Corporation and its affiliates (Ameren) or the intended recipient. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Note that any views or opinions presented in this message do not necessarily represent those of Ameren. All e-mails are subject to Ameren policies. If you have received this in error, please notify the sender immediately by replying to the message and deleting the material from any computer.



FOCUSED ENERGY. For life.

Circuit: U41596 County: Adams





APPLY FOR A RIGHT TREE RIGHT PLACE
GRANT AT **AMERENILLINOIS.COM/GRANTS.**

AMEREN ILLINOIS OFFERS THE RIGHT TREE, RIGHT PLACE GRANT PROGRAM TO PROMOTE A PARTNERSHIP APPROACH TO VEGETATION MANAGEMENT WITH THE MUNICIPALITIES WE SERVE.

As part of this program, we work with municipal leaders to identify trees which may be better suited for removal rather than continual trimming. This grant program provides municipalities with funds to replace removed trees or promote the principles of the Arbor Day Foundation's Tree City USA Program. Communities will be awarded \$125 for each eligible removed tree.

1. Work with your Ameren Illinois Forestry Supervisor to identify trees eligible for removal by Ameren Illinois.
2. Submit your application online at **AmerenIllinois.com/Grants.**



WHAT IS A “HAZARD TREE?”

Ameren Illinois employs vegetation management techniques which are designed to promote tree health and protect our electric delivery system. Part of our vegetation management plan includes working with municipalities to identify hazard trees which are candidates for removal. A hazard tree is a dead, dying or otherwise unstable tree that is threatening the power lines and must be addressed on a case-by-case basis. This includes trees that are well below the power lines, yet could cause future interference as they grow. If trimmed away from the power lines, these trees will still need continual maintenance trimming every few years. These trees are targets for removal.

VEGETATION MANAGEMENT BASICS

1. Trees growing up toward the power lines are targets for removal. Even trees that are well below the power lines should be removed to prevent future interference. Stumps will not be ground out.
2. We will coordinate tree removal with the city.
3. City is responsible for removal of debris.

GRANT PROGRAM BASICS

1. Only trees growing in public rights-of-way and having the potential to interfere with overhead lines are eligible for the grant program.
2. Trees must be identified before removal and approved as eligible by your local Ameren Illinois Forestry Supervisor.
3. \$125 will be awarded for each eligible tree removed, up to \$2,500.
4. Communities may use the funds in a manner consistent with the Right Tree, Right Place principles. Some examples include:
 - » Planting new trees outside of the right-of-way
 - » Planting approved replacement trees inside the right of way (work with your Ameren Illinois Forestry Supervisor)
 - » Developing a community-wide tree management plan
 - » Maintenance of existing trees
 - » Obtaining Tree City USA certification
5. Communities may apply more than once per year, but the maximum annual grant award will be \$2,500.
6. Only government entities (villages, towns, townships, and counties) are eligible to apply.
7. Community members must receive electric delivery service from Ameren Illinois.

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|---------------------|---------------|----------------|----|
| FDR:QCY-U41596-12KV | | | |
| 1639 HIGHWAY 24 | , | , PALOMA | IL |
| 62359 | | | |
| 2080 HIGHWAY 24 | , | , CAMP POINT | IL |
| 62320 | | | |
| 1826 E 2453RD LN | , | , CAMP POINT | IL |
| 62320 | | | |
| PO BOX 468 | , | , CAMP POINT | IL |
| 62320 | | | |
| 305 QUINCY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 5435 GLENCRIE DR | , | , QUINCY | IL |
| 62305 | | | |
| C/O PROKARMA BSF112 | , PO BOX 2410 | , OMAHA | NE |
| 68103 | | | |
| 1893 N 1950TH AVE | , | , COATSBURG | IL |
| 62325 | | | |
| 1911 E 2100TH ST | , | , CAMP POINT | IL |
| 62320 | | | |
| 401 LIBERTY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 218 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 105 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 100 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 218 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 305 COLUMBUS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 904 FOURNIE LN | , | , COLLINSVILLE | IL |
| 62234 | | | |
| 101 MENDON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1893 E 2000TH ST | , | , CAMP POINT | IL |
| 62320 | | | |
| 1843 E 1750TH ST | , | , COATSBURG | IL |
| 62325 | | | |
| 109 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1845 E 1750TH ST | , | , COATSBURG | IL |
| 62325 | | | |
| 326 W MILL ST | , | , MENDON | IL |
| 62351 | | | |
| 1119 N 9TH ST | , | , QUINCY | IL |
| 62301 | | | |
| 97 SHAWNEE DR | , | , CAMP POINT | IL |
| 62320 | | | |
| 205 S MAIN ST | , | , COATSBURG | IL |

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| 62325 | | | |
| 114 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 200 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 2066 HIGHWAY 24 | , | , CAMP POINT | IL |
| 62320 | | | |
| C/O CAMP POINT TIRE | , 2118 HIGHWAY 24 | , CAMP POINT | IL |
| 62320 | | | |
| 1804 E 1900TH ST | , | , COATSBURG | IL |
| 62325 | | | |
| C/O PROKARMA BSF112 | , PO BOX 2410 | , OMAHA | NE |
| 68103 | | | |
| 204 LIBERTY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 407 KEENE ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1961 E 1800TH ST | , | , COATSBURG | IL |
| 62325 | | | |
| 305 QUINCY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1866 E 1800TH PL | , | , COATSBURG | IL |
| 62325 | | | |
| 2034 HIGHWAY 24 | , | , CAMP POINT | IL |
| 62320 | | | |
| 1737 HIGHWAY 24 | , | , COATSBURG | IL |
| 62325 | | | |
| 34330 376TH AVE | , | , BAYLIS | IL |
| 62314 | | | |
| 216 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1862 HIGHWAY 24 | , | , COATSBURG | IL |
| 62325 | | | |
| 119 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| C/O JERELYN DOUGLAS | , 312 PARKVIEW DR | , CAMP POINT | IL |
| 62320 | | | |
| 309 S MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| C/O PROKARMA BSF112 | , PO BOX 2410 | , OMAHA | NE |
| 68103 | | | |
| 221 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 405 KEENE ST | , | , COATSBURG | IL |
| 62325 | | | |
| PO BOX 231 | , | , MT STERLING | IL |
| 62353 | | | |
| 101 LIBERTY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 305 KEENE ST | , | , COATSBURG | IL |

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| 62325 | | | |
| 316 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 301 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 200 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| C/O JERELYN DOUGLAS | , 312 PARKVIEW DR | , CAMP POINT | IL |
| 62320 | | | |
| 208 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 315 KEENE ST | , | , COATSBURG | IL |
| 62325 | | | |
| 201 COLUMBUS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 2068 HIGHWAY 24 | , | , CAMP POINT | IL |
| 62320 | | | |
| 201 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 208 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 301 S MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| WILLIAM BINGER | , C/O PATRICK BINGER | , MENDON | IL |
| 62351 | | | |
| C/O PROKARMA BSF112 | , PO BOX 2410 | , OMAHA | NE |
| 68103 | | | |
| 117 S MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1740 HIGHWAY 24 | , | , COATSBURG | IL |
| 62325 | | | |
| 1893 N 2100TH AVE | , | , COATSBURG | IL |
| 62325 | | | |
| 120 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| C/O PROKARMA BSF112 | , PO BOX 2410 | , OMAHA | NE |
| 68103 | | | |
| 209 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 2114 HIGHWAY 24 | , | , CAMP POINT | IL |
| 62320 | | | |
| 209 MENDON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 100 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 109 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 2072 HIGHWAY 24 | , | , CAMP POINT | IL |
| 62320 | | | |
| ENGIE INSIGHT | , MS 5443 | , SPOKANE | WA |

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| 99210 | | | |
| 1741 HIGHWAY 24 | , | , COATSBURG | IL |
| 62325 | | | |
| C/O JANET WILKEY | ,107 JEFFERSON ST | , COATSBURG | IL |
| 62325 | | | |
| 1922 E 1850TH ST | , | , COATSBURG | IL |
| 62325 | | | |
| 124 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 114 LIBERTY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 320 MENDON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 204 LIBERTY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 202 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| PO BOX 217 | , | , GOLDEN | IL |
| 62339 | | | |
| 121 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 302 QUINCY ST | , | , COATSBURG | IL |
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| 205 HOUSTON ST | , | , COATSBURG | IL |
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| 301 QUINCY ST | , | , COATSBURG | IL |
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| 300 HOUSTON ST | , | , COATSBURG | IL |
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| 101 KEENE ST | , | , COATSBURG | IL |
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| 1826 E 2453RD LN | , | , CAMP POINT | IL |
| 62320 | | | |
| 201 QUINCY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 2453 N 2050TH AVE | , | , CAMP POINT | IL |
| 62320 | | | |
| SEWER TREATMENT PLANT | ,1639 HIGHWAY 24 | , PALOMA | IL |
| 62359 | | | |
| 312 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1741 HIGHWAY 24 | , | , COATSBURG | IL |
| 62325 | | | |
| 233 S MAIN ST | , | , COATSBURG | IL |
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| 107 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 308 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1847 E 1750TH ST | , | , COATSBURG | IL |

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| 62325 | | | |
| 2070 HIGHWAY 24 | , | , CAMP POINT | IL |
| 62320 | | | |
| 1214 SPRING LAKE CORS | , | , QUINCY | IL |
| 62305 | | | |
| 100 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 823 S 36TH ST APT 141 | , | , QUINCY | IL |
| 62301 | | | |
| 324 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 320 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 100 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1913 E 2100TH ST | , | , CAMP POINT | IL |
| 62320 | | | |
| 501 QUINCY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 406 KEENE ST | , | , COATSBURG | IL |
| 62325 | | | |
| 321 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 122 N MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 213 MENDON ST | , | , COATSBURG | IL |
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| 214 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 214 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 316 HOUSTON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1806 HIGHWAY 24 | , | , COATSBURG | IL |
| 62325 | | | |
| 108 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 405 KEENE ST | , | , COATSBURG | IL |
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| 207 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 100 E MENDON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 214 E MARION ST | , | , CLAYTON | IL |
| 62324 | | | |
| 312 LIBERTY ST | , | , COATSBURG | IL |
| 62325 | | | |
| 209 ADAMS ST | , | , COATSBURG | IL |
| 62325 | | | |
| 313 HOUSTON ST | , | , COATSBURG | IL |

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|------------------|---|-------------|----|
| 62325 | | | |
| 323 JEFFERSON ST | , | , COATSBURG | IL |
| 62325 | | | |
| 213 S MAIN ST | , | , COATSBURG | IL |
| 62325 | | | |
| 1639 HIGHWAY 24 | , | , PALOMA | IL |
| 62359 | | | |
| 102 QUINCY ST | , | , COATSBURG | IL |
| 62325 | | | |

JB Pritzker
Governor



Rob Jeffreys
Director

The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

Sheriff Rich Wagner
Adams County Sheriff's Department
535 Vermont Street
Quincy, Illinois 62301

Chair Kent Snider
Adams County Board Chair
521 Vermont Street
Quincy, Illinois 62301

RECEIVED
SEP 22 2021
ADAMS COUNTY CLERK

730 ILCS 5/3-15-2 outlines the responsibility of the Illinois Department of Corrections, Jail and Detention Standards Unit to inspect county and municipal jails and identify noncompliance with established standards. This requirement is outlined in paragraph (b) of the statute and is included below.

As the Director I am required to give notice of noncompliance and ensure follow up inspections are completed six months after notice is given. This will allow for the county or municipality to take the steps necessary to correct noncompliance findings.

(b) At least once each year, the Department of Corrections may inspect each adult facility for compliance with the standards established and the results of such inspection shall be made available by the Department for public inspection. At least once each year, the Department of Juvenile Justice shall inspect each county juvenile detention and shelter care facility for compliance with the standards established, and the Department of Juvenile Justice shall make the results of such inspections available for public inspection. If any detention, shelter care or correctional facility does not comply with the standards established, the Director of Corrections or the Director of Juvenile Justice, as the case may be, shall give notice to the county board and the sheriff or the corporate authorities of the municipality, as the case may be, of such noncompliance, specifying the particular standards that have not been met by such facility. If the facility is not in compliance with such standards when six months have elapsed from the giving of such notice, the Director of Corrections or the Director of Juvenile Justice, as the case may be, may petition the appropriate court for an order requiring such facility to comply with the standards established by the Department or for other appropriate relief.

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

www.illinois.gov/idoc

Jail and Detention Standards Unit Inspector, Jennifer Delaney conducted Adams County's 2021, Jail and Detention Standards Unit Inspection on August 30, 2021. During that inspection the following issues of noncompliance was identified:

701.150 Safety

a) Pre-Planning

Each facility shall establish and maintain written procedures covering response to and drills for emergency situations, including, but not limited to, natural disasters and mass evacuation. Jail staff shall be trained on the procedures.

Periodic drills should be conducted and documented for staff training purposes.

b) Fire Protection

Each jail shall prepare and post a fire plan requiring simulated fire drills, use of equipment, evacuation procedures and other requirements of the Fire Marshal.

Emergency evacuation routes and fire extinguisher locations should be posted throughout the jail.

Pursuant to 730 ILCS 5/3-15-2 (b) I am notifying you of this finding of noncompliance.

Members of the Office of Jail & Detention Standards are available for consultation should you desire. You may contact the office at (217)558-2200 ext. 4212.

Sincerely,



Rob Jeffrey, Director
Illinois Department of Corrections
1301 Concordia Court
Springfield, IL 62794
217-558-2200



The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

ADAMS COUNTY JAIL 2021 INSPECTION REPORT

Criminal Justice Specialist, Jennifer Delaney, inspected the Adams County Jail on August 30, 2021. Interviews were conducted with Jail Administrators Sue Hester and Brian Curran, as well as various other county employees and contractual staff at the facility.

IMPROVEMENTS SINCE LAST INSPECTION

Increased the number of tablets for detainee use
Increased the number of phones for detainee use

NONCOMPLIANCES WITH ILLINOIS COUNTY JAIL STANDARDS

701.150 Safety

a) Pre-Planning

Each facility shall establish and maintain written procedures covering response to and drills for emergency situations, including, but not limited to, natural disasters and mass evacuation. Jail staff shall be trained on the procedures.

Periodic drills should be conducted and documented for staff training purposes.

b) Fire Protection

Each jail shall prepare and post a fire plan requiring simulated fire drills, use of equipment, evacuation procedures and other requirements of the Fire Marshal.

Emergency evacuation routes and fire extinguisher locations should be posted throughout the jail.

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

Recommendations

It is recommended that a complete review of personal property procedures be conducted and should include a printed copy of electronic property records, signed by both the jail staff member receiving and relinquishing property, as well as the detainee upon relinquishing or receiving property. Further, the assignment of a property officer, as needed, will help insure that the property room is kept clean, organized, and free of property that should be disposed of, picked up, or mailed within a set time period, as outlined by jail policy.

It is recommended that qualified mental health professional periodically review the mental health related questions on the intake medical prescreening instrument to determine if the questions are appropriate and address issues related to emergent mental health concerns.

It is recommended that options for toilet and sink availability in the dayroom areas be explored. These improvements could improve jail security and staff safety by limiting detainee access to individual detention rooms during certain periods.

Jennifer Delaney _____

Criminal Justice Specialist

ILLINOIS DEPARTMENT OF CORRECTIONS
 OFFICE OF JAIL AND DETENTION STANDARDS
County Jail Inspection Checklist

P.O. Box 19277
 Springfield, Illinois 62794-9277
 217-558-2200 ext. 4212
 Fax: 217-558-4004

August 30, 2021

Date of Inspection

Name of Facility: Adams County Jail **Phone Number:** 217-277-2200

Address: 537 Vermont Street

City/State: Quincy IL **Zip Code:** 62301

Sheriff: Rich Wagner **Phone Number:** 217-277-2200

Address: 535 Vermont Street

City/State: Quincy IL **Zip Code:** 62301

Chairman, County Board: Kent Snider

Address: 521 Vermont Street

City/State: Quincy IL **Zip Code:** 62301

Chief Judge: John Frank McCartney **Judicial Circuit:** 8th

Address: 521 Vermont Street

City/State: Quincy IL **Zip Code:** 62301

Resident Judge: Scott Larson

Address: 521 Vermont Street

City/State: Quincy IL **Zip Code:** 62301

Jail Superintendent: Sue Hester; Brian Curran

Officials and titles interviewed, other than above: Booking Officer, Emily Muering; Classification/Commissary Officer, Deana Coleman; Nurse, Jamie Springett; Kitchen Supervisor, Kendra Haynes

Date of construction: 2020 **Date of last renovation:** N/A

Capacity: Total: 194 Male: 146 Female: 48
 Juv. Male: 0 Juv. Female: 0

Inspection date pop.: Total: 143 Male: 128 Female: 15
 Juv. Male: 0 Juv. Female: 0

Number of cells: Single: 16 Double: 31 Other: Two 8-bed dorms

Number of detention rooms: Single: 0 Double: 0 Other: Seven 4-bed cells

Employees specifically assigned full-time jail duties: Male: 31 Female: 6

a. **Part-time jail officers:** Male: 0 Female: 0

b. **Non-jail staff persons performing jail duties:** Male: 0 Female: 0

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
County Jail Inspection Checklist

YES N/A NO

- | | | | |
|--|--------------------------|-------------------------------------|-------------------------------------|
| Has the jail been approved to hold detainees who are under 18 years of age? | <input type="checkbox"/> | | <input checked="" type="checkbox"/> |
| Has the jail held detainees who are under 18 years of age since the last inspection conducted on the jail? | <input type="checkbox"/> | | <input checked="" type="checkbox"/> |
| Were the detainees under 18 years of age held in the jail since the last inspection separated by sight and sound at all times from other jail detainees 18 years of age and older? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

701.10 ADMINISTRATION

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Are full-time jail officers trained in accordance with current law? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are jail officers trained in security and emergency procedures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is staff training documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has a written jail procedures manual been established? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are emergency procedures (evacuations, riots, escapes, control devices, medical emergencies including suicide prevention and crisis intervention, severe weather, natural disasters and bomb threats) part of the manual? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is a comprehensive duty description of each jail post available in writing and furnished to each employee performing the function? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are all jail records required by law maintained and available for examination? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is discrimination and harassment of employees and detainees prohibited? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Has a code of conduct for jail staff been established? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Does staff training include first aid, CPR and identification of signs and management of detainees with a mental illness or a developmental disability? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Do jail officers and other personnel assigned to correctional duties receive annual training conducted by or approved by mental health professionals on suicide prevention and mental health issues? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do jail officers that have contact with juvenile detainees receive additional training specific to juvenile issues within correctional settings, as approved by the Illinois Law Enforcement Training Standards Board? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.20 PERSONNEL

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Are sufficient personnel assigned to provide 24 hour supervision of detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has a jail administrator been appointed when the average daily population exceeds 25? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is the appointed Jail Administrator qualified by training and experience? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
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YES N/A NO

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 4. When each floor of detention has 15 or more detainees, is there one officer assigned to each floor? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is same gender supervision provided during periods of personal hygiene activities such as showering and toileting, when feasible? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do jail officers working in direct contact with detainees have a thorough knowledge of the personnel rules and emergency procedures of the jail which has been documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are jail officers thoroughly acquainted with all security features of the jail and the location and use of all emergency equipment and first aid supplies which has been documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are jail officers prohibited from recommending or furnishing advice concerning the retention of a specific lawyer? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Is a list of local lawyers made available? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701. 30 RECORDS

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are booking and personal records maintained for each detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the monthly jail population report forwarded to the Jail and Detention Standards Unit in a timely manner? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are extraordinary or unusual occurrences properly reported? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701. 40 ADMISSION PROCEDURES

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are Notices of Rights and Jail Rules conspicuously posted in all receiving rooms and common areas? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are detainees given an immediate pat down search? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do receiving jail officers determine the legality of confinement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is the identity of the person being detained verified? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are detainees fingerprinted and photographed in accordance with current law? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are seriously injured, seriously ill or unconscious persons given a medical examination by a licensed physician or a medical staff member prior to detainment? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are detainees strip searched? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the search conducted in privacy? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is the search conducted by a person of the same gender? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is personal clothing searched? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is probing of body cavities prohibited unless reasonable suspicion of contraband exists? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| a. Is the body cavity search conducted by medically trained personnel? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is the body cavity search conducted in a private location under sanitary conditions? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. When an item of personal property is taken from a detainee, including medication, is the item identified and described on a property receipt in the presence of the detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do property receipts contain the signatures of the admitting officer and the detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the original property receipt placed in the detainee's personal record and a duplicate given to the detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is personal property securely stored? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If personal property is released to a third party, is a written release containing the detainee's authorizing signature and signature of the receiving individual obtained and kept as part of the jail's records? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is there a policy for the disposal of abandoned property? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Are detainees allowed to make a reasonable number of completed telephone calls as soon as practicable? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are the dates and times of telephone calls made during the admission process documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Does the admitting officer observe detainees for any obvious injuries or illnesses requiring emergency medical care? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Does the admitting officer question detainees to determine if the detainee has any medical condition which requires medical attention? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the admitting officer question detainees regarding past treatment for mental disorders, mental illness, developmental disabilities or dual diagnosis? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Does the admitting officer question detainees regarding an imminent risk of self-harm by use of an approved screening instrument or history of medical illness? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Does the admitting officer question detainees to determine if the detainee is on medication? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Does the admitting officer question female detainees to determine if they are pregnant? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. When a detainee shows signs of or reports unusual physical or mental distress, is the detainee referred to health care personnel as soon as possible? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are all mental health screenings conducted either by an assessment of a mental health professional or by an assessment of a jail officer using an approved screening instrument for assessing mental health? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 17. Are detainees exhibiting psychiatric symptoms such as acute psychotic features, mood disturbances or who have a known psychiatric history evaluated by a mental health professional? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are detainees exhibiting suicidal behavior or ideations placed in a reasonable level of care that provides for their safety and stability? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Is any medication in a detainee's possession at the time of admission withheld until identification and verification of the proper use of the medication is obtained and documented by a licensed medical professional? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Does medical staff obtain verification of the proper use of medication in the detainee's possession at the time of admission as soon as possible, but no later than the time interval specified for the next administration of the medication as provided on the medication's prescription container? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Is a record established for each detainee at the time of admission and maintained for the duration of the period of confinement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the record contain the required information? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Is a medical record part of the detainee's personal record? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the medical record contain the health and physical condition, including treatment and medication administered to the detainee: | | | |
| (1) Upon admission? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) During confinement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (3) Upon release? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Is medication administered as prescribed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Does the record contain an itemized record of the detainee's cash and other valuables, expenditures and receipts while in custody? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. Is a record of authorized absences from the jail part of the detainee record? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26. Is a record of visitors' names and dates of visits maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 27. Is a record of each detainee's misconduct and any subsequent discipline administered maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28. Is a record of case disposition, judge and court maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29. Is immediate treatment initiated upon detection of body pests? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30. Are all detainees required to take an admitting shower? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. Are detainees assigned to suitable quarters? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. Are detainees issued clean bedding, a towel, necessary clothing and soap? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | YES | N/A | NO |
|--|-------------------------------------|--------------------------|--------------------------|
| a. Does bedding include a mattress cover? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are flame-retardant mattresses issued? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is bed covering appropriate to the season? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Is the towel made of cloth and of bath size? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 33. Are detainees permitted to purchase toothbrushes and dentifrice? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 34. Are detainees without funds issued such items by staff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 35. Are detainees held accountable for all jail property issued to them? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.50 ORIENTATION

| | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Is an orientation given to each detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does orientation include all required information? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is special assistance given to detainees as needed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.60 RELEASE PROCEDURES

| | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Is positive identification of each detainee made prior to discharge, transfer or release? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is a record made as to date, time and authority of each release of a detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is each detainee given a physical inspection and a record made of wounds or injuries? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees searched prior to release? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are all personal property items inventoried and returned to the detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is a written record retained that documents the name and amount of any maintenance medication released with a detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is a copy of the itemized and signed personal property receipt maintained by the jail as a permanent record? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are detainees delivered to the custody of the Illinois Department of Corrections in accordance with <i>Illinois Compiled Statutes</i> ? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

DISCHARGE OF MENTALLY ILL DETAINEES

| | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 9. When a mentally ill detainee is released, is the detainee given a listing of community mental health resource addresses and telephone numbers? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is the detainee provided with the opportunity to receive a copy of his/her jail's mental health, medical and medication records? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Does linkage and aftercare include a referral to a mental health provider, a prescription for medications or a two week supply of prescribed medications? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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YES N/A NO

701.70 CLASSIFICATION AND SEPARATION

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Is there a classification plan that specifies criteria and procedures for determining and changing the status of a detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are required segregation policies followed? | | | |
| a. Are female detainees separated by sight and sound from male detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are witnesses separated from detainees charged with an offense? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. When possible, are non-criminal detainees separated from criminal detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Are charged detainees segregated from convicted detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Are mentally ill, developmentally disabled, dually diagnosed or emotionally disturbed detainees housed or tiered as recommended by a mental health professional? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Are suspected mentally ill, developmentally disabled, dually diagnosed or emotionally disturbed persons examined by a mental health professional? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Are detainees who have been determined by mental health professionals to be severely mentally ill, developmentally disabled or emotionally disturbed transferred to an appropriate facility? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is detainee classification reviewed at least every 60 days? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.80 HOUSING

of Floors of detention: 1

- | | | | |
|--|-------------------------------------|--------------------------|-------------------------------------|
| 1. Do cells provide at least 50 square feet of floor space with a minimum ceiling height of eight feet? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do detention rooms provide at least 64 square feet of floor space with a minimum ceiling height of eight feet? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are all cells and detention rooms designated for a maximum of double occupancy? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Is each cell and detention room equipped with: | | | |
| a. A rigidly constructed metal bed with solid or perforated metal bottom, securely anchored to the floor or wall or a concrete sleeping surface? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. A washbasin with piped hot and cold water? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. A prison-type toilet? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Illumination sufficient for comfortable reading? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Tamper-proof light fixtures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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YES N/A NO

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| f. A secured metal mirror? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do dormitories provide at least 50 square feet of floor space per occupant with a minimum ceiling height of 8 feet? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is each dormitory equipped with: | | | |
| a. A rigidly constructed metal bed with solid or perforated metal bottom, securely anchored to the floor or wall for each detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. A washbasin with piped hot and cold water for every eight occupants? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. A prison-type toilet for every eight occupants? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. A shower with piped hot and cold water for every eight occupants? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Illumination sufficient for comfortable reading? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Tamper-proof light fixtures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Seating for each detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do cells or detention rooms conform to current building and accessibility codes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is a dayroom provided in conjunction for each cell block or detention room cluster? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Does the day room area provide at least 35 square feet of floor space for each cell block and/or detention room cluster built prior to July 1 st , 1980? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Does the day room area contain no less than 35 square feet of floor space for each cell or detention room in the cell block or detention room cluster for each cell block or detention room cluster built since July 1, 1980 or in which major renovations have occurred since July 1, 1980? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is adequate and appropriate seating provided for the number of detainees that make use of each dayroom? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are showers provided in each cellblock area? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is the jail comfortably heated or cooled according to the season? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Does the system eliminate disagreeable odors and routinely provide temperatures within the normal comfort zone? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.90 MEDICAL AND MENTAL HEALTH CARE

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are all required medical and mental health services available to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is a medical doctor available to attend to the medical and mental health needs of detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 3. If no mental health professional is on staff, are professional mental health services secured through linkage agreements with local and regional providers or independent contracts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. If so, are linkage agreements and credentials of independent contractors documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is approved mental health training provided to jail officers and other personnel primarily assigned to correctional duties on suicide prevention and mental health issues? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Does suicide prevention training include: | | | |
| a. The nature and symptoms of suicide? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The specifics of identification of suicidal individuals through the recognition of verbal and behavioral cues? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Situational stressors? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Evaluation of detainee coping skills? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Other signs of potential risk? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Monitoring? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Evaluation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Stabilization? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Referral of suicidal individuals? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Does mental health training include: | | | |
| a. The nature of mental illness? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Symptoms of mental illness? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Specifics of identification of mentally ill individuals through the recognition of verbal and behavioral cues? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Situational stressors? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Evaluation of detainee coping skills, and other signs of potential risk? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Monitoring of mental illness? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Evaluation of mental illness? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Stabilization of mental illness? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Referral of the mentally ill detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Have arrangements been made for detainees to have access to emergency dental care? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 9. General medical services are provided by (select all that apply): | | | |
| <input type="checkbox"/> Staff physicians | | | |
| <input checked="" type="checkbox"/> Contractual services | | | |
| <input type="checkbox"/> A nearby hospital | | | |
| 10. Are detainees suspected of having communicable diseases immediately referred to appropriate medical staff and isolated? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are detainees given a medical screening by a medical doctor, a physician's assistant, a nurse practitioner, a registered nurse or a licensed practical nurse within 14 days after confinement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is a schedule for daily sick call established? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are the names of those detainees reporting to sick call recorded in the medical log? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are detainees with emergency complaints attended to as quickly as possible? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Has the attending physician provided written approval for non-medical staff to issue over-the-counter medication at the request of the detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Are detainee medical and mental health treatment logs maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is all the treatment and medication prescribed recorded including date and time of treatment and medication is administered? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is a written record kept of all detainees' special diets? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are all medications securely stored? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Is a jail officer present when a physician or other medical personnel attend to detainees at the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are proper precautions taken to ensure detainees actually ingest received medication? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Before a detainee may be approved by the jail administrator to retain lifesaving medication on his or her person, is there consultation with and concurrence by a physician or other medical professional with the safety and security of the jail and detainee taken into consideration? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are detainees prohibited from having access to medical supplies, patients' records and medications? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Has at least one member of the jail staff on each shift successfully completed and subsequently received biannual recertification from a recognized course in first aid training which included cardiopulmonary resuscitation (CPR)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Is there a proper stock of first aid supplies available to staff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Is there a TB isolation room? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is proper air supply maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
County Jail Inspection Checklist

| YES | N/A | NO |
|-------------------------------------|--------------------------|--------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.100 CLOTHING, PERSONAL HYGIENE, AND GROOMING

| | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are mechanical washing and drying equipment and cleaning agents provided when detainees are required to supply and wear personal clothing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is clean clothing issued at least twice weekly when clothing is provided by the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are detainees without funds provided with necessary equipment and articles to maintain proper grooming and hygiene? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees allowed to shower or bathe at least three times weekly? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are detainees allowed to shave daily? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are females provided with shaving supplies appropriate for personal hygiene needs? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are barber and beautician services available? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are female detainees provided with necessary articles for personal hygiene? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.110 FOOD SERVICES

Meal service type (select all that apply):

- Contract for catered food service.
- Provide frozen or otherwise pre-prepared meals that have been processed by the procedure required to produce a condition suitable for consumption.
- Food preparation and service in an on-site kitchen with food service staff who are employees of the facility.

Menu on day of inspection:

Breakfast: Hard-Boiled Egg(2), Jelly, Bread(2), Cake, Margarine, Calcium Drink Mix

Lunch: Turkey Jambalaya, Beans, Peas, Cornbread, Margarine, Frosted Bar, Drink Mix

Dinner: Chicken Patty, Bun, Chips, Carrots, Salad Dressing, Dessert Bar, Drink Mix

| | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are meals of sufficient nutritional value? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does food quantity appear sufficient? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
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County Jail Inspection Checklist

| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 3. Are meals served at appropriate intervals? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is a drink, other than water, served with each meal? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is at least one complete, balanced and hot meal served each 24 hours? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are special meals adhered to when medically prescribed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. If the food preparation and service is provided by an on-site kitchen, does at least one full-time cook employed by the facility have proper food service sanitation certification from the Illinois Department of Public Health? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. If the facility has contracted for catered food service, does the food service provider have proper food service sanitation certification from the Illinois Department of Public Health? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are menu items substituted when a detainee's religious beliefs prohibit eating of particular foods? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Do detainees submit written requests for alternative diets? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are dietary restrictions confirmed with religious leaders? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are menus preplanned? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Retained for at least 3 months? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Diversified? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Do food service operations conform to the <i>Food Sanitation Code</i> ? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Are food service trustees screened by medical staff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Are employees and trustees visually evaluated at the beginning of each shift and any individual found to have boils, infective wounds or respiratory infections cleared by medical staff before being permitted to work in any food service area? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are kitchen trustees required to bathe and dress in clean clothing prior to their daily work shift? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Is the jail cook or kitchen staff familiar with security aspects of jail operation, training and supervision of trustees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are heated or insulated carts or trays used for transportation of food from the jail kitchen to detainees when a significant distance is involved? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Are food and drinks protected from contaminants during preparation and delivery? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are divided or compartmented trays used for meal service? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Are eating utensils removed from detainee quarters soon after the meal is finished? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Are openings to the outside protected to prevent the entrance of rodents and insects? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
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| | YES | N/A | NO |
|--|-------------------------------------|--------------------------|--------------------------|
| 21. Are ranges, stoves and ovens equipped with accurate thermostats or temperature gauges? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Is the kitchen equipped with: | | | |
| a. A mechanical dishwasher? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. A three-compartment sink? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Are dishes and trays drain dried? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Are dry goods properly stored? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. Are refrigerators and freezers operated at appropriate temperatures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.120 SANITATION

| | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are non-carpeted floors swept and mopped with detergent or a germicidal agent at least once daily? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are germicidal cleaning agents used on all floors in the toilet, shower and food service areas? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are the windows clean? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are openings to the outside effectively protected to prevent the entrance of rodents and insects? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is ventilation sufficient to provide at least 10 cubic feet of air per minute per person? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are walls kept clear of etched or inscribed graffiti or writing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is the jail free of trash and debris? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are cleaning implements and equipment cleaned, dried and securely stored after use? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are detainee work details supervised by a jail officer? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are toilets, washbasins, showers and sinks cleaned and sanitized daily? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is trash and garbage contained and disposed of in a sanitary manner? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is a source of drinking water provided in each cell and day room? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Is an adequate supply of clean clothing, bedding, towels, soap and cleaning equipment maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are sheets, pillowcases and mattress covers changed and washed at least once a week? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Are vinyl covered mattresses washed with hot water, detergent and disinfected monthly, or before reissue? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are blankets laundered or sterilized monthly, or before reissue? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
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| | YES | N/A | NO |
|--|-------------------------------------|--------------------------|--------------------------|
| 17. Are cotton or fiber-filled mattresses and mattress pads aired and spray-sanitized monthly, or before reissue? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are detainees issued a clean towel at least twice weekly? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Are shaving and barber tools thoroughly cleaned, disinfected and secured? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Are floors in rooms where food or drink are stored, prepared or served kept clean? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Are all counters, shelves, tables, equipment and utensils in which food or drink comes in contact kept in good repair? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Are utensils stored in a clean, dry place protected from flies, dirt, overhead leakage and condensation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Are plumbing facilities in good working order? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Are range cooking surfaces, hoods, vents and filters cleaned regularly? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. Are windows, walls and woodwork clean? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26. Are frequent inspections of living areas made for the control of body pests? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 27. Are immediate control or extermination measures taken when body pest infestation occurs? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28. Does the jail have an established rodent, pest and vermin control program? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.130 SUPERVISION

| | | | |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 1. Are sufficient jail officers present in the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is continuous 24-hour supervision provided in direct supervision housing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are supervisory checks conducted at least once every 30 minutes and documented in the shift record for indirect supervision housing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are all supervisory checks recorded by time, signed by the jail officer conducting the check and noted for any relevant remarks? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are dormitories housing more than 25 detainees provided with continuous observation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do radio operators who conduct 30 minute personal observation checks have jail officer training? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are detainees prohibited from having control or authority over anyone? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are detainees locked in their individual cells between designated times of lights out and arising in the morning? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Time of lights out: 10:00 pm

701.140 SECURITY

| | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are detainees searched prior to exiting and entering the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---|-------------------------------------|--------------------------|--------------------------|

ILLINOIS DEPARTMENT OF CORRECTIONS
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| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 2. Are jail officers and other personnel assigned to jail duty trained in security measures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are detainees prohibited from exercising control of security measures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are all locks, doors, bars, windows and other security equipment frequently inspected? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are all cell block doors and doors opening into a corridor kept locked? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are security vestibule doors opened one at a time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are all unoccupied cells and rooms kept locked at all times? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are backup personnel available when doors to living quarters are opened? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are glass and unsecured metal items prohibited in the detention area? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are trustees carefully supervised and not permitted unrestricted movement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are detainees who present special security concerns checked more frequently than 30 minutes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is a master population record, locator board or computer printout indicating the various jail sections and housing assignments maintained at the control center? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Are keys inventoried and documented at the beginning of each shift? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are random, unannounced shakedowns of detainees and jail and detention areas conducted? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Frequency: <u>Weekly</u> | | | |
| 15. Are bars, walls, windows and floors of the jail regularly and frequently inspected and kept clear of posters, pictures, calendars and articles of clothing that obstruct direct observation of detainee activity? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Are tools and equipment inventoried and securely stored? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Are eating utensils accounted for after each meal? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Is damaged or nonfunctioning security equipment promptly repaired? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Are detainees prohibited access to all jail records? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Is a physical head count made and recorded at least three times daily? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Is a record of all keys inventoried and issued maintained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are keys not in use stored in a secure key locker? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is one full set of keys, separate from those in current use, securely stored in a separate area accessible to designated jail staff for use in the event of any emergency? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are all detainees, including trustees, not permitted to handle, use or possess jail keys of any type? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
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| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 22. Are weapons prohibited in the secure section of the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are weapons secured in a locked drawer, cabinet or container outside of the security area? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are reserve firearms, ammunition, control devices and other protective equipment stored in a secure room? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Are persons authorized to use control devices trained in the proper employment of the device? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the training documented? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. When control devices are used, is a record of the incident made? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are detainees affected by control devices given a thorough medical examination and appropriate treatment after security control has been gained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Is an emergency electrical power source available? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Date last tested: weekly Type: Diesel

701.150 SAFETY

| | | | |
|--|-------------------------------------|--------------------------|-------------------------------------|
| 1. Does the jail maintain written procedures covering response and drills for preparation of handling emergency situations that includes, but not limited to, natural disasters and mass evacuation of the jail and is documented training provided to all jail staff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there at least one fire extinguisher for each 5,000 square feet of floor area? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are fire extinguishers readily accessible to staff, but not detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are fire extinguishers examined at least once a year and tagged with date of inspection and initials of the inspector? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are all jail personnel familiar with the characteristics and operation of all types of fire extinguishers in the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Does the jail have a posted fire plan and evacuation procedures? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Are simulated fire drills conducted? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Are all emergency exits known to jail personnel and exit keys immediately available? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are there two exits from each floor of detention? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are all means of egress kept clean and open? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Are detainees prohibited from engaging in wrestling, contact sports, horseplay or any activity likely to cause injury? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Are detainees assigned vocational tasks given a safety orientation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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YES N/A NO

701.160 DISCIPLINE

1. Does the jail maintain written standards and provide detainees with:
 - a. Disciplinary rules and regulations governing behavior?
 - b. Conduct constituting a penalty offense?
 - c. Types and duration of penalties, including loss of visiting privileges, that may be imposed?
 - d. Information on who may impose penalties?
 - e. Authorized methods of seeking information and making complaints?
 - f. All other matters necessary to enable the detainee to understand both his or her rights and obligations?
2. Is special assistance provided to detainees when needed?
3. Are detainees allowed to make requests or complaints to the jail administrator in written form without censorship of substance?
4. Are detainees permitted to submit a complaint to the Jail and Detention Standards Unit?
5. Do jail officers observing a disciplinary violation submit a written report?
6. Do supervisory staff conduct a review of the factors of an alleged minor rule violation within 24 hours after its occurrence?
 - a. Are detainees segregated as a result of a minor rule infraction informed by supervisory staff of the result of his or her review?
 - b. Are detainees allowed to submit a grievance to higher authority?
7. Are penalties for minor rule violations limited to a reprimand or the loss of privileges or segregation for no more than 72 hours?
8. Does someone other than the reporting officer conduct an investigation on major rule violations?
 - a. If probable cause is established, is a hearing date scheduled?
 - b. Are penalties withheld until after the hearing?
9. Are major rule violation hearings conducted in accordance with hearing rules for major violations?
10. Do major rule violation disciplinary findings:
 - a. Contain restrictions of privileges carefully evaluated and assessed as it relates to the infraction and does not impose a secondary penalty on another person?
 - b. Impose segregation only after lesser penalties have been considered?
11. Are restricted diets and corporal punishment prohibited?

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| | YES | N/A | NO |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 12. Do disciplinary rules, regulations and the forfeiture of good behavior allowance comply with <i>The County Jail Good Behavior Allowance Act [730ILCS 130/3.1]</i> ? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Is the use of restraint devices prohibited from being applied as a penalty? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are restraint devices used on detainees: | | | |
| a. As a precaution against escape during transportation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. On medical grounds at the discretion of a physician? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. By order of the jail administrator in order to prevent a detainee from injuring others or to prevent a detainee from damaging or destroying property? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. If the county where the jail is located has less than 3,000,000 inhabitants, is use of restraint devices upon a pregnant female detainee in compliance with Section 17.5 of the County Jail Act [730 ILCS 125/17.5]? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. If the county where the jail is located has 3,000,000 or more inhabitants, is the use of restraint devices upon a pregnant female detainee in compliance with section 3-15003.6 of the Counties Code [55 ILCS 5/3-15003.6]? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 17. Is a written report placed on file whenever restraint devices are applied? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are individual cases reviewed once every 24 hours to determine the necessity for such restraints? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Are psychotropic medicines prohibited for use as disciplinary devices or control measures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. When detainees are alleged to have committed a crime while in the jail, is documentation made and the case referred to the appropriate law enforcement official for possible prosecution? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.170 EMPLOYMENT OF DETAINEES

| | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Is employment of detainees prohibited when such assignment may violate any personal right or jail standard? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is employment of detainees prohibited if the assignment is hazardous or potentially dangerous? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is employment of detainees prohibited if the assignment is in conflict with any law, ordinance or local labor working agreements? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is employment of detainees prohibited if the assignment endangers jail security? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.180 MAIL PROCEDURES

| | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Can detainees receive an unlimited number of letters? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is incoming mail opened and examined for contraband or funds? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
County Jail Inspection Checklist

| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 3. Are cashier's checks, money orders or certified checks discovered in a detainee's incoming mail recorded and securely kept as part of the detainee's personal property on a property receipt indicating the sender, amount and date, or deposited into the detainee's commissary fund account? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are personal checks and cash returned to sender along with a notification that funds may not be received in that form? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is incoming mail containing contraband held for inspection and disposition by the jail administrator? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is the contraband labeled and logged? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are appropriate law enforcement agencies notified? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is incoming mail promptly delivered? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is mail forwarded to discharged detainees or returned to sender if a forwarding address is known? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are detainees prohibited from opening, reading or delivering another detainee's mail without his or her permission? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are detainees permitted to receive books and periodicals subject to inspection and approval by jail personnel? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Does the jail administrator spot check and read incoming non-privileged mail when there is reason to believe that jail security may be impaired, or mail procedures are being abused? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is outgoing, non-privileged mail reproduced or withheld from delivery if it presents a threat to jail security or safety? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. When a detainee is prohibited from receiving a letter or portions thereof, are both the detainee and sender notified in writing of the decision? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Are detainees allowed to send an unlimited number of letters? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Have provisions been made to allow detainees to send packages? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Is outgoing mail clearly marked with the detainee's name? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Is outgoing mail collected Monday through Friday and mailed promptly? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is outgoing, non-privileged mail submitted in unsealed envelopes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Is the detainee notified in writing of any outgoing mail withheld? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are procedures established for processing certified or registered mail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Is privileged mail submitted in sealed envelopes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Is incoming mail clearly marked "privileged" opened in the presence of detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Are disciplinary restrictions prohibited from being placed on a detainee's mail or electronic mail privileges? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
County Jail Inspection Checklist

| | YES | N/A | NO |
|---|-------------------------------------|--------------------------|--------------------------|
| 22. If the jail administrator allows detainees to send and receive electronic mail: | | | |
| a. Does the jail have a Web site providing instructions how electronic mail can be sent to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Does the Web site set forth and are detainees notified that electronic mail is considered non-privileged and subject to inspection procedures for regular non-privileged mail including being viewed and read by jail staff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is inspected electronic mail, determined to have improper content or which compromises safety or security, not allowed to be sent by the detainee or delivered to the detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. If electronic communication is rejected for delivery, is a report of occurrence completed which includes the name of the detainee involved, name and e-mail address of the other party, date and time the e-mail was sent or received, and the reason for rejection that is both dated and signed by the jail staff person making the determination? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Is the sender notified by designated jail staff when electronic mail is received for a detainee no longer in the custody of the jail? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.190 TELEPHONE

| | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are detainees permitted to place at least one 5-minute telephone call per week? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are telephone calls subject to monitoring? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Can violations of telephone rules result in the suspension of the detainee's use of the telephone for a designated period of time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is a notice stating telephone calls may be monitored or recorded posted by each telephone from which detainees may place calls? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are rules governing the use of telephones established? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Can violations of telephone rules result in the suspension of the detainee's use of the telephone for a designated period of time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.200 VISITING

| | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are visiting procedures established? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are there at least two visiting days per week? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is one of the visits during the weekend? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees allowed at least 15 minutes per visit? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are two or more visitors visiting at the same time counted as one visit? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. May children visit when accompanied by an adult? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are professional individuals associated with a defendant's case or involved with counseling needs granted liberal visitations? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is an area provided to ensure privacy during the visit? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
County Jail Inspection Checklist

YES N/A NO

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 9. Are all visitors required to provide identification and sign in before being permitted to visit a detainee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. When applicable, are detainees searched before and after each visitation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Is a visitors "Search Notice" sign posted? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is constant visual supervision maintained in contact visitation areas? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.210 SOCIAL SERVICE PROGRAMS

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Are social service programs available on site to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are volunteer workers and groups invited to participate in jail programs? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.220 EDUCATION

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are relevant educational programs provided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are educational information and academic materials permitted and made accessible to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are vocational information and materials permitted and made accessible to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.230 LIBRARY

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Are library services made available to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Is access to current <i>Illinois Compiled Statutes</i> provided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is access to current jail rules and regulations provided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there a written policy covering day-to-day activities and schedules? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. If a full-time librarian is not required, is a jail staff person assigned library administration responsibility? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.240 RELIGIOUS SERVICES

- | | | | |
|--|-------------------------------------|--------------------------|-------------------------------------|
| 1. Are detainees allowed to participate in religious services and obtain religious counseling? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are detainees required to participate in religious activities? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

701.250 COMMISSARY

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Has a commissary system been established? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are prices charged detainees consistent with local community stores? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are prices for postal supplies sold at post office cost? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is commissary provided on a regular scheduled basis at least weekly? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are net profits of the commissary system used only for education, recreation or other purposes within the jail for the benefit of the detainees as deemed appropriate by the Sheriff? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFICE OF JAIL AND DETENTION STANDARDS
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YES N/A NO

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 6. Are net profits used for record keeping expenses of the commissary system? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is there accurate accounting maintained for all purchases, sales and expenditures of the commissary system; which includes telephone access services and electronic mail access services provided to detainees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Has there been a completed timely annual audit of the commissary system arranged with the county auditor or county treasurer? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.260 RECREATION AND LEISURE TIME

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Is out of cell indoor recreation provided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is out of cell outdoor recreation provided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are exercise areas appropriately equipped and utilized? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are detainees allowed in the exercise area for at least one hour per day? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are recreation and leisure time activities planned and scheduled? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

701.270 JUVENILE DETENTION

- | | | | |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| 1. Are status offenders prohibited from being detained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does the jail detain juveniles? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Is the detention six hours or less? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Is periodic supervision maintained and recorded? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Are supervisory checks made on each juvenile at least once every 15 minutes? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are juveniles detained sight and sound separate from adults? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Are minors informed of the purpose of the detention, the time it is expected to last and that detention cannot exceed six hours? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Are minors 12 years of age or older confined for more than six hours but less than 36 hours (excluding Saturdays, Sundays and court holidays)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are parents, legal guardians or persons with whom the minor resides notified of the minor's detention, if the law enforcement officer or court officer has been unable to do so? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are juvenile records maintained separately from adult records? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Are juvenile records prohibited from being open to public inspection or disclosure, except by appropriate authority? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Is same-gender supervision of minors provided: | | | |
| a. During the performance of established procedures which require physical contact or examination such as body searches? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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| | YES | N/A | NO |
|--|--------------------------|-------------------------------------|--------------------------|
| b. During periods of personal hygiene activities such as showers, toilet and related activities? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Is periodic supervision maintained? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Are periodic checks made once every 15 minutes for the first six hours of confinement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are periodic checks made once every 30 minutes after the first six hours of confinement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Are periodic checks made once every 15 minutes of minors subject to isolation or segregation? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Are checks recorded by a mechanical device or logged in ink? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Are the times of the checks recorded? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Does the supervisory check log allow for entries of relevant remarks? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| g. Do the checks contain the signature of staff conducting the check? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Are minors assigned to single occupancy cells or detention rooms? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Are minors provided with meals when detained during the facility's normal meal periods? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Is evidence of child abuse reported to the Illinois Department of Human Services? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Are staff trained in juvenile supervision with training approved by the Illinois Law Enforcement Training Standards Board? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

701.280 TEMPORARY DETENTION STANDARDS

| | | | |
|--|--------------------------|-------------------------------------|-------------------------------------|
| 1. Are minors detained for more than 36 hours, but less than seven days (including Saturdays, Sundays and court holidays)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Are youth offered a minimum of two hours of day room activity daily? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Are youth offered a minimum of one hour of physical activity daily? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are appropriate reading materials, table games and radios and/or televisions provided? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Is appropriate social interaction provided for youth? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Is an outdoor recreation area available for detainee use? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Are outdoor activities for youth scheduled? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Is academic instruction provided a minimum of four hours per day? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is the instruction appropriate to the individual needs of each youth? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Is the instruction provided by a trained teacher or tutor? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
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County Jail Inspection Checklist

| | YES | N/A | NO |
|--|--------------------------|-------------------------------------|--------------------------|
| 6. Are medical, psychiatric, psychological, casework and counseling services provided as needed in all individual cases? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Is a daily visiting schedule established? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is one visit per day afforded? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are liberal visits afforded to persons professionally associated with a youth's case? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are youth allowed to place or receive at least one telephone call per day? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Is each youth provided with a copy of written rules and regulations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Do the rules contain a description of conduct constituting a penalty offense? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Do the rules contain the types and duration of penalties? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Do the rules contain the method or conditions under which penalties maybe imposed and persons so authorized to impose discipline? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Do the rules contain procedures for seeking information, making complaints and filing appeals? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. Are rule violations reviewed by the jail administrator? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Are minor rule violations reviewed within 24 hours? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are major rule violations reviewed within 36 hours? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

701.290 YOUTH PROSECUTED UNDER THE CRIMINAL CODE OF 1961

| | | | |
|---|--------------------------|-------------------------------------|--------------------------|
| 1. Do jail officers determine that a minor being detained is confined under proper legal authority? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Is a day room of no less than 35 square feet per cell or room provided? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are youth allowed eight hours of day room activity each day? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is recreation of an energetic nature offered? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are appropriate reading materials, table games, radios or televisions provided? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Is an outdoor recreation area available for detainee use? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Are outdoor activities for youth scheduled? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Is regularly scheduled academic instruction provided? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is the instruction appropriate to the individual needs of each youth? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Have educational arrangements been made through the appropriate local school district? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Are co-educational classes scheduled? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

ILLINOIS DEPARTMENT OF CORRECTIONS
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| | YES | N/A | NO |
|--|--------------------------|-------------------------------------|--------------------------|
| 7. Is access to psychiatric, psychological, casework and counseling services provided as needed in individual cases? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Has a visiting schedule been established identifying no fewer than two visiting days per week? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Is at least one visit allowed during evening hours? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Is at least one visit allowed during the weekend? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Are visits permitted on holidays? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Are liberal visits afforded to professional persons associated with a youth's case? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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County Jail Inspection Checklist

Inspector's comments:

An updated variance dated July 12, 2021, for (2) detention rooms exceeding maximum occupancy requirements/ insufficient floor space (*section 701.80*) is on file with Illinois Department of Corrections and should be reviewed annually.

Superintendents and staff continue to express concerns over the building not having complete sight and sound separation for male and female detainees during recreation periods, thus limiting use areas to maintain compliance with the standard.

Mental Health Services are provided by Preferred Family Healthcare DBA Clarity Healthcare and includes a telemedicine portal and/or in person visits with a qualified mental health professional.

Medical Services and associated administrative supports are provided by Quincy Medical Group which include health assessments, sick call management, medication management, and referral services, all by a physician or appropriately licensed staff working under the direction of a physician.

Detainee phone services are provided by Securus Technologies.

Commissary Items are provided by Summit Food services, LLC.

Meals are provided by Summit Food Services, LLC.

Jennifer Delaney

Criminal Justice Specialist Name (Print)



The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

September 17, 2021

Sheriff Rich Wagner
Adams County Sheriff's Department
535 Vermont Street
Quincy, Illinois 62301

Ryan A. Niekamp
Adams County Clerk
507 Vermont Street
Quincy, Illinois 62301

Dear Sheriff Wagner and Clerk Niekamp

A copy of the recent inspection report for the Adams County Jail is enclosed. The *Illinois Compiled Statutes [730 ILCS 5/3-15-2(b)]* mandates the Illinois Department of Corrections to inspect each county jail annually and to make the results of such inspections available for public review. Your offices should make this inspection report available for public review in the records of Adams County and you are encouraged to give notice to the citizens of your county, by news release or other means, that this inspection report is available for the public's review.

The Jail and Detention Standards Unit staff is available for consultation should you desire. Please call (217) 558-2200, extension 4212.

Sincerely,

Edwin R. "Bob" Bowen
Manager
Jail and Detention Standards Unit

cc: Superintendent Sue Hester
Superintendent Brian Curran
Adams County Board Chair Kent Snider
Criminal Justice Specialist (TA) Jennifer Delaney

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

FINANCIALS

| Account | Flex Account | | Medical Insurance Expense Fund | Treasurer Cash | Federal Drug Traffic |
|-----------------------------|--------------------|--------------------------|--------------------------------|-------------------|----------------------|
| Beginning Balance | \$16,571.13 | Beginning Balance | \$199,529.55 | \$1,870.76 | \$29,909.13 |
| Posted Interest | \$4.57 | Revenue | \$120,133.00 | \$1,762.81 | \$6.15 |
| Flex Transfers In | \$12,761.96 | Transfers In | | - | - |
| Flex Claims | (\$1,878.34) | Transfers Out | \$980.63 | - | - |
| Flex Admin Expenses | (\$137.64) | Expenses | \$238,495.87 | \$76.51 | - |
| Flex Transfers Out | - | | | | |
| Subtotal: | \$10,750.55 | Bank Balance | \$80,186.05 | \$3,557.06 | \$29,915.28 |
| Flex Cash on Deposit | - | Deposits in Transit | - | \$850.00 | - |
| Posted Interest (total YTD) | \$39.10 | Outstanding Checks | - | - | - |
| Ending Balance | \$27,321.68 | Ending Balance | \$80,186.05 | \$4,407.06 | \$29,915.28 |

PERSONNEL

| | |
|---------------------------------|---|
| Full Time Employees w/Medical | 4 |
| Full Time Employees w/o Medical | 2 |

GENERAL

The tax collection process is nearing completion, with the Tax Sale set for Monday, October 25th.


 F. Bryden Cory, Adams County Treasurer

**ADAMS COUNTY CLERK & RECORDER
REVENUE SHEET
September-21**

VITAL RECORDS

| | |
|---|--------------------|
| 001-111-4105 EARNINGS-COUNTY CLERK (Marriage & Misc.) | \$7,685.50 |
| 001-111-5549 Postage | \$97.00 |
| 111-111-4105 EARNINGS-COUNTY CLERK (Automation/Equipment Fund- Copies, etc) | \$2,279.00 |
| SUBTOTAL | \$10,061.50 |

REDEMPTION

| | |
|---|-------------------|
| 001-111-4105 EARNINGS-COUNTY CLERK (Fees) | \$30.00 |
| 111-111-4105 EARNINGS-COUNTY CLERK (Automation) | \$1,405.00 |
| SUBTOTAL | \$1,435.00 |

RECORDING DOCUMENTS

| | |
|--|--------------------|
| 001-131-4105 EARNINGS-RECORDER (Recording Fees & Revenue Stamps) | \$39,478.25 |
| 505-501-4105 EARNINGS-RECORDER (GIS County Highway) | \$27,898.00 |
| 132-131-4105 EARNINGS-RECORDER (GIS Recorder) | \$962.00 |
| 133-131-4105 EARNINGS-RECORDER (Automation) | \$4,324.50 |
| 131-131-4125 LAREDO REVENUE | \$4,731.78 |
| 131-131-4105 EARNINGS-RECORDER (Document Storage/Copies, etc.) | \$6,796.50 |
| SUBTOTAL | \$84,191.03 |

MISCELLANEOUS FUNDS

| | |
|---------------------------------|-----------------|
| 001-001-4135 LIQUOR LICENSES | \$200.00 |
| 001-001-4295 MISC. REVENUE | \$0.00 |
| SUBTOTAL | \$200.00 |

TOTALS \$95,887.53

PREPARED BY:

[Handwritten Signature]
Signature

RECEIVED

OCT 05 2021

DATE:
ADAMS CO. TREASURER
10/5/2021

**ADAMS COUNTY CLERK
RYAN A. NIEKAMP**

FEE ACCOUNT

Receipts

| | |
|--------------------------------------|--------------------|
| Postage - 001-111-5549 | \$97.00 |
| Liquor Licenses - 001-001-4135 | \$200.00 |
| Marriage Licenses -001-011-4105 | \$765.00 |
| Civil Union Licenses - 001-011-4105 | \$0.00 |
| Miscellaneous Fees - 001-011-4105 | \$6,920.50 |
| Equipment Fund - 111-111-4105 | \$1,139.00 |
| Automation Fund- 111-111-4105 | \$1,140.00 |
| Marriage Licenses DV - Disbursements | \$255.00 |
| Redemptions - 001-002-3551 | \$45,506.76 |
| D.C Surcharge - Disbursements | \$112.00 |
| TOTAL RECEIPTS | \$56,135.26 |

Disbursements

| | |
|------------------------------|--------------------|
| Marriage Licenses DV - State | \$255.00 |
| Redemptions - Tax Buyers | \$44,071.76 |
| D.C. Surcharge - State | \$112.00 |
| TOTAL DISBURSEMENTS | \$44,438.76 |

+Overages or -Shortages:

| | |
|-----------------------------|--------------------|
| TOTAL FEES DEPOSITED | \$11,696.50 |
|-----------------------------|--------------------|



ADAMS COUNTY CLERK/ RECORDER

10/1/2021

Adams County Circuit Clerk
 Monthly Report
 September 2021

TOTAL MONTHLY RECEIPTS: \$ 226,285.00
CCP COLLECTIONS \$ 7,763.00
COMPTROLLER COLLECTIONS \$ 2,072.00

| CASE FILINGS: | Aug-21 | Sep-21 | YTD |
|---------------------------|--------|--------|------|
| AD - Adoption | 7 | 3 | 41 |
| CC - Criminal Contempt | 0 | 0 | 2 |
| CF - Criminal Felony | 50 | 54 | 637 |
| CH - Chancery | 5 | 9 | 36 |
| CM - Criminal Misdemeanor | 40 | 32 | 315 |
| CV - Conservation | 2 | 2 | 11 |
| D - Divorce | 25 | 21 | 203 |
| DT - DUI | 10 | 12 | 91 |
| F - Family | 14 | 15 | 143 |
| JA - Juvenile Abuse | 10 | 3 | 74 |
| JD - Juvenile Delinquent | 5 | 3 | 32 |
| L - Law | 5 | 6 | 36 |
| LM - Law Magistrate | 14 | 22 | 136 |
| MH - Mental Health | 51 | 36 | 376 |
| MR - Misc Remedy | 17 | 8 | 195 |
| OP - Order of Protection | 64 | 46 | 460 |
| OV - Ordinance Violation | 45 | 54 | 351 |
| P - Probate | 16 | 23 | 159 |
| SC - Small Claims | 59 | 114 | 729 |
| TR - Traffic | 335 | 465 | 3724 |
| TX - Tax | 0 | 0 | 2 |

PASSPORTS PROCESSED: 6

PERSONNEL:

We have one open position

Monthly Report of Juvenile Detention

ADAMS COUNTY ILLINOIS

Monthly Report of:---->

JUVENILE **Month---->** **September** **Year---->** **2021**
DETENTION

FINANCIAL SECTION

Account Name or Purpose

NONE

Institution Where Acct Held

Account Number

Your Books Beginning Balance

Your Books Monthly Revenue

Your Books Monthly Expense

-
\$0.00

Your Books Ending Balance

Deposits in Transit

Expense's)/Checks not Cleared

= =====

Institution Ending Balance

PERSONNEL SECTION

| Beginning Number | Leaving Employment | Declined Benefit | Ending Number |
|------------------|--------------------|------------------|---------------|
|------------------|--------------------|------------------|---------------|

Full Time Employees w/ Medical

24 0 1 25

Full Time Employee that declined medical benefit - Andy Eyler (1)

Who entered ----->

Part Time Employees

Not Medical Insured

6 0 0 7

Who left----->

Who entered ----->

GENERAL SECTION

STATISTICS

DETENTION

RESIDENTS # OF DAYS

10 193

TREATMENT

0 0

OUT OF COUNTY

10 191

TOTAL

20 384

LOW POPULATION

11

HIGH POPULATION

15

AVERAGE POPULATION

13

3 OUT OF COUNTY RESIDENTS WERE HELD AT A PER DIEM OF \$95.00 FOR 64 DAYS

\$6,080.00

7 OUT OF COUNTY RESIDENTS WAS HELD AT A PER DIEM OF \$127.00 FOR 127 DAYS

\$15,240.00

\$21,320.00

14 Out of County Transports at a rate of \$.40 per mile for 965 miles = \$ 386.00

\$386.00

Total \$21,706.00

Public Defender's Office

Cases Appointed 2021

| CASE TYPE | TREND | January | February | March | April | May | June | July | August | September | October | November | December | TOTAL |
|----------------------|-------|------------|------------|------------|------------|------------|------------|------------|------------|------------|---------|----------|----------|-------------|
| Felony | | 60 | 88 | 72 | 65 | 58 | 89 | 72 | 62 | 40 | | | | 606 |
| Felony PTR | | 10 | 31 | 29 | 26 | 20 | 37 | 35 | 28 | 37 | | | | 253 |
| Misdemeanor | | 29 | 35 | 19 | 28 | 19 | 37 | 33 | 34 | 28 | | | | 262 |
| Misdemeanor PTR | | 4 | 3 | 1 | 7 | 0 | 2 | 5 | 5 | 9 | | | | 36 |
| Traffic | | 7 | 326 | 160 | 91 | 66 | 101 | 88 | 77 | 102 | | | | 1018 |
| Abuse/Neglect-Parent | | 23 | 71 | 42 | 13 | 8 | 17 | 15 | 14 | 16 | | | | 219 |
| Abuse/Neglect-Child | | 3 | 14 | 14 | 6 | 7 | 17 | 13 | 11 | 4 | | | | 89 |
| Inter/Super-Parent | | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 1 |
| Inter/Super-Child | | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 2 |
| Delinquency | | 2 | 6 | 3 | 1 | 3 | 4 | 4 | 2 | 4 | | | | 29 |
| Invol Hosp/Med | | 1 | 0 | 2 | 1 | 0 | 0 | 1 | 2 | 0 | | | | 7 |
| Bond Appearance | | 57 | 68 | 56 | 51 | 50 | 55 | 70 | 67 | 47 | | | | 521 |
| Bond Prepare Only | | 0 | 1 | 1 | 2 | 0 | 0 | 0 | 1 | 0 | | | | 5 |
| TOTAL | | 196 | 645 | 400 | 291 | 231 | 359 | 336 | 303 | 287 | | | | 3048 |

*The bulk of traffic cases in February are those assumed by our office after the retirement of a part-time public defender.

/s/ Todd R. Nelson

Public Defender

Public Defender's Office

Cases Closed 2021

| CASE TYPE | TREND | January | February | March | April | May | June | July | August | September | October | November | December | TOTAL |
|----------------------|-------|------------|------------|------------|------------|------------|------------|------------|------------|------------|---------|----------|----------|-------------|
| Felony | | 54 | 53 | 98 | 58 | 100 | 102 | 82 | 77 | 93 | | | | 717 |
| Felony PTR | | 13 | 8 | 35 | 17 | 35 | 31 | 30 | 23 | 27 | | | | 219 |
| Misdemeanor | | 25 | 33 | 30 | 28 | 34 | 20 | 22 | 26 | 38 | | | | 256 |
| Misdemeanor PTR | | 7 | 1 | 6 | 0 | 4 | 8 | 3 | 6 | 7 | | | | 42 |
| Traffic | | 16 | 5 | 59 | 51 | 47 | 84 | 34 | 70 | 82 | | | | 448 |
| Abuse/Neglect-Parent | | 8 | 1 | 19 | 11 | 17 | 35 | 10 | 5 | 17 | | | | 123 |
| Abuse/Neglect-Child | | 14 | 0 | 8 | 4 | 6 | 13 | 4 | 8 | 7 | | | | 64 |
| Inter/Super-Parent | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 0 |
| Inter/Super-Child | | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 3 | 0 | | | | 4 |
| Delinquency | | 3 | 2 | 6 | 5 | 2 | 2 | 4 | 2 | 7 | | | | 33 |
| TOTAL | | 140 | 103 | 261 | 174 | 246 | 295 | 189 | 220 | 278 | | | | 1906 |

/s/ Todd R. Nelson

Public Defender

ADAMS COUNTY ILLINOIS

Monthly Report of:----> **PROBATION DEPT** **September** **2021**

FINANCIAL SECTION

Account Name or Purpose NONE
 Institution Where Acct Held
 Account Number

Your Books Beginning Balance
 Your Books Monthly Revenue
 Your Books Monthly Expense

 Your Books Ending Balance
 Deposits in Transit
 Expense(s)/Checks not Cleared

=====

Institution Ending Balance

PERSONNEL SECTION

| | Beginning Number | Leaving Employment | Entering Employment | Ending Number |
|---|---------------------|-----------------------|------------------------|------------------|
| Full Time Employees w/ Medical without | 23 | | | 23 |

Who left----->

 Who entered ----->

| | | | | |
|--|---|--|--|---|
| Part Time Employees Not Medical Insured | 1 | | | 1 |
|--|---|--|--|---|

Who left----->

 Who entered ----->

GENERAL SECTION Monthly Activities

| | | | |
|--------------------|------|-----------------|-----|
| Adult Probation | 680 | Drug Tests | 347 |
| Adult Pretrial | 277 | Breathalyzers | 31 |
| Juvenile Probation | 29 | Investigations | 20 |
| Community | | Completed | |
| Service Work | 184 | Public Service | |
| Administrative | | Hours Completed | 890 |
| Supervision | 147 | Case Contacts | 671 |
| Total | 1317 | | |

ADAMS COUNTY ILLINOIS

Monthly Report of:---->

SUPERVISOR OF ASSESSMENTS
BOARD OF REVIEW

September, 2021

FINANCIAL SECTION

Account Name or Purpose
Institution Where Account Held
Account Number

NONE

Your Books Beginning Balance
Your Books Monthly Revenue
Your Books Monthly Expense

Your Books Ending Balance
Deposits in Transit
Expenses/Checks not Cleared

=====

Institution Ending Balance

ADAMS COUNTY CLERK

OCT 04 2021

RECEIVED

PERSONNEL SECTION

| | Beginning Number | Leaving Employment | Entering Employment | Ending Number |
|--------------------------------|---------------------|-----------------------|------------------------|------------------|
| Full Time Employees w/ Medical | 3 | | | 3 |

Who left----->

Who entered ----->

| | | | | |
|--|---|--|--|---|
| Part Time Employees Not Medical Insured | 3 | | | 3 |
|--|---|--|--|---|

Who left----->

Who entered ----->

GENERAL SECTION

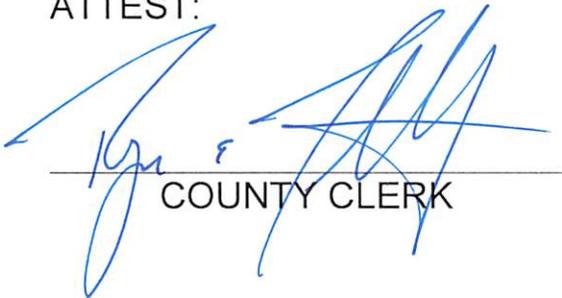
During September we have received either in person or by mail 71 Senior Citizen Homestead Exemption renewals, 41 PTAX 340 Freeze Applications, 9 Disabled Veterans' Exemption renewals, and 17 Person with Disabilities Exemption renewals. We processed 190 MyDec real estate declarations for the month of August.

The Board of Review is currently in session, and met 8 times this month. They have received 201 changes requested by the Assessors or Supervisor of Assessments and 54 tax complaints filed by taxpayers. We have received 2 new applications for non-homestead property tax exemption requesting 100% exemption through the Board of Review. We have 21 properties asking for \$100,000 or more in reduction of assessed value per property. All taxing districts involved have been notified in case they would like to become an intervening party to the appeal.




CHAIRMAN

ATTEST:

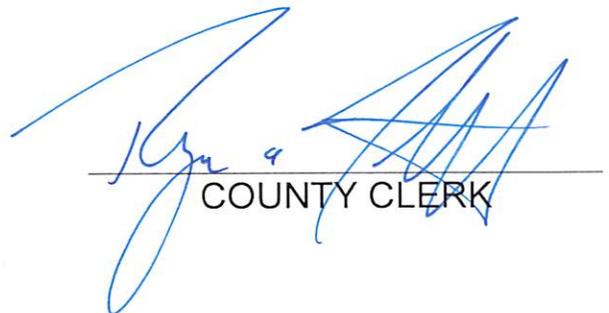

COUNTY CLERK

COUNTY OF ADAMS)
STATE OF ILLINOIS)

I, Ryan A. Niekamp, County Clerk in and for said County of Adams, State of Illinois, do hereby certify that the foregoing is true and complete copy of the proceedings of the Adams County Board's meeting held on October 12, 2021 as shown by my records in my office.

Witness my hand and official seal at Quincy, Illinois this 9^h day of November, 2021.




COUNTY CLERK