

#### WISCONSIN, USA

www.manitowoc.org



TO: Personnel Committee

FROM: Jessie Lillibridge, Human Resources Director

RE: Human Resources Office Update

DATE: March 5, 2018

The Human Resources Office has worked on the following projects and initiatives since our last meeting:

#### Recruiting

Hired: Maintenance Mechanic

Hired: DPI Laborer (2)

• Hired: WWTF Operator

Hired: Library Coordinator of Public Service

Hired: Admin Support Specialist – Snr Ctr (part-time)

• Advertising: Police Officer (continuous)

Advertising: Transit Driver – Part-time (continuous)

Advertising: Firefighter/Paramedic (continuous)

Advertising: Seasonal positions

Advertising: Associate Planner

Advertising: Library Clerk

Interviewing: Payroll Administrator

Interviewing: Housing Enforcement Inspector

Extended offer: Police Officer (2)

Extended offer: Transit Driver

Extended offer: CSW Intern

• Extended offer: DPI Laborer

#### **Employee Relations**

- Continuing to respond to employee concerns/questions.
- Investigation and discipline for employees continues as necessary.
- The firefighter collective bargaining agreement will expire in 2018. Presumably negotiations will be forthcoming.
- National Employee Appreciation Day was March 2 the People Committee bought donuts for all employees to celebrate.

#### **Organizational Development & Training**

Succession Planning –working with departments on succession planning with employees.
 Several employees in key positions have announced plans for retirement in the upcoming year.
 Working on plans for each of these with Department Heads and Supervisors.

- The Tuition Reimbursement program continues to be successful.
- Spot Award program has been well-received. We continue to remind employees about the STAR Award and Spot Award programs.
- The People Development Committee has developed a years of service and retiree recognition program.
- Our next New Employee Orientation session for March 14<sup>th</sup> for all new employees hired in the past quarter.
- Planning with CVMIC for 2018 supervisory training.

#### **Compensation, Benefits & Wellness**

- Manty Health & Wellness Center operations continue to go well. Positive feedback from employees. Attached is the monthly report.
- Continuing to work through some issues with Anthem. We have scheduled a monthly call with Anthem and ABRC (Associated Benefits & Risk Consulting) to discuss issues.
- Onsite nurse visits occur twice a month.
- Wellness committee meeting and actions continuing monthly health topics and lunch and learn programs. Our 2018 events are under way, including Lunchtime Yoga, massage therapy at a reduced cost, walking challenges, incentives for using the City Hall fitness facility, and incorporating Go365 into the initiatives.
- Working with City Attorney to terminate an obsolete 2004 Central States Participation
  Agreement and developing a new Agreement that aligns with our current Transit collective
  bargaining agreement.
- Working to gather information on the current DPW wages only employees and their benefits through Central States. We have spent many hours looking for answers to what the City's obligation is to the plan and the retirees who are on this plan.
- Held our annual planning meeting with our brokers and discussed strategies for next year's benefits plan. We meet in June and will go over the recommendations for 2019 based on the proposal requests that ABRC is working on.
- Working with Finance/Payroll to implement the new compensation structure on July 1, 2018.

#### **Safety & Risk Management**

- Safety committee meeting and discussion, continuing monthly topics.
- Continuing the lost time injury program, employees are enjoying it and continue to report safety concerns. Three lost time incidents for 2017.
- Workers Compensation review and addressing concerns.
- Emergency response plans for all City buildings in progress.
- Respiratory Policy, Silica Dust Policy, and Chlorine Storage Policy (WWTF) are under development with the assistance of CVMIC.
- The Safety Committee is working with Fire and Rescue to hold weather drills the second week of April and Fire Drills the second week of October.
- We continue to work with the CVMIC legal team to respond to a discrimination complaint that an employee made to the DWD.
- Aurora has donated eight AEDs for several City locations. Additionally, another AED was donated by Heart-A-Rama. We are working with the Fire Department and Building & Grounds to get them installed. The Fire Department will be offering training on the AEDs. A press event was held on January 24, 2018 at the Silver Creek Fieldhouse.
- The annual work plan meeting with CVMIC was held on February 1, 2018.

• A past employee, who filed for duty disability, which we denied, has filed an appeal. We are working with CVMIC and an outside labor attorney on this filing.

#### **Administration**

- Working with departments on job description updates. This is an ongoing project. Supervisors
  and Managers will be reviewing all job descriptions with employees as a part of the annual
  evaluation process.
- Completed working with the Manitowoc Public Library to merge the Library's Employee Policy Manual into the City of Manitowoc Employee Policy Manual. The Library Board approved the merged document and it will be brought to Council for final approval in March.

#### **Separations**

- Library Page
- Firefighter
- Library Clerk
- Completed exit interviews with voluntary separations/retirements

Attachment

# Aurora BayCare Manty Health and Wellness Clinic Summary

City of Manitowoc YTD January, 2018



Aurora BayCare Medical Center





# City of Manitowoc - Overall Summary

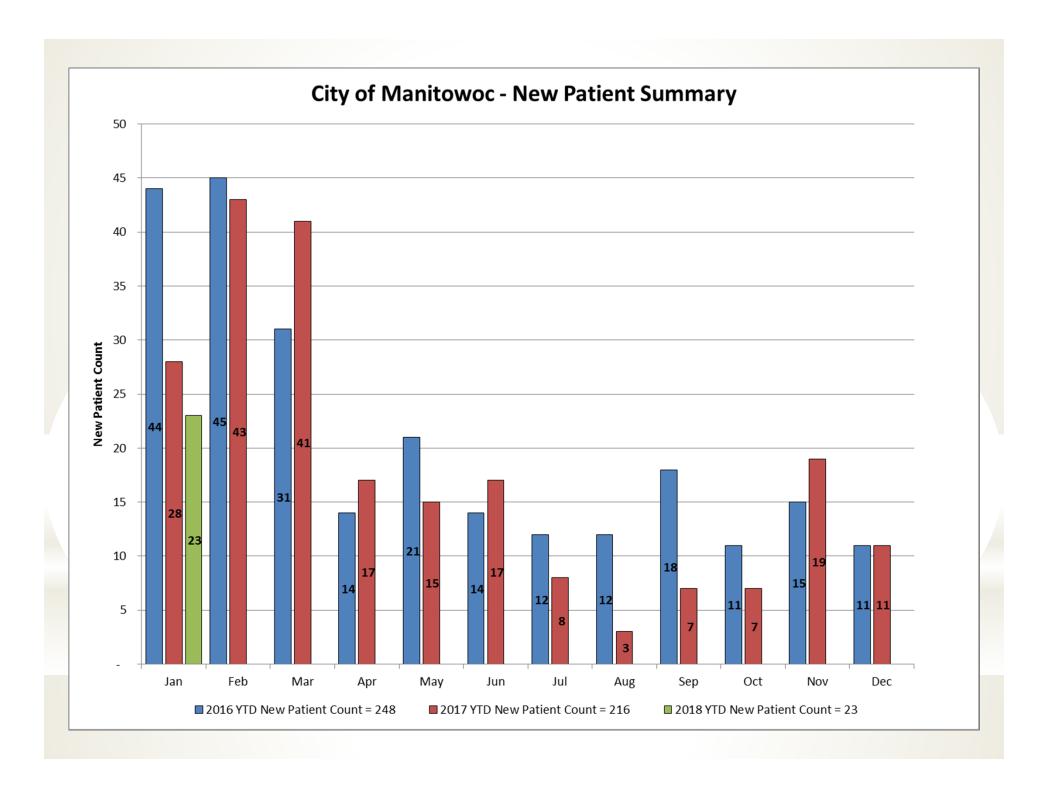
| City of Manitowoc Services   | Jan         | Feb  | Mar      | Apr        | May        | Jun  | Jul  | Aug  | Sep        | Oct  | Nov        | Dec      | January YTD 2018 |
|--|-------------|------|----------|------------|------------|------|------|------|------------|------|------------|----------|------------------|
| Clinic Nurse Practitioner Services (Hour)                            | \$ 5,183.20 |      |          |            |            |      |      |      |            |      |            |          | \$ 5,183.20      |
| Facility Rent  | \$ 172.05   |      |          |            |            |      |      |      |            |      |            |          | \$ 172.05        |
| Pharmacy   | \$ 650.61   |      |          |            |            |      |      |      |            |      |            |          | \$ 650.61        |
| Clinic Vaccine   | \$ 79.00    |      |          |            |            |      |      |      |            |      |            |          | \$ 79.00         |
| Labs   | \$ 80.63    |      |          |            |            |      |      |      |            |      |            |          | \$ 80.63         |
| Aurora Employer Clinic Charges Invoiced                              | \$ 6,165.49 | \$ - | \$ -     | \$ -       | \$ -       | \$ - | \$ - | \$ - | \$ -       | \$ - | \$ -       | \$ -     | \$ 6,165.49      |
|  |             |      |          |            |            |      |      |      |            |      |            |          |                  |
| Charges Avoided  | Jan         | Feb  | Mar      | Apr        | May        | Jun  | Jul  | Aug  | Sep        | Oct  | Nov        | Dec      | January YTD 2018 |
| Customary Charges  | \$ 9,477.88 |      | \$ -     | \$ -       | \$ -       | \$ - | \$ - | \$ - | \$ -       | \$ - | \$ -       | \$ -     | \$ 9,477.88      |
| Additional Charges   | \$ 111.59   |      | \$ -     | \$ -       | \$ -       | \$ - | \$ - | \$ - | \$ -       | \$ - | \$ -       | \$ -     | \$ 111.59        |
| Total Charges Avoided  | \$ 9,589.47 | \$ - | \$ -     | \$ -       | \$ -       | \$ - | \$ - | \$ - | \$ -       | \$ - | \$ -       | \$ -     | \$ 9,589.47      |
| Total Savings  | \$ 3,423.98 | \$ - | \$ -     | <b>S</b> - | <b>S</b> - | \$ - | \$ - | \$ - | <b>S</b> - | \$ - | <b>S</b> - | \$ -     | \$ 3,423.98      |
|  | + -,        |      | <u> </u> |            | i .        |      |      |      |            |      |            | ,        | -,               |
|  |             |      |          |            |            |      |      |      |            |      |            |          |                  |
| City of Manitowoc Visits   | Jan         | Feb  | Mar      | Apr        | May        | Jun  | Jul  | Aug  | Sep        | Oct  | Nov        | Dec      | January YTD 2018 |
| Provider Visit   | 51          |      |          |            |            |      |      |      |            |      |            |          | 51               |
| Nurse Visit  | 5           |      |          |            |            |      |      |      |            |      |            |          | 5                |
| Lab Visit  | 20          |      |          |            |            |      |      |      |            |      |            |          | 20               |
| Vaccine  | 2           |      |          |            |            |      |      |      |            |      |            |          | 2                |
| Total Patient Visits   | 78          | -    | -        | -          | -          | -    | -    | -    | -          | -    | -          | -        | 78               |
| Total Provider Visit Types   | Jan         | Feb  | Mar      | Apr        | May        | Jun  | Jul  | Aug  | Sep        | Oct  | Nov        | Dec      | January YTD 2018 |
| OFFICE/OUTPT VISIT,NEW,LEVL II                                       | 1           | reb  | iviui    | Арі        | iviuy      | Juli | Jui  | Aug  | Зер        | Ott  | 1400       | Dec      |                  |
| OFFICE/OUTPT VISIT, NEW, LEVE II                                     | 9           |      |          |            | -          |      |      |      |            |      |            | +        | 1 9              |
| OFFICE/OUTPT VISIT, NEW, LEVE III  OFFICE/OUTPT VISIT, NEW, LEVE III | 1           |      | -        | +          |            |      |      |      |            |      | +          | +        |                  |
|  | 1           |      |          | +          | -          | +    |      | -    |            |      | +          | +        | 1 1              |
| OFFICE/OUTPT VISIT EST LEVEL II OFFICE/OUTPT VISIT EST LEVEL III     | 34          |      |          | +          | -          | +    |      | -    |            |      | +          | +        | 34               |
| OFFICE/OUTPT VISIT EST LEVEL III  OFFICE/OUTPT VISIT EST LEVEL IV    | 34          |      | +        | +          | -          |      |      | -    |            | -    | +          | +        | 34               |
|  | 1           |      |          |            | -          |      |      |      |            |      |            | _        |                  |
| PREV NEW AGE 18-39   |             |      |          |            | -          |      |      |      | -          |      |            |          | 1                |
| PREV EST AGE 18-39   | 1 1         |      |          |            | -          |      |      |      | -          |      |            |          | 1                |
| Grand Total  | 51          | -    | -        | -          | <u> </u>   | -    | -    | -    | -          | -    | -          | <u> </u> | 51               |
|  |             |      |          |            |            |      |      |      |            |      |            |          |                  |
| Total Nurse Visit Types  | Jan         | Feb  | Mar      | Apr        | May        | Jun  | Jul  | Aug  | Sep        | Oct  | Nov        | Dec      | January YTD 2018 |
| OFFICE/OUTPT VISIT EST LEVEL I                                       | 5           |      |          |            |            |      |      |      |            |      |            |          | 5                |
| Grand Total  | 5           |      | -        |            | -          | _    | _    |      | -          | -    | _          |          | 5                |

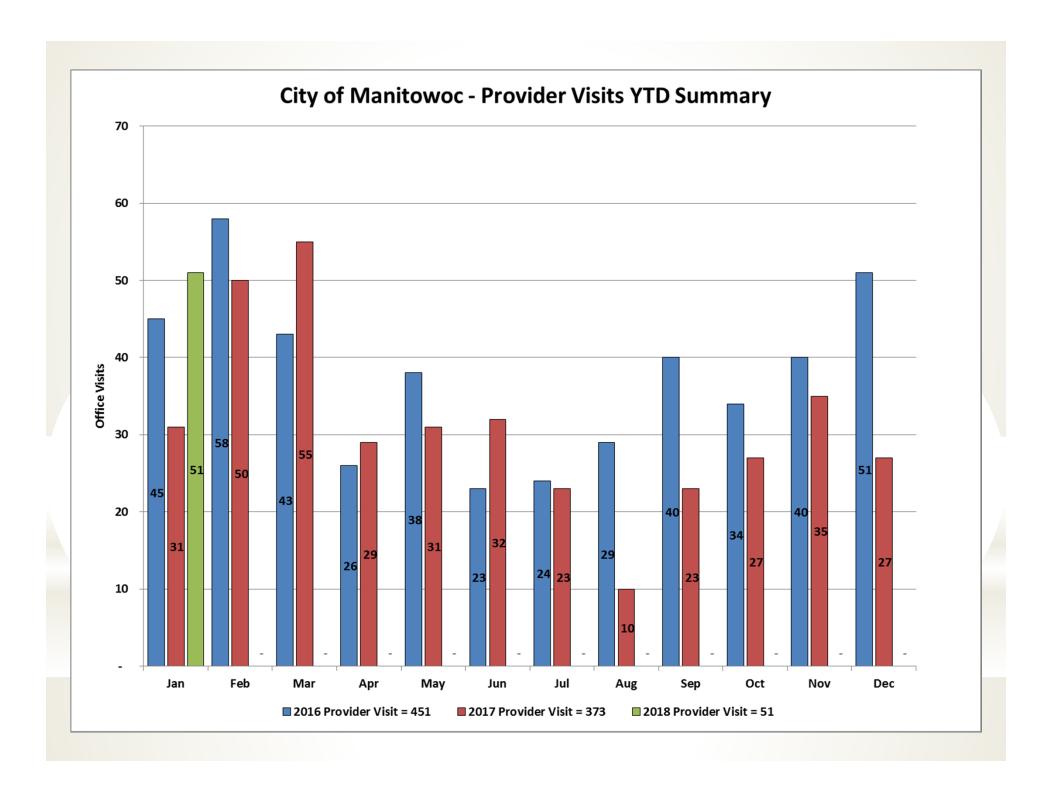
# City of Manitowoc - Invoice Summary Patient Services/Vaccine/Clinic Labs Service Month: January 2018

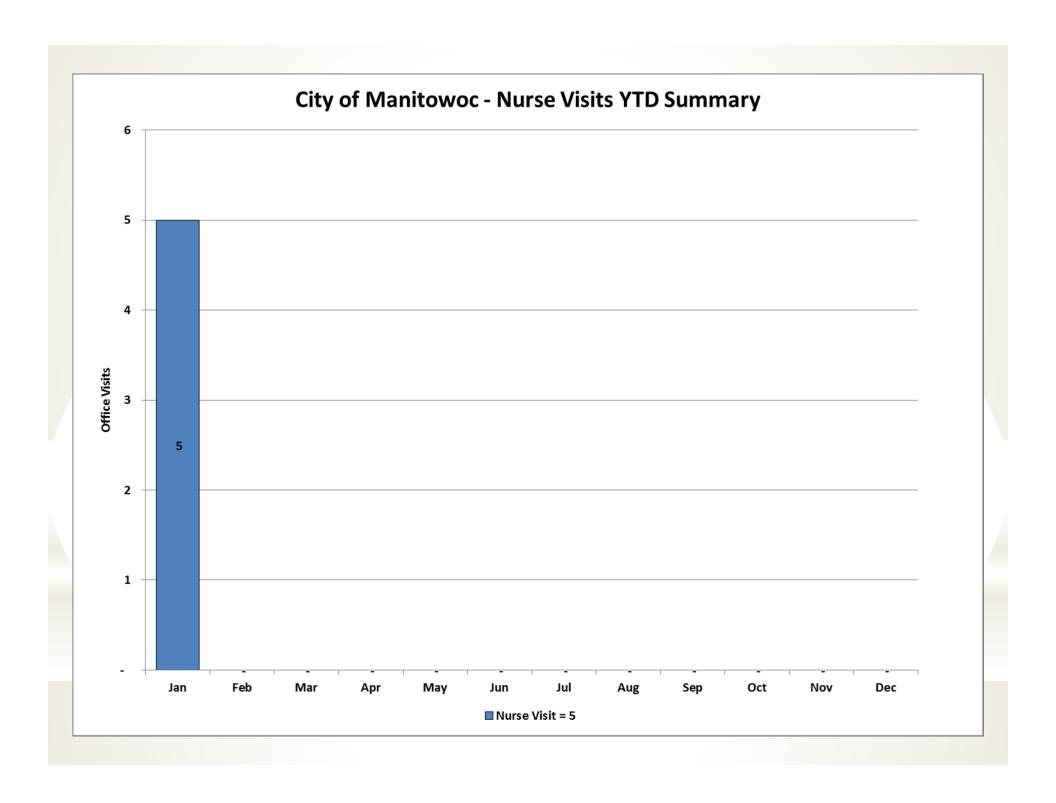
| Patient Services |  |  |     |           |                       |       |             |  |
|------------------|--|--|-----|-----------|-----------------------|-------|-------------|--|
| Company          |  | Description                                | Mor | thly Rate | Quantity/Participants | Total | Monthly Fee |  |
| CITY             |  | Clinic Nurse Practitioner Services (Hours) | \$  | 29.45     | 176                   | \$    | 5,183.20    |  |
| CITY             |  | Facility Rent                              | \$  | 172.05    | 1                     | \$    | 172.05      |  |
| CITY             |  | Pharmacy                                   | \$  | 650.61    | 1                     | \$    | 650.61      |  |
|                  |  |  |     |           |                       |       |             |  |

|         | Vaccine              |  |               |       |                |          |       |  |  |
|---------|----------------------|--|---------------|-------|----------------|----------|-------|--|--|
| Company | CPT code             | Description  | Contract Rate |       | Total Quantity | Total Co | st    |  |  |
| CITY    | 90471                | IMMUNIZATION ADMIN SINGLE OR FIRST                     | Not Cost      |       | 2              | \$       | -     |  |  |
| CITY    | 90686                | INFLUENZA QUADRIVALENT SPLIT PRES FREE 0.5 ML VACC, IM | \$            | 19.00 | 1              | \$       | 19.00 |  |  |
| CITY    | 90746                | HEP B VACC ADULT 3 DOSE, IM                            | \$            | 60.00 | 1              | \$       | 60.00 |  |  |
|         | Total Clinic Vaccine |  |               |       |                |          |       |  |  |

|         | •         | Clinic Labs            | •      |            |                 |         |          |
|---------|-----------|------------------------|--------|------------|-----------------|---------|----------|
| Company | CPT Code  | Test Name              | Contra | ct Rate    | Sum of Quantity | Total I | ab Fee   |
| CITY    | 80053     | COMP METABOLIC PNL     | \$     | 4.50       | 1               | \$      | 4.50     |
| CITY    | 81001     | URINE COMPLETE         | \$     | 5.32       | 1               | \$      | 5.32     |
| CITY    | 82150     | AMYLASE                | \$     | 3.59       | 1               | \$      | 3.59     |
| CITY    | 83690     | LIPASE                 | \$     | 4.83       | 1               | \$      | 4.83     |
| CITY    | 84439     | FREE T4                | \$     | 4.83       | 1               | \$      | 4.83     |
| CITY    | 84443     | TSH                    | \$     | 4.83       | 1               | \$      | 4.83     |
| CITY    | 84481     | FREE T3                | \$     | 11.31      | 1               | \$      | 11.31    |
| CITY    | 85004     | DIFFERENTIAL           | Not o  | n Contract | 1               | \$      | -        |
| CITY    | 85027     | HEME PROFILE           | Not o  | n Contract | 1               | \$      | -        |
| CITY    | 87077     | AEROBIC IDENTIFICATION | Not o  | n Contract | 2               | \$      | -        |
| CITY    | 87081     | CULTURE STREP GRP A    | \$     | 2.38       | 11              | \$      | 26.18    |
| CITY    | 87086     | URINE CULTURE          | \$     | 15.24      | 1               | \$      | 15.24    |
|         |           |                        |        |            |                 | \$      | -        |
|         |           |                        |        |            |                 | \$      | -        |
|         | Total Lab |                        |        |            |                 |         | 80.63    |
|         |           |                        |        |            |                 |         |          |
|         |           |                        |        |            |                 |         |          |
|         |           |                        |        |            | TOTAL INVOICED  | \$      | 6,165.49 |







# City of Manitowoc - Visits By Day Summary Pg1

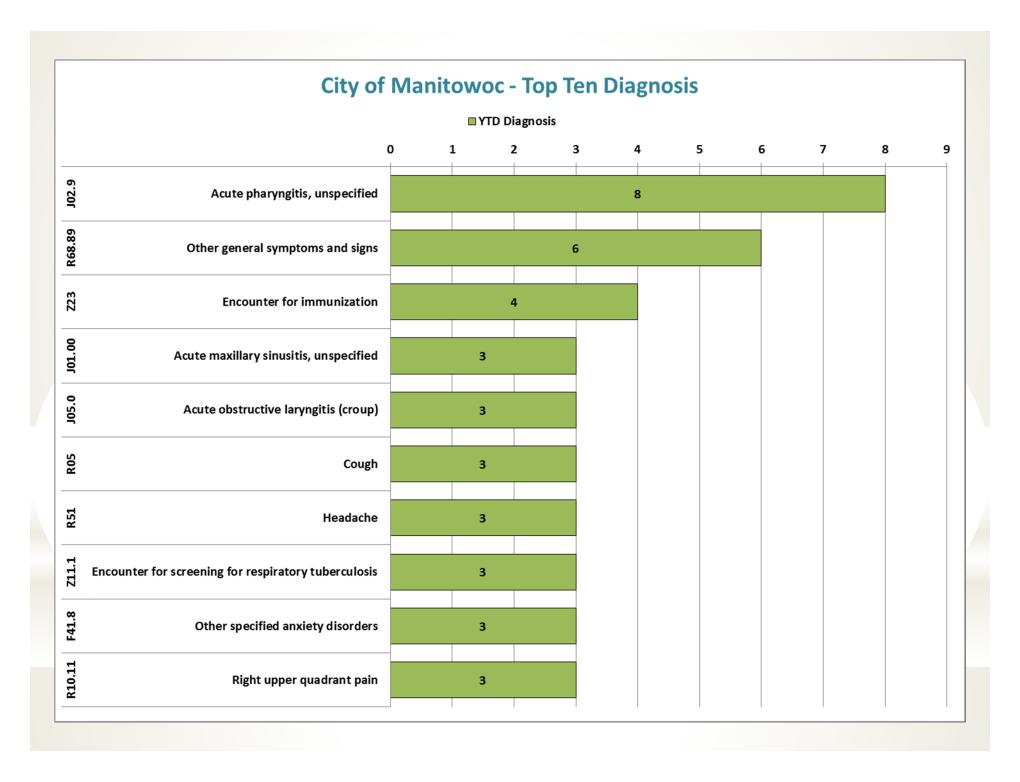
|                |             |             |                  | Provider Visits - | January 2018 |           |          |        |       |
|----------------|-------------|-------------|------------------|-------------------|--------------|-----------|----------|--------|-------|
|                | Appointment | Appointment | Appointment      |                   |              |           |          |        |       |
| Visit Type     | Time        | Date        | Length (Minutes) | Monday            | Tuesday      | Wednesday | Thursday | Friday | Total |
| Provider Visit | 7:00:00 AM  | 1/5/2018    | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 8:30:00 AM  | 1/5/2018    | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 10:00:00 AM | 1/3/2018    | 30               |                   |              | 1         |          |        | 1     |
| Provider Visit | 10:00:00 AM | 1/5/2018    | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 10:00:00 AM | 1/15/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 10:00:00 AM | 1/17/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 10:00:00 AM | 1/22/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 10:00:00 AM | 1/29/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 10:00:00 AM | 1/30/2018   | 15               |                   | 1            |           |          |        | 1     |
| Provider Visit | 10:15:00 AM | 1/5/2018    | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 10:15:00 AM | 1/25/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 10:30:00 AM | 1/4/2018    | 30               |                   |              |           | 1        |        | 1     |
| Provider Visit | 10:30:00 AM | 1/17/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 10:30:00 AM | 1/22/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 10:30:00 AM | 1/23/2018   | 15               |                   | 1            |           |          |        | 1     |
| Provider Visit | 10:30:00 AM | 1/24/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 10:30:00 AM | 1/26/2018   | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 10:30:00 AM | 1/31/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 10:45:00 AM | 1/3/2018    | 30               |                   |              | 1         |          |        | 1     |
| Provider Visit | 10:45:00 AM | 1/18/2018   | 45               |                   |              |           | 1        |        | 1     |
| Provider Visit | 11:15:00 AM | 1/3/2018    | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 12:00:00 PM | 1/2/2018    | 30               |                   | 1            |           |          |        | 1     |
| Provider Visit | 12:00:00 PM | 1/8/2018    | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 12:00:00 PM | 1/15/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 12:00:00 PM | 1/18/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 12:00:00 PM | 1/24/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 12:00:00 PM | 1/31/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 12:30:00 PM | 1/3/2018    | 45               |                   |              | 1         |          |        | 1     |
| Provider Visit | 12:30:00 PM | 1/9/2018    | 15               |                   | 1            |           |          |        | 1     |
| Provider Visit | 12:30:00 PM | 1/17/2018   | 15               |                   |              | 1         |          |        | 1     |

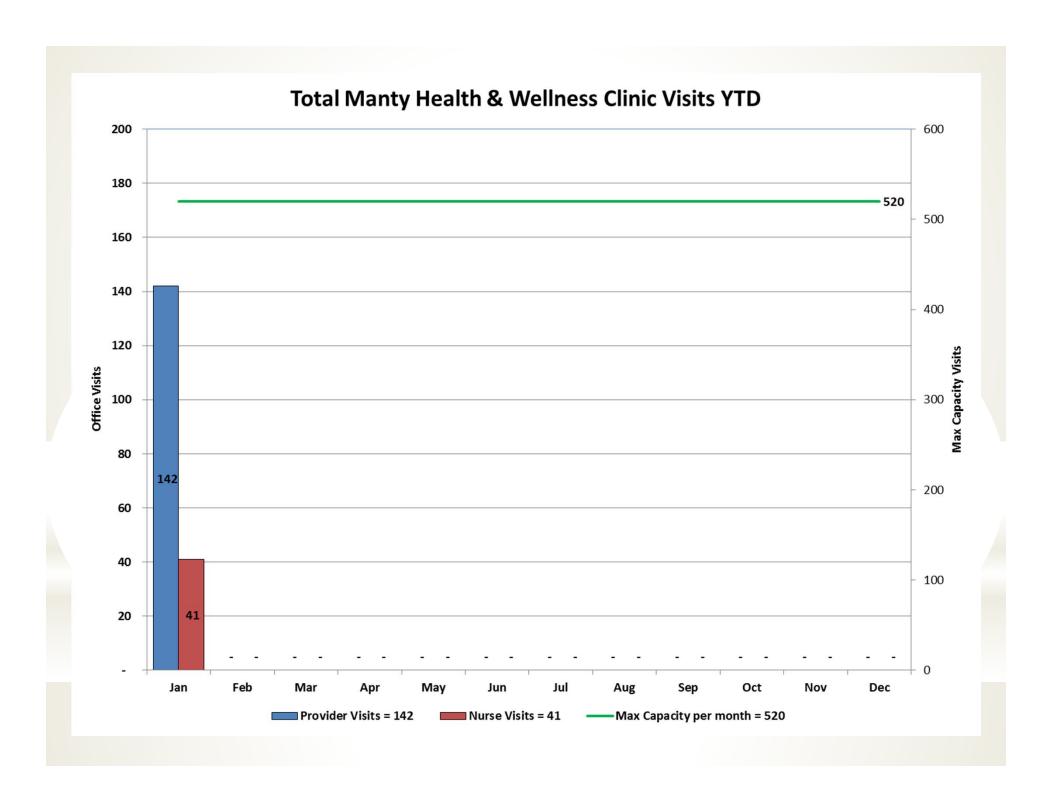
# City of Manitowoc - Visits By Day Summary Pg 2

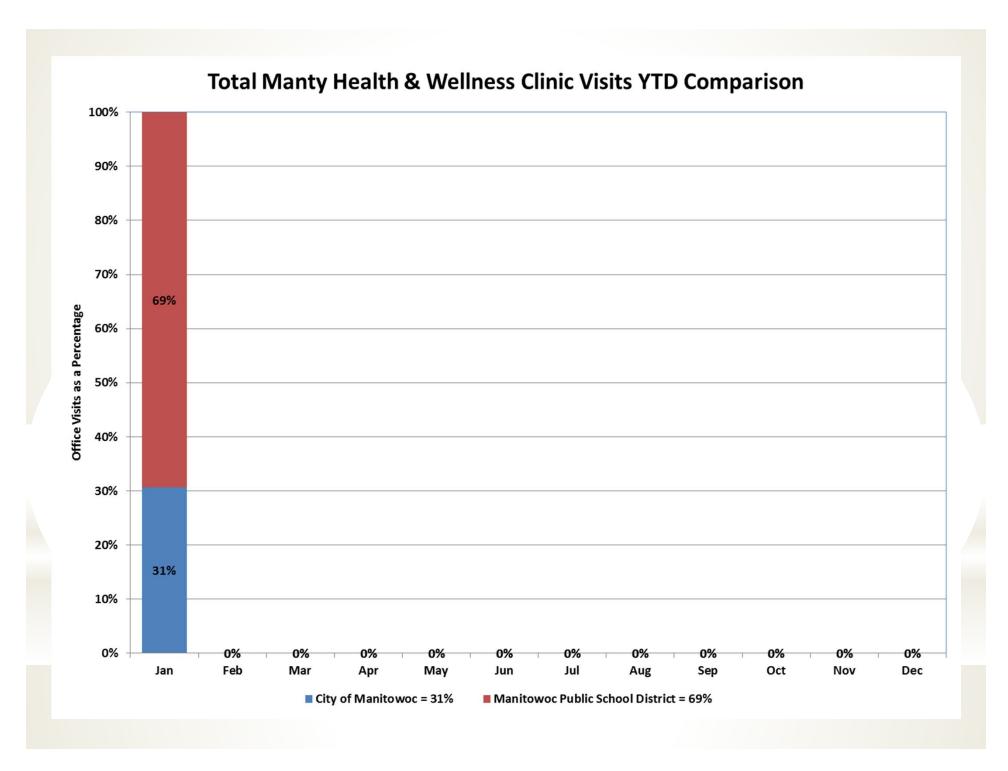
|                |             |             |                  | Provider Visits - | January 2018 |           |          |        |       |
|----------------|-------------|-------------|------------------|-------------------|--------------|-----------|----------|--------|-------|
|                | Appointment | Appointment | Appointment      |                   |              |           |          |        |       |
| Visit Type     | Time        | Date        | Length (Minutes) | Monday            | Tuesday      | Wednesday | Thursday | Friday | Total |
| Provider Visit | 12:30:00 PM | 1/22/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 12:30:00 PM | 1/23/2018   | 15               |                   | 1            |           |          |        | 1     |
| Provider Visit | 12:30:00 PM | 1/26/2018   | 30               |                   |              |           |          | 1      | 1     |
| Provider Visit | 12:30:00 PM | 1/29/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 12:45:00 PM | 1/12/2018   | 30               |                   |              |           |          | 1      | 1     |
| Provider Visit | 1:00:00 PM  | 1/17/2018   | 30               |                   |              | 1         |          |        | 1     |
| Provider Visit | 1:00:00 PM  | 1/19/2018   | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 1:00:00 PM  | 1/31/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 1:45:00 PM  | 1/11/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 2:00:00 PM  | 1/19/2018   | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 2:15:00 PM  | 1/16/2018   | 15               |                   | 1            |           |          |        | 1     |
| Provider Visit | 2:30:00 PM  | 1/22/2018   | 15               | 1                 |              |           |          |        | 1     |
| Provider Visit | 2:30:00 PM  | 1/26/2018   | 15               |                   |              |           |          | 1      | 1     |
| Provider Visit | 3:00:00 PM  | 1/11/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 4:15:00 PM  | 1/11/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 4:15:00 PM  | 1/18/2018   | 60               |                   |              |           | 1        |        | 1     |
| Provider Visit | 4:15:00 PM  | 1/25/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 4:45:00 PM  | 1/11/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 5:15:00 PM  | 1/10/2018   | 15               |                   |              | 1         |          |        | 1     |
| Provider Visit | 5:15:00 PM  | 1/11/2018   | 15               |                   |              |           | 1        |        | 1     |
| Provider Visit | 5:30:00 PM  | 1/23/2018   | 15               |                   | 1            |           |          |        | 1     |
| Grand Total    |             | Ļ           | 975              | 9                 | 7            | 14        | 11       | 10     | 51    |
|                |             |             |                  |                   |              |           |          |        |       |
|                |             |             |                  |                   |              |           |          |        |       |
|                |             |             |                  | ancelled/No Sh    |              | •         |          |        |       |
|                |             |             | Date             | Cancellation      | No Show      | Total     |          |        |       |
|                |             |             | 1/11/2018        |                   |              | 1         |          |        |       |
|                |             |             | 1/17/2018        |                   |              | 1         |          |        |       |
|                |             |             | 1/19/2018        |                   |              | 1         |          |        |       |
|                |             |             | 1/24/2018        | 1                 |              | 1         |          |        |       |
|                |             |             | 1/29/2018        | 1                 |              | 1         |          |        |       |
|                |             |             | Grand Total      | 5                 | -            | 5         |          |        |       |
|                |             |             |                  | Nurse Visits -    | January 2018 |           |          |        |       |
|                |             |             |                  | Visit Type        | Total        |           |          |        |       |
|                |             |             |                  | Nurse Visit       | 5            |           |          |        |       |
|                |             |             |                  | Grand Total       | 5            |           |          |        |       |

## City of Manitowoc - Vaccine Summary

|              | Y   | TD Que | antit | y     |     |     |      |        |       |     |     |     |     |         |
|--------------|---|--------|-------|-------|-----|-----|------|--------|-------|-----|-----|-----|-----|---------|
| CPT Code     | Description   | Jan    | Feb   | Mar   | Apr | May | Jun  | Jul    | Aug   | Sep | Oct | Nov | Dec | YTD Qty |
| 90686        | INFLUENZA QUADRIVALENT SPLIT PRES FREE 0.5 ML VACCINE | 1      |       |       |     |     |      |        |       |     |     |     |     |         |
| 90714.02     | TD 7 YRS+ PRESERVATIVE FREE                           | -      |       |       |     |     |      |        |       |     |     |     |     | -       |
| 90715        | TETANUS/DIPTHERIA/ACELLULAR PERTUSSIS                 | -      |       |       |     |     |      |        |       |     |     |     |     | -       |
| 90736        | Shingles (Zostavax) Vaccine                           | -      |       |       |     |     |      |        |       |     |     |     |     | -       |
| 90746        | HEPATITIS B VACCINE ADULT IM 3 DOSE SCHEDULE          | 1      |       |       |     |     |      |        |       |     |     |     |     |         |
| <b>Total</b> |   | 2      | -     | -     | -   | -   | -    | -      | -     | -   | -   | -   | -   |         |
|              |   |        |       |       |     |     |      |        |       |     |     |     |     |         |
|              |   |        |       |       |     |     |      |        |       |     |     |     |     |         |
|              | YTD Cost  |        |       |       |     |     |      |        |       |     |     |     |     |         |
| CPT Code     | Description   |        | Cost  |       | YTD | Qty | Tota | al YTD | Cost  |     |     |     |     |         |
| 90686        | INFLUENZA QUADRIVALENT SPLIT PRES FREE 0.5 ML VACCINE | \$     |       | 19.00 |     | 1   | \$   |        | 19.00 |     |     |     |     |         |
| 90714.02     | TD 7 YRS+ PRESERVATIVE FREE                           | \$     |       | 25.00 |     | -   | \$   |        | -     |     |     |     |     |         |
| 90715        | TETANUS/DIPTHERIA/ACELLULAR PERTUSSIS                 | \$     |       | 39.00 |     | -   | \$   |        | -     |     |     |     |     |         |
| 90736        | Shingles (Zostavax) Vaccine                           | \$     |       | -     |     | -   | \$   |        | -     |     |     |     |     |         |
| 90746        | HEPATITIS B VACCINE ADULT IM 3 DOSE SCHEDULE          | \$     |       | 60.00 |     | 1   | \$   |        | 60.00 |     |     |     |     |         |
| otal         |   |        |       |       |     |     | ¢    | •      | 79 NN |     |     |     |     |         |

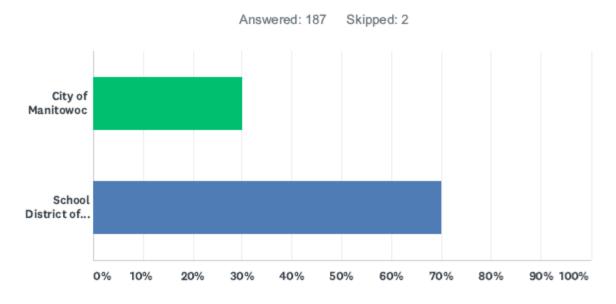






Manty Health and Wellness Clinic

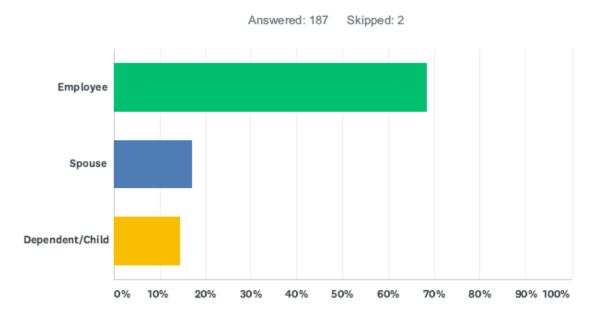
# Q1 Please select the employer who provides you/your family with access to the Manty Health and Wellness Clinic.



| ANSWER CHOICES               | RESPONSES |     |
|------------------------------|-----------|-----|
| City of Manitowoc            | 29.95%    | 56  |
| School District of Manitowoc | 70.05%    | 131 |
| TOTAL                        |           | 187 |

Manty Health and Wellness Clinic

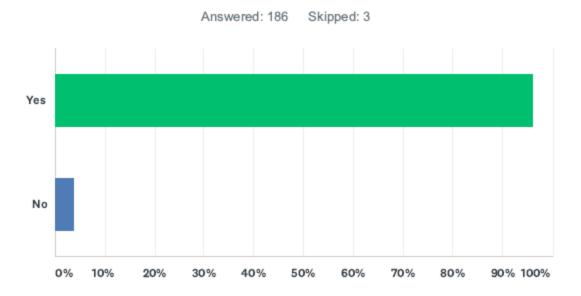
#### Q2 Please select the option that best describes the patient.



| ANSWER CHOICES  | RESPONSES |     |
|-----------------|-----------|-----|
| Employee        | 68.45%    | 128 |
| Spouse          | 17.11%    | 32  |
| Dependent/Child | 14.44%    | 27  |
| TOTAL           |           | 187 |

Manty Health and Wellness Clinic

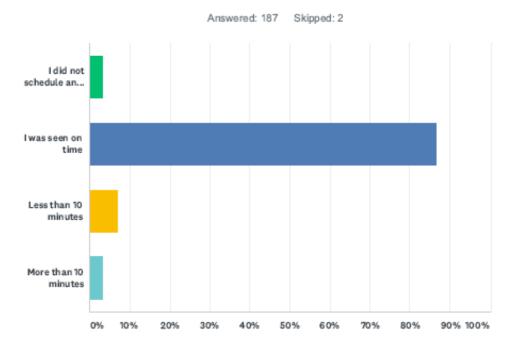
### Q3 Was your appointment scheduled before you arrived at the clinic?



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Yes            | 96.24%    | 179 |
| No             | 3.76%     | 7   |
| TOTAL          |           | 186 |

Manty Health and Wellness Clinic

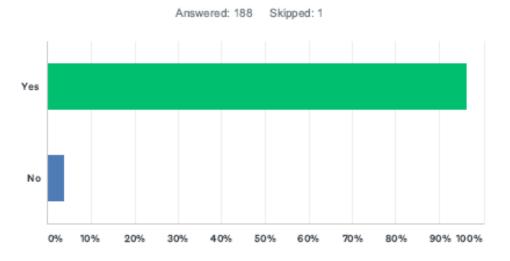
Q4 If you scheduled an appointment in advance, how long did you have to wait past your scheduled appointment time to be seen?



| ANSWER CHOICES                               | RESPONSES |     |
|--|-----------|-----|
| I did not schedule an appointment in advance | 3.21%     | 6   |
| I was seen on time                           | 86.63%    | 162 |
| Less than 10 minutes                         | 6.95%     | 13  |
| More than 10 minutes                         | 3.21%     | 6   |
| TOTAL  |           | 187 |

Manty Health and Wellness Clinic

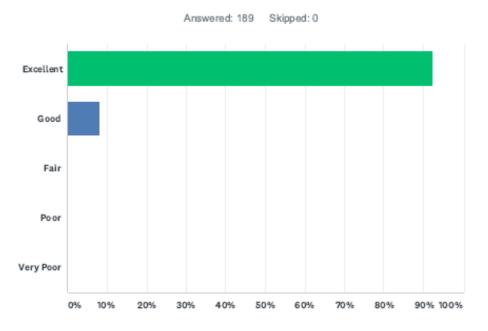
#### Q5 Were you able to be seen when you needed an appointment?



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Yes            | 96.28%    | 181 |
| No             | 3.72%     | 7   |
| TOTAL          |           | 188 |

Manty Health and Wellness Clinic

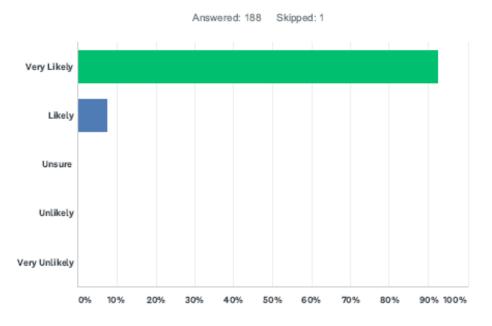
#### Q6 How would you rate the care that you received?



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Excellent      | 92.06%    | 174 |
| Good           | 7.94%     | 15  |
| Fair           | 0.00%     | 0   |
| Poor           | 0.00%     | 0   |
| Very Poor      | 0.00%     | 0   |
| TOTAL          |           | 189 |

Manty Health and Wellness Clinic

## Q7 What is the likelihood that you will recommend the Manty Health and Wellness Clinic to other employees?



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Very Likely    | 92.55%    | 174 |
| Likely         | 7.45%     | 14  |
| Unsure         | 0.00%     | 0   |
| Unlikely       | 0.00%     | 0   |
| Very Unlikely  | 0.00%     | 0   |
| TOTAL          |           | 188 |