

ORDINANCE NO. 1242 – 07/21

**AMENDING SECTION 15-359 OF THE WALWORTH COUNTY CODE OF ORDINANCES
RELATING TO SPECIAL PAY PREMIUMS AT LAKELAND HEALTH CARE CENTER**

THE WALWORTH COUNTY BOARD OF SUPERVISORS DOES ORDAIN AS FOLLOWS:

PART I: That Section 15-359 of the Walworth County Code of Ordinances is hereby amended to read as follows (additions are underlined; deletions are shown in strike-through text):

“Sec. 15-359. Special pay premiums.

(b) Any premium listed below is paid on productive hours only.

Type of Premium	How Much	Who	Special Notes
Shift Premium	\$1.00/hour	LPN (2nd and 3rd shift) *Excludes red-circled employees	Received for any hours worked from 2:30 p.m. to 7:00 a.m.
	\$1.50/hour	RN and Assistant Nurse Manager (2nd and 3rd shift) *Excludes red-circled employees	Received for any hours worked from 2:30 p.m. to 7:00 a.m.
	\$0.75/hour	All hourly LHCC employees in nursing excluding RN's and LPN's (2nd and 3rd shift) *Excludes red-circled employees	Received for any hours worked from 2:30 p.m. to 7:00 a.m.
	\$2.00/hour	<u>2nd and 3rd Shift LPNs, RNs, CNAs, CMAs, Crisis Nurse Aides and any other hourly LHCC employees in nursing</u>	<u>Received for any hours worked from 2:30 p.m. to 7:00 a.m.</u>
	\$0.50/hour \$2.00/hour	Food service, recreation, restorative and reception employees, including Administrative Clerks I, II and III, at LHCC *Excludes red-circled employees	Received by employees scheduled to work 2nd shift with a start time of 11:30 a.m. or later for <u>any hours worked from 11:30 a.m. to 7:00 a.m.</u>
	\$0.75/hour	Correctional or Communications Officers (2 nd shift)	Received for any hours worked from 3:00 p.m. to 11:00 p.m.

PART II: That this ordinance shall be effective retroactively as of June 27, 2021.

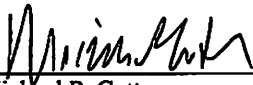
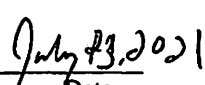
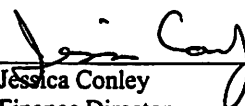
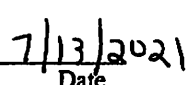
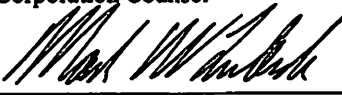

PASSED and ADOPTED by the Walworth County Board of Supervisors this 13th day of July 2021.

1 _____
2 Nancy Russell
3 County Board Chair
4
5 County Board Meeting Date: July 13, 2021
6
7 Action Required: Majority Vote X

Kimberly S. Bushey
Attest: County Clerk

Two-thirds Vote _____ Other _____

Policy and Fiscal Note is attached.
Reviewed and approved pursuant to Section 2-91 of the Walworth County Code of Ordinances:

 _____ Michael P. Cotter Corporation Counsel	 _____ Date	 _____ Jessica Conley Finance Director	 _____ Date
 _____ Mark W. Lubarda County Administrator	 _____ Date		

If unsigned, exceptions shall be so noted by the County Administrator.

