APPLICATION FOR (CAA HQ 3108 MGMT 6.2025) CDOC CHIEF OF MEDICAL SERVICES (HYB...

Tina M Cullyford

General Information

Person ID
[redacted]

Address
[redacted]

Home Phone
[redacted]

Notification Preference
Email

Email
[redacted]

Alternate Phone
[redacted]

Former Last Name
Rosler

Month and Day of Birth
08/05

Personal Information

Driver's license
[redacted]

Can you, after employment, submit proof of your legal right to work in the United States?
Yes

What is your highest level of education?
Bachelor's Degree

Preferences

Are you willing to relocate?
No

Preferred Type of Work
Full Time

Preferred Shifts
Day, Evening, On Call (as needed)

Preferred Type of Position
Regular

Objective
To further my career with the Colorado Department of Corrections through a Chief of Medical Services position to continue to guide exceptional medical care for incarcerated individuals.

Education

School
Capella University

School Type
College/University

Education Website
www.capella.edu

Location
Minneapolis, Minnesota

Degree
Bachelor's

Major/Minor
Nursing

Units Completed
192 Quarter

Graduated
Yes

School
Otero Junior College

School Type
College/University

Location
LaJunta, Colorado

Degree

Major/Minor

Units Completed

Associate's	Nursing	65 Semester

Graduated
Yes

School	School Type	Location
Morgan Community College	College/University	Limon, Colorado

Degree	Major/Minor	Units Completed
No Degree	Nursing-Pre-requisites	35 Semester

Graduated

Work Experience

Nurse Consultant
4/2021 to Present

Employer	Address	Phone Number
Tina Cullyford- Nurse Consultant	[redacted]	[redacted]

Hours Worked Per Week	No. of Employees Supervised	Name of Supervisor
8	0	Self Employed

May we contact this employer?

Duties
Perform consulting on legal and licensure complaints for Colorado Attorney General, Department of Regulatory Agency and out of state attorneys.
Review of files with a detailed written report.
Testify in court if required.

Regional Health Services Administrator
12/2019 to Present

Employer	Address	Phone Number
Colorado Department of Corrections	1250 Academy Park Loop Colorado Springs, Colorado, 80910	7193201054

Hours Worked Per Week	No. of Employees Supervised	Name of Supervisor
40	7	Leonard Woodson - Deputy Director of Clinical Services

May we contact this employer?
Yes

Duties
Directly supervise 5 HSA's at AVCF, Denver Complex, LCF, SCF, LVCF/YOS and PPMU medical and mental health monitor.
Offer collateral supervision to the Private Prison Monitoring Unit (PPMU) 2 HSA's at BCCF and CCCF.
Assume role of HSA for any facility I oversee when there is a vacancy. Directly supervise staff and complete all aspects of the PMP.
Offer guidance and support on a variety of operational issues as they arise.
Offer guidance and support on personnel issues as they arise.
Review performance documentation to include reviews, and evaluations.
Review all step II grievances.
Answer step II grievances in the absence of an HSA.
Provide on-call coverage on a rotating schedule.
Facilitate calls with HSAs to disseminate needed information.
Offender Services Liaison on movement throughout the state.
SME for the DECORUM project and medical portion of eOMIS
Full access to IAM system for onboarding and offboarding clinical staff.
Liaison on MAT grants and construction for program. Oversee budget and ensure spending is completed and recorded.
Work with DORA on rule making for the department's community clinic licenses.
Member of the policy committee at HQ level.
Member of committees on numerous projects to include mobility designations, parole

medications, MAT program, and release programs.
Liaison with CDPHE for outbreaks.
NCCHC committee for accreditation. Will switch back to ACA committee if needed.
Member of the dementia committee for the unit at SCCF.
Workgroup for expanding end of life care options at DRDC and CTCF.
Interview potential candidates for various disciplines, complete hiring packets, and make recommendations regarding hiring new employees across the state.
Complete application reviews as assigned by HR.
Complete reviews of SOW's as assigned by budget.
Testify on behalf of the department in an individual capacity or as a 30b6 witness as assigned.

Reason for Leaving

Further my career with CDOC as a Chief of Medical Services

Health Services Administrator
5/2017 to 3/2021

Employer	Address	Phone Number
Colorado Department of Corrections	10900 Smith Rd Denver, Colorado, 80239	3033072301

Hours Worked Per Week	No. of Employees Supervised	Name of Supervisor
40	26	Jill Lampela - Chief of Clinical Operations

May we contact this employer?
Yes

Duties
Directly supervise 32 staff within multiple disciplines.
Oversee budget for three correctional facilities. To include medical, mental health, medical records, residential therapy, therapeutic community, and sex offender management programs.
Chair the Quality Assurance Program for three facilities.
Enter payroll for all direct reports.
Interview potential candidates for various disciplines, complete hiring packets, and

make recommendations regarding hiring new employees across the state.
Participate in the progressive discipline process for current employees and complete termination packets for HQ review.
Member of the policy committee at the facility and HQ level.
Answer step II grievances.
Provide 24/7 on-call coverage, as needed.
Coverage for RHSA as delegated.
Member of committee on numerous projects to include mobility designations, parole medications, MAT program, and release programs.
Speak with families. Arrange special visits as necessary.
Daily meetings with the DRDC/CCC management team.

Reason for Leaving

To obtain a position as a Regional Health Services Administrator

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Nurse IV
6/2016 to 5/2017

Employer	Address	Phone Number
Colorado Department of Corrections- DRDC	10900 Smith Road Denver, Colorado, 80239	303-307-2301

Hours Worked Per Week	No. of Employees Supervised	Name of Supervisor
40	5	Dwayne Fox - RHSA

May we contact this employer?
Yes

Duties
Directly supervise 5 staff as well as manage employees for those who are my direct report.
Covered DWCF when there was no HSA to help DRDC HSA.
Worked with providers directly on their day 4 numbers. Developed and implemented plans to keep numbers below 40.
Complete provider and nursing schedules.
Participate in interview panels for various positions.

Validate CQI data and help RN IIIs develop their plan of actions.
On-call rotation as well as cover for other nurse supervisors that have a conflict with their call rotation.
Random sharp counts.
Random documentation checks as well as nurse in-services to help them become proficient with policies and clinical standards.
Assign Lipincotts.
Payroll and overtime tracker.
Navigating eOMIS and help all staff (providers and nurses) to the best of my ability.
Attend daily roll call and managers meetings.
Cover for HSA when she is was unavailable
Complete all steps of performance documentation.

Reason for Leaving

To promote to a HSA at DRDC.

Nurse III
12/2014 to 6/2016

Employer	Address	Phone Number
Limon Correctional Facility	Limon, Colorado, 80826	719-775-7653

Hours Worked Per Week	No. of Employees Supervised	Name of Supervisor
40	9	Nicole Blatnick - HSA

May we contact this employer?
Yes

Duties
Supervise up to 9 nurses to include scheduling, payroll, training, and reviews.
Evaluations, plans and progressive discipline.
CQI audit data collection and co-chair of quarterly meetings.
ACA file completion.
General floor nursing duties to include medication administration, charting, triage, emergency responses, and other duties as assigned.

Hypertension and diabetic medication compliance tracking.
Track psychotropic medication compliance for all P3 and above offenders weekly.
Educate on medication and schedule with mental health providers as necessary for offenders who fail to take prescribed medication.
Developed and maintained a chronic care data base to ensure continuity of care.
Cover for the health services administrator as designated with the management team and/or training and meetings.
Policy and review committee.
Chart reviews daily, with and without provider to ensure proper documentation and policy are followed.
Answer step one grievances.
Complete on- call nurse duties biweekly.
Cover shifts as necessary. Work in addition of 40 hours most weeks.
Monthly one-on-one meetings with nurses as well as monthly nurses' meetings discussing a minimum of one new/updated policy and/or clinical standard.
Speak with families of offenders.
Arranged a clinic wide PPCT course that fulfilled basic PPCT requirement as well as specialized training related to clinical services only.
Developed an "open" letter to nursing schools about working at CDOC.

Reason for Leaving

Employment closer to home as well as a new challenge as a Nurse IV in a different correctional setting.

RN I
12/2012 to 12/2014

Employer	Address	Phone Number
Colorado Department of Corrections- LCF	Limon, Colorado, 80828	7197757653

Hours Worked Per Week	Name of Supervisor	May we contact this employer?
40	Nicole Blatnick - HSA	Yes

Duties
General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned by supervisor. Work extra shifts

as needed.

Reason for Leaving

Promotion

RN-Charge Nurse
1/2011 to 6/2013

Employer	Address	Phone Number
Grace Healthcare	[redacted]	[redacted]

Hours Worked Per Week	No. of Employees Supervised	Name of Supervisor
40	4	Judi Cole - ADON

May we contact this employer?
Yes

Duties
Charge nurse at long-term facilty.
Supervised minimum 2 CNA's per shift.
Up to 2 LPN's per shift.
Wound Care
Medication administration
Charting

Reason for Leaving

Needed employment closer to home. Different challenge not offered in LTC.

Additional Information

Additional Information

Transcripts of BSN degree.

Certificates and Licenses

TYPE	LICENSE NUMBER	ISSUING AGENCY
Certified Correctional Health Professional		NCCHC

DATE ISSUED	DATE EXPIRES
10/2024	12/2026

TYPE	LICENSE NUMBER	ISSUING AGENCY
LPN License	PN.0048761	DORA

DATE ISSUED	DATE EXPIRES
9/2011	8/2012

TYPE	LICENSE NUMBER	ISSUING AGENCY
Registered Nurse	RN.1617494	State of Colorado

DATE ISSUED	DATE EXPIRES
8/2012	9/2026

Skills

Office Skills

Typing	Data Entry
60	0

References

Reference Type	Name	Position
Professional	Tapley, Brian	Clinical Informatics Specialist

Address	Phone	Email Address
1250 Academy Park Loop, Denver, Colorado 80239	719-500-1697	brian.tapley@state.co.us

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Reference Type	Name	Position
Professional	Garcia-Hyman, Carley	RHSA

Address	Phone	Email Address
1250 Academy Park Loop, Colorado Springs, Colorado 80910	719-505-4076	carley.garciahyman@state.co.us

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Reference Type	Name	Position
Professional	Lisac, Dave	Deputy Director of Prison Operations

Address	Phone	Email Address
1250 Academy Loop, Colorado Springs, Colorado 80910	719-505-4076	dave.lisac@state.co.us

Reference Type	Name	Position
Professional	Brandt, Jeremy "Jess"	Assistant Director of Offender Services

Address	Phone	Email Address
1250 Academy Park Loop, Colorado Springs, Colorado 80910	719-431-4149	jeremy.brandt@state.co.us

Reference Type	Name	Position
Professional	Maul MD, Randolph	Chief Medical Officer

Address	Phone	Email Address
1250 Academy Park Loop, Colorado Springs, Colorado 80910	719-306-2821	randolph.maul@state.co.us

Attachments

ATTACHMENT	FILE NAME	FILE TYPE	CREATED BY	ACTION
Transcripts (1).pdf	Transcripts (1).pdf	References	Job Seeker	Edit View Redacted File
Tina Cullyford Resume 2025.docx	Tina Cullyford Resume 2025.docx	Resume	Job Seeker	Edit View Redacted File

Resume

Text Resume

Agency-Wide Questions

1. Are you a current State of Colorado employee?

Yes

2. Are you a previous State of Colorado employee?

No

3. If you receive notice that you have been eliminated from consideration for the position, you may protest the action by filing an appeal with the State Personnel Board/State Personnel Director within 10 days from the date you receive notice of the elimination. Also, if you wish to challenge the selection and comparative analysis process, you may file an appeal with the State Personnel Board/State Personnel Director within 10 days from the receipt of notice or knowledge of the action you are challenging. Refer to Chapters 4 and 8 of the State Personnel Board Rules and Personnel Director's Administrative Procedures, 4 CCR 801, for more information about the appeals process. The State Personnel Board Rules and Personnel Director's Administrative Procedures are available at spb.colorado.gov. A standard appeal form is available at: spb.colorado.gov. If you appeal, your appeal must be submitted in writing on the official appeal form, signed by you or your representative, and received at the following address within 10 days of your receipt of notice or knowledge of the action: Colorado State Personnel Board/State Personnel Director, Attn: Appeals Processing, 1525 Sherman Street, 4th Floor, Denver, CO 80203. Fax: 303-866-5038. Phone: 303-866-3300. The ten-day deadline and these appeal procedures also apply to all charges of discrimination.

I affirm that I have read and understand my appeal rights as stated above.

4. Are you a veteran? (If yes, please remember to attach your DD-214 to your application if you believe you're eligible for veteran's preference points).

No

5. Under the Colorado Constitution, art. XII, sec. 15, qualified veterans and surviving spouses are eligible for preference when participating in the selection process for state job opportunities, other than for promotional opportunities. If you are an honorably discharged veteran, the spouse of a veteran unable to work due to a service connected disability, or the unremarried surviving spouse of a veteran who served on active duty in the United States Armed Forces during one of the periods for which the federal government awards veteran's preference, you may claim preference during the selection process for a position

within the state personnel system. In order for us to determine your eligibility for veterans preference, you must attach a copy of a DD-214 form and other supporting documentation along with your application. Please indicate which of the following options best fits your veterans status:

I am not a Veteran.

6. Are you applying for REINSTATEMENT?

No

7. Do you acknowledge and understand that if selected for a CDOC position and you bear body art, tattoos and/or body piercings that you will be required to remove piercings and cover tattoos during your shift?

I so acknowledge.

8. How did you learn about this job opportunity?

State of Colorado (CO-Jobs) Website

9. Please state specifically who or where you learned about this job. If you were referred by a current employee, state the full name of the employee; Job Fair, state which job fair; newspaper, state which newspaper, etc.

Referred by Chief of Clinical Services

10. I acknowledge that as a current or past Colorado Department of Corrections employee applying for a Promotion, Transfer, Reinstatement or Voluntary Demotion, I authorize the gaining Appointing Authority, Hiring Manager and/or delegated representative access to any information pertaining to my CDOC employment including, but not limited to, personnel file/records or information relating to my current and/or past employment performance documentation, in consideration of my application for employment. This release is executed with full knowledge, understanding, and consent that any Information discovered may be used for the official purposes. I also understand that any information reviewed will not be disclosed to another person or agency outside of the Colorado Department of Corrections, unless authorized and consistent with applicable law. I release the Colorado Department of Corrections from any liability or damage that may result from the use of information obtained.

I so acknowledge.

11. Basic Training: If appointed to a position, you must successfully complete the Colorado Department of Corrections basic training prior to starting your work assignment. Basic Training is a 6 week, paid training program, that is held at an

assigned training location (this could be your assigned facility or it could be another location) Monday through Friday from 8am to 5pm. Daily attendance is a requirement during basic training. Failure to attend training may be considered failure to perform satisfactorily, and may result in termination. New employees must attend and pass all phases of basic training as required which includes English reading comprehension, relevant competency assessments and written/practical exams in Defensive Tactics. Do you acknowledge this?

I so acknowledge.

12. Thank you for your interest in employment with the Colorado Department of Corrections (CDOC.) As part of the pre-employment investigation process, an integrity interview will be conducted. I understand that I must disclose everything in the interview as it relates to the questions asked and that my fingerprints will be sent to the Federal Bureau of Investigations (FBI.) If at any point during the background process I have any negative contact with a law enforcement agency (i.e.: tickets, accidents, arrests, etc.), a negative termination from employment, or any contact with offenders or former offenders on a personal level, I must contact the Background Investigations Unit with this information, and provide any documents, within 24 hours of the incident having occurred, or the next business day if it falls on a holiday or weekend. I understand that I may be required to submit to a polygraph examination, psychological or suitability examination or drug test and must pass the required examinations as a condition of employment. The background investigation is a continuous process. Failure to disclose any information on my application, refusal to provide additional requested information, participate and answer integrity interview questions or conduct myself in a professional manner during the process will be grounds for disqualification from the background process and I will be deemed ineligible for employment. If I am hired and there is any omission or falsification of information regarding my criminal history, or based on the severity of any new pertinent information the CDOC will have grounds to terminate. If it is determined that I am ineligible for employment based on the CDOC pre-employment hiring standards, I will be notified regarding the reason for ineligibility.

I acknowledge and agree.

13. If you indicated that you are a previous State of Colorado employee, please list all State of Colorado Departments or institutions of Higher Education for which you have worked for and your Employee ID (if known):

CDOC

14. If you indicated that you are a current or previous State of Colorado employee, please list your dates of employment and classifications for all State of Colorado Departments or institutes of Higher Education for which you have worked.

Colorado Department of Corrections:
Nurse I 12/12 to 12/14
Nurse III 12/14 to 6/16
Nurse IV 6/16 to 5/17
HSA 2/17 to 5/17 interim and 5/17 to 3/21
RHSA 12/19 to 9/20 interim and 9/20 to present
Interim Chief of Clinical Operations

15. If you indicated that you are a current State of Colorado employee, please list all State of Colorado Departments or institutions of Higher Education for which you have worked for and your Employee ID (if known):

CDOC 18645

Supplemental Questions

1. I acknowledge that the 'Work Experience" section of the application is complete and contains all relevant work experience related to the position that I am applying for. This information will be used to help determine compensation for the position. "See resume" statements cannot be accepted in lieu of the "work experience" section of the application. Additional work experience will not be accepted after the job announcement close date for compensation purposes.

I so acknowledge this statement.

2. I acknowledge that time sensitive correspondence will be sent via email from the Office of Human Resources and/or the Background Investigation Unit throughout the application process.

YOU ARE STRONGLY ENCOURAGED TO CHECK YOUR E-MAIL DAILY.

I understand time sensitive correspondence will be sent via email and that I should check my email daily.

3. The assessment process for this position will consist primarily of a review of your application materials and responses to supplemental questions against minimum qualifications, preferred qualifications and required competencies. Your responses will also be evaluated on ability to follow instructions, clarity,

conciseness, organization, grammar, spelling and word choice.

Application materials and responses to supplemental questions will be reviewed by Subject Matter Experts to assess and rank applicants.

Do you acknowledge this?

I so acknowledge this statement.

4. Do you hold an active Registered Nurse, or Advanced Practice Nurse license from the Colorado Board of Nursing?

Yes

5. If you hold a RN or APN license please enter the license number.

RN 1617494 expires 9/26

6. Please detail your experience managing a multi-disciplinary health care program that provided medical and behavioral health services. Include years of experience, various disciplines, operations, and programs.

I'd be happy to detail my experience managing multi-disciplinary healthcare programs that provided both medical and behavioral health services. My career in this area spans over 10 years, predominantly within correctional settings. Currently, I'm serving as the Interim Chief of Clinical Operations, a role I've held since March 2025, and previously from June to December 2022. In this executive position, I oversee our entire clinical operations, which encompasses everything from direct medical care to behavioral health services across multiple facilities. A significant part of my role involves supervising our Regional Health Services Administrators and Health Services Administrators, as well as our Private Prison Monitoring Unit, which focuses on both medical and behavioral health compliance. I work really closely with other chiefs and program administrators across all disciplines—that includes medical, behavioral health, dental, and substance use treatment. Our goal is always to ensure we're providing the best possible care while adhering to our policies. I'm also heavily involved in various workgroups and committees, where we focus on driving positive changes for both the incarcerated population and our staff. One example of my approach to leadership is how I've tackled communication challenges. We had some noticeable divides between our HSAs and various program administrators and chiefs. For our May HSA meeting, I opened the floor for questions ahead of time, allowing each program administrator and chief to share updates and then directly address concerns. This was incredibly successful; everyone felt empowered, heard, and it significantly reduced tensions. I also initiated a new process where we'll rotate our quarterly HSA

meetings to different facilities. This allows our HSAs to see how operations differ across sites and learn best practices they can bring back to their own teams. Prior to this interim leadership role, I've served as a Regional Health Services Administrator since September 2020, with an interim period before that. In this capacity, I directly supervise five Health Services Administrators and two PPMU monitors, overseeing all aspects of clinical care for offenders in my region. I also provide collateral supervision to HSAs at our private facilities and act as the main liaison with prison operations for all clinical needs – medical, behavioral health, and dental. A significant part of my job is providing guidance and support on a wide range of operational and personnel issues. This includes everything from performance reviews to coaching staff through challenges, and even making termination recommendations when necessary. I also review all Step II offender grievances for my facilities. This gives me a unique perspective to identify issues that could be improved upon, allowing us to have direct dialogues and make operational changes where needed. I'm also involved in things like grant management for expanding services, and I work closely with HSAs on their budgets to ensure proper spending. Before moving into regional oversight, I spent about three and a half years as the Health Services Administrator for a major correctional facility (DRDC), from May 2017 to March 2021. This was a really hands-on role where I supervised a multi-disciplinary team, including RNIVs, behavioral health supervisors, mid-level providers, and dentists. For extended periods during that time, I also stepped in as interim RHSA for six facilities and interim HSA for others, which truly broadened my perspective. A key accomplishment during this time was developing and launching our Medication-Assisted Treatment (MAT) program. This involved a lot of moving parts: ensuring our mid-level providers received their X-waivers, training our nurses to safely deliver MAT medications while also considering facility security concerns, and collaborating with our behavioral health team to develop necessary training and group programs for offenders. I also attended monthly MAT offender staffings to ensure compliance. Beyond MAT, I was responsible for all our clinical ACA files, Continuous Quality Improvement (CQI) audits, and developing action plans across clinical, behavioral health, and our Sex Offender Treatment Programs. I even taught Medical Emergency Response courses throughout the state to improve care during emergencies and helped devise a transgender checklist for staffings during the intake process. My journey into healthcare management began with direct clinical roles. I started as an RN IV from July 2016 to February 2017, where I supervised other nurses and managed clinic operations, including mid-level providers and psychiatry. Prior to that, as a Nurse III at Limon Correctional Facility for about a year and a half, I supervised up to 10 nurses, handled scheduling, ensured proper processes and

documentation, and triaged mental health kites to support our limited behavioral health staff. This progression from direct patient care 2012-2014 and nursing leadership into broader operational and program management has given me a really holistic understanding of how to effectively manage and improve multi-disciplinary healthcare services.

7. **Certification and Confidentiality Statement**

I certify that:

--I understand that this, my completed Application, the attached Supplemental Questions, and my responses are confidential and that I have neither consulted with others nor received assistance in the preparation, writing, or editing of my responses and the information contained herein is in my own words and was prepared and completed solely by me and only me.

--All the information I have provided herein is true, complete and correct to the best of my knowledge and belief, and is made in good faith.

--I have not communicated the confidential information of this, my Application and the attached Supplemental Questions in any way to other candidates, potential candidates, subject matter experts, or any person.

--I understand that if the confidential information in this, my Application and the attached Supplemental Questions and/or my responses, are found to have been falsified, plagiarized, or shared in any way, I may be disqualified or removed from the position if appointed.

I agree to the terms and conditions of this Certification and Confidentiality Statement.

Accessibility Statement

A. Position Information [PAR #31419]:

Vacancy Type	Current Vacancy		
Facility	HQ		
Agency Code	CAA		
Position Number	3180	Original PDQ	
Employee Action	New Hire		
		Employee Name	undefined
Estimated Eff Date	07/01/2025		
Contact Name	JULIE DREW	**Contact #**	719-579-9580
Position Action	No Changes		
Minimum Sal ($/Mon)	8637 - 13820		
Requested Sal ($/Mon)	8637		
Current Class Code	H6G8XX	**Current Class Title**	MANAGEMENT
Proposed Class Code		**Proposed Class Title**	

B. Division Information:

Division Information	Headquarters	**Date of Request**	06/12/2025
Work Unit	CLINICAL SERVICES - ADMINISTRATION		
Work Title	Chief of Medical Services (works remotely part-time)		

C. Type of Action Requested:

Vacancy Status	Unencumbered	**Date Vacated**	05/31/2025
Last Incumbent ID	13353	**Last Incumbent Name**	JILL WILLIAMS
Assignment Type	Permanent		
Time Basis	Full Time		

D. Reason for Request (Include Specific Details):

Previous incumbent retired - pay through date TBD. This position serves as the Chief of Medical Services. This position is needed to assist in the operational management of Clinical Services to ensure consistent application of policies and procedures in all clinics throughout the department. It is a critical position so it may be necessary to move Jill Williams to a substitute position if we need to fill the position prior to her pay through date.

E. Signatures:

I certify that I have reviewed and agree with the information contained in this document and supporting documentation.

Appointing Authority/Designee

Badge # : 14729 **Name :** LEONARD WOODSON **Date :** 06/13/2025 05:04:30 PM

Department Group

Group :

I certify that I have reviewed and agree with the information contained in this document and supporting documentation.

Dir/Designee Badge # : 31999 **Name:** LACY MONDAY **Date:** 06/17/2025 07:39:30 AM

Budget Office

☑ **Position Number Confirmed**

Fund Line	Unit	Appropriation Code	Cert Name
1000	2E00	CGBFA004G	CAAA MED MGMT

Location	Sub Location	Activity
		1200

Badge # : 7687 **Name:** MARCY DELCASTILLO **Date:** 06/17/2025 10:42:42 PM

Office of Human Resources

Recommended PDQ Changes:

How Position Filled?: Promotion

Additional Notes:

Referral Registration #: HQ 3108 H6G8XX MGMT 7.2025

Employee Badge#: 18645

Employee Name: TINA CULLYFORD

Empl Personal Email (Non-DOC):

Effective Date: 08/01/2025

FLSA Status: Exempt

Pay Differential: 0- No Pay Differential

On Call: No

Badge #: 33265 **Name:** MALORIE MESTAS **Date:** 07/24/2025 12:50:06 PM

Notes/Comments:

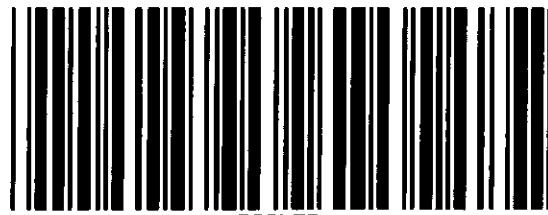
07/24/2025 12:50:06 PM - Malorie Mestas [Badge # 33265]
Candidate Cullyford, Tina badge #18645, appointed to MGMT- Clinical services 3180 at HQ, effective August 1st, 2025. Previous HP VII, previous salary $10,808.77. Promotion, trial service. TIS -0. New salary $11,682. FLSA Exempt, CO WINS Not Covered,0 - No Pay Differential

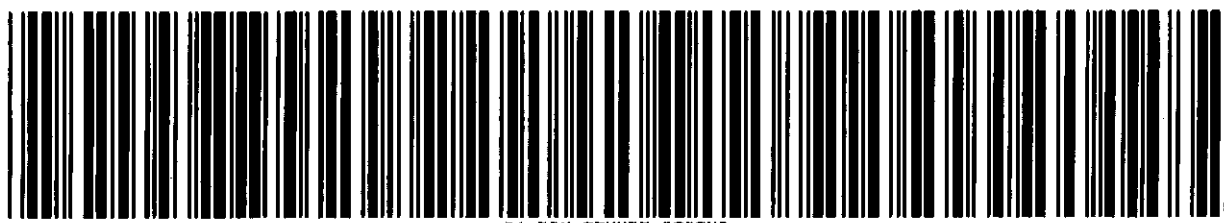
Rejection History:

No rejection history for this PAR.

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18645


ROSLER


81-PAY-TENURE-STATUS

COLORADO
Department of Corrections

AR Form 1450-03A (03/01/24)

Discretionary Pay Differential Request

I. General Info					
Date:	3/19/25	Assigned Facility/Office	Headquarters / Clinical Services		
Printed name of employee for whom award is requested	Cullyford, Tina				
Employee #	18645	State EID #	997087514	Classification	Health Professional VII
Employee Address	[redacted]				

I. II. Type of discretionary pay requested: (Please check one)							
	Matching Pay	X	**Temporary Pay**		Project Pay		Housing Premium
	Referral Award		Signing Award		Incentive Award		

Justification for discretionary pay request (must meet criteria for type of pay - see definitions in AR): Tina Cullyford will serve as the interim Chief of Clinical Operations while that incumbent is on administrative leave. I am requesting a 10% non base building monthly increase in her salary while she serves in this role because she will be responsible for tasks that are above her current classification.

** No discretionary pay differentials are guaranteed. If granted, they may be discontinued at any time.

Matching Pay:

1.	Amount offered:		% base building:		% non-base building:	
	Pay start date:		Pay end date:			
2.	Is pay a counter offer to a bona fide job offer?				If yes, attach documentation of job offer.	
3.	Is pay for the purpose of bringing pay rate of long term employee to rate of newer employee (s)?					
4.	Is pay offered for a transition to another position/assignment?				If yes, provide position and/or classification.	

Temporary Pay:

1.	Status and position number of incumbent, if a temporary assignment		Active; will remain in HQ HP VII position 6216.			
2.	Time limit on assignment is (days)	90 days	Effective Date: 3/19/25		End Date: 6/19/25	

Assignment is not permanent and will be reviewed periodically to determine need for continuation or termination. **Assignment may be terminated at any time by the appointing authority.**

Referral Award:

1.	Referral award (not to exceed $500):		Employees performing recruitment as part of their regular assignments are ineligible. Employees assisting at hiring events are also ineligible.		
	100% to be paid six months after hire, provided that both employees are still employed.				
	Recruitment Date		Hire Date		Pay Date	
	Verify employee's name on recruited application. Payout is non-base building and statutory lid applies.					

Signing Bonus:						
1.	Signing Bonus (not to exceed $5,000) Amount:			Payout will be distributed as follows:		
Payout is non-base building and statutory lid applies. **If an employee separates from DOC service prior to the completion of one full year, the award tendered will be returned in full.**						
Project Pay:						
1.	Status and position number of incumbent, on project assignment:					
2.	Time limit on project is (days)		Effective Date		End Date	
Assignment is not permanent and will be reviewed periodically to determine need for continuation or termination. **Assignment may be terminated at any time by the appointing authority.**						
Incentive Award:						
1.	Effective Date:		Amount Eligible:			
Assignment is not permanent and will be reviewed periodically to determine need to for continuation or termination. Assignment may be terminated at any time by the appointing authority.						
Housing Premium:						
1.	Effective Date:		Amount Eligible:			

III. Routing as follows:

Approved by:	Michele Cottingham Signature - Director of Human Resources	3/20/25 Date
	Tracy Henderson Signature Division Director	3/20/2025 Date
	Mitch Kurtz Signature Director of Finance & Administration	4/1/25 Date
	Signature Deputy Executive Director	04/01/2025 Date

IV. The amounts, terms, and conditions of this agreement may not be grieved or appealed.

By my signature affixed hereto, I understand and agree to all the applicable provisions of this document.

Signature	Appointing Authority	3/20/25 Date
	Employee Tina M Cullyford	4.3.25 Date
	After signatures, forward to the Office of Human Resources and the Employee Compensation Unit	

COLORADO
Department of Corrections
Office of Clinical & Correctional Services
1250 Academy Park Loop
Colorado Springs, CO 80910

MEMORANDUM

DATE: June 4, 2025

TO: Michele Cottingham
Director of Human Resources

THROUGH: Lacy Monday
Director of Clinical and Correctional Services

FROM: Leonard E. Woodson, III
Deputy Director of Clinical and Correctional Services

SUBJECT: Request to extend Temporary Pay for Tina Cullyford

I am requesting an extension of the 10% non base building temporary pay for Tina Cullyford, employee #18645, who is serving as the interim Chief of Clinical Operations. The previously approved discretionary pay request was for the dates of March 19, 2025, through June 19, 2025. I am requesting an extension through August 19, 2025. The Chief of Operations position became vacant June 1, 2025, and Tina Cullyford will continue to serve as interim while the position is posted/filled.

cc: doc_hrrecord@state.co.us
doc_payroll@state.co.us

/jad

STATE OF COLORADO

HR_Forms - DOC, DOC <doc_hr_forms@state.co.us>

CDOC Total State Service Audit

1 message

CDOC Office of Human Resources <doc_hr_forms@state.co.us> Tue, Mar 28, 2023 at 6:52 PM
To: TINA CULLYFORD <tina.cullyford@state.co.us>

COLORADO
Department of Corrections
Office of Human Resources

March 28, 2023

Dear Tina Cullyford, Badge #18645

The Office of Human Resources (OHR) recently conducted an audit of your Total State Service (TSS), the accumulation of all permanent full time or part time employment with the State of Colorado.

Definitions:

- **Agency 1 Date/Entry on Duty (EOD):** The most recent date you began working for the Colorado Department of Corrections, excluding temporary or student employment.
- **Adjusted Service Date/Total State Service (TSS):** The date which represents the total number of years/months/days you have been employed by the State of Colorado and adjusts to account for any breaks in service of more than ninety (90) days. Temporary and student employment is excluded as specified in Colorado State Personnel Board Rule 1-70.
- **Accrual Date:** The leave earning rate computed as the Adjusted Service Date (TSS) rounded to the 1st of the following month, except if the date is the 1st of the month. Temporary and student employment is excluded as specified in Colorado State Personnel Board Rule 5-7.

After reviewing your employment history with the State of Colorado, your dates prior to the audit were:
Agency 1/EOD Date: 12/17/2012
Adjusted Service/TSS Date: 12/17/2012
Accrual Date: 12/17/2012

Effective 4/1/2023, your dates following the audit are:
Agency 1/EOD Date: 12/17/2012
Adjusted Service/TSS Date: 12/17/2012
Accrual Date: 12/17/2012

If you have any questions, reply to this email and an OHR employee will follow up with you. If you prefer to be contacted via phone, please include the best phone number and time of day to reach you. The work you do is important and appreciated!

EMPLOYEE INFORMATION:

Employee Badge #	Employee Name	SSN #	PUF ID
18645	CULLYFORD, TINA MARIE	###-##-2457	98406
EID	**Date of Birth**	**Ethnicity**	**Gender**
997087514	08/05/1973	W	F
Home Address	**Home City**	**Home State**	**Home Zip**
[redacted]	[redacted]	[redacted]	[redacted]
Home Phone	**Mailing Address**	**Education Level**	**Education Year**
[redacted]	[redacted] [redacted]	Bachelor's Degree	2012
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
Adjusted Service Date	**Agency 1 Date (DOC)**	**Agency 2 Date (Facility)**	**Service Start Date (State)**
12/17/2012	12/17/2012	12/17/2012	
Accruals Date	**Cert Status**	**Current/Previous Salary**	**New Salary**
12/17/2012	1	8332.00	8332.00

GENERAL INFORMATION:

Effective Date	CPPS Action	Agency Name	Action Record #
12/01/2019	DISCRETIONARY PAY - 80PE DP	CORRECTIONS	00000-00

CURRENT POSITION INFORMATION:

Position #	Position Agency	Class Code	Class Title
29292	CAA	C7C6XX	HEALTH PROFESSIONAL VI
Supervisor Badge#	**Supervisor Name**	**Sup. Position #**	**Supervisor Agency**
13353	LAMPELA, JILL Y	3180	CAA

NEW POSITION INFORMATION:

Position #	Position Agency	Class Code	Class Title
29292	CAA	C7C6XX	HEALTH PROFESSIONAL VI
Supervisor Badge #	**Supervisor Name**	**Sup. Position #**	**Supervisor Agency**
13353	LAMPELA, JILL Y	3180	CAA
Grade	**Funding Cert Name**	**Fund Percent**	**Pay Differential**
C25	CAAA DR INFIRMRY	GENERAL FUND	0E
City Code	**Physical Location**	**Expiration Date**	
261	34 - DRDC		
Facility	**Locator Code**	**Work Unit**	
DENVER COMPLEX	34 - DRDC	CLINICAL SERVICES - MEDICAL	
Business Street	**Business PO Box**	**Business City / Zip**	**Business Phone**
10900 SMITH RD		DENVER / 80239	(303) 307-2212

JUSTIFICATION:

TEMPORARY PAY DIFFERENTIAL IN THE AMOUNT OF 10% OR $833.00 PER MONTH FOR AN UNDETERMINED PERIOD DUE TO INTERIM APPOINTMENT TO BEGIN ON 12/01/2019. APPROVED BY DEPUTY EXECUTIVE DIRECTOR.

HR ONLY:

Authorized By Personnel	Appointing Authority	Date Entered	CPPS Entry Date
DAVID MIXER - LCA 422	CLIN SVCS - MICHELLE BRODEUR	12/13/2019	

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COLORADO
Department of Corrections

AR Form 1450-03A (10/01/19)

Discretionary Pay Differential Request

Date:	12/9/19	Assigned Facility/Office	DRDC Clinical Servcies		
Printed name of employee for whom award is requested	Cullyford, Tina				
Employee #	18645	State EID #997087514		Classification	HP VI
Employee Address	[redacted]				

	Matching Pay	X	Temporary Pay		Project Pay		Housing Premium
	Referral Award		Signing Award		Incentive Award		

Justification for discretionary pay request (must meet criteria for type of pay - see definitions in AR): Ms. Cullyford will be serving as an interim Regional Health Services Administrator due to a current vacancy. She will be expected to perform duties and assume responsibilities that are outside her current job description; therefore, I am requesting a 10% non-base building salary increase while she services in this role.

** No discretionary pay differentials are guaranteed. If granted, they may be discontinued at any time.

Matching Pay:

1.	Amount offered:		% base building:		% non-base building:	
	Pay start date:		Pay end date:			
2.	Is pay a counter offer to a bona fide job offer?				If yes, attach documentation of job offer.	
3.	Is pay for the purpose of bringing pay rate of long term employee to rate of newer employee (s)?					
4.	Is pay offered for a transition to another position/assignment?				If yes, provide position and/or classification.	

Temporary Pay

1.	Status and position number of incumbent, if a temporary assignment		Active; will remain assigned to HP VI position 29292.		
2.	Time limit on assignment is (days)	180	Effective Date: 12/1/19		End Date:TBD

Assignment is not permanent and will be reviewed periodically to determine need for continuation or termination. Assignment may be terminated at any time by the appointing authority.

Referral Award

1.	Referral award (not to exceed $500):				
	100% to be paid six months after hire, provided that both employees are still employed.				
	Recruitment Date		Hire Date		Pay Date
	Verify employee's name on recruited application. Payout is non-base building and statutory lid applies.				

Signing Bonus:					
1.	Signing Bonus (not to exceed $5,000) Amount:		Payout will be distributed as follows:		
Payout is non-base building and statutory lid applies. If an employee voluntarily separates from DOC service prior to the completion of one full year, the award tendered will be returned in full.					
Project Pay					
1.	Status and position number of incumbent, on project assignment:				
2.	Time limit on project is (days)		Effective Date		End Date
Assignment is not permanent and will be reviewed periodically to determine need for continuation or termination. Assignment may be terminated at any time by the appointing authority.					
Incentive Award					
1.	Effective Date:		Amount Eligible:		
Assignment is not permanent and will be reviewed periodically to determine need to for continuation or termination. Assignment may be terminated at any time by the appointing authority.					
Housing Premium					
1.	Effective Date:		Amount Eligible:		

III. Routing as follows:

Approved by:

Signature Chief Human Resources Officer	Date 12-11-19
Signature Division Director	Date 12.12.19
Signature Associate Director of Budget	Date 12/11/19
Signature Deputy Executive Director	Date 12-13-19

IV. The amounts, terms, and conditions of this agreement may not be grieved or appealed.

By my signature affixed hereto, I understand and agree to all the applicable provisions of this document.

Signature

Appointing Authority	Date 12.9.19
Employee	Date 12/9/19

After signatures, forward to the Office of Human Resources and the Employee Compensation Unit

EMPLOYEE INFORMATION:

Employee Badge #	Employee Name	SSN #	PUF ID
18645	CULLYFORD, TINA MARIE	###-##-2457	82835
EID	**Date of Birth**	**Ethnicity**	**Gender**
997087514	08/05/1973	W	F
Home Address	**Home City**	**Home State**	**Home Zip**
[redacted]	[redacted]	[redacted]	[redacted]
Home Phone	**PO Box**	**Education Level**	**Education Year**
[redacted]	[redacted]	Bachelor's Degree	2012
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
Adjusted Service Date	**Agency 1 Date (DOC)**	**Agency 2 Date (Facility)**	**Service Start Date (State)**
12/17/2012	12/17/2012	12/17/2012	12/17/2012
Accruals Date	**Cert Status**	**Current/Previous Salary**	**New Salary**
12/17/2012	1	7222.00	8089.00

GENERAL INFORMATION:

Effective Date	CPPS Action	Agency Name	Action Record #
08/01/2018	MATCHING PAY - 80PE MP	CORRECTIONS	00000-00

CURRENT POSITION INFORMATION:

Position #	Position Agency	Class Code	Class Title
29292	CAA	C7C6XX	HEALTH PROFESSIONAL VI
Supervisor Badge#	**Supervisor Name**	**Sup. Position #**	**Supervisor Agency**
17328	DENNIS, NICOLE	6303	CAA

NEW POSITION INFORMATION:

Position #	Position Agency	Class Code	Class Title
29292	CAA	C7C6XX	HEALTH PROFESSIONAL VI
Supervisor Badge #	**Supervisor Name**	**Sup. Position #**	**Supervisor Agency**
17328	DENNIS, NICOLE RENEE	6303	CAA
Grade	**Funding Cert Name**	**Fund Percent**	**Pay Differential**
C25	CAAA DR INFIRMRY	GENERAL FUND	0E
City Code	**Physical Location**	**Expiration Date**	
261			
Facility	**Locator Code**	**Work Unit**	
DENVER COMPLEX	34 - DRDC	CLINICAL SERVICES - MEDICAL	
Business Street	**Business PO Box**	**Business City / Zip**	**Business Phone**
10900 SMITH RD		DENVER / 80239	(303) 307-2212

JUSTIFICATION:

MATCHING PAY AS A RESULT OF HB 18-1322 AND INCREASE FOR OTHER CLINICAL CLASSIFICATIONS BEING APPROVED. EMP WILL RECEIVE AN ADDITIONAL 12% ($867.00) PER MONTH GOING FROM $7222.00 PER MONTH TO $8089.00 PER MONTH EFF 8-1-18.

HR ONLY:

Authorized By Personnel	Appointing Authority	Date Entered	CPPS Entry Date
AMANDA GUTIERREZ - LCA 412	CLIN SVCS - MICHELLE NELSON	08/13/2018	

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COLORADO
Department of Corrections

AR Form 1450-03A (05/15/18)

Discretionary Pay Differential Request

I. General Info					
Date:	7/30/2018		Assigned Facility/Office	DRDC Clinical Services	
Printed name of DOC employee for whom award is requested	Tina Cullyford				
DOC Employee #	18645	State EID # 997087514		Classification	C7C6XX
DOC Employee Address	[redacted]				

I. II. Type of discretionary pay requested: (Please check one)							
X	Matching Pay		Temporary Pay		Project Pay		Housing Premium
	Referral Award		Signing Award		Incentive Award		

Justification for discretionary pay request (must meet criteria for type of pay - see definitions in AR):
As a result of HB18-1322 an increase in nursing and mid-level providers was approved. This will have an impact on current nursing salaries based off the mid point salary and years of service. This increase will result in nursing line staff salaries greater than current HP VI salaries.

** No discretionary pay differentials are guaranteed. If granted, they may be discontinued at any time.

Matching Pay:

1.	Amount offered:	12%	% base building: X		% non-base building:	
	Pay start date:	8/1/2018	Pay end date:			
2.	Is pay a counter offer to a bona fide job offer? No				If yes, attach documentation of job offer. N/A	
3.	Is pay for the purpose of bringing pay rate of long term DOC employee to rate of newer DOC employee (s)?		No			
4.	Is pay offered for a transition to another position/assignment? No				If yes, provide position and/or classification. N/A	

Temporary Pay

1.	Status and position number of incumbent, if a temporary assignment					
2.	Time limit on assignment is (days)		Effective Date:		End Date:	

Assignment is not permanent and will be reviewed periodically to determine need for continuation or termination. **Assignment may be terminated at any time by the appointing authority.**

Referral Award

1.	Referral award (not to exceed $500):				
	100% to be paid six months after hire, provided that both DOC employees are still employed.				
	Recruitment Date		Hire Date		Pay Date
	Verify employee's name on recruited application. Payout is non-base building and statutory lid applies.				

Signing Bonus:						
1.	Signing Bonus (not to exceed $5,000) Amount:	Payout will be distributed as follows:				
Payout is non-base building and statutory lid applies. **If DOC employee voluntarily separates from DOC service prior to the completion of one full year, the award tendered will be returned in full.**						
Project Pay						
1.	Status and position number of incumbent, on project assignment:					
2.	Time limit on project is (days)		Effective Date		End Date	
Assignment is not permanent and will be reviewed periodically to determine need for continuation or termination. **Assignment may be terminated at any time by the appointing authority.**						
Incentive Award						
1.	Effective Date:		Amount Eligible:			
Assignment is not permanent and will be reviewed periodically to determine need to for continuation or termination. Assignment may be terminated at any time by the appointing authority.						
Housing Premium						
1.	Effective Date:		Amount Eligible:			

III. Routing as follows:

Approved by:	Signature Chief Human Resources Officer	Date 7-30-18
	Signature Division Director	Date 7-30-18
	Signature Associate Director of Budget	Date 7/30/18
	Signature Deputy Executive Director RR briefed	Date 7/30/18

IV. The amounts, terms, and conditions of this agreement may not be grieved or appealed.

By my signature affixed hereto, I understand and agree to all the applicable provisions of this document.

Signature	Appointing Authority	Date 7-30-18
	DOC Employee Tina Cullyford HSA	Date 8/1/18
	After signatures, forward to the Office of Human Resources and Payroll	

EMPLOYEE ID | EFF DATE | PERS ACTIONS | HOME AGENCY
997087514 | 06/30/2017 | 88 | CORRECTIONS ADMINISTRATION
3600 HAVANA
DENVER CO 80239

EMPLOYEE NAME | SUFFIX | PREFIX
CULLYFORD,TINA MARIE

STATUS	STAT DATE	ADJ SVC DSEP RSN	LOA RTRN DT	LOA RSN	R/T	F/P
A	12/17/2012	12/17/2012			R	F

TYPE	PY ST	AGY DT 1	AGY DATE 2	ANNL BASE	SVC START DT	FLSA	BENE BASE	REHIRE
E	S	12/17/2012	12/17/2012	$84,144.00	12/17/2012	Y	$67,236.00	

AGCY-UNIT	COFRS ORGN	WORK SITE	MEMO
CAA 34		00261	REMOVE JOB 2 ON 1

JOB ASSIGNMENT INFORMATION — TITLE: HEALTH PROFESSIONAL VI

JOB #	BEGIN DATE	END DATE	POS #	JOB CLASS	ENTRY DT	CONTRACT DATE
1	05/15/2017	99/99/9999	CAA29292	C7C6XX	05/15/2017	

PAY RATE	CODE	GRADE	PCT FT	TERM	CYCLE	JOB AGCY	TM RPT	SAVE PAY DT
7,012.0000	P	C25	100.00%		M1	CAA 34	E	

	ACCT CODE	ERN	RATE/AMT	PERCENT	START DT	STOP DT
01	CAAA DR INFIRMRY	REG	$7,012.0000	100.00%	05/15/2017	99/99/9999
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
13						
14						
15						
16						

ATB & Merit Pay
FY 17-18

** JOB HISTORY INFORMATION

JOB#	ACT	ACT DATE	CLASS	RNG/STP	PAY RATE	CYC	%FT	POSN#	ST	TP	RT	FP	JOB	DEPT
1	11	07/01/2017	C7C6XX	C2	7,012.000	M1	100.00%	DXDXD	A	E	R	F	CAA	34
100006	005	15/2017	C7C6XX	C2	6,813.000	M1	100.00%	DXDXD	A	E	R	F	CAA	34
2			C7C6XX	C2	6,813.000	M1	100.00%	DXDXD					CAA	34
2	06	05/15/2017	C7C6XX	C2	6,813.000	M1	100.00%		A	E	R	F	CAA	34
1	06	05/15/2017	C6S4XX	C2	6,194.000	M1	100.00%	DXDXD	A	E	R	F	CAA	34
1	80	03/15/2017	C6S4XX	C2	6,194.000	M1	100.00%	DXDXD	A	E	R	F	CAA	34

JOB PERFORMANCE INFORMATION

RATE	RAT TYPE	RAT DATE	POSITION	RATING SUPERVISOR
3	A	03/17/20	CAA34376	BARKEY, GLORIA

NXT RVW DT	PROB STAT	STAT CLASS	STRT DT	END DT
	05	C7C6XX	05/15/2017	11/14/2017

COMMENT
18645

ORGANIZATION ID/NAME
CAA DEPT OF CORRECTIONS -CAA-

PREPARED BY _____

AUTHORIZATION _____

AUTHORIZATION APPROVAL _____

CHANGES REVIEWED
AND APPROVED BY _____

EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** CULLYFORD, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 69027
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** ENGLEWOOD	**Home State** CO	**Home Zip** 80113
Home Phone [redacted]	**PO Box** PO BOX 715	**Education Level** Bachelor's Degree	**Education Year** 2012
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
DOC Agency Date 12/17/2012	**State Service Date** 12/17/2012	**Accruals Date** 12/17/2012	**Adj. Service Date** 12/17/2012
Facility Entry Date 12/17/2012	**Cert Status** 5	**Salary** 6813.00	

GENERAL INFORMATION:

Effective Date 05/15/2017	**CPPS Action** PROMOTION - 06 P	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 34376	**Position Agency** CAA	**Class Code** C6S4XX	**Class Title** MID-LEVEL PROVIDER
Supervisor Badge# 22604	**Supervisor Name** FOX, DWAYNE	**Sup. Position #** 6216	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 29292	**Position Agency** CAA	**Class Code** C7C6XX	**Class Title** HEALTH PROFESSIONAL VI
Supervisor Badge # 22604	**Supervisor Name** FOX, DWAYNE M	**Sup. Position #** 6216	**Supervisor Agency** CAA
Grade C25	**Funding Cert Name** CAAA DR INFIRMRY	**Fund Percent** GENERAL FUND	**Pay Differential** 0E
City Code 261	**Physical Location**	**Expiration Date**	
Facility DENVER COMPLEX	**Locator Code** 34 - DRDC	**Work Unit** CLINICAL SERVICES - MEDICAL	
Business Street 10900 SMITH RD	**Business PO Box**	**Business City / Zip** DENVER / 80239	**Business Phone** (303) 307-2212

JUSTIFICATION:

TRIAL SERVICE PROMOTION OF MID-LEVEL PROVIDER FROM POSITION #34376-CAAA DR MEDICAL, C24, $6194.00 TO HEALTH PROFESSIONAL VI POSITION #29292-CAAA DR INFIRMRY, C25, $6813.00. FILLS VACANT POSITION.

HR ONLY:

Authorized By Personnel AMANDA WATSON - LCA 412	**Appointing Authority** CLIN SVCS - MICHELLE NELSON	**Date Entered** 05/12/2017	**CPPS Entry Date**

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EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** CULLYFORD, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 69026
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** ENGLEWOOD	**Home State** CO	**Home Zip** 80113
Home Phone [redacted]	**PO Box** [redacted]	**Education Level** Bachelor's Degree	**Education Year** 2012
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
DOC Agency Date 12/17/2012	**State Service Date** 12/17/2012	**Accruals Date** 12/17/2012	**Adj. Service Date** 12/17/2012
Facility Entry Date 12/17/2012	**Cert Status** 1	**Salary** 6194.00	

GENERAL INFORMATION:

Effective Date 05/14/2017	**CPPS Action** DISCRETIONARY PAY - 80PE DP	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 34376	**Position Agency** CAA	**Class Code** C6S4XX	**Class Title** MID-LEVEL PROVIDER
Supervisor Badge# 22604	**Supervisor Name** FOX, DWAYNE M	**Sup. Position #** 6216	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 34376	**Position Agency** CAA	**Class Code** C6S4XX	**Class Title** MID-LEVEL PROVIDER
Supervisor Badge # 22604	**Supervisor Name** FOX, DWAYNE M	**Sup. Position #** 6216	**Supervisor Agency** CAA
Grade C24	**Funding Cert Name** CAAA DR MEDICAL	**Fund Percent** GENERAL FUND	**Pay Differential** 1E
City Code 261	**Physical Location**	**Expiration Date**	
Facility DENVER COMPLEX	**Locator Code** 34 - DRDC	**Work Unit** CLINICAL SERVICES - MEDICAL	
Business Street 10900 SMITH RD	**Business PO Box**	**Business City / Zip** DENVER / 80239	**Business Phone** (303) 307-2212

JUSTIFICATION:

END DISCRETIONARY PAY IN THE AMOUNT OF $619.00 DUE TO EMPLOYEE BEING PROMOTED. EMPLOYEE WILL GO FROM $6813.00 TO $6194.00.

HR ONLY:

Authorized By Personnel AMANDA WATSON - LCA 412	**Appointing Authority** CLIN SVCS - MICHELLE NELSON	**Date Entered** 05/12/2017	**CPPS Entry Date**

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EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** CULLYFORD, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 66292
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** ENGLEWOOD	**Home State** CO	**Home Zip** 80113
Home Phone [redacted]	**PO Box** [redacted]	**Education Level** Bachelor's Degree	**Education Year** 2012
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
DOC Agency Date 12/17/2012	**State Service Date** 12/17/2012	**Accruals Date** 12/17/2012	**Adj. Service Date** 12/17/2012
Facility Entry Date 12/17/2012	**Cert Status** 1	**Salary** 6813.00	

GENERAL INFORMATION:

Effective Date 03/15/2017	**CPPS Action** DISCRETIONARY PAY - 80PE DP	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 34376	**Position Agency** CAA	**Class Code** C6S4XX	**Class Title** MID-LEVEL PROVIDER
Supervisor Badge# 10166	**Supervisor Name** BARKEY, GLORIA	**Sup. Position #** 29292	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 34376	**Position Agency** CAA	**Class Code** C6S4XX	**Class Title** MID-LEVEL PROVIDER
Supervisor Badge # 10166	**Supervisor Name** BARKEY, GLORIA	**Sup. Position #** 29292	**Supervisor Agency** CAA
Grade C24	**Funding Cert Name** CAAA DR MEDICAL	**Fund Percent** GENERAL FUND	**Pay Differential** 1E
City Code 261	**Physical Location**	**Expiration Date**	
Facility DENVER COMPLEX	**Locator Code** 34 - DRDC	**Work Unit** CLINICAL SERVICES - MEDICAL	
Business Street 10900 SMITH RD	**Business PO Box**	**Business City / Zip** DENVER / 80239	**Business Phone** (303) 307-2212

JUSTIFICATION:

DISCRETIONARY PAY INCREASE IN THE AMOUNT OF 10% OR $619.00 BEGINNING 3-15-17 AND GOING INDEFINITLEY DUE TO PERFORMING DUTIES OF INTERIM HSA UNTIL THE POSITION IS FILLED.

HR ONLY:

Authorized By Personnel AMANDA WATSON - LCA 412	**Appointing Authority** CLIN SVCS - MICHELLE NELSON	**Date Entered** 03/06/2017	**CPPS Entry Date**

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AR Form 1450-03A (03/01/15)

DEPARTMENT OF CORRECTIONS
DISCRETIONARY PAY DIFFERENTIAL REQUEST FORM

I. Date: 2/10/17 Requesting Facility/Office: HQ/Clinical Services

PRINTED NAME of DOC employee for whom award is requested: Cullyford, Tina

DOC Employee #: 18645 State EID #: 997087514 Classification: Mid-Level Prov/Nurse Mgr

DOC Employee Address: [redacted]

II. Type of discretionary pay requested: (Please check one)

A. Matching Pay ☐ B. Temporary Pay X
C. Referral Award ☐ D. Signing Award ☐

Justification for discretionary pay request (must meet criteria for type of pay - see definitions in AR):
The Health Services Administrator (HSA) for DRDC is resigning. Tina Cullyford will serve as interim HSA effective 3/15/17. I am requesting a 10% non base building increase because she will be handling personnel and operational issues that are above her current classification.

1. Amount offered: 10% % base building 0% % non-base building 100%
   Pay start date: 3/15/17 Pay end date: Unknown
2. Is pay a counter offer to a bona fide job offer? n/a If yes, attach documentation of job offer.
3. Is pay offered for transfer to another position/assignment? n/a If yes, provide position number and/or classification _____
4. Status and position number of incumbent, if a temporary assignment Active; will remain in current position #34376
5. If referral award, attach documented shortage of classification and statement from person recruited supporting role of DOC employee.

   Amount of referral award (not to exceed $500), _____ 50% approved on hire date of _____ remaining 50% to be paid on _____ six months thereafter provided that both DOC employees are still employed.
6. If signing award (not to exceed $5,000), 50% to be paid on date of hire _____ remaining 50% to be paid on _____ six months thereafter providing that DOC employee is still employed.

III. Forward request with attachment for:

Approved by: _____ Signature/Chief Human Resources Officer — Date 2-13-17

Approved by: _____ Signature/Division Director — Date 2/15/17

Approved by: _____ Signature/Associate Director of Budgeting — Date 2/15/17

Approved by: _____ Signature/DOC Deputy Executive Director — Date 2/16/17

AR Form 1450-03B (07/01/10)

DEPARTMENT OF CORRECTIONS
DISCRETIONARY PAY DIFFERENTIAL AGREEMENT

Date: _____

I. DOC Employee: Cullyford, Tina DOC Employee #: 18645

State EID #: 997087514 Position # 34376 Facility/Office HQ/ Clinical Services

Appointing Authority: Michelle Nelson

II. Amount: $ 10% monthly to be paid, 50% on _____ with remaining 50% on _____ provided all applicable conditions have been met.

III. Terms of Agreement

A. Terms for Matching Pay Differential (Check Applicable Terms)

1. ___ Payout shall be base building _____ non-base building _____ not to exceed statutory lid for assigned salary range, through regular payroll.
2. ___ Payout is for a counter offer to a verified bona fide job offer.
3. ___ Payout is for transfer to another position.
4. ___ Payout is for the purpose of bringing pay rate of long-term DOC employee to the rate of newer DOC employee(s).

B. Terms for Temporary Pay Differential

Payout is non-base building through regular payroll. Time limit on assignment is (unknown) days, effective 2/15/17
Assignment is not permanent and will be reviewed periodically to determine need for continuation or termination. Assignment may be terminated at any time by appointing authority.

C. Terms for Referral Award

1. Payout is non-base building and statutory lid applies.
2. Provided both the award DOC employee and the new hire are still employed six months after hire date, remainder of total award shall be due the DOC employee.

D. Terms for Signing Award

1. Payout is non-base building and statutory lid applies.
2. Provided DOC employee of signing award is still employed after six months, remainder of total award shall be due the DOC employee.
3. If DOC employee voluntarily separates from DOC service prior to the completion of one full year, the award tendered will be returned in full to the administrative head.

IV. The amounts, terms, and conditions of this agreement may not be grieved or appealed.

By my signature affixed hereto, I understand and agree to all the applicable provisions of this document.

Administrative Head/Date DOC Employee/Date Tina Cullyford 2/16/17

Forward with appropriate attachments to the Office of Human Resources

EMPLOYEE ID	EFF DATE	PERS ACTIONS	HOME AGENCY
997087514	11/30/2016	11 KA	CORRECTIONS ADMINISTRATION
			3600 HAVANA
			DENVER CO 80239

EMPLOYEE NAME SUFFIX PREFIX
CULLYFORD,TINA MARIE

STATUS	STAT DATE	ADJ SVC DSEP RSN	LOA RTRN DT	LOA RSN	R/T	F/P
A	12/17/2012	12/17/2012			R	F

TYPE	PY ST	AGY DT 1	AGY DATE 2	ANNL BASE	SVC START DT	FLSA	BENE BASE	REHIRE
E	S	12/17/2012	12/17/2012	$74,328.00	12/17/2012	Y	$67,236.00	

AGCY-UNIT	COFRS ORGN	WORK SITE	MEMO
CAA 34		00261	CERTIFY_EFF:_11-30-16_____

JOB ASSIGNMENT INFORMATION TITLE: MID-LEVEL PROVIDER

JOB #	BEGIN DATE	END DATE	POS #	JOB CLASS	ENTRY DT	CONTRACT DATE
1	06/01/2016	99/99/9999	CAA34376	C6S4XX	06/01/2016	

PAY RATE	CODE	GRADE	PCT FT	TERM	CYCLE	JOB AGCY	TM RPT	SAVE PAY DT
6,194.0000	P	C24	100.00%		M1	CAA 34	E	

	ACCT CODE	ERN	RATE/AMT	PERCENT	START DT	STOP DT
01	CAAA DR MEDICAL	REG	$6,194.0000	100.00%	06/01/2016	99/99/9999
02						
03						
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14						
15						
16						

** JOB HISTORY INFORMATION

JOB#	ACT	ACT DATE	CLASS	RNG/STP	PAY RATE	CYC	%FT	POSN#	ST	TP	RT	FP	JOB	DEPT
1	11	07/01/2016	C6S4XX	C2	6,194.000	M1	100.00%	DXDXD	A	E	R	F	CAA	34
100006006		01/2016	C6S4XX	C2	6,163.000	M1	100.00%	DXDXD	A	E	R	F	CAA	34
1	06	06/01/2016	C6S3XX	C2	5,603.000	M1	100.00%	DXDXD	A	E	R	F	CAA	34
1	11	07/01/2015	C6S3XX	C2	5,603.000	M1	100.00%		A	E	R	F	CAA	39
1	11	07/01/2015	C6S3XX	C2	5,493.000	M1	100.00%	DXDXD	A	E	R	F	CAA	39
1	06	12/01/2014	C6S3XX	C5	5,493.000	M1	100.00%	DXDXD	A	E	R	F	CAA	39

JOB PERFORMANCE INFORMATION

RATE	RAT TYPE	RAT DATE	POSITION	RATING SUPERVISOR
2	A	04/01/20	CAA09348	BLATNICK, NICOLE

NXT RVW DT	PROB STAT	STAT CLASS	STRT DT	END DT
	01	C6S4XX	11/30/2016	

COMMENT
DOC ID 18645

ORGANIZATION ID/NAME
CAA DEPT OF CORRECTIONS -CAA-

PREPARED BY _____

AUTHORIZATION _____

AUTHORIZATION APPROVAL _____

CHANGES REVIEWED
AND APPROVED BY _____

EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** CULLYFORD, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 58127
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** ENGLEWOOD	**Home State** CO	**Home Zip** 80113
Home Phone [redacted]	**PO Box** [redacted]	**Education Level** Bachelor's Degree	**Education Year**
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
DOC Agency Date 12/17/2012	**State Service Date** 12/17/2012	**Accruals Date** 12/17/2012	**Adj. Service Date** 12/17/2012
Facility Entry Date 12/17/2012	**Cert Status** 1	**Salary** 6194.00	

GENERAL INFORMATION:

Effective Date 06/01/2016	**CPPS Action** PROMOTION - 06 P	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 9348	**Position Agency** CAA	**Class Code** C6S3XX	**Class Title** NURSE III
Supervisor Badge# 17043	**Supervisor Name** BLATNICK, NICOLE	**Sup. Position #** 9341	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 34376	**Position Agency** CAA	**Class Code** C6S4XX	**Class Title** MID-LEVEL PROVIDER
Supervisor Badge # 10166	**Supervisor Name** BARKEY, GLORIA	**Sup. Position #** 29292	**Supervisor Agency** CAA
Grade C24	**Funding Cert Name** CAAA DR MEDICAL	**Fund Percent** GENERAL FUND	**Pay Differential** 1E
City Code 261	**Physical Location** 34 - DRDC	**Expiration Date**	
Facility DENVER COMPLEX	**Locator Code** 34 - DRDC	**Work Unit** CLINICAL SERVICES - MEDICAL	
Business Street 12101 HWY 61	**Business PO Box** 6000	**Business City / Zip** STERLING / 80751	**Business Phone** (970) 521-5010

JUSTIFICATION:

TRIAL SERVICE PROMOTION OF NURSE III FROM POSITION #9348-CAAA LC MEDICAL, C23, $5603.00 TO MID-LEVEL PROVIDER POSITION #34376-CAAA DR MEDICAL, C24, $6194.00 (ABOVE 10% TO BRING TO CLASS MIN). FILLS VACANT POSITION.

HR ONLY:

Authorized By Personnel AMANDA WATSON - LCA 412	**Appointing Authority** CLIN SVCS - MICHELLE NELSON	**Date Entered** 05/12/2017	**CPPS Entry Date**

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EMPLOYEE ID	EFF DATE	PERS ACTIONS	HOME AGENCY
997087514	07/01/2015	88	CORRECTIONS ADMINISTRATION
			49030 STATE HWY 71 SOUTH
			LIMON CO 80826

EMPLOYEE NAME SUFFIX PREFIX
CULLYFORD,TINA MARIE

STATUS	STAT DATE	ADJ SVC DSEP RSN	LOA RTRN DT	LOA RSN	R/T	F/P
A	12/17/2012	12/17/2012			R	F

TYPE	PY ST	AGY DT 1	AGY DATE 2	ANNL BASE	SVC START DT	FLSA	BENE BASE	REHIRE
E	S	12/17/2012	12/17/2012	$67,236.00	12/17/2012	Y		

AGCY-UNIT	COFRS ORGN	WORK SITE	MEMO
CAA 39		00582	CERTIFY EFF: 05/31/2015

JOB ASSIGNMENT INFORMATION TITLE: NURSE III

JOB #	BEGIN DATE	END DATE	POS #	JOB CLASS	ENTRY DT	CONTRACT DATE
1	12/01/2014	99/99/9999	CAA09348	C6S3XX	12/01/2014	

PAY RATE	CODE	GRADE	PCT FT	TERM	CYCLE	JOB AGCY	TM RPT	SAVE PAY DT
5,603.0000	P	C23	100.00%		M1	CAA 39	E	

	ACCT CODE	ERN	RATE/AMT	PERCENT	START DT	STOP DT
01	CAAA LC MEDICAL	REG	$5,603.0000	100.00%	12/01/2014	99/99/9999
02						
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15						
16						

ATB & Merit Pay

** JOB HISTORY INFORMATION

JOB#	ACT	ACT DATE	CLASS	RNG/STP	PAY RATE	CYC	%FT	POSN#	ST	TP	RT	FP	JOB	DEPT
1	11	07/01/2015	C6S3XX	C2	5,603.000	M1	100.00%	DXDXD	A	E	R	F	CAA	39
100011	007	01/2015	C6S3XX	C2	5,493.000	M1	100.00%	DXDXD	A	E	R	F	CAA	39
1	06	12/01/2014	C6S3XX	C5	5,493.000	M1	100.00%	DXDXD	A	E	R	F	CAA	39
1	01	12/17/2012	C6S1XX	C4	4,610.000	M1	100.00%		A	N	R	F	CAA	39

JOB PERFORMANCE INFORMATION

RATE	RAT TYPE	RAT DATE	POSITION	RATING SUPERVISOR
2	A	04/21/20	CAA09348	BLATNICK, NICOLE

NXT RVW DT	PROB STAT	STAT CLASS	STRT DT	END DT
	01	C6S3XX	05/31/2015	

COMMENT
DOC ID 18645

ORGANIZATION ID/NAME
CAA DEPT OF CORRECTIONS -CAA-

PREPARED BY _____

AUTHORIZATION _____

AUTHORIZATION APPROVAL _____

CHANGES REVIEWED
AND APPROVED BY _____

EMPLOYEE ID | EFF DATE | PERS ACTIONS | HOME AGENCY
997087514 | 05/31/2015 | 11 KA | CORRECTIONS ADMINISTRATION
49030 STATE HWY 71 SOUTH
LIMON CO 80826

EMPLOYEE NAME | SUFFIX | PREFIX
CULLYFORD,TINA MARIE

STATUS	STAT DATE	ADJ SVC DSEP RSN	LOA RTRN DT	LOA RSN	R/T	F/P
A	12/17/2012	12/17/2012			R	F

TYPE	PY ST	AGY DT 1	AGY DATE 2	ANNL BASE	SVC START DT	FLSA	BENE BASE	REHIRE
E	S	12/17/2012	12/17/2012	$65,916.00	12/17/2012	Y		

AGCY-UNIT	COFRS ORGN	WORK SITE	MEMO
CAA 39		00582	CERTIFY_EFF:_05/31/2015_____

JOB ASSIGNMENT INFORMATION — TITLE: NURSE III

JOB #	BEGIN DATE	END DATE	POS #	JOB CLASS	ENTRY DT	CONTRACT DATE
1	12/01/2014	99/99/9999	CAA09348	C6S3XX	12/01/2014	

PAY RATE	CODE	GRADE	PCT FT	TERM	CYCLE	JOB AGCY	TM RPT	SAVE PAY DT
5,493.0000	P	C55	100.00%		M1	CAA 39	E	

	ACCT CODE	ERN	RATE/AMT	PERCENT	START DT	STOP DT
01	CAAA LC MEDICAL	REG	$5,493.0000	100.00%	12/01/2014	99/99/9999
02						
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** JOB HISTORY INFORMATION

JOB#	ACT	ACT DATE	CLASS	RNG/STP	PAY RATE	CYC	%FT	POSN#	ST	TP	RT	FP	JOB	DEPT
1	06	12/01/2014	C6S3XX	C5	5,493.000	M1	100.00%	DXDXD	A	E	R	F	CAA	39
100001	01	2/17/2012	C6S1XX	C4	4,610.000	M1	100.00%	DXDXD	A	N	R	F	CAA	39

JOB PERFORMANCE INFORMATION

RATE	RAT TYPE	RAT DATE	POSITION	RATING SUPERVISOR
2	A	04/21/20	CAA09348	BLATNICK, NICOLE

NXT RVW DT	PROB STAT	STAT CLASS	STRT DT	END DT
	01	C6S3XX	05/31/2015	

COMMENT
DOC ID 18645

ORGANIZATION ID/NAME
CAA DEPT OF CORRECTIONS -CAA-

PREPARED BY _____

AUTHORIZATION _____

AUTHORIZATION APPROVAL _____

CHANGES REVIEWED
AND APPROVED BY _____

EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** CULLYFORD, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 47562
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** ENGLEWOOD	**Home State** [redacted]	**Home Zip** [redacted]
Home Phone [redacted]	**PO Box** [redacted]	**Education Level** Bachelor's Degree	**Education Year** 2012
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
DOC Agency Date 12/17/2012	**State Service Date** 12/17/2012	**Accruals Date** 12/17/2012	**Adj. Service Date** 12/17/2012
Facility Entry Date 12/17/2012	**Cert Status** 5	**Salary** 5493.00	

GENERAL INFORMATION:

Effective Date 04/03/2015	**CPPS Action** DEMOGRAPHIC - 11	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 9348	**Position Agency** CAA	**Class Code** C6S3XX	**Class Title** NURSE III
Supervisor Badge# 17043	**Supervisor Name** BLATNICK, NICOLE MARIE	**Sup. Position #** 9341	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 9348	**Position Agency** CAA	**Class Code** C6S3XX	**Class Title** NURSE III
Supervisor Badge # 17043	**Supervisor Name** BLATNICK, NICOLE MARIE	**Sup. Position #** 9341	**Supervisor Agency** CAA
Grade C55	**Funding Cert Name** CAAA LC MEDICAL	**Fund Percent** GENERAL FUND	**Pay Differential** 1E
City Code 582	**Physical Location**	**Expiration Date**	
Facility LCF	**Locator Code** 39 - LCF	**Work Unit** CLINICAL SERVICES - MEDICAL	
Business Street 49030 STATE HWY 71	**Business PO Box**	**Business City / Zip** LIMON / 80826	**Business Phone** (719) 775-7678

JUSTIFICATION:

NAME CHANGE FROM ROSLER, TINA MARIE TO CULLYFORD, TINA MARIE.

HR ONLY:

Authorized By Personnel CARLA HEADLEY - LCA 131	**Appointing Authority** CLIN SVCS - RENAE JORDAN	**Date Entered** 04/03/2015	**CPPS Entry Date**

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EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** ROSLER, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 44402
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** [redacted]	**Home State** [redacted]	**Home Zip** [redacted]
Home Phone [redacted]	**PO Box** [redacted]	**Education Level** Associate Degree	**Education Year**
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
DOC Agency Date 12/17/2012	**State Service Date** 12/17/2012	**Accruals Date** 01/01/2013	**Adj. Service Date**
Facility Entry Date 12/17/2012	**Cert Status** 5	**Salary** 5493.00	

GENERAL INFORMATION:

Effective Date 12/01/2014	**CPPS Action** PROMOTION - 06 P	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 9345	**Position Agency** CAA	**Class Code** C6S1XX	**Class Title** NURSE I
Supervisor Badge# 17043	**Supervisor Name** BLATNICK, NICOLE MARIE	**Sup. Position #** 9341	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 9348	**Position Agency** CAA	**Class Code** C6S3XX	**Class Title** NURSE III
Supervisor Badge # 17043	**Supervisor Name** BLATNICK, NICOLE MARIE	**Sup. Position #** 9341	**Supervisor Agency** CAA
Grade C55	**Funding Cert Name** CAAA LC MEDICAL	**Fund Percent** GENERAL FUND	**Pay Differential** 1E
City Code 582	**Physical Location** 39 - LCF	**Expiration Date**	
Facility LCF	**Locator Code** 39 - LCF	**Work Unit** CLINICAL SERVICES - MEDICAL	
Business Street 49030 STATE HWY 71	**Business PO Box**	**Business City / Zip** LIMON / 80826	**Business Phone** (719) 775-7678

JUSTIFICATION:

TRIAL SERVICE PROMOTION OF NURSE I, POSITION #09345-CAAA LC MEDICAL, C48, $4932.00 TO NURSE III, POSITION #09348-CAAA LC MEDICAL, C55, $5493.00 (ABOVE 10% TO BRING TO MINIMUM OF CLASSIFICATION).

HR ONLY:

Authorized By Personnel CARLA HEADLEY - LCA 131	**Appointing Authority** CLIN SVCS - RENAE JORDAN	**Date Entered** 12/09/2014	**CPPS Entry Date**

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EMPLOYEE ID	EFF DATE	PERS ACTIONS	HOME AGENCY
997087514	06/05/2014	12	CORRECTIONS ADMINISTRATION
			49030 STATE HWY 71 SOUTH
			LIMON CO 80826

EMPLOYEE NAME	SUFFIX	PREFIX
ROSLER,TINA MARIE		

STATUS	STAT DATE	ADJ SVC DSEP RSN	LOA RTRN DT	LOA RSN	R/T	F/P
A	12/17/2012	12/17/2012			R	F

TYPE	PY ST	AGY DT 1	AGY DATE 2	ANNL BASE	SVC START DT	FLSA	BENE BASE	REHIRE
N	S	12/17/2012	12/17/2012		12/17/2012	Y		

AGCY-UNIT	COFRS ORGN	WORK SITE	MEMO
CAA 39		00582	

JOB ASSIGNMENT INFORMATION — TITLE: NURSE I

JOB #	BEGIN DATE	END DATE	POS #	JOB CLASS	ENTRY DT	CONTRACT DATE
1	12/17/2012	99/99/9999	CAA09345	C6S1XX	12/17/2012	

PAY RATE	CODE	GRADE	PCT FT	TERM	CYCLE	JOB AGCY	TM RPT	SAVE PAY DT
4,932.0000	P	P13	100.00%		M1	CAA 39	E	

	F	USER CODES	ERN	RATE/AMT	PERCENT	START DT	STOP DT
12							
13	F	USER CODES	ERN	RATE/AMT	PERCENT	START DT	STOP DT
14		CAAA LC MEDI	REG	$4,932.0000	100.00%	12/17/2012	99/99/9999
15							
16							
17							

00000000000

** JOB HISTORY INFORMATION

JOB#	ACT	ACT DATE	CLASS	RNG/STP	PAY RATE	CYC	%FT	POSN#	ST	TP	RT	FP	JOB	DEPT
1	01	12/17/2012	C6S1XX	C4	4,610.000	M1	100.00%	DXDXD	A	N	R	F	CAA	39

00000000

ATB & Merit Pay

JOB PERFORMANCE INFORMATION

RATE	RAT TYPE	RAT DATE	POSITION	RATING SUPERVISOR
2	A	04/10/20	CAA09345	NICOLE, BLATNICK

NXT RVW DT	PROB STAT	STAT CLASS	STRT DT	END DT
	01	C6S1XX	12/16/2013	

COMMENT
DOC ID 18645

ORGANIZATION ID/NAME
CAA DEPT OF CORRECTIONS -CAA-

PREPARED BY _____

AUTHORIZATION _____

AUTHORIZATION APPROVAL _____

CHANGES REVIEWED
AND APPROVED BY _____

EMPLOYEE ID	EFF DATE	PERS ACTIONS	HOME AGENCY
997087514	12/16/2013	11 KA	CORRECTIONS ADMINISTRATION
			49030 STATE HWY 71 SOUTH
			LIMON CO 80826

EMPLOYEE NAME SUFFIX PREFIX
ROSLER,TINA MARIE

STATUS	STAT DATE	ADJ SVC DSEP RSN	LOA RTRN DT	LOA RSN	R/T	F/P
A	12/17/2012	12/17/2012			R	F

TYPE	PY ST	AGY DT 1	AGY DATE 2	ANNL BASE	SVC START DT	FLSA	BENE BASE	REHIRE
N	S	12/17/2012	12/17/2012		12/17/2012	Y		

AGCY-UNIT	COFRS ORGN	WORK SITE	MEMO
CAA 39		00582	CERTIFY_EFF:_12/16/2013_____

JOB ASSIGNMENT INFORMATION TITLE: NURSE I

JOB #	BEGIN DATE	END DATE	POS #	JOB CLASS	ENTRY DT	CONTRACT DATE
1	12/17/2012	99/99/9999	CAA09345	C6S1XX	12/17/2012	

PAY RATE	CODE	GRADE	PCT FT	TERM	CYCLE	JOB AGCY	TM RPT	SAVE PAY DT
4,764.0000	P	P13	100.00%		M1	CAA 39	E	

CERT NO	F	USER CODES	ERN	RATE/AMT	PERCENT	START DT	STOP DT
LCF MEDICAL	Y	09345	REG	$4,764.0000	100.00%	12/17/2012	99/99/9999

JOB PERFORMANCE INFORMATION

RATE	RAT TYPE	RAT DATE	POSITION	RATING SUPERVISOR
2	A	03/27/20	CAA09345	BLATNICK, NICOLE

NXT RVW DT	PROB STAT	STAT CLASS	STRT DT	END DT
	01	C6S1XX	12/16/2013	

COMMENT
DOC ID 18645

ORGANIZATION ID/NAME
CAA DEPT OF CORRECTIONS -CAA-

PREPARED BY _____

AUTHORIZATION _____

AUTHORIZATION APPROVAL _____

CHANGES REVIEWED
AND APPROVED BY _____

EMPLOYEE ID	EFF DATE	PERS ACTIONS	HOME AGENCY
997087514	05/31/2013	11 KE	CORRECTIONS ADMINISTRATION
			49030 STATE HWY 71 SOUTH
			LIMON CO 80826

EMPLOYEE NAME	SUFFIX	PREFIX
ROSLER,TINA MARIE		

STATUS	STAT DATE	ADJ SVC DSEP RSN	LOA RTRN DT	LOA RSN	R/T	F/P
A	12/17/2012	12/17/2012			R	F

TYPE	PY ST	AGY DT 1	AGY DATE 2	ANNL BASE	SVC START DT	ELSA	BENE BASE	REHIRE
N	S	12/17/2012	12/17/2012		12/17/2012	Y		

AGCY-UNIT	COFRS ORGN	WORK SITE	MEMO
CAA 39		00582	

JOB ASSIGNMENT INFORMATION — TITLE: NURSE I

JOB #	BEGIN DATE	END DATE	POS #	JOB CLASS	ENTRY DT	CONTRACT DATE
1	12/17/2012	99/99/9999	CAA09345	C6S1XX	12/17/2012	

PAY RATE	CODE	GRADE	PCT FT	TERM	CYCLE	JOB AGCY	TM RPT	SAVE PAY DT
4,764.0000	P	P13	100.00%		M1	CAA 39	E	

CERT NO	F	USER CODES	ERN	RATE/AMT	PERCENT	START DT	STOP DT
LCF MEDICAL	Y	09345	REG	$4,764.0000	100.00%	12/17/2012	99/99/9999

ATB 2%
Merit Pay 2013

JOB PERFORMANCE INFORMATION

RATE	RAT TYPE	RAT DATE	POSITION	RATING SUPERVISOR
2	A	03/27/20	CAA09345	BLATNICK, NICOLE

NXT RVW DT	PROB STAT	STAT CLASS	STRT DT	END DT
	04	C6S1XX	12/17/2012	12/16/2013

COMMENT
DOC ID 18645

ORGANIZATION ID/NAME
CAA DEPT OF CORRECTIONS -CAA-

PREPARED BY _____

AUTHORIZATION _____

AUTHORIZATION APPROVAL _____

CHANGES REVIEWED
AND APPROVED BY _____

CDOC HR - Personnel Update Form

EMPLOYEE INFORMATION:

Employee Badge #	Employee Name	SSN #	PUF ID
18645	ROSLER, TINA MARIE	###-##-2457	25695
EID	**Date of Birth**	**Ethnicity**	**Gender**
997087514	08/05/1973	W	F
Home Address	**Home City**	**Home State**	**Home Zip**
[redacted]	[redacted]	[redacted]	80828
Home Phone		**Education Level**	**Education Year**
[redacted]	[redacted]	03	2012
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
DOC Agency Date	**State Service Date**	**Accruals Date**	**Adj. Service Date**
12/17/2012	12/17/2012	01/01/2013	
Facility Entry Date	**Cert Status**	**Salary**	
12/17/2012	4	4610.00	

GENERAL INFORMATION:

Effective Date	CPPS Action	Agency Name	Action Record #
12/17/2012	NEW EMPLOYEE-ABOVE MIN - 01 NEAM	CORRECTIONS	12010-12

CURRENT POSITION INFORMATION:

Position #	Position Agency	Class Code	Class Title
9345	CAA	C6S1XX	NURSE I
Supervisor Badge#	**Supervisor Name**	**Sup. Position #**	**Supervisor Agency**
17043	BLATNICK, NICOLE MARIE	9348	CAA

NEW POSITION INFORMATION:

Position #	Position Agency	Class Code	Class Title
9345	CAA	C6S1XX	NURSE I
Supervisor Badge #	**Supervisor Name**	**Sup. Position #**	**Supervisor Agency**
17043	BLATNICK, NICOLE MARIE	9348	CAA
Grade	**Funding Cert Name**	**Fund Percent**	**Pay Differential**
C48	LCF MEDICAL	GENERAL FUND	1N
City Code	**Physical Location**	**Expiration Date**	
582			
Facility	**Locator Code**	**Work Unit**	
LCF	39 - LCF	CLINICAL SERVICES - MEDICAL	
Business Street	**Business PO Box**	**Business City / Zip**	**Business Phone**
49030 STATE HWY 71		LIMON / 80826	(719) 775-7678

JUSTIFICATION:

PROBATIONARY APPOINTMNET OF NURSE I TO POSITION #09345-LCF MEDICAL, C48, $4610.00 (ABOVE MINIMUM APPROVED BY KELLIE WASKO). FILLS VACANT.

HR ONLY:

Authorized By Personnel	Appointing Authority	Date Entered	CPPS Entry Date
CARLA HEADLEY - LCA 131	CLIN SVCS - RENAE JORDAN	12/11/2012	12-11-12

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12/11/2012

STATE OF COLORADO

COLORADO DEPARTMENT OF CORRECTIONS

Clinical Services
2862 South Circle Drive
Colorado Springs, CO 80906-4195
Phone: (719) 226-4541
Fax: (719) 226-4565
Web: www.doc.state.co.us

John W. Hickenlooper
Governor

Tom Clements
Executive Director

MEMORANDUM

TO: Human Resources

FROM: Renae Jordan
Interim Assistant Director of Prisons, Clinical Services

RE: Above Hiring Salary Hire

DATE: November 30, 2012

Pursuant to prior agreements, I am forwarding this directly to your office for processing on expediting nurse hiring. Our agreement was that CNAs, LPNs, and Nurses can be hired in this expeditious fashion as long as they are hired at the approved rate listed below. The approved rates equal up to $2,659.00 for CNA, $3,310.00 for LPN/MA, and $5,285.00 for Nurse I.

Name of applicant:	Rosler, Tina
Position Number:	9345
Position Classification:	Nurse I
Facility:	LCF
Salary:	$4610.00
Effective Date:	12/17/12

/jad

Attachment: Referral List

cc: Health Services Administrator

#186-45 LCF

Employee History Report for: ROSLER,TINA MARIE
Employee ID: 997087514
SSN: XXX-XX-2457

EFF DATE/ CLASS	ACT CDE	SUB ACT CDE	POS	PRB STS	GRD	SALARY	POS TYP	SEP RSN	S E S	PCNT FULL TIME	OP ID	MEMO
DEPT LABOR & EMPLOYMENT -KAA- Service Start Date: 2010/03/29 Adjusted Service Date: 2010/03/29												
2010/10/08	88	KAA10078	03	P10		13.0300 N	00		N	50.00	QCNU131	SUPERVISOR CHANGE
P1A1XX - TEMPORARY AIDE												
2010/10/01	88	KAA10078	03	P10		13.0300 N	00		N	50.00	QCNU200	SUPERVISOR CHANGE
P1A1XX - TEMPORARY AIDE												
2010/09/28	05	KAA10078	03	P10		13.0300 N	25		N	50.00	QCNU200	SUPERVISOR CHANGE
P1A1XX - TEMPORARY AIDE												
2010/08/01	11	KAA10078	03	P10		13.0300 N	00		N	50.00	QCNU200	SUPERVISOR CHANGE
P1A1XX - TEMPORARY AIDE												
2010/03/29	01	KAA10078	03	P10		13.0300 N	00		N	50.00	QCNU200	
P1A1XX - TEMPORARY AIDE												

No State Svc credit


02-APPLICATIONS

EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** CULLYFORD, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 106164
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** [redacted]	**Home State** [redacted]	**Home Zip** [redacted]
Home Phone [redacted]	**Mailing Address** ,	**Education Level** Bachelor's Degree	**Education Year**
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
Adjusted Service Date 12/17/2012	**Agency 1 Date (DOC)** 12/17/2012	**Agency 2 Date (Facility)** 12/17/2012	**Service Start Date (State)** 12/17/2012
Accruals Date 12/17/2012	**Cert Status** 5	**Current/Previous Salary** 8332.00	**New Salary** 9190.00

GENERAL INFORMATION:

Effective Date 09/15/2020	**CPPS Action** PROMOTION - 06 P	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 29292	**Position Agency** CAA	**Class Code**	**Class Title**
Supervisor Badge# 13353	**Supervisor Name** LAMPELA, JILL Y	**Sup. Position #** 3180	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 6216	**Position Agency** CAA	**Class Code** C7C7XX	**Class Title** HEALTH PROFESSIONAL VII
Supervisor Badge # 13353	**Supervisor Name** LAMPELA, JILL Y	**Sup. Position #** 3180	**Supervisor Agency** CAA
Grade C26	**Funding Cert Name** CAAA MED MGMT	**Fund Percent** GENERAL FUND	**Pay Differential** 0E
City Code 201	**Physical Location** 10 - HQ	**Expiration Date**	
Facility HQ	**Locator Code** 10 - HQ	**Work Unit** CLINICAL SERVICES - ADMINISTRATION	
Business Street 1250 ACADEMY PARK LOOP	**Business PO Box**	**Business City / Zip** COLORADO SPRINGS / 80910	**Business Phone** (719) 579-9580

JUSTIFICATION:

TRIAL SERVICE PROMOTION OF HEALTH PROFESSIONAL VI, $8332.00 TO HEALTH PROFESSIONAL VII, $9190.00 at 10.3%.

HR ONLY:

Authorized By Personnel MONA BURLEIN - LCA 425	**Appointing Authority** CLIN SVCS - LEONARD WOODSON	**Date Entered** 09/15/2020	**CPPS Entry Date**

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COLORADO
Department of Corrections
Office of Clinical & Correctional Services
1250 Academy Park Loop
Colorado Springs, CO 80910
P 719-226-4510

MEMORANDUM

To: Executive Director's Office

FROM: Leonard E. Woodson, III
Assistant Director of Clinical Services

RE: Promotional Salary Request - Exceeds 10%

DATE: September 2, 2020

Tina Cullyford has been selected to fill HQ Health Professional VII position 6216 (PAR ID 19661). Ms. Cullyford is currently an HP VI at DRDC; current salary is $8332. The standard 10% promotional increase would place her at $9165. The DPA entry salary for HP VII is $7560. This position serves as a Regional Health Services Administrator (RHSA).

I am requesting approval to raise her salary to $9190, which is approximately a 10.3% raise, for the following reasons:

- Recruitment of qualified candidates is difficult due to competition with local health care organizations; therefore, a competitive salary must be offered to ensure recruitment and retention.
- This is the monthly salary currently being paid to the other two RHSAs.

Thank you for your consideration of this request.

/jad

_X_ Approved ____ Denied _____ 9/2/2020
Signature Date

A. Position Information [PAR #19661]:

Vacancy Type	Current Vacancy		
Facility	HQ		
Agency Code	CAA		
Position Number	6216	Original PDQ	
Employee Action	New Hire		
Estimated Eff Date	08/01/2020		
Contact Name	JULIE DREW	**Contact #**	719-579-9580
Position Action	No Changes		
Minimum Sal ($/Mon)	7560 - 12253		
Requested Sal ($/Mon)	7560		
Justify Higher Salary	An above entry hiring salary will be necessary to ensure recruitment due to competition with other organizations.		
Current Class Code	C7C7XX	**Current Class Title**	HEALTH PROFESSIONAL VII
Proposed Class Code		**Proposed Class Title**	

B. Division Information:

Division Information	Headquarters	**Date of Request**	07/06/2020
Work Unit	CLINICAL SERVICES - ADMINISTRATION		
Work Title	Regional Health Services Administrator		

C. Type of Action Requested:

Vacancy Status	Unencumbered	**Date Vacated**	07/17/2020
Last Incumbent ID	25961	**Last Incumbent Name**	ROBERT SIMON
Assignment Type	Permanent		
Time Basis	Full Time		

D. Reason for Request (Include Specific Details):

Incumbent is resigning. This position serves as a Regional Health Services Administrator for Clinical Services. The RHSAs are responsible for ensuring that health care practices and policies are consistently followed statewide and that quality care is being provided to offenders. The individuals are required to travel to clinics across the state to review clinic supervision and practices, to provide instructions to clinic administrators and staff, and to address quality of care and operational issues accordingly. They work closely with the facility management teams and Clinical Services management to assure consistent policy implementation. Not filling this position may cause delays in moving forward with policy and procedure changes and will cause interruptions in proper supervision of the Health Services Administrators and clinics. It may be necessary to appoint a Health Services Administrator as an interim Regional Health Services Administrator to cover these duties. As a result, the duties of the individual serving as interim RHSA will need to be delegated to another individual; therefore, it is necessary to fill this RHSA position as soon as possible to reduce the strain on staff and Clinical Services Administrators.

E. Signatures:

I certify that I have reviewed and agree with the information contained in this document and supporting documentation.

Appointing Authority/Designee

Badge # : 14729 **Name :** LEONARD WOODSON **Date :** 07/07/2020 09:06:29 AM

Department Group

Group :

I certify that I have reviewed and agree with the information contained in this document and supporting documentation.

Dir/Designee Badge # : 11038 **Name:** MICHELLE BRODEUR **Date:** 07/08/2020 04:53:00 PM

Budget Office

☑ **Position Number Confirmed**

Fund Line	Unit	Appropriation Code	Cert Name
1000	2E00	CGBFA004G	CAAA MED MGMT

Location	Sub Location	Activity
		1200

Badge # : 25695 **Name:** GARY RUSHING **Date:** 07/09/2020 09:32:30 AM

Office of Human Resources

Recommended PDQ Changes:

How Position Filled?:	Promotion
Additional Notes:	previous: C7C6XX - DRDC salary: $9190
Referral Registration #:	Regional HSA - 8/2020
Employee Badge#:	18645
Employee Name:	TINA CULLYFORD
Empl Personal Email (Non-DOC):	
Effective Date:	09/15/2020
FLSA Status:	Exempt
Pay Differential:	0- No Pay Differential
On Call:	No

Badge #: 26301 **Name:** BROOKE SHERRILL **Date:** 09/15/2020 09:35:34 AM

Notes/Comments:

No Comments

Rejection History:

No rejection history for this PAR.

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CAA - 6216 7/2020 HP VII - CDOC Regional Health Services Administrator

Contact Information -- Person ID: 13549735

Name:	Tina M Cullyford	Address:	[redacted]
Home Phone:	[redacted]	Alternate Phone:	
Email:	[redacted]	Notification Preference:	Email
Former Last Name:	Rosler	Month and Day of Birth:	08/05

Personal Information

Driver's License:	Yes, [redacted]
Can you, after employment, submit proof of your legal right to work in the United States?	Yes
What is your highest level of education?	Bachelor's Degree

Preferences

Are you willing to relocate?	No
Types of positions you will accept:	Regular
Types of work you will accept:	Full Time
Types of shifts you will accept:	Day , Evening , On Call (as needed)

Objective

To obtain a Regional Health Service Administrator position with Colorado Department of Corrections.

Education

College/University
Capella University
www.capella.edu
10/2012 - 6/2014
Minneapolis, Minnesota

Did you graduate: Yes
Major/Minor: Nursing
Units Completed: 192 Quarter
Degree Received: Bachelor's

College/University
Otero Junior College
8/2010 - 6/2012
LaJunta, Colorado

Did you graduate: Yes
Major/Minor: Nursing
Units Completed: 65 Semester
Degree Received: Associate's

College/University
Morgan Community College
8/2009 - 7/2010
Limon, Colorado

Did you graduate: No
Major/Minor: Nursing-Pre-requisites
Units Completed: 35 Semester
Degree Received: No Degree

Work Experience

Nurse III
12/2014 - Present

Limon Correctional Facility
Limon , Colorado 80826
719-775-7653

Hours worked per week: 40
of Employees Supervised: 9
Name of Supervisor: Nicole Blatnick - HSA
May we contact this employer? Yes

Duties

General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned for the last 3 years. Work extra shifts as needed to cover

the schedule. Supervise 9 nurses to include scheduling, payroll, training and review process. CQI nurse and co-chair for quarterly CQI meetings. ACA file compilation. Policy and review committee. Cover for Health Service Administrator as designated with the Management team and/or training and meetings. Maintain Chronic Care Offender data base to ensure continuity of care. Chart reviews daily with and without provider to ensure proper documentation and policy guidelines are followed. Answer step one grievances. Diabetic and ADA data base to ensure proper restrictions are in place. Track psychotropic medication compliance for all P3 and above offenders. Educate and schedule with psych as necessary for offenders who fail to take medication as prescribed. Other duties as assigned.

Reason for Leaving
Employment closer to home as well as a new challenge as a Nurse IV in a different correctional setting.

Nurse IV
6/2016 - Present

Colorado Department of Corrections-DRDC
10900 Smith Road
Denver, Colorado 80239
303-307-2301

Hours worked per week: 40
of Employees Supervised: 5
Name of Supervisor: Dwayne Fox - RHSA
May we contact this employer? Yes

Duties
Supervise RN III's, Medical Records, Lab Tech positions and clinic staff. For several months I also supervised the RN III's at DWCF as well as their clinic staff. Complete payroll. Performance documentation and evaluations. Completion of ACA files as well as ensuring that all areas turned their files in, in a timely manner. Ensure CQI audits are completed and plan of actions are written. Co-Chair for quarterly meetings. Ensure Infectious Disease forms are completed and submitted. Step II grievances as assigned. Mid-Level Provider schedules and plan of actions for Day 4 intake numbers. Track training requirements for nurses and mid-level providers. Evaluated and approved usage of agency hours when requested by RN III's. Presented in-services to nurses during monthly nursing meetings in both the clinic and the infirmary. Attend roll call daily and present numbers when HSA is not available. Meet with offenders requests for interviews. Call families as indicated. Work hand in hand with clinic staff to learn how to use eOMIS. Attended numerous training's to help them with this transition. Open communication lines with Marquis as well as CDOC OIT though the entire process and still today. Approval of clinic and infirmary supply orders. Policy and Review committee. Chart reviews daily with and without provider to ensure proper documentation and policy guidelines are followed. Education to nurses as needed if they fail to meet policy guidelines.

Reason for Leaving
To promote to a HSA at DRDC.

Health Services Administrator
5/2017 - Present

Colorado Department of Corrections
10900 Smith Rd
Denver, Colorado 80239
3033072301

Hours worked per week: 40
of Employees Supervised: 26
Name of Supervisor: Jill Lampela - Chief of Clinical Operations
May we contact this employer? Yes

Duties
Manage a multi-disciplinary clinical services department in a fast paced intake facility. Complete ACA files correctly within deadlines established. Ensure Outcome measures and CQI completed timely. Ensure plan of actions are created, implemented and follow up for any changes that may be needed. Complete all aspects of the PMP process for direct reports as well as ensure direct reports are completing for their subordinates. Approve all schedules. Complete payroll. Track budget. Sign off on all supplies being ordered. Monitor P-Card logs and sign monthly statements as the approving official.

Reason for Leaving
To obtain a position as a Regional Health Services Administrator

RN I
12/2012 - 12/2014

Colorado Department of Corrections-LCF
Limon , Colorado 80828
7197757653

Hours worked per week: 40
Name of Supervisor: Nicole Blatnick - HSA
May we contact this employer? Yes

Duties
General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned by supervisor. Work extra shifts as needed.

Reason for Leaving
Promotion

RN-Charge Nurse
1/2011 - 6/2013

Grace Healthcare
[redacted]

Hours worked per week: 40
of Employees Supervised: 4
Name of Supervisor: Judi Cole - ADON
May we contact this employer? Yes

Duties
Charge nurse at long-term facilty.
Supervised minimum 2 CNA's per shift.
Up to 2 LPN's per shift.
Wound Care
Medication administration
Charting

Reason for Leaving
Needed employment closer to home. Different challenge not offered in LTC.

Certificates and Licenses

Type: Registered Nurse

Number: RN.1617494

Issued by: State of Colorado

Date Issued: 8 /2012 Date Expires: 9 /2021

Type: LPN License

Number: PN.0048761

Issued by: DORA

Date Issued: 9 /2011 Date Expires: 8 /2012

Skills

Office Skills

Typing: 60
Data Entry: 0

Additional Information

Additional Information

Transcripts of BSN degree.

References

Professional
[redacted]



Resume

Text Resume

Attachments

Attachment	File Name	File Type	Created By
CapellaTanscript.pdf	CapellaTanscript.pdf	**Transcript**	Job Seeker

Agency-Wide Questions

1. Q: Are you a current State of Colorado employee?

A: Yes

---

2. Q: If you indicated that you are a current State of Colorado employee, please select the State of Colorado Department or Higher Education institution that you currently work for from the following list:

A: Department of Corrections

---

3. Q: Are you a previous State of Colorado employee?

A: No

---

4. Q: If you indicated that you are a previous State of Colorado employee, please select the State of Colorado Department or Higher Education institution for which you most recently worked from the following list:

A: Not Applicable

---

5. Q: If you indicated that you are a previous State of Colorado employee, please list your dates of services for the last State of Colorado Department or Higher Education Institution.

A:

---

6. Q: If you receive notice that you have been eliminated from consideration for the position, you may protest the action by filing an appeal with the State Personnel Board/State Personnel Director within 10 days from the date you receive notice of the elimination. Also, if you wish to challenge the selection and comparative analysis process, you may file an appeal with the State Personnel Board/State Personnel Director within 10 days

from the receipt of notice or knowledge of the action you are challenging. Refer to Chapters 4 and 8 of the State Personnel Board Rules and Personnel Director's Administrative Procedures, 4 CCR 801, for more information about the appeals process. The State Personnel Board Rules and Personnel Director's Administrative Procedures are available at spb.colorado.gov. A standard appeal form is available at: spb.colorado.gov. If you appeal, your appeal must be submitted in writing on the official appeal form, signed by you or your representative, and received at the following address within 10 days of your receipt of notice or knowledge of the action: Colorado State Personnel Board/State Personnel Director, Attn: Appeals Processing, 1525 Sherman Street, 4th Floor, Denver, CO 80203. Fax: 303-866-5038. Phone: 303-866-3300. The ten-day deadline and these appeal procedures also apply to all charges of discrimination.

A: I affirm that I have read and understand my appeal rights as stated above.

---

7. Q: Are you a veteran? (If yes, please remember to attach your DD-214 to your application if you believe you're eligible for veteran's preference points).

A: No

---

8. Q: Under the Colorado Constitution, art. XII, sec. 15, qualified veterans and surviving spouses are eligible for preference when participating in the selection process for state job opportunities, other than for promotional opportunities. If you are an honorably discharged veteran, the spouse of a veteran unable to work due to a service connected disability, or the unremarried surviving spouse of a veteran who served on active duty in the United States Armed Forces during one of the periods for which the federal government awards veteran's preference, you may claim preference during the selection process for a position within the state personnel system. In order for us to determine your eligibility for veterans preference, you must attach a copy of a DD-214 form and other supporting documentation along with your application. Please indicate which of the following options best fits your veterans status:

A: I am not a Veteran.

---

9. Q: Are you applying for REINSTATEMENT?

A: No

---

10. Q: Please select the location(s) that you are willing to work. (Please note that vacancies may not occur in all areas.)

A: Denver Complex

---

11. Q: Do you acknowledge and understand that if selected for a CDOC position and you bear body art, tattoos and/or body piercings that you will be required to remove piercings and cover tattoos during your shift?

A: I so acknowledge.

---

12. Q: How did you learn about this job opportunity?

A: State of Colorado (CO-Jobs) Website

---

13. Q: Please state specifically who or where you learned about this job. If you were referred by a current employee, state the full name of the employee; Job Fair, state which job fair; newspaper, state which newspaper, etc.

A: Referred by Chief of Clinical Operations Jill Lampela and Director of Clinical Services Michelle Broedur.

---

14. Q: I acknowledge that as a current or past Colorado Department of Corrections employee applying for a Promotion, Transfer, Reinstatement or Voluntary Demotion, I authorize the gaining Appointing Authority, Hiring Manager and/or delegated representative access to any information pertaining to my CDOC employment including, but not limited to, personnel file/records or information relating to my current and/or past employment

performance documentation, in consideration of my application for employment. This release is executed with full knowledge, understanding, and consent that any Information discovered may be used for the official purposes. I also understand that any information reviewed will not be disclosed to another person or agency outside of the Colorado Department of Corrections, unless authorized and consistent with applicable law. I release the Colorado Department of Corrections from any liability or damage that may result from the use of information obtained.

A: I so acknowledge.

---

15. Q: Important Information: If you are offered and accept a position with the CDOC, you will be required to successfully complete the Colorado Department of Corrections basic training at the Corrections Training Academy in Canon City, CO. Daily attendance is a requirement during basic training. New state employees do not have accrued paid leave and leave without pay will not be approved during this training period. Failure to attend training may be considered failure to perform satisfactorily, and may result in termination. Do you acknowledge this?

A: I so acknowledge.

---

16. Q: Thank you for your interest in employment with the Colorado Department of Corrections (CDOC.) As part of the pre-employment investigation process, an integrity interview will be conducted. I understand that I must disclose everything in the interview as it relates to the questions asked and that my fingerprints will be sent to the Federal Bureau of Investigations (FBI.) If at any point during the background process I have any negative contact with a law enforcement agency (i.e.: tickets, accidents, arrests, etc.), a negative termination from employment, or any contact with offenders or former offenders on a personal level, I must contact the Background Investigations Unit with this information, and provide any documents, within 24 hours of the incident having occurred, or the next business day if it falls on a holiday or weekend. I understand that I may be required to submit to a polygraph examination, psychological or suitability examination or drug test and must pass the required examinations as a condition of employment. The background investigation is a continuous process. Failure to disclose any information on my application, refusal to provide additional requested information, participate and answer integrity interview questions or conduct myself in a professional manner during the process will be grounds for disqualification from the background process and I will be deemed ineligible for employment. If I am hired and there is any omission or falsification of information regarding my criminal history, or based on the severity of any new pertinent information the CDOC will have grounds to terminate. If it is determined that I am ineligible for employment based on the CDOC pre-employment hiring standards, I will be notified regarding the reason for ineligibility.

A: I acknowledge and agree.

Supplemental Questions

1. Q: I acknowledge that time sensitive correspondence will be sent via email from the Office of Human Resources and/or the Background Investigation Unit throughout the application process. YOU ARE STRONGLY ENCOURAGED TO CHECK YOUR E-MAIL DAILY.

A: I understand time sensitive correspondence will be sent via email and that I should check my email daily.

---

2. Q: The assessment process for this position will consist primarily of a review of your application materials and responses to supplemental questions against minimum qualifications, preferred qualifications and required competencies. Your responses will also be evaluated on ability to follow instructions, clarity, conciseness, organization, grammar, spelling and word choice. **Application materials and responses will be reviewed by Subject Matter Experts to assess and rank applicants**. Do you acknowledge this?

A: I so acknowledge this statement.

---

3. Q: Ensure the "Work Experience" section of your application is complete and contains all

information needed to determine if you meet the minimum qualifications and contains at least 10 years of work experience, if applicable. Resumes and "see resume" statements cannot be accepted in lieu of the "Work Experience" section of the application being completed. If you are utilizing education to meet the minimum qualifications, you must attach a copy of your transcripts that contain your name, name of the college, type of degree received and date the degree was awarded. Do you acknowledge this?

A: I so acknowledge this statement.

---

4. Q: Do you live in Colorado?

A: Yes

---

5. Q: Please describe in detail your experience supervising professional medical and behavioral health staff such as nurses, physicians, and mental health counselors. Supervisory experience includes making decisions that affect the pay, status, and tenure of subordinate employees. Be sure to include the name of your employer, your job title, the dates you were employed, and a description of your Supervisory Org. structure.

A: Currently I am the HSA for DRDC and CCC as well as interim RHSA for FCF, SCF, LCF, DWCF, LVCF, and YOS and interim HSA for LCF with the Colorado Department of Corrections. During my 3 ½ years as HSA of DRDC (March 2017 to current) for extended periods of time I have also completed interim HSA for DWCF. Currently I am the delegated health authority for DRDC, CCC, and directly supervise RNIV, BH supervisor, SOTMP supervisor, mid level providers, TC Supervisor and Dentist II. As the interim HSA for LCF (December 2019 to current) I am the delegated health authority as well as I directly supervise all of their clinical staff nurses, providers, MH supervior and dentist. As interim RHSA (December 2019 to current) I directly supervise four HSA's at five facilities.

---

6. Q: Please detail your experience managing a multi-disciplinary health care program that provided medical and behavioral health services. Include years of experience, various disciplines, operations, and programs.

A: Currently I am the HSA for DRDC as well as interim RHSA for 6 facilities and interim HSA for LCF. During my 3 ½ years as HSA of DRDC (March 2017 to current) for extended periods of time I have also acted interim HSA for DWCF. My duties include supervising RNIV, BH supervisor, SOTMP supervisor, mid level providers and Dentist II. I have completed multiple progressive disciplines on staff to coach and mentor them through issues and/or requested termination if they were not good in the position for the department. As a HSA I meet with all direct report staff a minimum of once per month to ensure they are on tract with their programs and those they supervise. Responsible for all clinical ACA files, CQI audits and plan of actions in clinical, behavioral health and SOTMP. I am a member of the policy committee at HQ for clinical services as well at the facility level for IA's. Developed a MAT program at DRDC. Ensured mid-level providers received the x-waiver and nurses were adequately trained to deliver MAT medications safely for the offender and the security concerns of these medications at the facility level. Worked with behavioral health on the training needed as well as classes/groups to offer the offenders. Attend monthly staffings on MAT offenders to ensure we are compliant. Taught Medical Emergency Response at facilities throughout the state to ensure better care for the offenders in the event an emergency arose to clincal and security staff. Helped devise a transgender check list for staffings. Ensure all staffings take place per policy within 1 day and 3 days respectively of their arrival at DRDC. As a RN IV (July 16 to Feb 17) at DRDC I supervised the RNIII's as well as the management of the clinic to include mid-level providers, psychiatry and BH providers. I was assigned to oversee DWCF clinic as well. Oversaw CQI information from the RN III's and co-chaired quarterly meetings. Worked with all disciplines on plan of actions. I was the Nurse III at Limon Correctional Facility for 1 ½ years (December 2014 to June 2016). I supervised up to 10 nurses, when fully staffed. Major responsibilities included scheduling, covering for HSA at management meetings and other meetings as assigned, ensured shifts were covered, ensured proper processes were being used and documentation was correct. Completed CQI audit for medical, ACA files, and helped provider try and stay up on signing charts and doing new arrivals.

Triaged mental health kites in an effort to help them be more effective with their limited staff as well as work with drug and alcohol to ensure assessments were completed per policy.

---

7. Q: Provide a detailed example of how you resolved a clinical operational issue within an organization.

A: When I arrived at DRDC as the Nurse IV we had an immediate operational issue that needed addressed. Intake physicals are completed at DRDC by mid-level providers (MLP) and should be done at day 3 post their arrival. Mid-level providers were grossly behind on physicals. This is measured as Day 4 numbers meaning anything not done on day 3 is carried over. This number should be at or below 40. When I started the number was often over 100 at it's highest almost 200. I corrected this deficiency by working daily with their schedules and creating several plan of actions to help decrease day 4 intake physical numbers by setting clear minimum expectations daily and meeting with them mid-day if they were not on target to reach their number. Ensured adequate staffing daily, reaching out to agency and other facilities as necessary to keep a minimum of 4 MLP's daily to focus on intakes. Also changed the way MLP’s worked in the infirmary to help keep more providers in the clinic completing intakes. It took roughly one month to correct this issue and I continue as an HSA to monitor this number and take action if needed which is has not been necessary for the last year.

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8. Q: **Corrections Training Academy**:

If appointed to a position, you must successfully complete the CDOC basic training before you start your work assignment.

The Corrections Training Academy (CTA) is an 18 day, paid training that is held in **Canon City**, Monday through Friday from 8am to 5pm.

Basic training is held once a month and starts the first week of each month.

You must attend and pass all phases of basic training as required which includes the Defense Tactics.

Do you acknowledge this?

A: I so acknowledge this information.

---

9. Q: **Certification and Confidentiality Statement**

I certify that:

--I understand that this, my completed Application, the attached Supplemental Questions, and my responses are confidential and that I have neither consulted with others nor received assistance in the preparation, writing, or editing of my responses and the information contained herein is in my own words and was prepared and completed solely by me and only me.

--All the information I have provided herein is true, complete and correct to the best of my knowledge and belief, and is made in good faith.

--I have not communicated the confidential information of this, my Application and the attached Supplemental Questions in any way to other candidates, potential candidates, subject matter experts, or any person.

--I understand that if the confidential information in this, my Application and the attached Supplemental Questions and/or my responses, are found to have been falsified, plagiarized, or shared in any way, I may be disqualified or removed from the position if appointed.

A: I agree to the terms and conditions of this Certification and Confidentiality Statement.

HSA Vacancies 3/2017 - CDOC Health Services Administrator

Contact Information -- Person ID: 13549735

Name:	Tina M Cullyford	Address:	[redacted]
Home Phone:	[redacted]	Alternate Phone:	
Email:	[redacted]	Notification Preference:	Email
Former Last Name:	Rosler	Month and Day of Birth:	08/05

Personal Information

Driver's License:	[redacted]
Can you, after employment, submit proof of your legal right to work in the United States?	Yes
What is your highest level of education?	Bachelor's Degree

Preferences

Preferred Salary:	$81,000.00 per year
Are you willing to relocate?	No
Types of positions you will accept:	Regular
Types of work you will accept:	Full Time
Types of shifts you will accept:	Day , Evening , On Call (as needed)

Objective

To obtain a Health Service Administrator job with Colorado Department of Corrections at DRDC.

Education

College
Capella University
www.capella.edu
10/2012 - 6/2014
Minneapolis, Minnesota

Did you graduate: Yes
College Major/Minor: Nursing
Units Completed: 192 Quarter
Degree Received: Bachelor's

College
Otero Junior College
8/2010 - 6/2012
LaJunta, Colorado

Did you graduate: Yes
College Major/Minor: Nursing
Units Completed: 65 Semester
Degree Received: Associate's

College
Morgan Community College
8/2009 - 7/2010
Limon, Colorado

Did you graduate: No
College Major/Minor: Nursing-Pre-requisites
Units Completed: 35 Semester
Degree Received: No Degree

Work Experience

Nurse III
12/2014 - Present

Limon Correctional Facility
Limon , Colorado 80826
719-775-7653

Hours worked per week: 40
Monthly Salary: $5,597.00
of Employees Supervised: 9
Name of Supervisor: Nicole Blatnick - HSA
May we contact this employer? Yes

Duties

General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned for the last 3 years. Work extra shifts as needed to cover the schedule. Supervise 9 nurses to include scheduling, payroll, training and review process. CQI nurse and co-chair for quarterly CQI meetings. ACA file compilation. Policy and review committee. Cover for Health Service Administrator as designated with the Management team and/or training and meetings. Maintain Chronic Care Offender data base to ensure continuity of care. Chart reviews daily with and without provider to ensure proper documentation and policy guidelines are followed. Answer step one grievances. Diabetic and ADA data base to ensure proper restrictions are in place. Track psychotropic medication compliance for all P3 and above offenders. Educate and schedule with psych as necessary for offenders who fail to take medication as prescribed. Other duties as assigned.

Reason for Leaving
Employment closer to home as well as a new challenge as a Nurse IV in a different correctional setting.

Nurse IV
6/2016 - Present

Colorado Department of Corrections- DRDC
10900 Smith Road
Denver, Colorado 80239
303-307-2301

Hours worked per week: 40
Monthly Salary: $6,194.00
of Employees Supervised: 5
Name of Supervisor: Dwayne Fox - RHSA
May we contact this employer? Yes

Duties
Supervise RN III's, Medical Records, Lab Tech positions and clinic staff. For several months I also supervised the RN III's at DWCF as well as their clinic staff. Complete payroll. Performance documentation and evaluations. Completion of ACA files as well as ensuring that all areas turned their files in, in a timely manner. Ensure CQI audits are completed and plan of actions are written. Co-Chair for quarterly meetings. Ensure Infectious Disease forms are completed and submitted. Step II grievances as assigned. Mid-Level Provider schedules and plan of actions for Day 4 intake numbers. Track training requirements for nurses and mid-level providers. Evaluated and approved usage of agency hours when requested by RN III's. Presented in-services to nurses during monthly nursing meetings in both the clinic and the infirmary. Attend roll call daily and present numbers when HSA is not available. Meet with offenders requests for interviews. Call families as indicated. Work hand in hand with clinic staff to learn how to use eOMIS. Attended numerous training's to help them with this transition. Open communication lines with Marquis as well as CDOC OIT though the entire process and still today. Approval of clinic and infirmary supply orders. Policy and Review committee. Chart reviews daily with and without provider to ensure proper documentation and policy guidelines are followed. Education to nurses as needed if they fail to meet policy guidelines.

Reason for Leaving
To promote to a HSA at DRDC.

RN I
12/2012 - 12/2014

Colorado Department of Corrections- LCF
Limon , Colorado 80828
7197757653

Hours worked per week: 40
Monthly Salary: $4,769.00
Name of Supervisor: Nicole Blatnick - HSA
May we contact this employer? Yes

Duties
General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned by supervisor. Work extra shifts as needed.

Reason for Leaving
Promotion

RN-Charge Nurse
1/2011 - 6/2013

Hours worked per week: 40
Monthly Salary: $3,360.00
of Employees Supervised: 4

Grace Healthcare
[redacted]

Name of Supervisor: Judi Cole - ADON
May we contact this employer? Yes

Duties
Charge nurse at long-term facilty.
Supervised minimum 2 CNA's per shift.
Up to 2 LPN's per shift.
Wound Care
Medication administration
Charting

Reason for Leaving
Needed employment closer to home. Different challenge not offered in LTC.

Certificates and Licenses

Type: Registered Nurse

Number: RN.1617494

Issued by: State of Colorado

Date Issued: 8 /2012 Date Expires: 9 /2018

Type: LPN License

Number: PN.0048761

Issued by: DORA

Date Issued: 9 /2011 Date Expires: 8 /2012

Skills

Office Skills

Typing: 60
Data Entry: 0

Additional Information

Additional Information

Transcripts of BSN degree.

References

[redacted]

Resume

Text Resume

Attachments

Attachment	File Name	File Type	Created By
SSR_TSRPT.pdf	SSR_TSRPT.pdf	**Other**	Job Seeker
DORA - RN	Tina Cullyford RN	**License**	Lorie Sanchez

Agency-Wide Questions

1. Q: Are you a current State of Colorado classified employee?

A: Yes

---

2. Q: If you indicated that you are a current State of Colorado employee, please select the State of Colorado Department or Higher Education institution that you currently work for from the following list:

A: Department of Corrections

---

3. Q: Are you a previous State of Colorado classified employee?

A: No

---

4. Q: If you indicated that you are a previous State of Colorado employee, please select the State of Colorado Department or Higher Education institution for which you most recently worked from the following list:

A: Not Applicable

---

5. Q: If you indicated that you are a previous State of Colorado employee, please list your dates of services for the last State of Colorado Department or Higher Education Institution.

A:

---

6. Q: Select the one (1) answer that best describes how you learned about this job opening.

A: Current State Employee

---

7. Q: If you receive notice that you have been eliminated from consideration for the position, you may protest the action by filing an appeal with the State Personnel Board/State Personnel Director within 10 days from the date you receive notice of the elimination. Also, if you wish to challenge the selection and comparative analysis process, you may file an appeal with the State Personnel Board/State Personnel Director within 10 days from the receipt of notice or knowledge of the action you are challenging. Refer to Chapters 4 and 8 of the State Personnel Board Rules and Personnel Director's Administrative Procedures, 4 CCR 801, for more information about the appeals process. The State Personnel Board Rules and Personnel Director's Administrative Procedures are available at www.colorado.gov/spb. A standard appeal form is available at: www.colorado.gov/spb. If you appeal, your appeal must be submitted in writing on the official appeal form, signed by you or your representative, and received at the following address within 10 days of your receipt of notice or knowledge of the action: Colorado State Personnel Board/State Personnel Director, Attn: Appeals Processing, 1525 Sherman Street, 4th Floor, Denver, CO 80203. Fax: 303-866-5038. Phone: 303-866-3300. The ten-day deadline and these appeal procedures also apply to all charges of discrimination.

A: I affirm that I have read and understand my appeal rights as stated above.

---

8. Q: Are you a veteran? (If yes, please remember to attach your DD-214 to your application if you believe you're eligible for veteran's preference points).

A: No

---

9. Q: Under the Colorado Constitution, art. XII, sec. 15, qualified veterans and surviving spouses are eligible for preference when participating in the selection process for state job opportunities, other than for promotional opportunities. If you are an honorably discharged veteran, the spouse of a veteran unable to work due to a service connected disability, or the unremarried surviving spouse of a veteran who served on active duty in the United States Armed Forces during one of the periods for which the federal government awards veteran's preference, you may claim preference during the selection process for a position within the state personnel system. In order for us to determine your eligibility for veterans preference, you must attach a copy of a DD-214 form and other supporting documentation along with your application. Please indicate which of the following options best fits your veterans status:

A: I am not a Veteran.

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10. Q: Are you applying for REINSTATEMENT?

A: No

---

11. Q: Please select the location(s) that you are willing to work. (Please note that vacancies may not occur in all areas.)

A: Denver Complex

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12. Q: Do you acknowledge and understand that if selected for a CDOC position and you bear body art, tattoos and/or body piercings that you will be required to remove piercings and cover tattoos during your shift?

A: I so acknowledge.

Supplemental Questions

1. Q: Do you live in Colorado?

A: Yes

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2. Q: The assessment process for this position will consist primarily of a review of your application, documents submitted and responses to supplemental questions against the minimum qualifications, required competencies and preferred qualifications. Your responses will also be evaluated on ability to follow instructions, clarity, conciseness, organization, grammar, spelling and word choice. Do you acknowledge this?

A: I so acknowledge.

---

3. Q: I acknowledge that time sensitive correspondence will be sent via email from the Office of Human Resources and/or the Background Investigation Unit throughout the application process. YOU ARE STRONGLY ENCOURAGED TO CHECK YOUR E-MAIL DAILY.

A: I understand time sensitive correspondence will be sent via email and that I should check my email daily.

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4. Q: Ensure the "Work Experience" section of your application is complete and contains all information needed to determine if you meet the minimum qualifications. Resumes and "see resume" statements cannot be accepted in lieu of the "Work Experience" section of the application being completed. If you are utilizing education to meet the minimum qualifications, you must attach your transcripts that contain the name of the college/university, type of degree received, date the degree was awarded, your name, last four of social security or student ID number. Do you acknowledge this?

A: I so acknowledge.

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5. Q: Do you possess a valid, active license from the State of Colorado as a Registered Nurse, Nurse Practitioner, Physician Assistant, Physician, Chiropractor, Licensed Clinical Social Worker, Licensed Professional Counselor, Licensed Marriage & Family Therapist, Licensed Psychologist, Licensed Addiction Counselor or Certified Addiction Counselor III?

A: Yes

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6. Q: Enter your Colorado healthcare license number and type. (Ex: RN 000000, LPC 11111, LAC 2222, etc.)

A: Current: RN.1617494 Original Issue date 8/1/12 Expires 9/18
Past: PN.0048761 Original Issue date: 9/8/11 Expired 8/12 when received RN.

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7. Q: Current vacancies are in Crowley, Canon City and Denver. Select the location(s) that you are willing to work.

A: Denver

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8. Q: Please describe your experience providing oversight of a medical program at a supervisory level. Include years of experience, roles held, major responsibilities, programs in which you were responsible for oversight, amount of staff under your supervision and disciplines you've supervised. Supervisory experience includes making decisions that affect pay, status and tenure of subordinate employees.

A: Currently I am the interim HSA for DRDC but the majority of my time here has been in the role of Nurse Manager (RN IV). My duties here include supervising RN III's in the clinic and infirmary, Lab and X-Ray techs, Intake and Medical Records. I also manage the mid-level providers by working daily with their schedules and creating several plan of actions to help decrease day 4 intake physical numbers by setting clear expectations daily and meeting with them mid-day if they were not on target to reach their number. Ensure adequate staffing daily, reaching out to agency and other facilities as necessary to keep a minimum of 4 MLP's daily to focus on intakes. Also changed the way MLP's work in the infirmary to help keep more providers in the clinic completing intakes. Oversee CQI information from the RN III's and co-chair of the quarterly meetings. I meet with the RN III's one on one every month or more as necessary to ensure smooth clinic operation as well as ensuring they have the tools to succeed through mentoring and coaching. Complete PMP reviews and plans. Educate and help train new nurses to help ensure their success in this setting. Attend daily roll call and manager meeting with the HSA and covered in her absence. Attend policy and review committee. Attend Length of Stay and Internal Classification Meetings.

I was the Nurse III at Limon Correctional Facility for 1 ½ years. I supervised up to 10 nurses, when fully staffed. Major responsibilities included scheduling, covering for HSA at management meetings and other meetings as assigned, ensured shifts were covered, ensured proper processes were being used and documentation was correct. Completed CQI audit for medical, ACA files, and helped provider try and stay up on signing charts and doing new arrivals. Triaged mental health kites in an effort to help them be more effective with their limited staff as well as work with drug and alcohol to ensure assessments that are needed for Hep C treatment were completed. I helped develop a chronic care roster which tracked offenders who required chronic care appointments and scheduled their appointments. I developed a HTN clinic for offenders and helped train another nurse in how to run this program. This was in place for over 1 year before I left the position and received positive feedback from offenders and provider. I met with nurses one on one every month or more as necessary to ensure smooth clinic operation. Completed PMP reviews and plans. Initiated a PIP if needed to ensure nurses have the tools to succeed through mentoring and coaching. Educated and trained new nurses to help ensure their success in this setting.

Charge Nurse Grace Healthcare (LTC Facility) 1 ½ years. I supervised CNA's while I was an LPN and LPN's and CNA's while a RN. My major responsibilities included scheduling while a charge nurse and ensuring adequate coverage based on census. Fall risk assessments on all residents as well as check assessments those under myself did. Ensure documentation was correct for LPN's and CNA's. Trained and mentored LPN's while they were learning to meet the demands of a long term care facility including an extremely high resident to nurse ratio (38-45 to 1). Mentor CNA's when deficiencies were noted. Complete quarterly reviews of all employees under me and work with ADON to complete mid year and end of year reviews. Wound care nurse. Completed weekly full assessments and daily treatments as needed. Continued this role after I began working at DOC and trained other nurses to complete required paperwork and properly care for sometimes very complex wounds.

---

9. Q: Please discuss your experience with progressive discipline.

A: Nursing in a correctional environment is challenging and understanding where the employees I supervise are currently standing is an important piece of the progressive discipline piece. I have monthly meetings with my nurses, lab and x-ray tech, and medical records techs which translates into monthly notes and a confirming memorandum if necessary to clearly set expectations if there are deficiencies noted. If the behavior does not change after a confirming memorandum then I initiate performance documentation and a PIP as necessary. I have issued several PDOC's when

expectations of the confirming memorandum were not met. I have also written a few PIP's. I encourage input in the process from those I supervise and encourage them to embrace the PIP as the learning tool it is meant to be. I have had success with the progressive discipline process in that in the 6 month review period I had two nurse that were overall 1's with PIP's and both helped write their PIP's and ended as level II's in this year end rating cycle. This is a win for the organization in that we can keep quality staff which supports our mission. I also am a firm believer in positive reinforcement and have issues several positive PDOCS to those I directly supervise as well as some who have come from other facilities to help us with our intake numbers.

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10. Q: Please describe your experience establishing operational or programmatic goals and objectives and developing and managing a budget to achieve those goals and objectives.

A: At DRDC I worked closely with the HQ management team and MLP's to develop POA's top help with our day 4 intake numbers. Changed several areas to include minimum staffing maintained at 4 and daily expectations with mid-day follow through if not meeting expectation. Assigned one provider to the Permanent Assigned Offenders at DRDC as well as Provider of the Day for 2 month increments to ensure that staff that are onsite can focus on intakes only. Decreased the number of hours they were required to work in the infirmary to increase intake physicals as well. Work hand in hand with the RN III's to ensure that only what is needed is ordered on both the clinic and the infirmary. Helped the RN III's develop more in depth CQI POA's for areas that we continued to fail at with clear time frames and expectations. Direct input and oversight of the eOMIS launch and the impact it had to our clinic and infirmary. Developed spreadsheets for providers to use while issues were being addressed such as no medical restrictions moving over (still us this one), daily sick call, labs, med holds, etc… this allowed the clinic to continue to function with minimal impact to offender care.
At LCF I worked with my current HSA to establish correction plans (programmatic goals) following CQI audits. An example of this would be the anatomical requirement for CQI. It seems that every other cycle we do not meet the required threshold. This time we approached it from a different angle and have laminated measuring devices and placed them on the anatomical clip boards as well as wrote "remember measurements" on all the boards as well. This was discussed once again in the nurses meeting where they were given specific, measurable, attainable, relevant and time-bound goals as it relates to daily clinical operations. The expectation of 100% compliance was clearly stated. Operationally I have altered schedules for all disciplines due to unforeseen circumstances, such as an unexpected lock-down(s). I have been on several IAP planning sessions to ensure that clinic operations are met especially in regards to diabetics getting their meals at set times. This has been a challenge in the past but due to consistent responses from clinical in these plan developing meetings diabetics are now listed in the IAP and clinical is always included in the planning. A goal was written with an employee who does are ordering to lower our monthly purchases so that we could purchase lab chairs at the end of the fiscal year. He was able to do so and we were not only able to purchase lab chairs but other much needed equipment as well.

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11. Q: Describe why you are the best candidate for this position. Provide a detailed account of how you meet the required competencies as listed in the job announcement and how your accomplishments, qualifications, skills, areas of expertise, other characteristics, etc., make you the best fit candidate for this position.

A: In my past role as Nurse III at Limon Correctional Facility I was mentored and trained by a knowledgeable HSA who along with my recent HSA at DRDC prepared me well for this position. I currently perform most of the duties listed in the job description as well as meet the competencies. I have excellent documentation skills and communicate well with others through written word and on the phone. I have conversations daily with other disciplines to ensure continuity of care of offenders as well as seamless operations between clinical services and custody and control. I can problem solve and critically think even when faced with a stressful situation. A murder at LCF allowed for myself and another nurse to use our critical thinking skills to act appropriately from a medical and security (crime scene) point of view. I have an open door policy and welcome questions from not only my nurses but security staff as well. Building bridges between our staff and security can only strengthen our clinic operations and offender care. Nurses also know that even if I am not on call they may contact me 24/7 to just ask a question or to

bounce an idea off of. Many times they know the answer and they just need someone from the outside to take a look and encourage them to make the right choice. Alternately having that extra person on the phone to be willing to triage/assess with you can make you see things you may not have thought of which can benefit offender care as well. I believe that verbal communication sometimes is all that may be needed to effectively resolve an issue and thus effectively manage clinical operations. Sometimes all someone needs is to know someone is listening and I think that is the hallmark of an effective leader…being a good listener. The correctional environment is stressful on many levels on its face but when also faced with life and death situations your staff has to know they can count on you and I feel I have shown them that. There is nothing that I have asked my staff to do that I have not done myself or would be willing to do myself. I have worked with security staff to bridge the gap on numerous occasions. I have won the "million dollar award" given by one captain for "bridging the gap between security and medical." I have never understood why there seems to be such a division filled with strife between the two entities and I take pride in bringing these two disciplines together more seamlessly. I have also received positive performance documentation from security staff for all working together for the betterment of the facility and offenders during various situations. I am knowledgeable in all aspects the clinical skills needed to perform my job efficiently and diligently. I love to learn and if I happen to not know the answer I will research until I am satisfied that I not only know the answer but the "why" of the answer. Understanding something completely makes it easier to share that knowledge with others. I have worked with all disciplines to ensure offender care is complete to include referring to drug and alcohol, dental, mental health and outside providers as indicated. I am under no illusion that I know everything there is possible to know about this position but I am confident that my current job duties have and are preparing me for this position. I enjoy a challenge and learning new things and feel that I have a great deal to offer to this position if selected.

---

12. Q: Please describe the complexities of a multi-disciplinary health care delivery system.

A: The true essence of multi-disciplinary health care delivery system is collaboration. The complexity comes from trying to collaborate with disciples that view the process itself differently. Collaboration requires an understanding of how each person's role and responsibility aids in excellent offender care, which should be everyone's main goal. Joint problem solving , mutual give and take, shared accountability and the pooling of resources is required for collaboration to work. The multi-disciplinary team in a correctional setting is complex by the nature of not only where the team is housed but also the clientele. With that being said though, if the team learns to collaborate with the aid of a strong leader than offender care could only improve.

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13. Q: A) On what social media website did you see this job opening?

A: None

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14. Q: B) Select the one (1) answer that best describes where you learned about this job opportunity.

A: Other*

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15. Q: C) If your response to the question above included a star, please state specifically who or where you learned about this job. If you were referred by a current employee, state the full name of the employee.

A: CDOC Job website

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16. Q: D) Do you utilize social media, personally or professionally? If so, which platform(s) do you use most often?

A: Facebook

Denver 34376 C6S4XX 3/2016 - CDOC Nurse Manager - Denver

Contact Information -- Person ID: 13549735

Name:	Tina M Cullyford	Address:	[redacted]
Home Phone:	[redacted]	Alternate Phone:	
Email:		Notification Preference:	Email
Former Last Name:	Rosler	Month and Day of Birth:	08/05

Personal Information

Driver's License:	Yes, [redacted]
Can you, after employment, submit proof of your legal right to work in the United States?	Yes
What is your highest level of education?	Bachelor's Degree

Preferences

Preferred Salary:	$73,000.00 per year
Are you willing to relocate?	No
Types of positions you will accept:	Regular
Types of work you will accept:	Full Time
Types of shifts you will accept:	Day , Evening , Rotating , On Call (as needed)

Objective

To obtain a Nurse IV position with Colorado Department of Corrections

Education

College
Capella University
www.capella.edu
10/2012 - 6/2014
Minneapolis, Minnesota

Did you graduate: Yes
College Major/Minor: Nursing
Units Completed: 192 Quarter
Degree Received: Bachelor's

College
Otero Junior College
8/2010 - 6/2012
LaJunta, Colorado

Did you graduate: Yes
College Major/Minor: Nursing
Units Completed: 65 Semester
Degree Received: Associate's

College
Morgan Community College
8/2009 - 7/2010
Limon, Colorado

Did you graduate: No
College Major/Minor: Nursing-Pre-requisites
Units Completed: 35 Semester
Degree Received: No Degree

Work Experience

Nurse III
12/2014 - Present

Limon Correctional Facility
Limon , Colorado 80826
719-775-7653

Hours worked per week: 40
Monthly Salary: $5,597.00
of Employees Supervised: 9
Name of Supervisor: Nicole Blatnick - HSA
May we contact this employer? Yes

Duties

General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned for the last 3 years. Work extra shifts as needed to cover the schedule.

Supervise 9 nurses to include scheduling, payroll, training and review process. CQI nurse and co-chair for quarterly CQI meetings. ACA file compilation. Policy and review committee. Cover for Health Service Administrator as designated with the Management team and/or training and meetings. Maintain Chronic Care Offender data base to ensure continuity of care. Chart reviews daily with and without provider to ensure proper documentation and policy guidelines are followed. Answer step one grievances. Diabetic and ADA data base to ensure proper restrictions are in place. Track psychotropic medication compliance for all P3 and above offenders. Educate and schedule with psych as necessary for offenders who fail to take medication as prescribed. Other duties as assigned.

Reason for Leaving
Employment closer to home as well as a new challenge as a Nurse IV in a different correctional setting.

RN I
12/2012 - 12/2014

Colorado Department of Corrections- LCF
Limon , Colorado 80828
7197757653

Hours worked per week: 40
Monthly Salary: $4,769.00
Name of Supervisor: Nicole Blatnick - HSA
May we contact this employer? Yes

Duties
General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned by supervisor. Work extra shifts as needed.

Reason for Leaving
Promotion

RN-Charge Nurse
1/2011 - 6/2013

Grace Healthcare
900 S 12th Street
Rocky Ford, Colorado 80167
(719) 254-3314

Hours worked per week: 40
Monthly Salary: $3,360.00
of Employees Supervised: 4
Name of Supervisor: Judi Cole - ADON
May we contact this employer? Yes

Duties
Charge nurse at long-term facilty.
Supervised minimum 2 CNA's per shift.
Up to 2 LPN's per shift.
Wound Care
Medication administration
Charting

Reason for Leaving
Needed employment closer to home. Different challenge not offered in LTC.

Certificates and Licenses

Type: Registered Nurse

Number: RN.1617494

Issued by: State of Colorado

Date Issued: 8 /2012 Date Expires: 9 /2016

Skills

Office Skills

Typing: 60
Data Entry: 0

Additional Information

Additional Information

Transcripts of BSN program to use in lieu of 1 year experience.

References

Professional

[redacted]

Resume

Text Resume

Attachments

Attachment	File Name	File Type	Created By
SSR_TSRPT.pdf	SSR_TSRPT.pdf	**Other**	Job Seeker
DORA RN	Cullyford, T RN 4 2016	**License**	Heather Tepley

Agency-Wide Questions

1. Q: Are you a current State of Colorado classified employee?

A: Yes

---

2. Q: If you indicated that you are a current State of Colorado employee, please select the State of Colorado Department or Higher Education institution that you currently work for from the following list:

A: Department of Corrections

---

3. Q: Are you a previous State of Colorado classified employee?

A: No

---

4. Q: If you indicated that you are a previous State of Colorado employee, please select the State of Colorado Department or Higher Education institution for which you most recently worked from the following list:

A: Not Applicable

---

5. Q: If you indicated that you are a previous State of Colorado employee, please list your dates of services for the last State of Colorado Department or Higher Education Institution.

A:

---

6. Q: Select the one (1) answer that best describes how you learned about this job opening.

A: Current State Employee

---

7. Q: If you receive notice that you have been eliminated from consideration for the position, you may protest the action by filing an appeal with the State Personnel Board/State Personnel Director within 10 days from the date you receive notice of the elimination. Also, if you wish to challenge the selection and comparative analysis process, you may file an appeal with the State Personnel Board/State Personnel Director within 10 days from the receipt of notice or knowledge of the action you are challenging. Refer to Chapters 4 and 8 of the State Personnel Board Rules and Personnel Director's Administrative Procedures, 4 CCR 801, for more information about the appeals process. The State Personnel Board Rules and Personnel Director's Administrative Procedures are available at www.colorado.gov/spb. A standard appeal form is available at: www.colorado.gov/spb. If you appeal, your appeal must be submitted in writing on the official appeal form, signed by you or your representative, and received at the following address within 10 days of your receipt of notice or knowledge of the action: Colorado State Personnel Board/State Personnel Director, Attn: Appeals Processing, 1525 Sherman Street, 4th Floor, Denver, CO 80203. Fax: 303-866-5038. Phone: 303-866-3300. The ten-day deadline and these appeal procedures also apply to all charges of discrimination.

A: I affirm that I have read and understand my appeal rights as stated above.

---

8. Q: Are you a veteran? (If yes, please remember to attach your DD-214 to your application if you believe you're eligible for veteran's preference points).

A: No

---

9. Q: Under the Colorado Constitution, art. XII, sec. 15, qualified veterans and surviving spouses are eligible for preference when participating in the selection process for state job opportunities, other than for promotional opportunities. If you are an honorably discharged veteran, the spouse of a veteran unable to work due to a service connected disability, or the unremarried surviving spouse of a veteran who served on active duty in the United States Armed Forces during one of the periods for which the federal government awards veteran's preference, you may claim preference during the selection process for a position within the state personnel system. In order for us to determine your eligibility for veterans preference, you must attach a copy of a DD-214 form and other supporting documentation along with your application. Please indicate which of the following options best fits your veterans status:

A: I am not a Veteran.

---

10. Q: Are you applying for REINSTATEMENT?

A: No

---

11. Q: Please select the location(s) that you are willing to work. (Please note that vacancies may not occur in all areas.)

A: Denver Complex

Supplemental Questions

1. Q: The assessment process for this position will consist primarily of a review of your application, documents submitted and responses to supplemental questions against the minimum qualifications, required competencies and preferred qualifications. Your responses will also be evaluated on ability to follow instructions, clarity, conciseness, organization, grammar, spelling and word choice. Do you acknowledge this?

A: I so acknowledge.

---

2. Q: Ensure the "Work Experience" section of your application is complete and contains all information needed to determine if you meet the minimum qualifications. Resumes and "see resume" statements cannot be accepted in lieu of the "Work Experience" section of the application being completed. If you are utilizing education to meet the minimum qualifications, you must attach your transcripts that contain the name of the college/university, type of degree received, date the degree was awarded, your name, last four of social security or student ID number. Do you acknowledge this?

A: I so acknowledge.

---

3. Q: I acknowledge that time sensitive correspondence will be sent via email from the Office of Human Resources and/or the Background Investigation Unit throughout the application process. YOU ARE STRONGLY ENCOURAGED TO CHECK YOUR E-MAIL DAILY.

A: I understand time sensitive correspondence will be sent via email and that I should check my email daily.

---

4. Q: Do you live in Colorado?

A: Yes

---

5. Q: Do you possess a valid Registered Nurse License from the State of Colorado or any state participating in the Nurse Licensure Compact?

A: Yes

---

6. Q: Please enter your RN license number and state of issuance.

A: RN.1617494 Colorado

---

7. Q: Please discuss, in detail, your experience managing personnel issues with staff you have supervised. Your response should include the issue(s), your role and the outcome.

A: Working in a supervisor role of nurses in corrections has presented challenges. The inherent stress that comes with working in a correctional facility can take it's toll on individuals but I find that my place as a supervisor can help new and old employees through some of the issues that arise due to stress. I hold one to one monthly meetings that allows for a time for the employee and myself to communicate and allow the employee to vent and decompress is needed. They are each allowed to speak freely with any issues they have. I challenge them when they have an issue to also give me a solution. These meetings have allowed for interactions about both positive and negative behaviors. I document these meetings and when review time comes around I have a wealth of information to draw from. These also allow for documentation when negative performance documentation may be needed. One particular nurse who when at work did wonderful, struggled to meet her work schedule by coming to work on time. Consistently she was 10-30 minutes late for each shift. In two consecutive meetings I documented that this was an issue and what we discussed as clear expectations. A confirming memorandum was completed after the second meeting. Unfortunately she continued to fail to meet her scheduled time and in the 3rd month she received performance documentation. These meetings though allowed for me to have the needed documentation to support the PDOC. She did realize the severity of the situation after than and I am happy to say one of my more punctual nurses today.

Another example of an employee issue was I had two nurses who attended the academy together and were friends on the outside suddenly stopped talking to each other at work and made snide comments about the other to whoever would listen. This was causing a large issue in operations as they often worked together on overlapping shifts as well as together alone on shifts and duties were not being done efficiently and their negativity was contagious to the entire clinic morale. I brought both nurses into an office away from the clinic and allowed them each 5 minutes to discuss why they were upset and the one who was not speaking could not interject. I then had them both state what they liked about each other and why they were friends. During this entire meeting they were looking at me to "side" with them. I stated several times that I was not there to give my opinion only to mediate as they shared theirs. They were told in clear directives that they would have to work these issues out prior to this meeting ending or documentation would be initiated for failing to meet several IPO's if any more instances were noted. I read them the IPO's they would be failing to meet by continuing this behavior. This meeting ended up lasting over one hour and resolutions to be cordial were made. Ultimately they did work through their issues and worked well together from that point on until one of them quit.

While in the nursing home I supervised a LPN that I noted to be falsifying documentation stating that she completed treatments when she did not. The Long Term Care Center where I worked did not have progressive discipline and so my talking to her was not documented anywhere like CDOC does with confirming memorandums and PDOC's. I checked her work daily though and kept my own notes. I spoke with her on the implications for patient care as well as her license. She always had an excuse as to why she couldn't get something done and even told me "it's just a dressing, it will be fine until tomorrow." This resident happened to have a stage III coccyx ulcer. She continued the behavior. I recommended her for termination after the 3rd incident I could verify. I was supported and had to terminate her as she came to work. She was shocked that she could be terminated even though I had spoke to her several times. This was reported to the state nursing board as well. I had far more positive stories while working at the LTC and relished learning how to speak to CNA's and other LPN's in a positive way in a supervisor role. I learned a great deal about interpersonal conflict which allowed me to step into my role as Nurse III with greater ease in regards to dealing with employees.

While the general manager of Carquest I did not have a great deal of conflict with employees as I only supervised 1 full time and 1 part time employee (at a time) but I did deal with a serious issue while there. When one employee worked weekends there always seemed to be a discrepancy in the cash drawer as well as inventory. This took a great deal of investigative work to figure out who was stealing and how they were doing it. Once it was discovered it became a police matter and she was terminated. That was my first experience in having to terminate an employee and although she was guilty of theft it was still a trying ordeal for myself to end somebody's employment. All of my experiences in different work disciplines have prepared me for the supervisor role that I now seek.

---

8. Q: Please describe your nursing supervisory experience. Include years of experience, roles held, types of environments, programs, disciplines you've supervised and major responsibilities. Supervisory experience includes making decisions that affect pay, status and tenure of subordinate employees.

A: Nurse III at Limon Correctional Facility for almost 1 ½ years. Major responsibilities include

scheduling, covering for HSA at management meetings and other meetings she assigns me to, ensuring shifts are covered, ensuring proper processes are being used and documentation is correct. I also do CQI audit, AC files, chronic care roster, and help provider try and stay up on signing charts and doing new arrivals. I meet with nurses Q monthly or more as necessary to ensure smooth clinic operation. Complete PMP reviews and plans. Educated and train new nurses to help ensure their success in this setting. Initiate a PIP if needed to ensure nurses have the tools to succeed through mentoring and coaching.

Charge Nurse Grace Healthcare (LTC Facility) 1 ½ years. I supervised CNA's while I was an LPN and LPN's and CNA's while a RN. My major responsibilities included scheduling while a charge nurse and ensuring adequate coverage based on census. Fall risk assessments on all residents as well as check assessments those under myself did. Ensure documentation was correct for LPN's and CNA's. Trained and mentored LPN's while they were learning to meet the demands of a long term care facility including an extremely high resident to nurse ratio (38-45 to 1). Mentor CNA's when deficiencies were noted. Complete quarterly reviews of all employees under me and work with ADON to complete mid year and end of year reviews. Wound care nurse. Completed weekly full assessments and daily treatments as needed. Continued this role after I began working at DOC and trained other nurses to complete required paperwork and properly care for sometimes very complex wounds.

---

9. Q: What steps would you take to implement changes in schedules related to acuity of the patients and to man a 24 hour operation of inpatient and outpatient clinical settings?

A: Scheduling can be challenging in this setting. Triaging skills are essential to proper offender care both while interacting in person as well as through the kite system. Attempts should be made to match the scheduling of nurses with the needs of the offenders, meaning that the clinic and/or infirmary is staffed based off of acuity level required and the nurses strengths. Every nurse has certain strengths and learning those strengths would be the first major step I would take before attempting to implement any schedule changes.

---

10. Q: What steps would you take to improve staff morale and build retention among your staff ?

A: I am a firm believer in team builders. Everyone has strengths and sometimes it just takes someone else recognizing it to understand we are not as different as we think. I also believe scheduled meetings between employees and their supervisor does a great deal to boost morale as they learn that they can and will be heard. Empowering staff is also crucial to retention. I encourage them to bring me issues as well as solutions/suggestions. When an idea they have comes to life it can change the morale of that person and by default often the entire team.

---

11. Q: Describe why you are the best candidate for this position. Provide a detailed account of how you meet the required competencies as listed in the job announcement and how your accomplishments, qualifications, skills, areas of expertise, other characteristics, etc., make you a good fit for this position.

A: In my current role as Nurse III at Limon Correctional Facility I have been mentored and trained by a knowledgeable HSA who has prepared me well for this position. I currently perform most duties listed in the job description as well as meet the competencies. I currently provider direct offender care on a daily basis in not only the clinic but in the unit if necessary during emergency situations. I have excellent documentation skills and communicate well with others through written word and on the phone. I have conversations daily with other disciplines to ensure continuity of care of offenders as well as seamless operations between clinical services and custody and control.

I can problem solve and critically think even when faced with a stressful situation. A recent murder at our facility allowed for myself and another nurse to use our critical thinking skills to act appropriately from a medical and security (crime scene) point of view. I have an open door policy and welcome questions from not only my nurses but security staff as well. Building bridges between our staff and security can only strengthen our clinic operations and offender care. My nurses also know that even if I am not on call they may contact me 24/7 to just ask a question or to bounce an idea off of. Many times they know the answer and they just need someone from the outside to take a look and encourage them to make the right choice. Alternately having that extra person on the phone to be willing to triage/assess with you can make you see things you may not have thought of which can benefit offender care as well. This helps me to be an effective leader as they know they can always count on me day or night to be a support for them if needed. Sometimes all someone needs is to know someone is listening and I think that is the hallmark of an effective leader…being a good listener.

The correctional environment is stressful on many levels on its face but when also faced with life and death situations your staff has to know they can count on you and I feel I have shown them that. There is nothing that I have asked my staff to do that I have not done myself or would be willing to do myself. I have worked with security staff to bridge the gap on numerous occasions. I have won the "million dollar award" given by one captain for "bridging the gap between security and medical." I have never understood why there seems to be such a division filled with strife between the two entities and I take pride in bringing these two disciplines together more seamlessly. I have also received positive performance documentation from security staff for all working together for the betterment of the facility and offenders during various situations.

I am knowledgeable in all aspects the clinical skills needed to perform my job efficiently and diligently. I love to learn and if I happen to not know the answer I will research until I am satisfied that I not only know the answer but the "why" of the answer. Understanding something completely makes it easier to share that knowledge with others. I have worked with all disciplines to ensure offender care is complete to include referring to drug and alcohol, dental, mental health and outside providers as indicated. I am under no illusion that I know everything there is possible to know about this position but I am confident that my current job duties have and are preparing me for this position. I enjoy a challenge and learning new things and feel that I have a great deal to offer to this position if selected.

---

12. Q: A) On what social media website did you see this job opening?

A: None

---

13. Q: B) Select the one (1) answer that best describes where you learned about this job opportunity.

A: Friend, family member or employee*

---

14. Q: C) If your response to the question above included a star, please elaborate below.

A: From management at Nurse III retreat.

---

15. Q: D) Do you utilize social media, personally or professionally? If so, which platform do you use most often?

A: Facebook

Lookup Detail View

Licensee Information

This serves as primary source verification of the license.*

**Primary source verification: License information provided by the Colorado Division of Professions and Occupations, established by 24-34-102 C.R.S.*

Name	Public Address
Tina Marie Cullyford	[redacted]

License Information

Includes the Nurse Compact field

License Number	License Method	License Type	License Status	Original Issue Date	Effective Date	Expiration Date	Nurse Compact Designation
RN.1617494	Examination	Registered Nurse	Active	08/01/2012	10/01/2014	09/30/2016	Multi-State

Board/Program Actions

Discipline
There is no Discipline or Board Actions on file for this credential.

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CAA Nurse III 4/13 - CDOC Nurse III (Nurse Supervisor)

Contact Information -- Person ID: 13549735

Name: Tina M Rosler

Address: [redacted]

Home Phone: [redacted]

Email:

Former Last Name:

Alternate Phone:

Notification Preference: Email

Month and Day of Birth: 08/05

Personal Information

Driver's License: Yes, [redacted]

Can you, after employment, submit proof of your legal right to work in the United States? Yes

What is your highest level of education? Bachelor's Degree

Preferences

Preferred Salary:

Are you willing to relocate? No

Types of positions you will accept: Regular

Types of work you will accept: Full Time

Types of shifts you will accept: Day , Evening , Weekends

Objective

To obtain a Supervisory Nurse position at the Limon Correctional Facility.

Education

College
Capella University
www.capella.edu
10/2012 - 6/2014
Minneapolis, Minnesota

Did you graduate: Yes
College Major/Minor: Nursing
Units Completed: 192 Quarter
Degree Received: Bachelor's

College
Otero Junior College
8/2010 - 6/2012
LaJunta, Colorado

Did you graduate: Yes
College Major/Minor: Nursing
Units Completed: 65 Semester
Degree Received: Associate's

College
Morgan Community College
8/2009 - 7/2010
Limon, Colorado

Did you graduate: No
College Major/Minor: Nursing-Pre-requisites
Units Completed: 35 Semester
Degree Received: No Degree

Work Experience

RN I
12/2012 - Present

Colorado Department of Corrections- LCF
Limon , Colorado 80828
7197757653

Hours worked per week: 40
Monthly Salary: $4,769.00
Name of Supervisor: Nicole Blatnick - HSA
May we contact this employer? Yes

Duties

General nursing duties including medication administration, charting, triage, emergency responses, and other duties as assigned by supervisor. Work extra shifts as needed.

Rn-Charge Nurse
1/2012 - 6/2013

Hours worked per week: 40
Monthly Salary: $3,360.00
of Employees Supervised: 2

Grace Healthcare
[redacted]

Name of Supervisor: Judi Cole - ADON
May we contact this employer? Yes

Duties
Charge nurse at long-term facilty.
Supervise 2 CNA's per shift.
Wound Care
Medication administration
Charting

Reason for Leaving
Need employment closer to home. No longer feasible financially to work as a PRN basis.

Certificates and Licenses

Type: Registered Nurse

Number: RN.1617494

Issued by: State of Colorado

Date Issued: 8 /2012 Date Expires: 9 /2016

Skills

Office Skills

Typing: 60
Data Entry: 0

Additional Information

Additional Information

Transcripts of BSN to use in lieu of 1 year experience.

References

[redacted]

Resume

Text Resume

Attachments

Attachment	File Name	File Type	Created By
Transcripts (1).pdf	Transcripts (1).pdf	**Other**	Job Seeker
DORA - RN	DORA - RN Rosler	**License**	Jacqueline Sherbo

Agency-Wide Questions

1. Q: Are you a current State of Colorado classified employee?
A: Yes

2. Q: If you indicated that you are a current State of Colorado employee, please select the State of Colorado Department or Higher Education institution that you currently work for from the following list:
A: Department of Corrections

3. Q: Are you a previous State of Colorado classified employee?
A: No

4. Q: If you indicated that you are a previous State of Colorado employee, please select the State of Colorado Department or Higher Education institution for which you most recently worked from the following list:

A: Not Applicable

---

5. Q: If you indicated that you are a previous State of Colorado employee, please list your dates of services for the last State of Colorado Department or Higher Education Institution.

A:

---

6. Q: Select the one (1) answer that best describes how you learned about this job opening.

A: Current State Employee

---

7. Q: If you receive notice that you have been eliminated from consideration for the position, you may protest the action by filing an appeal with the State Personnel Board/State Personnel Director within 10 days from the date you receive notice of the elimination. Also, if you wish to challenge the selection and comparative analysis process, you may file an appeal with the State Personnel Board/State Personnel Director within 10 days from the receipt of notice or knowledge of the action you are challenging. Refer to Chapters 4 and 8 of the State Personnel Board Rules and Personnel Director's Administrative Procedures, 4 CCR 801, for more information about the appeals process. The State Personnel Board Rules and Personnel Director's Administrative Procedures are available at www.colorado.gov/spb. A standard appeal form is available at: www.colorado.gov/spb. If you appeal, your appeal must be submitted in writing on the official appeal form, signed by you or your representative, and received at the following address within 10 days of your receipt of notice or knowledge of the action: Colorado State Personnel Board/State Personnel Director, Attn: Appeals Processing, 1525 Sherman Street, 4th Floor, Denver, CO 80203. Fax: 303-866-5038. Phone: 303-866-3300. The ten-day deadline and these appeal procedures also apply to all charges of discrimination.

A: I affirm that I have read and understand my appeal rights as stated above.

---

8. Q: Are you a veteran? (If yes, please remember to attach your DD-214 to your application if you believe you're eligible for veteran's preference points).

A: No

---

9. Q: Under the Colorado Constitution, art. XII, sec. 15, qualified veterans and surviving spouses are eligible for preference when participating in the selection process for state job opportunities, other than for promotional opportunities. If you are an honorably discharged veteran, the spouse of a veteran unable to work due to a service connected disability, or the unremarried surviving spouse of a veteran who served on active duty in the United States Armed Forces during one of the periods for which the federal government awards veteran's preference, you may claim preference during the selection process for a position within the state personnel system. In order for us to determine your eligibility for veterans preference, you must attach a copy of a DD-214 form and other supporting documentation along with your application. Please indicate which of the following options best fits your veterans status:

A: I am not a Veteran.

---

10. Q: Are you applying for REINSTATEMENT?

A: No

---

11. Q: Please select the location(s) that you are willing to work. (Please note that vacancies may not occur in all areas.)

A: Limon

Supplemental Questions

1. Q: Do you live in Colorado?

A: Yes

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2. Q: Are you at least 21 years of age at the time you are submitting this application?

A: Yes

---

3. Q: Do you possess an active Registered Nurse license issued by the State of Colorado?

A: Yes

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4. Q: What is your Colorado Registered Nurse license number?

A: RN1617494

---

5. Q: Please describe, in detail, your experience as a licensed Registered Nurse. Please include years of experience, settings and types of populations you've provided patient care to.

A: Long Term Care 1 year
Correctional Nursing 1 year 8 months

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6. Q: Please describe, in detail, your nursing supervisory experience as a licensed Registered Nurse. Nursing supervisory experience includes making decisions which can effect pay, status and tenure of subordinate staff.

A: Supervised up to 4 CNA's while caring for up to 28 patients in long term care.

---

7. Q: Are you willing and able to perform ALL of the following? 1. Are you willing and able to work weekends, holidays and back-to-back shifts? 2. Are you willing and able to get to work on time? 3. Are you willing and able to stay for your entire shift? 4. Are you willing and able to report to work during inclement weather? 5. Are you willing and able to follow prescribed procedures and policies even if they may conflict with your personal preference? 6. Are you willing to work with staff and persons served of all social, economic, ethic, and religious backgrounds? 7. Are you willing and able to do the daily hygiene and domestic skills if the persons serviced cannot? 8. Are you willing to work in a locked facility? 9. Are you willing to work with people who display confrontational, manipulative, violent, and/or assaultive behavior? 10. Are you willing to restrain people when necessary? 11. Are you willing and able to lift up to 50 lbs and 25 lbs frequently by lifting, positioning and pivoting disabled adults? 12. Are you willing and able to stand on your feet for most of the work day? 13. Are you willing and able to assist persons with developmental disabilities to do their self-care activities including bathing, changing diapers, eating, shaving, etc.? (You WILL NOT CONTINUE in the assessment process if you are not willing and able to perform all of the duties and requirements listed above. Failure to perform these duties and requirements, if you are hired, will be grounds for termination.)

A: Yes

---

8. Q: A) On what social media website did you see this job opening?

A: None

---

9. Q: B) Select the one (1) answer that best describes where you learned about this job opportunity.

A: Friend, family member or employee*

---

10. Q: C) If your response to the question above included a star, please elaborate below.

A: Currently work at LCF and was told of open position by HSA and Admin

---

11. Q: D) Do you utilize social media, personally or professionally? If so, which platform do you use most often?

A: Facebook

Dora
Department of Regulatory Agencies
Barbara J. Kelley
Executive Director



Lookup Detail View

Licensee Information

This serves as primary source verification of the license.*

**Primary source verification: License information provided by the Colorado Division of Professions and Occupations, established by 24-34-102 C.R.S.*

Name	Public Address
Tina Marie Rosler	[redacted]

License Information

License Number	License Method	License Type	License Status	Original Issue Date	Effective Date	Expiration Date	Nurse Compact Designation
RN.1617494	Examination	Registered Nurse	Active	08/01/2012	10/01/2014	09/30/2016	Multi-State

Board/Program Actions

Discipline
There is no Discipline or Board Actions on file for this credential.

Generated on: 10/24/2014 8:14:59 AM

CAA-31620-3/11 - CDOC Nurse I-RN

Contact Information -- Person ID: 13549735

Name:	Tina M Rosier	Address:	[redacted]
Home Phone:	[redacted]	Alternate Phone:	
Email:		Notification Preference:	Email
Former Last Name:	Steckler	Month and Day of Birth:	08/05

Personal Information

Driver's License:	Yes, [redacted]
Can you, after employment, submit proof of your legal right to work in the United States?	Yes
What is your highest level of education?	Associate's Degree

Preferences

Preferred Salary:	
Are you willing to relocate?	No
Types of positions you will accept:	Regular
Types of work you will accept:	Full Time
Types of shifts you will accept:	Day , Evening , Night , Weekends

Objective

To obtain a nursing job at the Limon Correctional Facility

Education

College
Otero Junior College
8/2010 - 6/2012
LaJunta, Colorado

Did you graduate: Yes
College Major/Minor: Nursing
Units Completed: 65 Semester
Degree Received: Associate's

College
Morgan Community College
8/2009 - 7/2010
Limon, Colorado

Did you graduate: No
College Major/Minor: Nursing-Pre-requisites
Units Completed: 35 Semester
Degree Received: No Degree

Work Experience

Rn-Charge Nurse
1/2012 - Present

Grace Healthcare
[redacted]

Hours worked per week: 40
Monthly Salary: $3,360.00
of Employees Supervised: 2
Name of Supervisor: Judi Cole - ADON
May we contact this employer? Yes

Duties
Charge nurse at long-term facilty.
Supervise 2 CNA's per shift.
Wound Care
Medication administration
Charting

Reason for Leaving
Need employment closer to home.

Certificates and Licenses

Type: Registered Nurse

Number: RN.1617494

Issued by: State of Colorado

Date Issued: 8 /2012 Date Expires: 9 /2014

Skills

Office Skills

Typing:
Data Entry:

Additional Information

References

Resume

Text Resume

Attachments

Agency-Wide Questions

1. Q: Are you a current State of Colorado classified employee?
   A: No

2. Q: Are you a previous State of Colorado classified employee?
   A: No

3. Q: Select the one (1) answer that best describes how you learned about this job opening.
   A: Current State Employee

4. Q: Are you applying for REINSTATEMENT?
   A: No

5. Q: Are you a veteran? (If yes, please remember to attach your DD214 to your application if you believe you're eligible for veteran's preference points).
   A: No

6. Q: Please select the location(s) that you are willing to work. (Please note that vacancies may not occur in all areas.)
   A: Limon

Supplemental Questions

1. Q: Do you live in Colorado?
   A:

2. Q: Are you at least 21 years of age at the time of submitting this application?
   A:

3. Q: Do you possess of a VALID Registered Nurse License issued by the State of Colorado or any other state participating in the Nurse Licensure Compact?

A: Yes

4. Q: Most Nurse I vacancies are full-time positions; on rare occasions, there are part-time positions available. Are you interested in a part-time position?

A: No

5. Q: Are you willing and able to perform ALL of the following? 1. Are you willing and able to work weekends, holidays and back-to-back shifts? 2. Are you willing and able to get to work on time? 3. Are you willing and able to stay for your entire shift? 4. Are you willing and able to report to work during inclement weather? 5. Are you willing and able to follow prescribed procedures and policies even if they may conflict with your personal preference? 6. Are you willing to work with staff and persons served of all social, economic, ethic, and religious backgrounds? 7. Are you willing and able to do the daily hygiene and domestic skills if the persons serviced cannot? 8. Are you willing to work in a locked facility? 9. Are you willing to work with people who display confrontational, manipulative, violent, and/or assaultive behavior? 10. Are you willing to restrain people when necessary? 11. Are you willing and able to lift up to 50 lbs and 25 lbs frequently by lifting, positioning and pivoting disabled adults? 12. Are you willing and able to stand on your feet for most of the work day? 13. Are you willing and able to assist persons with developmental disabilities to do their self-care activities including bathing, changing diapers, eating, shaving, etc.? (You WILL NOT CONTINUE in the assessment process if you are not willing and able to perform all of the duties and requirements listed above. Failure to perform these duties and requirements, if you are hired, will be grounds for termination.)

A: Yes

6. Q: We'd like to know more about how you heard about this job. Please answer the following questions: If you heard about this job from the Internet, was it from Careerbuilders.com, Monster.com, AfterCollege.com, Yahoo.jobs, Colorado State Electronic Job Board or Other? If you did not hear about this job from the internet type NA.

A: NA

7. Q: If you heard about this job from a newspaper, was it from Denver Post Jobs, Springsjobs.com, Print ad classified section of local paper or other? If you did not hear about this job from the a newspaper type NA.

A: NA

8. Q: If you heard about this job from a Professional Association, was it from Print ad in a journal or newsletter, Web ad on association site or Other? please list. If you did not hear about this job from the a Professional Association type NA.

A: NA

9. Q: If you heard about this job from a College, University or other School, was it from Career Services Office Job Board, College Career Fair or other? please list. If you did not hear about this job from a College, University or other School type NA.

A: NA

10. Q: If you heard about this job from another source, was it Connecting Colorado/Dept of Labor and Employment, Friend or Relative, Current or Former DOC employee or other? please list. If you did not hear about this job from one of these sources type NA.

A: Limon Workforce Center

11. Q: Have you applied and tested for this position within the last year?
A: NO

CAVU Core Product
eLicense
State Government

Lookup Detail View

Name and Address

Name	Public Address	
Tina Marie Rosier	[redacted]	

Credential Information

Credential Number	Credentialing Method	Credential Type	Credential Status	Original Issue Date	Effective Date	Expiration Date
RN.1617494	Examination	Registered Nurse	Active	08/01/2012	08/01/2012	09/30/2014

Generated on: 8/15/2012 3:06:38 PM

State of Colorado
Colorado Department of Corrections

CONSENT TO SEARCH AUTHORIZATION

Pursuant to the below cited statute, each Department of Corrections employee is required to give his or her consent to be searched at any time. C.R.S., 1977 as amended:

17-19-102, Employees of Correctional Facilities

Any person who wishes to become or to continue as an employee, including but not limited to contract employees and volunteers, of a correctional facility, as defined in section 17-19-101 (3), shall sign, as a condition of his or her employment or of volunteering, a consent form in which the employee or volunteer shall give his or her consent to be stopped and searched without probable cause by a person of the same sex while engaged in the performance of his or her duties within or around the correctional facility. Said form shall be as promulgated by the executive director with the advice of the attorney general.

I hereby give my consent for the Superintendent or his designee to search my person, vehicle, and/or personal effects I bring onto the property of the Colorado State Department of Corrections. I further consent to allow the authorized person to search in whatever manner he or she decides, including strip search.

I understand that if contraband is discovered on my person, in my vehicle, or in my effects, I am subject to corrective action, disciplinary action, and/or criminal charges in the proper court.

This authorization for search is to be a permanent record in my personnel file.

Print Name: Tina Rosler

Signature: Tina M Rosler

State of Colorado
Colorado Department of Corrections

NON-RETALIATION STATEMENT
August 31, 2005

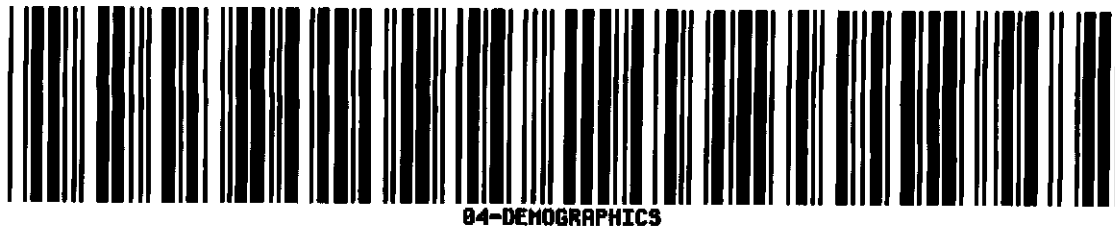
The Colorado Department of Corrections and the Executive Director of the DOC continue to support the concept that there can be no retaliation of any type directed against any employee for filing appeals of actions, claims of discrimination, grievances, or other filings permitted by federal or state law or rules. DOC will not condone or approve of any retaliation directed against an employee for exercising his or her statutory rights to appeal or file a charge of discrimination. All of the employees who filed appeals concerning the abolishment of their positions in calendar year 2003, or appealed the retention rights that were offered to them, are protected against retaliation and no employee of DOC shall retaliate or attempt to retaliate against those employees for exercising their rights. This includes any adverse employment action.

Any communication from a Division Director, Warden, Human Resources staff, or other officials implying that there should be some form of restriction on employees who appealed their layoff, abolition of position, or the retention right offered is expressly rejected by the Executive Director. Any employee who believes that he or she has been subjected to retaliation for exercising his or her statutory rights to appeal or file a charge of discrimination shall report the action to the Inspector General using procedure established by Administrative Regulation 1450-05, and DOC will investigate and take appropriate action, if any, pursuant to AR 1450-05. No retaliation shall occur for reporting such information.

This statement is an official policy statement of DOC and should be read in conjunction with the applicable Administrative Regulations. All employees of DOC shall be provided a copy of this communication.


09-LEAVE

NO DOCUMENTS IN THIS SECTION


04-DEMOGRAPHICS

Department of Personnel & Administration
Form SSA-1945

DPA

Statement Concerning Your Employment in a Job Not Covered by Social Security

Tina Rasler
Employee Name

CDOC
Employer Name

840644739
Employer ID#

Your earnings from this job are not covered under Social Security. When you retire, or if you become disabled, you may receive a pension based on earnings from this job. If you do, and you are also entitled to a benefit from Social Security based on either your own work or the work of your husband or wife, or former husband or wife, your pension may affect the amount of the Social Security benefit you receive. Your Medicare benefits, however, will not be affected. Under the Social Security law, there are two ways your Social Security benefit amount may be affected.

Windfall Elimination Provision
Under the Windfall Elimination Provision, your Social Security retirement or disability benefit is figured using a modified formula when you are also entitled to a pension from a job where you did not pay Social Security tax. As a result, you will receive a lower Social Security benefit than if you were not entitled to a pension from this job. For example, if you are age 62 in 2005, the maximum monthly reduction in your Social Security benefit as a result of this provision is $313.50. This amount is updated annually. This provision reduces, but does not totally eliminate, your Social Security benefit. For additional information, please refer to the Social Security publication, "Windfall Elimination Provision."

Government Pension Offset Provision
Under the Government Pension Offset Provision, any Social Security spouse or widow(er) benefit to which you become entitled will be offset if you also receive a Federal, State or local government pension based on work where you did not pay Social Security tax. The offset reduces the amount of your Social Security spouse or widow(er) benefit by two-thirds of the amount of your pension. For example, if you get a monthly pension of $600 based on earnings that are not covered under Social Security, two-thirds of that amount, $400, is used to offset your Social Security spouse or widow(er) benefit. If you are eligible for a $500 widow(er) benefit, you will receive $100 per month from Social Security, $500 - $400 = $100. Even if your pension is high enough to totally offset your spouse or widow(er) Social Security benefit, you are still eligible for Medicare at age 65. For additional information, please refer to the Social Security publication, "Government Pension Offset."

For More Information
Social Security publications and additional information, including information about exceptions to each provision, are available at www.socialsecurity.gov. You may also call toll free 1-800-772-1213, or, for the deaf or hard of hearing, call the TTY number 1-800-325-0778, or contact your local Social Security office.

I certify that I have received Form SSA-1945 that contains information about the possible effects of the Windfall Elimination Provision and the Government Pension Offset Provision on my potential future Social Security benefits.

Tina M Rasler
Signature of Employee

10/18/12
Date

Original: Agency Copies: Employee PERA (required)

Information about Social Security Form SSA-1945, Statement Concerning Your Employment in a Job Not Covered by Social Security

New legislation [Section 419(c) of Public Law 108-203, the Social Security Protection Act of 2004] requires State and local government employers to provide a statement to employees hired January 1, 2005 or later in a job not covered under Social Security. The statement explains how a pension from that job could affect future Social Security benefits to which they may become entitled.

Form SSA-1945, **Statement Concerning Your Employment in a Job Not Covered by Social Security**, is the document that employers should use to meet the requirements of the law. The SSA-1945 explains the potential effects of two provisions in the Social Security law for workers who also receive a pension based on their work in a job not covered by Social Security. The Windfall Elimination Provision can affect the amount of a worker's Social Security retirement or disability benefit. The Government Pension Offset Provision can affect any possible Social Security benefit entitlement as a spouse or an ex-spouse.

Employers must:

- Give the statement to the employee prior to the start of employment;
- Get the employee's signature on the form; and
- Submit a copy of the signed form to the pension paying agency.

Social Security will not be setting any additional guidelines for the use of this form. Copies of the SSA-1945 are available online at the Social Security website, www.socialsecurity.gov/form1945. Paper copies can be requested by email at oplm.oswm.rqct.orders@ssa.gov or by fax at 410-965-2037. The request must include the name, complete address and telephone number of the employer. Forms will not be sent to a post office box. Also, if appropriate, include the name of the person to whom the forms are to be delivered. The forms are available in packages of 25. Please refer to Inventory Control Number (ICN) 276950 when ordering.

State of Colorado
Colorado Department of Corrections

EMPLOYEE VERIFICATION FOR WORKER'S COMPENSATION

I have been notified by my employer of the procedure to follow in the event I incur a work-related injury/illness. I understand that my employer has designated providers that I must use as the primary provider for all work-related injuries/illnesses. I understand that if I do not receive my medical care from the designated provider for work-related injuries/illnesses, I will be financially responsible for that care. A list of designated providers and written authorization required from my employer will be provided by my supervisor before I can access medical care for non-emergency work-related injuries/illnesses.

Print Name: Tina Rosler

Signature: Tina M Rosler

COLORADO DEPARTMENT OF CORRECTIONS
COMPENSATORY TIME IN LIEU OF CASH OVERTIME PAYMENTS

OVERVIEW

The utilization of overtime shall be at the discretion of the DOC executive director, or designee, subject to the following provisions. Overtime may be authorized: (a) in the event of fire, flood, catastrophe, or other unforeseeable emergency; (b) for the purpose of manning a station or assignment when another DOC employee is not available for work; (c) to provide essential services when they cannot be provided by overlapping work schedules; and (d) to carry out short-range assignments in which the utilization of regular DOC employees is more advantageous than the hiring of additional DOC employees. Overtime shall not be authorized for any other purpose. A DOC employee must have PRIOR approval from the appointing authority or designee for working overtime. It is state policy that time worked shall be earned and paid in quarter-hour units. Time worked will not be recorded at the beginning or end of a scheduled work period in units of less than 15 minutes. Starting and ending time should be rounded to the nearest 15 minutes.

The Federal Fair Labor Standards Act defines overtime as work in excess of forty hours during the consecutive seven-day work week or in excess of 171 hours during the consecutive 28 day work period. The prescribed work week shall begin at 12:01 a.m. on Saturday, and shall terminate at 12:00 a.m. midnight on Friday. The 28 day work period began on 12/31/95 and continued every 28 days since. The 28 day calendar is published and posted on DOCnet in December of each year.

An eligible DOC employee may accumulate up to 40 hours of overtime (40 hours x 1-1/2 = 60 hours) equating to 60 hours of compensatory time at any given point in time. Any overtime worked in excess of this amount of accumulated overtime must be paid in cash.

Accumulated compensatory time must be taken as soon as practical after the end of the payroll period in which the overtime was worked.

I understand that if I am eligible to receive overtime and have PRIOR authorization to work overtime, I agree to accept compensatory time off in lieu of cash overtime payments, as a condition of my employment with the Colorado Department of Corrections.

Print Name: Tina Rosler

Signature: Tina M Rosler

[redacted] Submit Form

CDOC NEW EMPLOYEE WORKSHEET

Start Date:	12/17/2012	**SSN:**	[redacted]-2457	**Badge #:**	18645

NAME: ***(Must be exactly the same as it appears on SS# card)***

Last:	ROSLER	**First:**	TINA	**Middle:**	M
Physical Address:	[redacted]	**City:**	[redacted]		
Mailing Address:	[redacted]	**City:**	[redacted]		
Home Phone:	[redacted]	**Alternate Phone:**			
		Date of Birth:	08/05/1973	**Height:** 5'1	**Weight:** 200
Ethnicity:	White	**Eye Color:**	Blue		
Hair Color:	Blonde	Gender:	☐ Male	☑ Female	
Personal Email Address	[redacted]				

Note to employee: You will receive an automated email with a one-time link requesting that you complete a Form I9, Employment Eligibility Verification. This should be completed prior to Day 1 of Basic Training.

Emergency Contact Name:	[redacted]		
EC Alternate Phone #1:	[redacted]	**EC Alternate Phone #2:**	
PARS Position #:	9345	**Facility:**	LCF
Classification/Title:	NURSE I	**BT Location:**	Cañon City

Presently employed by State Agency: ☐ Yes ☑ No	Agency: Select Pay Stub if current/past State employee: ☐
Previously employed by State Agency: ☐ Yes ☑ No	Agency: DOC
Modules to attend: All	You must attend & pass all phases of Basic Training as required by your selected classification, which may include firearms & PPCT. ☐

Did you fill out the Mandatory Forms after your integrity interview? ☑ Yes ☐ No

IF NO, go to our website, www.doc.state.co.us, click on "New Employees" & to the left of Welcome Letter, click on "Mandatory Forms." **Print & Complete** all forms & turn them in at the TA on your 1st day of training. ☐ Payroll # for assistance is (719) 269-4043.

Go to our website www.doc.state.co.us, click on "New Employees", read the **Welcome Letter** ☐, & to the left of the letter, click on "Training" for general information about training.

Required documents that you must bring on the 1st day:

Original documents from the *"List of Acceptable Documents"* you received from the Human Resources Office after your Integrity interview. ☑

Have there been any changes in criminal history since your integrity interview? ☐ Yes ☑ No

Do you have any Medical, Physical or Mental Disabilities that require special accommodations? ☐ Yes ☑ No

Lodging: Yes To qualify for lodging, your home address **AND** facility address must be 50 miles from the training location. Lodging rules & a mapping link are located on the "Training" page of the New Employee section on our website. If you believe you qualify for lodging, you must complete the Student Travel Per Diem Form **electronically at least 5 days prior to the 1st day of training.**

This completes the Basic Training sign-up. Do you have any questions?

PARS Database ◯	**Pre-Employment Database** ◯	Form Revised 03/01/2012

[redacted] Print


05-PERFORMANCE


06-MISCELLANEOUS

STATE OF COLORADO

Watson - DOC, Amanda <amanda.watson@state.co.us>

Certification

Rick Thompkins <amanda.watson@state.co.us> Wed, Dec 14, 2016 at 12:59 PM
To: TINA.CULLYFORD@state.co.us, julie.drew@state.co.us

Dear Tina Marie Cullyford ,

Congratulations! You have successfully completed your probationary or trial service period as a MID-LEVEL PROVIDER with the Colorado Department of Corrections. As of 11/30/16 you were granted certification.

I would like to take this opportunity to congratulate you on this appointment and wish you continued success in your career with the Department.

Sincerely,

Rick Thompkins

Chief HR Officer

–

Amanda Watson
Human Resources Technician III
Colorado Department of Corrections
Phone 719.226.4470
1250 Academy Park Loop, Colorado Springs, CO 80910
amanda.watson@state.co.us | **www.doc.state.co.us**

STATE OF COLORADO

Bruch - DOC, Neta <neta.bruch@state.co.us>

Employee Certification

1 message

Bruch - DOC, Neta <neta.bruch@state.co.us> Fri, Jun 5, 2015 at 12:46 PM
To: Tina Cullyford - DOC <Tina.Rosler@state.co.us>
Cc: Julie Drew - DOC <julie.drew@state.co.us>

Dear Tina Marie Cullyford, #18645

Congratulations! You have successfully completed your probationary or trial service period as a ***Nurse III*** with the Colorado Department of Corrections. As of 05/31/2015 you were granted certification.

I would like to take this opportunity to congratulate you on this appointment and wish you continued success in your career with the Department.

Sincerely,
Rick Thompkins
Chief Human Resources Officer

Neta Bruch
CDOC Office of Human Resources - Operations Manager

COLORADO
Department of Corrections
Office of Human Resources

P 719.226.4433 I C 719.213.0650
2862 S. Circle Drive, Colorado Springs, CO 80906
neta.bruch@state.co.us I www.doc.state.co.us

STATE OF COLORADO

Vigil - DOC, Renee <renee.vigil@state.co.us>

Employee Certification

1 message

Bruch - DOC, Neta <neta.bruch@state.co.us> Thu, Feb 13, 2014 at 12:49 PM
To: Tina Rosler - DOC <Tina.Rosler@state.co.us>
Cc: Julie Drew - DOC <julie.drew@state.co.us>
Bcc: renee.vigil@state.co.us

Dear Tina Marie Rosler, #18645

Congratulations! You have successfully completed your probationary or trial service period as a ***Nurse I*** with the Colorado Department of Corrections. As of ***12/16/2013*** you were granted certification.

I would like to take this opportunity to congratulate you on this appointment and wish you continued success in your career with the Department.

Sincerely,
Rick Thompkins
Chief HR Officer
Office of Human Resources

Neta Bruch
CDOC Office of Human Resources - Operations Manager
719-226-4433 or 719-213-0650
neta.bruch@state.co.us

HR - Being defined not by what we do, but by what we deliver

This communication is intended solely for the addressee and is confidential, and may also be subject to the attorney-client privilege and work product doctrine. If you are not the intended recipient, any disclosure, copying, distribution or any action taken or omitted to be taken in reliance on it, is prohibited and may be unlawful. If you have received this message in error, please notify the sender by return e-mail and destroy all copies of the message. Thank you.

AR Form 1450-06A (07/01/06)

DEPARTMENT OF CORRECTIONS
PERMIT FOR OUTSIDE WORK

RECEIVED
MAR - 7 2013
Dept of Corrections

Name: Tina Roslee	SS#: [redacted]2457	DOC Emp #: 18645	Facility: LCF
Facility:	Work Assignment: Clinical Services /Nurse I		

I, Tina Roslee, have read and reviewed administrative regulation 1450-06 and understand that any approval for outside employment can be rescinded at any time by the Department.

Outside Employer: Pioneer Healthcare Center		Job Title: Nurse - RN
Address: [redacted]	Telephone: [redacted]	Supervisor: Jodi Cole
Schedule (Hours per day x days per week): PRN Only - No more than 1 day per week		
Paid Position Salary $ 23.00 per (hour, day, week, month).		Volunteer Position (No Compensation): Yes _____ No X
Military Reservist Pay: $ _____ Rank: _____ **Law Enforcement Pay: $** _____ Rank: _____		**Military Years of Service:** _____

List all specific job duties you may encounter in your outside employment. List any and all potential conflicts of interest as well as contact you may have with CDOC employees, contract workers, and/or other CDOC related situations (attach additional page if necessary). Standard Nursing duties.

Attach copies of any certifications, training certificates, qualifications, etc., that qualify you for your position.

Select the appropriate category which best describes your outside employment:

1.____	Law Enforcement/Fire Service/Court Services/Security/Private Prisons (Armed/Unarmed)	7.____	Drivers/Delivery/Transport etc.
2. X	Medical Svcs/Therapy/Counseling/EMT/Coroners/Rehab	8.____	Administrative/Office/Clerical etc.
3.____	Military Reserves (All branches)	9.____	Labor/Contractor/Repair/Maint./Landscape/Painting/ Mechanic, etc.
4.____	Retail/Sales/Home Internet/Tupperware etc.	10.____	Farming/Ranching
5.____	Instructor/Teacher/Trainer/Coach/Mentor/Referee/Sporting Officials, etc.	11.____	Religious Groups/Community Organizations/Advisory Boards
6.____	Restaurant/Bar/Liquor/Hotel etc.	12.___	Miscellaneous (explain)

Explanation:

Print Names	Signature	Date	Approved	Denied
Name: Tina Roslee	Tina M Roslee	1/31/13	[redacted]	
Immediate Supervisor: Nicole Blatnick	Nicole Blatnick	2/6/13	✓	
Appointing Authority: Renee Jordan	Renee Jordan	2/7/13	✓	
Director:				
Executive Director:				

Restrictions to outside employment per supervisors: _____

Forward original to the Office of Inspecte

Attachment "A"
Page 1 of 1

Outside employment cannot conflict with normal or on-call DOC work schedules. Work schedules will not be changed to accommodate outside employment.

AR Form 1500-02B (04/15/10)

COLORADO DEPARTMENT OF CORRECTIONS
OATH OF OFFICE

I do solemnly affirm that I shall support the Constitution of the United States, and the Constitution of the State of Colorado, and that I will faithfully perform the duties of my employment with the Colorado Department of Corrections.

Print Name: Tina Rosler **Date:** 12/27/12

Signature: Tina M Rosler

Job Classification: Nurse I

Assigned Location: LCF **Employee ID#:** 18645

Date Oath Administered: **January 17, 2013**

Name: **Pam Ploughe**

Title: **Warden Cañon Minimum Centers**

Original To: Personnel File
Copy To: Basic Training Files

AR Form 1450-06A (07/01/06)

DEPARTMENT OF CORRECTIONS
PERMIT FOR OUTSIDE WORK

Name: Tina Rosler	DOC Emp #: 18645
Facility: LCF	Work Assignment: Nurse

I, Tina Rosler, have read and reviewed administrative regulation 1450-06 and understand that any approval for outside employment can be rescinded at any time by the Department.

Outside Employer: Pioneer Health Care Center	Job Title: Charge Nurse
Addre[redacted] Telephone: [redacted]	Supervisor: Judi Cole, ADON

Schedule (Hours per day x days per week):

Paid Position Salary $ 21.00/HR per (hour, day, week, month). Sunday 12/23, Sunday Jan 6, Sunday Jan 13th	Volunteer Position (No Compensation): Yes _____ No X
Military Reservist Pay: $ _____ Rank: _____ Law Enforcement Pay: $ _____ Rank: _____	Military Years of Service: _____

List all specific job duties you may encounter in your outside employment. List any and all potential conflicts of interest as well as contact you may have with CDOC employees, contract workers, and/or other CDOC related situations (attach additional page if necessary). Geneal Nursing duties in a long term facility.

Attach copies of any certifications, training certificates, qualifications, etc., that qualify you for your position.

Select the appropriate category which best describes your outside employment:

1.____	Law Enforcement/Fire Service/Court Services/Security/Private Prisons (Armed/Unarmed)	7.____	Drivers/Delivery/Transport etc.
2.✓	Medical Svcs/Therapy/Counseling/EMT/Coroners/Rehab	8.____	Administrative/Office/Clerical etc.
3.____	Military Reserves (All branches)	9.____	Labor/Contractor/Repair/Maint./Landscape/Painting/ Mechanic, etc.
4.____	Retail/Sales/Home Internet/Tupperware etc.	10.____	Farming/Ranching
5.____	Instructor/Teacher/Trainer/Coach/Mentor/Referee/Sporting Officials, etc.	11.____	Religious Groups/Community Organizations/Advisory Boards
6.____	Restaurant/Bar/Liquor/Hotel etc.	12.____	Miscellaneous (explain)

Explanation:

Print Names	Signature	Date	Approved	Denied
Name: Tina Rosler	Tina M Rosler	12/18/12		
Immediate Supervisor: G. ARGYS		12-18-12	✓	
Appointing Authority: B Pacheco	B Pacheco	12-18-12	✓	
Director:				
Executive Director:				

Restrictions to outside employment per supervisors: _____

Forward original to the Office of Inspector General

State of Colorado
Colorado Department of Corrections

NOTIFICATION OF EMPLOYEE HANDBOOK

By my signature heron, I acknowledge that the full version of the State of Colorado, Department of Corrections Employee Handbook is available electronically at www.doc.state.co.us. I acknowledge that information contained in the handbook may be changed without notice and that I am responsible for obtaining and reading the handbook and for understanding and abiding by its contents throughout my career with the DOC. I acknowledge that information contained in the electronic version of the handbook does not constitute (expressly or implied) a contract between the Department of Corrections and the undersigned.

Print Name: Tina Rosier

Signature: Tina M Rosier


19-TRAINING

BT TRAINING CHECKLISTS

Name: Tina Rosler		Training ID# 18645	BT # 431
Position: Nurse I	Facility/Agency: LCF	Date of Hire: 12/17/12	BT Dates:

	Date	Initial
I have reviewed and understand the content regarding Administrative Regulation 1450 -01		
I have reviewed and understand the content regarding Administrative Regulation 1450 -05		
I understand that my person and/or my property may be subject to search at any time.		
I have reviewed and understand Executive Order #D 010 01 regarding Energy Efficiency and Conservation.		
I have reviewed and understand the content of the Basic Training Student Handbook.		

Class Name	Date	Initial	Class Name	Date	Initial
Employment Documentation	12/17/12	JR	Guided Practice @ CWCF to include: Searches/Shakedowns – Radio – Count - Restraints	1-2-13	JR
CTA Presentation /Welcome to DOC	12/17/12	JR			
CDOC Overview	12/17/12	JR	Radio Use	1-2-13	JR
Personnel / Payroll Presentation	12/17/12	JR	Report Writing / COPD Mock Incident	1-3-13	JR
Professional Standards	12/18/12	JR	Hostage Survival	1-4-13	JR
Embracing Diversity	12/18/12	JR	Use of Force	1-4-13	JR
Protecting the Public	12/19/12	JR	O. C. Training / Exposure	1-4-13	JR
Positive Professional Communications	12/19/12	JR	Security Threat Groups	1-7-13	JR
Motivational Interviewing	12/19/12	JR	Exam #3 SCORE 84		
ASHI – CPR / First Aide	12/20/12	JR	Parole / Community Corrections	1-7-13	JR
Facility Tours	12/21/12	JR	Report Writing Exercise	1-7-13	JR
Personal Safety	12/21/12	JR	Team Building Exercise	1-7-13	JR
Games Offenders Play	12/21/12	JR	PPCT Defensive Tactics Day 1 (All Staff)	1-8-13	JR
Exam #1 SCORE 96	12/21/12	JR	PPCT Defensive Tactics Day 2 (All Staff)	1-9-13	JR
PREA	12/24/12	JR	PPCT Defensive Tactics Day 2 SCORE 94	1-9-13	JR
Communicable Diseases	12/24/12	JR	PPCT Defensive Tactics Day 3 (4 Day Staff)		
Team Building Exercise			PPCT Defensive Tactics Day 4 SCORE		
Suicide Prevention	12/26/12	JR	Introduction to Business Technologies		
Staff Wellness	12/26/12	JR	Firearms Day 1 – Classroom (or half day)		
National Incident Mgmt Systems	12/27/12	JR	Firearms Day 2 – Classroom		
Fire and Life Safety	12/27/12	JR	Firearms Day 3 – Range (or half day)		
Key / Tool Control	12/27/12	JR	Firearms Day 4 – Range		
ADA in a Correctional Setting	12/28/12	JR	Correctional Industries Presentation		
Exam #2 SCORE 96			Special Teams Presentation	1-17-13	JR
Offender Counts	12/28/12	JR	K-9 Presentation	1-17-13	JR
Contraband & Evidence Handling	12/28/12	JR	Food Service Specialized Training		
Full Restraints	12/28/12	JR	Managing Offender Workers		
Searches & Shakedowns	12/28/12	JR	Firearms Remediation (Classroom & Qualifications)		

I CERTIFY THAT I HAVE RECEIVED ALL OF THE TRAINING AND MATERIALS AS INDICATED BY INITIALS ON THIS FORM.

SIGNATURE: Tina M Rosler **DATE:** 1-17-13

Clinical Services Classes - Nursing

Class Name	Date	Initial
ASHI – CPR Pro SCORE 100	12-2012	JR
Overview of Clinical Services		
Dental Emergencies		
Medication Administration		
PCDCIS Computer Class		
PREA First Responder		
Team Management of Diabetes		
Medical Emergency Assessment		
Fundamentals of TB		

Clinical Services Classes - Mental Health

Class Name	Date	Initial
Overview of Clinical Services		
M/H Concepts & Systems Overview		
Brief Psychiatric Rating Scale		
Advanced Suicide Prevention		
Advanced Suicide Prevention Application		
M/H On Call, Infirm. Admissions		
M/H Watches		
SNU Referrals		
M/H Psychopharmacology		
PCDCIS Computer Class		
Community Transition		

Clinical Services Classes - Providers

Class Name	Date	Initial
Overview of Clinical Services		
CPR Pro for Health Care Providers		
PCDCIS Computer Class		
Medical Provider Specialized Training		

I CERTIFY THAT I HAVE RECEIVED ALL OF THE TRAINING AND MATERIALS AS INDICATED BY INITIALS ON THIS FORM.

SIGNATURE: _____ **Date:** _____

Revised 11/00; 12/00; 05/01; 01/05; 03/05, 03/06, 04/06, 09/06, 11/07, 06/08, 05/09, 07/10, 08/11, 10/11, 10/12

TA 269 4417

Clinical Services Classes - Nursing		
Class Name	Date	Initial
ASHI – CPR Pro – SCORE – 100	1-30-14	JP
Overview of Clinical Services	1-13-15	JP
Dental Emergencies	1-23-15	JP
Medication Administration	1-23-15	JP
PCDCIS Computer Class	1-30-15	JP
PREA First Responder	1-30-15	JP
Team Management of Diabetes	1-28-15	JP
Medical Emergency Assessment	1-28-15	JP
Fundamentals of TB	1-28-15	JP

Clinical Services Classes - Mental Health		
Class Name	Date	Initial
Overview of Clinical Services		
MH Concepts & Systems Overview		
Brief Psychiatric Rating Scale		
Advanced Suicide Prevention		
Advanced Suicide Prevention Application		
MH On Call, Intrim Admissions		
MH Watches		
SNU Referrals		
MH Psychopharmacology		
PCDCIS Computer Class		
Community Transition		

Clinical Services Classes - Providers		
Class Name	Date	Initial
Overview of Clinical Services		
CPR Pro for Health Care Providers		
PCDCIS Computer Class		
Medical Provider Specialized Training		

I CERTIFY THAT I HAVE RECEIVED ALL OF THE TRAINING AND MATERIALS AS INDICATED BY INITIALS ON THIS FORM.

SIGNATURE: Jason M Pettis Date: 1-28-15

BT CLASS #	431
MONTH	12
YEAR	2012

DATA SHEET / EMERGENCY NOTIFICATION

NAME:	ID #:	BIRTHDATE:
Tina Rosler	18645	8-5-73
JOB CLASSIFICATION:		**FACILITY:**
NURSE I		LCF

MAILING ADDRESS: [redacted]

HOME PHONE #: (use cell only) [redacted]

I understand that I am required to notify CTA if any of the above information changes WITHIN 24 HRS.

STUDENT SIGNATURE:	DATE:	CTA STAFF SIGNATURE:	DATE:
Tina M Rosler	12/17/12	[signature]	12-18-12

STUDENT CHRONOLOGICAL SHEET

DATE	INSTRUCTOR'S COMMENTS	INITIALS

DATE

INSTRUCTOR'S SIGNATURE

COLORADO DEPARTMENT OF CORRECTIONS

CERTIFICATE OF REVIEW AND COMPLIANCE WITH THE COLORADO DEPARTMENT OF CORRECTIONS CODE OF ETHICS

By my signature hereon, I Tina Rosler swear and affirm that I have read and will abide by the Colorado Department of Corrections Code of Ethics.

Tina M Rosler	12/18/12
Signature	Date
Tina Rosler	18645
Printed name	ID #
K Beucke	12-18-12
Witness	Date

COLORADO DEPARTMENT OF CORRECTIONS
OATH OF OFFICE

I do solemnly affirm that I shall support the Constitution of the United States, and the Constitution of the State of Colorado, and that I will faithfully perform the duties of my employment with the Colorado Department of Corrections.

Print Name: Tina Rosler **Date:** 12/27/12

Signature: Tina M Rosler

Job Classification: Nurse I

Assigned Location: LCF **Employee ID#:** 18645

Date Oath Administered: **January 17, 2013**

Name: **Pam Ploughe**

Title: **Warden Cañon Minimum Centers**

Original To: Personnel File
Copy To: Basic Training Files

AR Form 700-09A (10/01/06)

COLORADO DEPARTMENT OF CORRECTIONS

DOC EMPLOYEE AND CONTRACT WORKER BRIEFING FORM ON THE CONFIDENTIALITY OF MEDICAL INFORMATION

Pursuant to CRS 18-4-412, "Any person who, without prior authorization, knowingly obtains a medical record or medical information with the intent to appropriate the medical record or medical information to his own use or to the use of another, who steals or discloses to an unauthorized person a medical record or medical information, or who, without authority, makes or causes to be made a copy of medical record or medical information commits theft of a medical record or medical information."

During the 1987 legislative session, the Colorado General Assembly enacted stringent statutes requiring the confidentiality of all information related to whether an individual suffers from AIDS or ARC or has tested positive for the HIV virus. CRS 25-4-1404, (1987 Cum. Supp.) provides in pertinent part that all information related to whether an individual suffers from AIDS or ARC or HIV-seropositivity "shall be strictly confidential medical information" and "shall not be released, shared with any agency or institution, or made public...", even upon subpoena, search warrant or discovery proceedings.

To ensure compliance with the confidentiality provisions, CRS 18-4-412 and CRS 25-4-1409, (1987 Cum. Supp.) provide that theft of a medical record or medical information is a class 6 felony, and that any person who releases or makes public confidential medical information or otherwise breaches confidentiality is guilty of a misdemeanor and is subject to a fine of not less than $500 nor more than $5,000 or to imprisonment in the County Jail for not less than six months nor more than two years or to both such fine and imprisonment.

DO NOT divulge any information concerning the medical status of any individual, including "AIDS-related" information.

I, Tina Rosler, a DOC employee/contract worker of the Colorado Department of Corrections, have read the above notice concerning confidentiality of medical information, including AIDS, ARC, and HIV-seropositivity. I am aware of my duty not to divulge such information and of the potential consequences in the event I violate this confidentiality.

Tina M Rosler
DOC Employee/Contract Worker Name and Signature

12/17/12
Date

96

SIDE 1

NAME (Last, First, M.I.)

ROSLER TINA

SEX (M) (F)

GRADE OR EDUC 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

GENERAL PURPOSE - PEARSON NCS - ANSWER SHEET

SEE IMPORTANT MARKING INSTRUCTIONS ON SIDE 2

	A	B	C	D	E
1				●	
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BIRTHDATE			IDENTIFICATION NUMBER										SPECIAL CODES					
MO.	DAY	YR.	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
	21	12	1	8	6	4	5						0		23			
Jan.	0	0	0	0	0	0	0	0	0	0	0	0	●	0	0	0	0	0
Feb.	1	●	●	1	●	1	1	1	1	1	1	1	1	1	1	1	1	1
Mar.	●	2	2	●	2	2	2	2	2	2	2	2	2	2	●	2	2	2
Apr.	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	●	3	3
May		4	4	4	4	4	●	4	4	4	4	4	4	4	4	4	4	4
Jun.		5	5	5	5	5	5	●	5	5	5	5	5	5	5	5	5	5
Jul.		6	6	6	●	6	6	6	6	6	6	6	6	6	6	6	6	6
Aug.		7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
Sep.		8	8	●	8	8	8	8	8	8	8	8	8	8	8	8	8	8
Oct.		9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
Nov.																		
Dec.																		

SIDE 2

	A	B	C	D	E		A	B	C	D	E		A	B	C	D	E		A	B	C	D	E
101	①	②	③	④	⑤	111	①	②	③	④	⑤	121	①	②	③	④	⑤	131	①	②	③	④	⑤	141	①	②	③	④	⑤
102	①	②	③	④	⑤	112	①	②	③	④	⑤	122	①	②	③	④	⑤	132	①	②	③	④	⑤	142	①	②	③	④	⑤
103	①	②	③	④	⑤	113	①	②	③	④	⑤	123	①	②	③	④	⑤	133	①	②	③	④	⑤	143	①	②	③	④	⑤
104	①	②	③	④	⑤	114	①	②	③	④	⑤	124	①	②	③	④	⑤	134	①	②	③	④	⑤	144	①	②	③	④	⑤
105	①	②	③	④	⑤	115	①	②	③	④	⑤	125	①	②	③	④	⑤	135	①	②	③	④	⑤	145	①	②	③	④	⑤
106	①	②	③	④	⑤	116	①	②	③	④	⑤	126	①	②	③	④	⑤	136	①	②	③	④	⑤	146	①	②	③	④	⑤
107	①	②	③	④	⑤	117	①	②	③	④	⑤	127	①	②	③	④	⑤	137	①	②	③	④	⑤	147	①	②	③	④	⑤
108	①	②	③	④	⑤	118	①	②	③	④	⑤	128	①	②	③	④	⑤	138	①	②	③	④	⑤	148	①	②	③	④	⑤
109	①	②	③	④	⑤	119	①	②	③	④	⑤	129	①	②	③	④	⑤	139	①	②	③	④	⑤	149	①	②	③	④	⑤
110	①	②	③	④	⑤	120	①	②	③	④	⑤	130	①	②	③	④	⑤	140	①	②	③	④	⑤	150	①	②	③	④	⑤

	A	B	C	D	E		A	B	C	D	E		A	B	C	D	E		A	B	C	D	E
151	①	②	③	④	⑤	161	①	②	③	④	⑤	171	①	②	③	④	⑤	181	①	②	③	④	⑤	191	①	②	③	④	⑤
152	①	②	③	④	⑤	162	①	②	③	④	⑤	172	①	②	③	④	⑤	182	①	②	③	④	⑤	192	①	②	③	④	⑤
153	①	②	③	④	⑤	163	①	②	③	④	⑤	173	①	②	③	④	⑤	183	①	②	③	④	⑤	193	①	②	③	④	⑤
154	①	②	③	④	⑤	164	①	②	③	④	⑤	174	①	②	③	④	⑤	184	①	②	③	④	⑤	194	①	②	③	④	⑤
155	①	②	③	④	⑤	165	①	②	③	④	⑤	175	①	②	③	④	⑤	185	①	②	③	④	⑤	195	①	②	③	④	⑤
156	①	②	③	④	⑤	166	①	②	③	④	⑤	176	①	②	③	④	⑤	186	①	②	③	④	⑤	196	①	②	③	④	⑤
157	①	②	③	④	⑤	167	①	②	③	④	⑤	177	①	②	③	④	⑤	187	①	②	③	④	⑤	197	①	②	③	④	⑤
158	①	②	③	④	⑤	168	①	②	③	④	⑤	178	①	②	③	④	⑤	188	①	②	③	④	⑤	198	①	②	③	④	⑤
159	①	②	③	④	⑤	169	①	②	③	④	⑤	179	①	②	③	④	⑤	189	①	②	③	④	⑤	199	①	②	③	④	⑤
160	①	②	③	④	⑤	170	①	②	③	④	⑤	180	①	②	③	④	⑤	190	①	②	③	④	⑤	200	①	②	③	④	⑤

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GENERAL PURPOSE PEARSON NCS ANSWER SHEET form no. 4521

PEARSON NCS

EXAMPLES

			WRONG			
1	①	⊗	③	④	⑤	
			WRONG			
2	①	②	✓	④	⑤	
			WRONG			
3	①	②	③	◓	⑤	
			RIGHT			
4	①	②	③	●	⑤	

IMPORTANT DIRECTIONS FOR MARKING ANSWERS

- Use #2 pencil only.
- Do NOT use ink or ballpoint pens.
- Make heavy black marks that fill the circle completely.
- Erase cleanly any answer you wish to change.
- Make no stray marks on the answer sheet.

I HAVE REVIEWED AND UNDERSTAND ALL TEST QUESTIONS AND ANSWERS

SIGNATURE Jina Koslo DATE 4/16/13

DO NOT WRITE IN THIS SPACE

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INDIVIDUAL SCORES REPORT
for ROSLER TINA 18645

Test: E1T1 BT431
Grade:
Score: 96.00% (96.00 of 100.00)

Objective	Points	%	Response [Correct Answer] / Student Comments
DISCRIMINATION	**8.00 of 8.00**	**100.00**	
1:4 DISCRIMINATION 2	4.00 of 4.00	100.00	D
1:6 DISCRIMINATION 3	4.00 of 4.00	100.00	D
DOC PROGRAM OVERVIEW	**4.00 of 4.00**	**100.00**	
1:7 DOC PROGRAM OVERVIEW 2	4.00 of 4.00	100.00	D
DRUG DETERRENCE	**8.00 of 8.00**	**100.00**	
1:1 DRUG DETERRENCE 4	4.00 of 4.00	100.00	D
1:5 DRUG DETERRENCE 3	4.00 of 4.00	100.00	A
EMBRACING DIVERSITY	**4.00 of 4.00**	**100.00**	
1:13 EMBRACING DIVERSITY 2	4.00 of 4.00	100.00	C
GAMES	**16.00 of 20.00**	**80.00**	
1:2 GAMES 6	4.00 of 4.00	100.00	C
1:8 GAMES 4	4.00 of 4.00	100.00	A
1:10 GAMES 8	4.00 of 4.00	100.00	C
1:14 GAMES 7	4.00 of 4.00	100.00	A
1:23 GAMES 5	0.00 of 4.00	0.00	C [B]
LEGAL ISSUES	**8.00 of 8.00**	**100.00**	
1:18 LEGAL ISSUES 4	4.00 of 4.00	100.00	D
1:24 LEGAL ISSUES 3	4.00 of 4.00	100.00	A
MOTIV INTERVIEWING	**4.00 of 4.00**	**100.00**	
1:22 MOTIV INTERVIEWING 3	4.00 of 4.00	100.00	C
PERSONAL SAFETY	**4.00 of 4.00**	**100.00**	
1:15 PERSONAL SAFETY 2	4.00 of 4.00	100.00	D
POSITIVE PROFES.	**4.00 of 4.00**	**100.00**	
1:25 POSITIVE PROFES. 3	4.00 of 4.00	100.00	D
PROFESSIONALISM	**24.00 of 24.00**	**100.00**	
1:3 PROFESSIONALISM 6	4.00 of 4.00	100.00	C
1:16 PROFESSIONALISM 3	4.00 of 4.00	100.00	A
1:17 PROFESSIONALISM 8	4.00 of 4.00	100.00	D
1:19 PROFESSIONALISM 7	4.00 of 4.00	100.00	A
1:20 PROFESSIONALISM 5	4.00 of 4.00	100.00	B
1:21 PROFESSIONALISM 4	4.00 of 4.00	100.00	A
PROTECT THE PUBLIC	**4.00 of 4.00**	**100.00**	
1:11 PROTECT THE PUBLIC 2	4.00 of 4.00	100.00	B

INDIVIDUAL SCORES REPORT

for ROSLER TINA 18645

Objective	Points	%	Response [Correct Answer] / Student Comments
VIOLENCE	**8.00 of 8.00**	**100.00**	
1:9 VIOLENCE 2	4.00 of 4.00	100.00	A
1:12 VIOLENCE 1	4.00 of 4.00	100.00	C
SUMMARY:	**96.00 of 100.00**	**96.00**	

94

SIDE 1

GENERAL PURPOSE - PEARSON NCS - ANSWER SHEET

SEE IMPORTANT MARKING INSTRUCTIONS ON SIDE 2

NAME (Last, First, M.I.)

ROSLER TINA M

SEX (M) (F)

GRADE OR EDUC 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

BIRTHDATE			IDENTIFICATION NUMBER										SPECIAL CODES					
MO.	DAY	YR.	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
Jan.	2	8	1	2	1	8	6	4	5						1	1		
Feb.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mar.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Apr.	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
May	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Jun.		4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
Jul.		5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
Aug.		6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
Sep.		7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
Oct.		8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
Nov.		9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
Dec.																		

1 B	11 A	21 A	31 B	41 B
2 D	12 D	22 C	32 B	42 B
3 C	13 D	23 B	33 B	43 B
4 D	14 D	24 D	34 B	44 B
5 A	15 D	25 C	35 B	45 B
6 A	16 B	26 B	36 B	46 B
7 D	17 A	27 B	37 B	47 B
8 D	18 B	28 B	38 B	48 B
9 D	19 C	29 B	39 B	49 B
10 B	20 C	30 B	40 B	50 B
51 B	61 B	71 B	81 B	91 B
52 B	62 B	72 B	82 B	92 B
53 B	63 B	73 B	83 B	93 B
54 B	64 B	74 B	84 B	94 B
55 B	65 B	75 B	85 B	95 B
56 B	66 B	76 B	86 B	96 B
57 B	67 B	77 B	87 B	97 B
58 B	68 B	78 B	88 B	98 B
59 B	69 B	79 B	89 B	99 B
60 B	70 B	80 B	90 B	100 B

SIDE 2

101	A B C D E	111	A B C D E	121	A B C D E	131	A B C D E	141	A B C D E
102	A B C D E	112	A B C D E	122	A B C D E	132	A B C D E	142	A B C D E
103	A B C D E	113	A B C D E	123	A B C D E	133	A B C D E	143	A B C D E
104	A B C D E	114	A B C D E	124	A B C D E	134	A B C D E	144	A B C D E
105	A B C D E	115	A B C D E	125	A B C D E	135	A B C D E	145	A B C D E
106	A B C D E	116	A B C D E	126	A B C D E	136	A B C D E	146	A B C D E
107	A B C D E	117	A B C D E	127	A B C D E	137	A B C D E	147	A B C D E
108	A B C D E	118	A B C D E	128	A B C D E	138	A B C D E	148	A B C D E
109	A B C D E	119	A B C D E	129	A B C D E	139	A B C D E	149	A B C D E
110	A B C D E	120	A B C D E	130	A B C D E	140	A B C D E	150	A B C D E

151	A B C D E	161	A B C D E	171	A B C D E	181	A B C D E	191	A B C D E
152	A B C D E	162	A B C D E	172	A B C D E	182	A B C D E	192	A B C D E
153	A B C D E	163	A B C D E	173	A B C D E	183	A B C D E	193	A B C D E
154	A B C D E	164	A B C D E	174	A B C D E	184	A B C D E	194	A B C D E
155	A B C D E	165	A B C D E	175	A B C D E	185	A B C D E	195	A B C D E
156	A B C D E	166	A B C D E	176	A B C D E	186	A B C D E	196	A B C D E
157	A B C D E	167	A B C D E	177	A B C D E	187	A B C D E	197	A B C D E
158	A B C D E	168	A B C D E	178	A B C D E	188	A B C D E	198	A B C D E
159	A B C D E	169	A B C D E	179	A B C D E	189	A B C D E	199	A B C D E
160	A B C D E	170	A B C D E	180	A B C D E	190	A B C D E	200	A B C D E

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GENERAL PURPOSE
PEARSON NCS
ANSWER SHEET
form no. 4521

PEARSON NCS

EXAMPLES	IMPORTANT DIRECTIONS FOR MARKING ANSWERS
WRONG 1 ① ⊗ ③ ④ ⑤ WRONG 2 ① ② ✓ ④ ⑤ WRONG 3 ① ② ③ ◭ ⑤ RIGHT 4 ① ② ③ ● ⑤	• Use #2 pencil only. • Do NOT use ink or ballpoint pens. • Make heavy black marks that fill the circle completely. • Erase cleanly any answer you wish to change. • Make no stray marks on the answer sheet.

I HAVE REVIEWED AND UNDERSTAND ALL TEST QUESTIONS AND ANSWERS

Jina M Kosler 12/28/12
SIGNATURE DATE

DO NOT WRITE IN THIS SPACE

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INDIVIDUAL SCORES REPORT
for ROSLER TINA M 18645

Test: E2T1 BT 431
Grade:
Score: 96.00% (96.00 of 100.00)

Objective	Points	%	Response [Correct Answer] / Student Comments
COMMUNICABLE DISEASE	**12.00 of 12.00**	**100.00**	
1:10 COMMUNICABLE DISEASE 4	4.00 of 4.00	100.00	B
1:17 COMMUNICABLE DISEASE 5	4.00 of 4.00	100.00	A
1:24 COMMUNICABLE DISEASE 6	4.00 of 4.00	100.00	D
FIRE LIFE SAFETY	**20.00 of 24.00**	**83.33**	
1:2 FIRE LIFE SAFETY 7	4.00 of 4.00	100.00	D
1:6 FIRE LIFE SAFETY 9	0.00 of 4.00	0.00	A [D]
1:7 FIRE LIFE SAFETY 12	4.00 of 4.00	100.00	D
1:16 FIRE LIFE SAFETY 8	4.00 of 4.00	100.00	B
1:19 FIRE LIFE SAFETY 10	4.00 of 4.00	100.00	C
1:25 FIRE LIFE SAFETY 11	4.00 of 4.00	100.00	C
KEY & TOOL CONTROL	**24.00 of 24.00**	**100.00**	
1:1 KEY & TOOL CONTROL 9	4.00 of 4.00	100.00	A
1:3 KEY & TOOL CONTROL 11	4.00 of 4.00	100.00	C
1:5 KEY & TOOL CONTROL 13	4.00 of 4.00	100.00	A
1:13 KEY & TOOL CONTROL 12	4.00 of 4.00	100.00	D
1:14 KEY & TOOL CONTROL 8	4.00 of 4.00	100.00	D
1:23 KEY & TOOL CONTROL 10	4.00 of 4.00	100.00	B
PHYSICAL DISABILITY	**12.00 of 12.00**	**100.00**	
1:8 PHYSICAL DISABILITY 2	4.00 of 4.00	100.00	D
1:9 PHYSICAL DISABILITY 4	4.00 of 4.00	100.00	D
1:15 PHYSICAL DISABILITY 3	4.00 of 4.00	100.00	D
PREA	**8.00 of 8.00**	**100.00**	
1:4 PREA 3	4.00 of 4.00	100.00	D
1:18 PREA 4	4.00 of 4.00	100.00	B
STAFF WELLNESS	**8.00 of 8.00**	**100.00**	
1:11 STAFF WELLNESS 3	4.00 of 4.00	100.00	B
1:22 STAFF WELLNESS 2	4.00 of 4.00	100.00	C
SUICIDE PREVENTION	**12.00 of 12.00**	**100.00**	
1:12 SUICIDE PREVENTION 3	4.00 of 4.00	100.00	D
1:20 SUICIDE PREVENTION 4	4.00 of 4.00	100.00	C
1:21 SUICIDE PREVENTION 2	4.00 of 4.00	100.00	A
SUMMARY:	**96.00 of 100.00**	**96.00**	

84

SIDE 1

NAME (Last, First, M.I.)

ROSLER TINA M

SEX (M) (F)

GRADE OR EDUC 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

GENERAL PURPOSE - SCANTRON - ANSWER SHEET

SEE IMPORTANT MARKING INSTRUCTIONS ON SIDE 2

	A	B	C	D	E
1	1	2	3	●	5
2	1	2	3	●	5
3	●	2	3	4	5
4	1	2	3	●	5
5	1	●	3	4	5
6	1	2	●	4	5
7	1	●	3	4	5
8	●	2	3	4	5
9	●	2	3	4	5
10	1	2	3	●	5

	A	B	C	D	E
11	1	●	3	4	5
12	1	2	3	●	5
13	1	2	3	●	5
14	1	2	3	●	5
15	1	2	●	4	5
16	1	2	3	●	5
17	1	2	3	●	5
18	1	2	●	4	5
19	1	2	●	4	5
20	1	2	3	●	5

	A	B	C	D	E
21	1	2	●	4	5
22	1	2	3	●	5
23	1	●	3	4	5
24	1	2	●	4	5
25	●	2	3	4	5
26	1	2	3	4	5
27	1	2	3	4	5
28	1	2	3	4	5
29	1	2	3	4	5
30	1	2	3	4	5

	A	B	C	D	E
31	1	2	3	4	5
32	1	2	3	4	5
33	1	2	3	4	5
34	1	2	3	4	5
35	1	2	3	4	5
36	1	2	3	4	5
37	1	2	3	4	5
38	1	2	3	4	5
39	1	2	3	4	5
40	1	2	3	4	5

	A	B	C	D	E
41	1	2	3	4	5
42	1	2	3	4	5
43	1	2	3	4	5
44	1	2	3	4	5
45	1	2	3	4	5
46	1	2	3	4	5
47	1	2	3	4	5
48	1	2	3	4	5
49	1	2	3	4	5
50	1	2	3	4	5

	A	B	C	D	E
51	1	2	3	4	5
52	1	2	3	4	5
53	1	2	3	4	5
54	1	2	3	4	5
55	1	2	3	4	5
56	1	2	3	4	5
57	1	2	3	4	5
58	1	2	3	4	5
59	1	2	3	4	5
60	1	2	3	4	5

	A	B	C	D	E
61	1	2	3	4	5
62	1	2	3	4	5
63	1	2	3	4	5
64	1	2	3	4	5
65	1	2	3	4	5
66	1	2	3	4	5
67	1	2	3	4	5
68	1	2	3	4	5
69	1	2	3	4	5
70	1	2	3	4	5

	A	B	C	D	E
71	1	2	3	4	5
72	1	2	3	4	5
73	1	2	3	4	5
74	1	2	3	4	5
75	1	2	3	4	5
76	1	2	3	4	5
77	1	2	3	4	5
78	1	2	3	4	5
79	1	2	3	4	5
80	1	2	3	4	5

	A	B	C	D	E
81	1	2	3	4	5
82	1	2	3	4	5
83	1	2	3	4	5
84	1	2	3	4	5
85	1	2	3	4	5
86	1	2	3	4	5
87	1	2	3	4	5
88	1	2	3	4	5
89	1	2	3	4	5
90	1	2	3	4	5

	A	B	C	D	E
91	1	2	3	4	5
92	1	2	3	4	5
93	1	2	3	4	5
94	1	2	3	4	5
95	1	2	3	4	5
96	1	2	3	4	5
97	1	2	3	4	5
98	1	2	3	4	5
99	1	2	3	4	5
100	1	2	3	4	5

BIRTHDATE			IDENTIFICATION NUMBER										SPECIAL CODES					
MO.	DAY	YR.	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
Jan. ●	07	13	1	8	6	4	5								0	8		
Feb. ○																		
Mar. ○	0	0	0	0	0	0	0	0	0	0	0	0	0	0	●	0	0	0
Apr. ○	1	1	●	1	●	1	1	1	1	1	1	1	1	1	1	1	1	1
May ○	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Jun. ○	3	3	3	●	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Jul. ○		4	4	4	4	4	●	4	4	4	4	4	4	4	4	4	4	4
Aug. ○		5	5	5	5	5	5	●	5	5	5	5	5	5	5	5	5	5
Sep. ○		6	6	6	6	●	6	6	6	6	6	6	6	6	6	6	6	6
Oct. ○		●	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
Nov. ○		8	8	●	8	8	8	8	8	8	8	8	8	8	8	●	8	8
Dec. ○		9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9

SIDE 2

	A	B	C	D	E
101	①	②	③	④	⑤
102	①	②	③	④	⑤
103	①	②	③	④	⑤
104	①	②	③	④	⑤
105	①	②	③	④	⑤
106	①	②	③	④	⑤
107	①	②	③	④	⑤
108	①	②	③	④	⑤
109	①	②	③	④	⑤
110	①	②	③	④	⑤
111	①	②	③	④	⑤
112	①	②	③	④	⑤
113	①	②	③	④	⑤
114	①	②	③	④	⑤
115	①	②	③	④	⑤
116	①	②	③	④	⑤
117	①	②	③	④	⑤
118	①	②	③	④	⑤
119	①	②	③	④	⑤
120	①	②	③	④	⑤
121	①	②	③	④	⑤
122	①	②	③	④	⑤
123	①	②	③	④	⑤
124	①	②	③	④	⑤
125	①	②	③	④	⑤
126	①	②	③	④	⑤
127	①	②	③	④	⑤
128	①	②	③	④	⑤
129	①	②	③	④	⑤
130	①	②	③	④	⑤
131	①	②	③	④	⑤
132	①	②	③	④	⑤
133	①	②	③	④	⑤
134	①	②	③	④	⑤
135	①	②	③	④	⑤
136	①	②	③	④	⑤
137	①	②	③	④	⑤
138	①	②	③	④	⑤
139	①	②	③	④	⑤
140	①	②	③	④	⑤
141	①	②	③	④	⑤
142	①	②	③	④	⑤
143	①	②	③	④	⑤
144	①	②	③	④	⑤
145	①	②	③	④	⑤
146	①	②	③	④	⑤
147	①	②	③	④	⑤
148	①	②	③	④	⑤
149	①	②	③	④	⑤
150	①	②	③	④	⑤
151	①	②	③	④	⑤
152	①	②	③	④	⑤
153	①	②	③	④	⑤
154	①	②	③	④	⑤
155	①	②	③	④	⑤
156	①	②	③	④	⑤
157	①	②	③	④	⑤
158	①	②	③	④	⑤
159	①	②	③	④	⑤
160	①	②	③	④	⑤
161	①	②	③	④	⑤
162	①	②	③	④	⑤
163	①	②	③	④	⑤
164	①	②	③	④	⑤
165	①	②	③	④	⑤
166	①	②	③	④	⑤
167	①	②	③	④	⑤
168	①	②	③	④	⑤
169	①	②	③	④	⑤
170	①	②	③	④	⑤
171	①	②	③	④	⑤
172	①	②	③	④	⑤
173	①	②	③	④	⑤
174	①	②	③	④	⑤
175	①	②	③	④	⑤
176	①	②	③	④	⑤
177	①	②	③	④	⑤
178	①	②	③	④	⑤
179	①	②	③	④	⑤
180	①	②	③	④	⑤
181	①	②	③	④	⑤
182	①	②	③	④	⑤
183	①	②	③	④	⑤
184	①	②	③	④	⑤
185	①	②	③	④	⑤
186	①	②	③	④	⑤
187	①	②	③	④	⑤
188	①	②	③	④	⑤
189	①	②	③	④	⑤
190	①	②	③	④	⑤
191	①	②	③	④	⑤
192	①	②	③	④	⑤
193	①	②	③	④	⑤
194	①	②	③	④	⑤
195	①	②	③	④	⑤
196	①	②	③	④	⑤
197	①	②	③	④	⑤
198	①	②	③	④	⑤
199	①	②	③	④	⑤
200	①	②	③	④	⑤

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GENERAL PURPOSE SCANTRON ANSWER SHEET form no. 4521

SCANTRON®

EXAMPLES

WRONG
1 ① ⊗ ③ ④ ⑤

WRONG
2 ① ② ⊘ ④ ⑤

WRONG
3 ① ② ③ ◔ ⑤

RIGHT
4 ① ② ③ ● ⑤

IMPORTANT DIRECTIONS FOR MARKING ANSWERS

- Use #2 pencil only.
- Do NOT use ink or ballpoint pens.
- Make heavy black marks that fill the circle completely.
- Erase cleanly any answer you wish to change.
- Make no stray marks on the answer sheet.

I HAVE REVIEWED AND UNDERSTAND ALL TEST QUESTIONS AND ANSWERS

SIGNATURE Tina M Forsler DATE 1-7-13

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INDIVIDUAL SCORES REPORT
for ROMERO RAYMUNDO A 18635

Test: E3T1 BT 431
Grade:
Score: 92.00% (92.00 of 100.00)

Objective	Points	%	Response [Correct Answer] / Student Comments
CONTRABAND	**8.00 of 8.00**	**100.00**	
1:23 CONTRABAND 5	4.00 of 4.00	100.00	B
1:25 CONTRABAND 4	4.00 of 4.00	100.00	B
COPD	**8.00 of 8.00**	**100.00**	
1:3 COPD 4	4.00 of 4.00	100.00	C
1:10 COPD 5	4.00 of 4.00	100.00	D
HOSTAGE SURVIVAL	**12.00 of 12.00**	**100.00**	
1:9 HOSTAGE SURVIVAL 4	4.00 of 4.00	100.00	A
1:11 HOSTAGE SURVIVAL 6	4.00 of 4.00	100.00	B
1:18 HOSTAGE SURVIVAL 5	4.00 of 4.00	100.00	C
OFFENDER COUNTS	**4.00 of 8.00**	**50.00**	
1:20 OFFENDER COUNTS 6	0.00 of 4.00	0.00	B [D]
1:22 OFFENDER COUNTS 7	4.00 of 4.00	100.00	D
RADIO USE	**8.00 of 8.00**	**100.00**	
1:1 RADIO USE 4	4.00 of 4.00	100.00	D
1:8 RADIO USE 3	4.00 of 4.00	100.00	B
REPORT WRITING	**8.00 of 8.00**	**100.00**	
1:2 REPORT WRITING 5	4.00 of 4.00	100.00	D
1:24 REPORT WRITING 4	4.00 of 4.00	100.00	C
RESTRAINTS	**4.00 of 4.00**	**100.00**	
1:15 RESTRAINTS 2	4.00 of 4.00	100.00	C
SEARCHES	**8.00 of 8.00**	**100.00**	
1:13 SEARCHES 11	4.00 of 4.00	100.00	D
1:21 SEARCHES 12	4.00 of 4.00	100.00	C
SECURITY THREATS	**16.00 of 20.00**	**80.00**	
1:5 SECURITY THREATS 8	4.00 of 4.00	100.00	B
1:6 SECURITY THREATS 7	0.00 of 4.00	0.00	A [C]
1:14 SECURITY THREATS 10	4.00 of 4.00	100.00	D
1:16 SECURITY THREATS 9	4.00 of 4.00	100.00	D
1:17 SECURITY THREATS 6	4.00 of 4.00	100.00	D
USE OF FORCE	**16.00 of 16.00**	**100.00**	
1:4 USE OF FORCE 9	4.00 of 4.00	100.00	B
1:7 USE OF FORCE 8	4.00 of 4.00	100.00	B
1:12 USE OF FORCE 5	4.00 of 4.00	100.00	D
1:19 USE OF FORCE 4	4.00 of 4.00	100.00	C

INDIVIDUAL SCORES REPORT

for ROMERO RAYMUNDO A 18635

Objective	Points	%	Response [Correct Answer] / Student Comments
SUMMARY:	**92.00 of 100.00**	**92.00**	

INDIVIDUAL SCORES REPORT
for ROSLER TINA M 18645

Test: E3T1 BT 431
Grade:
Score: 84.00% (84.00 of 100.00)

Objective	Points	%	Response [Correct Answer] / Student Comments
CONTRABAND	**4.00 of 8.00**	**50.00**	
1:23 CONTRABAND 5	4.00 of 4.00	100.00	B
1:25 CONTRABAND 4	0.00 of 4.00	0.00	A [B]
COPD	**4.00 of 8.00**	**50.00**	
1:3 COPD 4	0.00 of 4.00	0.00	A [C]
1:10 COPD 5	4.00 of 4.00	100.00	D
HOSTAGE SURVIVAL	**12.00 of 12.00**	**100.00**	
1:9 HOSTAGE SURVIVAL 4	4.00 of 4.00	100.00	A
1:11 HOSTAGE SURVIVAL 6	4.00 of 4.00	100.00	B
1:18 HOSTAGE SURVIVAL 5	4.00 of 4.00	100.00	C
OFFENDER COUNTS	**8.00 of 8.00**	**100.00**	
1:20 OFFENDER COUNTS 6	4.00 of 4.00	100.00	D
1:22 OFFENDER COUNTS 7	4.00 of 4.00	100.00	D
RADIO USE	**4.00 of 8.00**	**50.00**	
1:1 RADIO USE 4	4.00 of 4.00	100.00	D
1:8 RADIO USE 3	0.00 of 4.00	0.00	A [B]
REPORT WRITING	**8.00 of 8.00**	**100.00**	
1:2 REPORT WRITING 5	4.00 of 4.00	100.00	D
1:24 REPORT WRITING 4	4.00 of 4.00	100.00	C
RESTRAINTS	**4.00 of 4.00**	**100.00**	
1:15 RESTRAINTS 2	4.00 of 4.00	100.00	C
SEARCHES	**8.00 of 8.00**	**100.00**	
1:13 SEARCHES 11	4.00 of 4.00	100.00	D
1:21 SEARCHES 12	4.00 of 4.00	100.00	C
SECURITY THREATS	**20.00 of 20.00**	**100.00**	
1:5 SECURITY THREATS 8	4.00 of 4.00	100.00	B
1:6 SECURITY THREATS 7	4.00 of 4.00	100.00	C
1:14 SECURITY THREATS 10	4.00 of 4.00	100.00	D
1:16 SECURITY THREATS 9	4.00 of 4.00	100.00	D
1:17 SECURITY THREATS 6	4.00 of 4.00	100.00	D
USE OF FORCE	**12.00 of 16.00**	**75.00**	
1:4 USE OF FORCE 9	0.00 of 4.00	0.00	D [B]
1:7 USE OF FORCE 8	4.00 of 4.00	100.00	B
1:12 USE OF FORCE 5	4.00 of 4.00	100.00	D
1:19 USE OF FORCE 4	4.00 of 4.00	100.00	C

INDIVIDUAL SCORES REPORT

for ROSLER TINA M 18645

Objective	Points	%	Response [Correct Answer] / Student Comments
SUMMARY:	**84.00 of 100.00**	**84.00**	

04

SIDE 1

GENERAL PURPOSE - SCANTRON - ANSWER SHEET

SEE IMPORTANT MARKING INSTRUCTIONS ON SIDE 2

NAME (Last, First, M.I.)

ROSLER TINA M

SEX (M) (F)

GRADE OR EDUC 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

BIRTHDATE			IDENTIFICATION NUMBER										SPECIAL CODES					
MO.	DAY	YR.	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
Jan.	09	13	1	8	6	4	5											
Feb.																		
Mar.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Apr.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
May	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Jun.	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Jul.		4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
Aug.		5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
Sep.		6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
Oct.		7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
Nov.		8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
Dec.		9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9

	A	B	C	D	E
1	●	2	3	4	5
2	●	2	3	4	5
3	●	2	3	4	5
4	●	2	3	4	5
5	1	2	3	●	5
6	1	●	3	4	5
7	1	2	●	4	5
8	1	2	3	●	5
9	1	●	3	4	5
10	1	2	●	4	5

	A	B	C	D	E
11	1	2	●	4	5
12	1	●	3	4	5
13	●	2	3	4	5
14	●	2	3	4	5
15	●	2	3	4	5
16	1	●	3	4	5
17	1	●	3	4	5
18	1	2	3	●	5
19	1	●	3	4	5
20	●	2	3	4	5

	A	B	C	D	E
21	1	●	3	4	5
22	1	●	3	4	5
23	1	2	3	●	5
24	1	●	3	4	5
25	1	●	3	4	5
26	●	2	3	4	5
27	1	2	●	4	5
28	1	2	●	4	5
29	1	2	●	4	5
30	1	2	●	4	5

	A	B	C	D	E
31	●	2	3	4	5
32	●	2	3	4	5
33	1	2	●	4	5
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SIDE 2

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199	1	2	3	4	5
200	1	2	3	4	5

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GENERAL PURPOSE SCANTRON ANSWER SHEET form no. 4521

SCANTRON®

EXAMPLES

WRONG 1 ① ⊗ ③ ④ ⑤

WRONG 2 ① ② ⊘ ④ ⑤

WRONG 3 ① ② ③ ◔ ⑤

RIGHT 4 ① ② ③ ● ⑤

IMPORTANT DIRECTIONS FOR MARKING ANSWERS

- Use #2 pencil only.
- Do NOT use ink or ballpoint pens.
- Make heavy black marks that fill the circle completely.
- Erase cleanly any answer you wish to change.
- Make no stray marks on the answer sheet.

I HAVE REVIEWED AND UNDERSTAND ALL TEST QUESTIONS AND ANSWERS

SIGNATURE Tina Kosloff DATE 1-9-13

Use with Sentry® and OpScan® scanners

DO NOT WRITE IN THIS SPACE

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www.ScantronStore.com

INDIVIDUAL SCORES REPORT
for ROSLER TINA M 18645

Test: PPCT 2-DAY TST A
Grade:
Score: 93.94% (93.00 of 99.00)

Objective	Points	%	Response [Correct Answer] / Student Comments
PPCT BASIC EXAM	**0.00 of 99.00**	**0.00**	
1:1 PPCT BASIC EXAM 15	0.00 of 3.00	0.00	[A]
1:2 PPCT BASIC EXAM 31	0.00 of 3.00	0.00	[A]
1:3 PPCT BASIC EXAM 27	0.00 of 3.00	0.00	[A]
1:4 PPCT BASIC EXAM 25	0.00 of 3.00	0.00	[A]
1:5 PPCT BASIC EXAM 38	0.00 of 3.00	0.00	[D]
1:6 PPCT BASIC EXAM 20	0.00 of 3.00	0.00	[B]
1:7 PPCT BASIC EXAM 35	0.00 of 3.00	0.00	[C]
1:8 PPCT BASIC EXAM 12	0.00 of 3.00	0.00	[D]
1:9 PPCT BASIC EXAM 41	0.00 of 3.00	0.00	[D]
1:10 PPCT BASIC EXAM 28	0.00 of 3.00	0.00	[C]
1:11 PPCT BASIC EXAM 13	0.00 of 3.00	0.00	[C]
1:12 PPCT BASIC EXAM 29	0.00 of 3.00	0.00	[B]
1:13 PPCT BASIC EXAM 14	0.00 of 3.00	0.00	[A]
1:14 PPCT BASIC EXAM 23	0.00 of 3.00	0.00	[A]
1:15 PPCT BASIC EXAM 44	0.00 of 3.00	0.00	[A]
1:16 PPCT BASIC EXAM 37	0.00 of 3.00	0.00	[D]
1:17 PPCT BASIC EXAM 43	0.00 of 3.00	0.00	[B]
1:18 PPCT BASIC EXAM 39	0.00 of 3.00	0.00	[D]
1:19 PPCT BASIC EXAM 30	0.00 of 3.00	0.00	[B]
1:20 PPCT BASIC EXAM 17	0.00 of 3.00	0.00	[A]
1:21 PPCT BASIC EXAM 34	0.00 of 3.00	0.00	[B]
1:22 PPCT BASIC EXAM 24	0.00 of 3.00	0.00	[B]
1:23 PPCT BASIC EXAM 11	0.00 of 3.00	0.00	[D]
1:24 PPCT BASIC EXAM 16	0.00 of 3.00	0.00	[B]
1:25 PPCT BASIC EXAM 42	0.00 of 3.00	0.00	[B]
1:26 PPCT BASIC EXAM 40	0.00 of 3.00	0.00	[A]
1:27 PPCT BASIC EXAM 21	0.00 of 3.00	0.00	[C]
1:28 PPCT BASIC EXAM 45	0.00 of 3.00	0.00	[C]
1:29 PPCT BASIC EXAM 32	0.00 of 3.00	0.00	[C]
1:30 PPCT BASIC EXAM 19	0.00 of 3.00	0.00	[C]
1:31 PPCT BASIC EXAM 33	0.00 of 3.00	0.00	[A]
1:32 PPCT BASIC EXAM 18	0.00 of 3.00	0.00	[A]
1:33 PPCT BASIC EXAM 22	0.00 of 3.00	0.00	[C]
SUMMARY:	**93.00 of 99.00**	**93.94**	

100 SK

CPR Pro for the Professional Rescuer

Adult, Child and Infant — Answer Sheet

Instructions: Print your name and date below. Place an "X" over the correct answers.

Student Name Tina Kosler Date 12/20/12

Example:	a	X	c	d
1.	a	b	X	d
2.	a	b	c	X
3.	a	b	c	X
4.	X	b	c	d
5.	a	b	X	d
6.	a	b	X	d
7.	a	b	X	d
8.	a	X	c	d
9.	X	b	c	d
10.	a	b	c	X
11.	X	b	c	d
12.	X	b	c	d
13.	a	X	c	d
14.	a	b	c	X
15.	X	b	c	d
16.	a	X	c	d
17.	a	b	c	X
18.	a	X	c	d
19.	a	X	c	d
20.	a	X	c	d
21.	a	b	c	X
22.	X	b	c	d
23.	a	b	c	X
24.	a	b	c	X
25.	X	b	c	d
26.	a	b	X	d
27.	a	b	c	X
28.	a	X	c	d
29.	a	b	X	d
30.	a	b	X	d

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PPCT MANAGEMENT SYSTEMS, INC.

PRESSURE POINT CONTROL TACTICS
PRACTICAL EXAM

Developed by:
BRUCE K. SIDDLE
(2-day PPCT Practical Exam)

NAME: Tina Rosler DATE: 1-9-13

AGENCY: CDOC

LOCATION OF TEST: CTA

SCORE: Pass

TESTED BY: Cordova

CERTIFICATION EXPIRATION DATE: 5-13

Superior *– demonstrated the acceptable skill*
Adequate *– demonstration was correct after verbal critique*
Fail *– failed to demonstrate acceptable technique after 2 critiques*

The following document is the Practical Exam for the Pressure Point Control Tactics System. I hereby understand that the passing criteria for this practical exam must meet a minimum of an adequate score for every component of every technique.

NAME: Tina M Rosler DATE: 1-9-13

LOCATION: CTA

I do hereby acknowledge that the aforesigned individual has passed the Practical Exam for the Pressure Point Control Tactics System, as the standards set by PPCT Management Systems, Inc.

Course Instructor's Name: [signature]

Instructor's Certification Rank: IT

Certification Expiration Date: 5-4-2014

AR Form 1500-01G (03/01/09)

DEPARTMENT OF CORRECTIONS P.P.C.T. PARTICIPATION FORM

Name: Tina Rosler Employee #: 18645 Job Classification: Nurse L

Pressure Point Control Tactics (PPCT) is a training course that requires a certain amount of physical strength and agility, and at times can be physically demanding. In order to successfully complete the course, each student must be able to fully participate in the following techniques:

1) Joint Manipulations
2) Striking & Taking Body Strikes: techniques include hands, arms, knees, and feet
3) Pressure Point Compression

Examples of physical agility and strength needed to participate are the ability to:

- Lift arms above head and kick as high as own waist
- Stabilize another person to accomplish a controlled takedown
- Use arms, palms of hands, shins, and feet to deliver blows
- Withstand impact (slow speed or with a safety bag) on own body from strikes / blows
- Swing a baton in a striking technique
- Rotate body in a 90 degrees with feet planted for striking with foot or using a defensive tactic
- Get down on one or both knees and up again, with multiple repetitions

Describe any medical restriction or condition which may impede participation in this program:

_____

_____

_____

_____

_____

I certify that I have read and understand the above information and that I am able to perform all of the above essential functions and Pressure Point Tactics techniques.

Tina M Rosler	Tina M Rosler	12/17/12
Print Student Name	Student Signature	Date
G. ARGYS		12-18-12
Print Instructor Name	Instructor Signature	Date

POST PROGRAM STATEMENT OF PHYSICAL WELL BEING

My signature below attests that I have not incurred any unreported injuries as a result of participating in Pressure Point Control Tactics training.

Tina M Rosler	1-9-13	1452
Student Signature	Date Signed	Time Signed

*In –service staff fill out emergency notification on the back side.

EMERGENCY NOTIFICATION

EMERGENCY NOTIFICATION PERSON: _____

RELATIONSHIP: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____ PAGER: _____

CELLULAR: _____ BUSINESS PHONE: _____

COLORADO DEPARTMENT OF CORRECTIONS
CHEMICAL AGENT TRAINING
PARTICIPATION FORM

01/28/2005 Revised

Rosler, Tina, M — (PLEASE PRINT) NAME LAST, FIRST, MI.

NURSE I — JOB CLASSIFICATION

LCF — FACILITY

Any CHEMICAL AGENT training may require that students be exposed to the agent.

The agent has been proven to be safe. However, there may be individual health conditions that could be affected by exposure to the agent.

Prior to participation in the course practicum, persons with physical limitations or restrictions will **provide a physician's release** stating that the named person is released and allowed to participate in the course.

Please check appropriate paragraph:

✓ **I do not have** any physical restrictions or limitations, which would prevent me from participating fully in the course.

____ **I do have** physical restrictions and/or limitations, which would prevent me from participating fully in this course.

/s/ 1-4-13 Tina M Rosler DATE:

THIS SECTION TO BE COMPLETED BY INSTRUCTOR OF RECORD:

The above named person **will** X **will not** ____ be participating in CHEMICAL AGENT TRAINING.

/s/ [signature] DATE: 01-4-13

ORIGINAL: Training File COPY: Participant

Department of Corrections

This is to certify that

Tina Rosler

successfully completed

Basic Training

presented by

Corrections Training Academy

of Cañon City, Colorado, on this *17th* day of ***January, 2013***

Brent Parker
Associate Director of Training

Tom Clements
Executive Director

AR Form 1450-36B (12/01/07)

COLORADO DEPARTMENT OF CORRECTIONS
DRUG DETERRENCE PROGRAM

CONSENT TO DRUG/ALCOHOL TESTING

I understand it is the policy of the CDOC to conduct drug and/or alcohol tests of newly hired, reinstated, rehired, certified CDOC employees, contract workers, contract to FTE, and volunteers for the purpose of detecting drug and/or alcohol abuse, and that one of the requirements for consideration for working at CDOC is the satisfactory passing of the CDOC drug and/or alcohol test(s).

For the purpose of being further considered for working at CDOC I hereby agree to submit to a drug and/or alcohol test.

I agree to take a drug and/or alcohol test whenever requested by the CDOC, and I understand that the taking of such tests is a condition of my continued work at CDOC.

I also give consent to the testing agency to release to the CDOC and other officially interested parties the results of my tests. I also give consent for the results of the drug and/or alcohol test to be reviewed by the Drug Deterrence Program and my appointing authority.

At this time I consent to a drug and/or alcohol test.

Tina M Roslee 12/17/12

(Signature) (Date)

Tina M Roslee

(Printed name)

DOC TRAINING ACADEMY INCIDENT REPORT

Date of Incident:	Time of Incident:	Work Area: LCF
Employee's Name (print): Tina Rosler	Staff ID# 18645	
Offender's Full Name (print): [redacted]	DOC Number:	
Offender's Facility:	Offender's Living Unit:	

(Complete, Concise, Clear, Correct. Provide Details: Who, What, Where, When, How, Why. Actions Taken)

Description of Incident:

[redacted]

To I.G.
B Parker
Sent to IG via Offender Services LCF 12/18/12 JC

Reporting Employee's Signature: Tina M Rosler	Time of Report:
	Date Report Written: 12/18/12
Shift Supervisor's Signature: B Parker	Date: 12-18-12

AR Form 1450-06A (07/01/06)

DEPARTMENT OF CORRECTIONS
PERMIT FOR OUTSIDE WORK

Name: Tina Rosler	DOC Emp #: 18645
Facility: LCF	Work Assignment: Nurse

I, Tina Rosler, have read and reviewed administrative regulation 1450-06 and understand that any approval for outside employment can be rescinded at any time by the Department.

Outside Employer: Pioneer Health Care Center	Job Title: (Charge Nurse)
Addr [redacted] Telephon [redacted]	Supervisor: Judi Cole, ADON
Schedule (Hours per day x days per week):	
Paid Position Salary $ 21.00/HR per (hour, day, week, month). Sunday 12/23, Sunday Jan 6, Sunday Jan 13th	Volunteer Position (No Compensation): Yes _____ No X
Military Reservist Pay: $ _____ **Rank:** _____ **Law Enforcement Pay: $** _____ **Rank:** _____	**Military Years of Service:** _____

List all specific job duties you may encounter in your outside employment. List any and all potential conflicts of interest as well as contact you may have with CDOC employees, contract workers, and/or other CDOC related situations (attach additional page if necessary). General Nursing duties in a Long Term Facility.

Attach copies of any certifications, training certificates, qualifications, etc., that qualify you for your position.

Select the appropriate category which best describes your outside employment:

1.____	Law Enforcement/Fire Service/Court Services/Security/Private Prisons (Armed/Unarmed)	7.____	Drivers/Delivery/Transport etc.
2. ✓	Medical Svcs/Therapy/Counseling/EMT/Coroners/Rehab	8.____	Administrative/Office/Clerical etc.
3.____	Military Reserves (All branches)	9.____	Labor/Contractor/Repair/Maint./Landscape/Painting/ Mechanic, etc.
4.____	Retail/Sales/Home Internet/Tupperware etc.	10.____	Farming/Ranching
5.____	Instructor/Teacher/Trainer/Coach/Mentor/Referee/Sporting Officials, etc.	11.____	Religious Groups/Community Organizations/Advisory Boards
6.____	Restaurant/Bar/Liquor/Hotel etc.	12.____	Miscellaneous (explain)

Explanation:

Print Names	Signature	Date	Approved	Denied
Name: Tina Rosler	Tina M Rosler	12/18/12		
Immediate Supervisor: G. ARGYS		12-18-12	✓	
Appointing Authority: B PARKER	B Parker	12-18-12	✓	
Director:				
Executive Director:				

Restrictions to outside employment per supervisors: _____

Forward original to the Office of Inspector General

27. You find an 11-year-old child who is blue and appears to not be breathing. Her friend states that she collapsed and stopped moving after playing the "pass out" choking game. You are the only trained rescuer. You should:

    a. Give 1 breath every 5 to 6 seconds for about 2 minutes.
    b. Perform 5 cycles of CPR at 30:2 and then send the friend to alert EMS.
    c. Leave the child to alert EMS and get an AED and have the friend perform CPR.
    d. Send the friend to alert EMS, open the airway, and immediately give 2 rescue breaths.

28. If a child's chest does not rise with the first rescue breath. You should:

    a. Give 15 compressions and then 2 breaths.
    b. Reposition the airway and give a second breath.
    c. Perform 5 abdominal thrusts and look in the airway.
    d. Start CPR if the pulse is less than 60 beats per minute.

29. The proper hand position for chest compression in a 7-year-old child is:

    a. Upper third of the breastbone, 1 hand.
    b. Lower most portion of the breastbone, two hands.
    c. Center of the chest, between the nipples, 1 or 2 hands.
    d. Two thumbs on the breastbone with the fingers encircling the chest.

30. While crawling around on the floor, an 11-month-old suddenly starts gagging and coughing forcefully. You should:

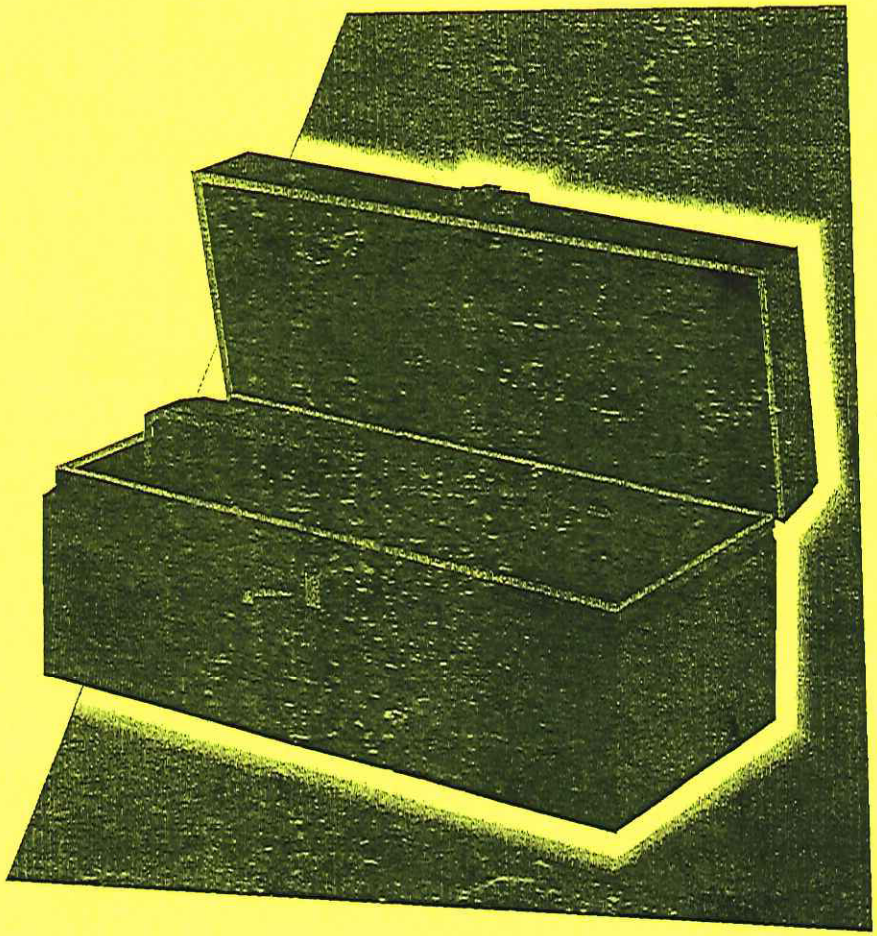
    a. Give forceful rescue breaths until the stomach visibly rises.
    b. Give 5 back blows and 5 chest thrusts until the object is expelled.
    c. Watch closely and be ready to take action if the symptoms worsen.
    d. Give abdominal thrusts in rapid sequence until the object is expelled.

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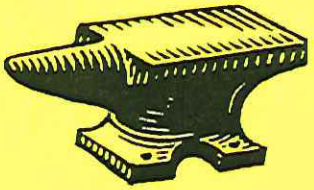
Tina Rosler
18645

Your Tool Box

1. Knowledge
2. Compassion
3. Honesty
4. Morality
5. Positive Attitude
6. Training
7. Consistant
8. Collaboration
9. Eagerness to learn
10. Adaptability



Tools For Your Tool Box

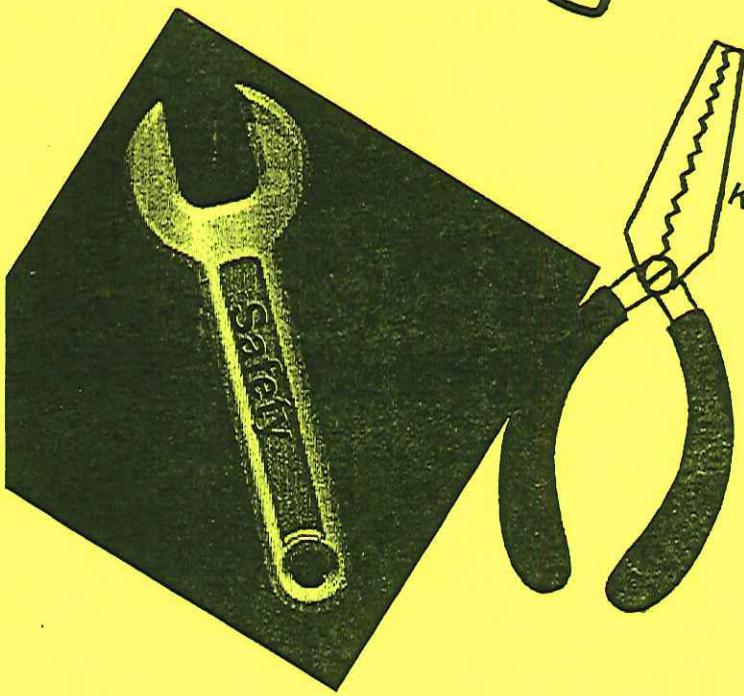


Policy

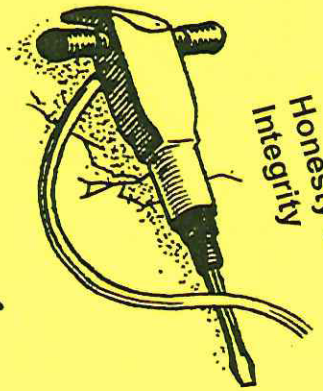


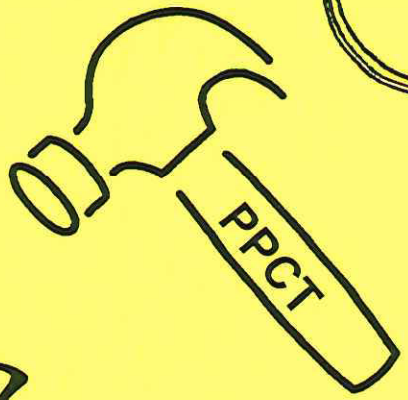












DEPARTMENT OF CORRECTIONS
POSITION DESCRIPTION

This position description is the official record of the assignment made to a position by the appointing authority. The supervisor is legally accountable for defining the responsibilities of the position. Employee participation is encouraged; however, THE SUPERVISOR IS RESPONSIBLE FOR THE ACCURATE COMPLETION OF THIS DOCUMENT. Do not alter or substitute this form. This document describes a position, not the employee's qualifications or performance.

I. POSITION IDENTIFICATION

Assignment Type: (•) Permanent ( ) Floater ( ) Substitute ( ) Temporary ( ) Non-Classified ( ) Transition ( ) Term-Limited

Agency Code: (•) CAA ( ) CBA ( ) CFC ( ) CFA

Position Number: 3180

Division or Equivalent: Headquarters

Work Unit or Equivalent: CLINICAL SERVICES - ADMINISTRATION

Business Address:

Street or P.O. Box #: 1250 ACADEMY PARK LOOP

City/State/Zip Code: COLORADO SPRINGS, CO 80910

Work Phone: (719)226-4525 **Ext:**

Class Code: H6G8XX

Official Class Title: MANAGEMENT

Working Title: Chief of Medical Services (works remotely part-time)

Coverage Designation: ( ) Covered (•) Not Covered

FLSA Status: Exempt

Shift Differential: 0 - No Pay Differential

Essential / Not-Essential: Not-Essential

Critical / Not-Critical: Not-Critical

Position Update Status: ( ) New Position ( ) Vacant Position (•) Occupied Position ( ) Update Records

II. WORK SETTING: Briefly summarize the basic purpose of the work unit by completing the following:
This work unit exists to...

Provide comprehensive professional health care in a secure correctional environment which maintains offender health status or prevents other than normal deterioration by ensuring unimpeded access to medical, dental, and mental health and rehabilitation services.

Briefly summarize the basic purpose of the position by completing the following:
This position exists to...

Monitor and direct the operations of Medical Services work units in all CDOC correctional facilities throughout the state through subordinate supervisors. This position assists in the development and implementation of policies and procedures, protocols and ensuring consistency of practice operationally across all correctional facilities.

III. DECISION MAKING AND RECOMMENDATIONS FOR APPROVAL

INSTRUCTIONS: Duty statements: Do not list temporary or occasional duties, past or future duties, or fill-in duties done in the absence of another employee. USE PRESENT TENSE ACTION VERBS, AVOID USING ACRONYMS AND UNCLEAR TERMS, SUCH AS HANDLES, ASSISTS, etc. Duty Statements should be written as a results-oriented statement detailing BY and HOW tasks are being performed. Example: Calculates and posts wages by computing hours worked.

a. Use the following scale for frequency: Daily, Weekly, Monthly, Quarterly, Annually
b. Fill in the percent time. Total of all duties must equal 100%.
c. List ESSENTIAL FUNCTIONS for duty statements.

1. **Duty Statement:** **Frequency:** Daily **Percent of Time:** 45 %

Responsible for multiple programs that provide state-wide medical services within the division of Clinical Services. Provide recommendations for operational needs of the clinics throughout the state. Administer programs through subordinate managers, for the overall operations for all facility clinical units in CDOC statewide. This involves daily problem solving with Regional Health Services Administrators related to staffing, offender clinical issues, and oversees developing staffing patterns and work units in order to deploy staff appropriately; involves implementing or developing changes for internal systems, processes and guidelines that are applied statewide by subordinate managers; position addresses novel and unique situations arising within clinical areas by creative solutions and individualized decision making processes. Coordinates clinical practice issues with the Chiefs of Service. Direct supervision of the Regional H.S.A's, Support Services Administrator, and indirect supervision of staff to include PMP and recommendations for corrective/disciplinary actions. Provide training to staff in area of responsibility to ensure compliance with applicable DOC policies and directives, career enhancement and promotional purposes, and to comply with DOC Personnel Rules and Regulations. Attend meetings on a regular basis with local civic and government agencies. Conduct meetings with management staff on a regular basis to ensure timely and appropriate dissemination of information. Available as a Relief Administrative Head 24 hours per day for emergencies and incidents. Promotes and is accountable for the safety and security of the clinical and correctional environment through conscientious observations, and sensitive item contraband control. Knowledgeable about life safety policies and procedures applicable to the assigned work unit. Informs supervisor of any violations of safety and security through the report writing process, attends training programs as assigned.

Physical:	**Mental:**	**Environmental:**	**Hazards:**
A , 7, 8, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	8	

2. **Duty Statement:** **Frequency:** Weekly **Percent of Time:** 25 %

Forecast budget expenditures, submit budget proposals; develop staffing patterns; negotiate contract and special project funding. Provide recommendations for operational needs. Consistently plan for future changes. Develop guidelines to comply with management objectives, strategic plan and agency policies and procedures. Develop applicable sections of the operating plan and strategic plan. Comply with legislative and administrative intent interpreting legislation and developing new and innovative programs. Identifies the need for changes in policies and procedures for Clinical Services; coordinates the formulation, implementation, and updating of clinical standards that conform to state laws, national and local standards (such as compliance and the Health Department standards) to be utilized by all CDOC correctional facilities and contracted private prisons. These documents are formulated by researching current applicable standards of practice, current literature, community standards of practice, other state's DOC practices, consultants' recommendations and input from clinical staff.

Physical:	Mental:	Environmental:	Hazards:
A , 7, 8, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	8	

3. **Duty Statement:** **Frequency:** Daily **Percent of Time:** 15 %

Develops position descriptions and performance plans and performs evaluations for subordinate managers; reviews performance plans and evaluations documented by the managers supervised by the Regional Health Services Administrators; involved in the hiring process for clinical management positions and other key clinical positions; involved in resolving miscellaneous personnel issues arising weekly working closely with Human Resources.

Physical:	Mental:	Environmental:	Hazards:
A , 7, 8, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	8	

4. **Duty Statement:** **Frequency:** Daily **Percent of Time:** 10 %

Liaison with other state agencies as assigned by the Deputy Director of Clinical and Correctional Services; identifies the need for teams or committees to resolve intra-agency or interagency issues; develops teams, leads teams, participates in or delegates leadership in the teams to resolve system issues or processes; participates or leads advisory, medical professional, interdisciplinary, planning, budget and other committees. Resource to supervisors on operational issues at higher level organizational meetings; work collaboratively with all Clinical Services administrators, facility staff, and Chiefs of Service on the provision of clinical services to all patient populations statewide.

Physical:	Mental:	Environmental:	Hazards:
A , 7, 8, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	8	

5. **Duty Statement:** **Frequency:** Daily **Percent of Time:** 5 %

Delegated responsibility for the administration of the operational component of the clinical services budget through Regional Health Services Administrators including contracted medical and nursing staff; assists in planning the annual budget and assesses monthly reports on spending at the clinical level through the Regional Health Services Administrators; recommends major purchases for medical equipment after researching the necessity.

Physical:	Mental:	Environmental:	Hazards:
A , 7, 8, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	8	

6. **What are some of the highest level decisions regularly made by the position without prior supervisory review? Examples of decisions should be related to duty statements. Indicate frequency by Daily, Weekly, Monthly, Quarterly, Annually.**

		Frequency
a.	Problem resolution of daily operational issues related to patient care such as movement between facilities, making policy decisions, changing operational systems and processes.	Daily
b.	Utilization of contract services for nursing and providers to supplement full-time employees; temporary redeployment of staff to ensure daily and weekly coverage while maintaining budget restraints.	Weekly
c.		
d.		
e.		

7. **List specific examples of recommendations this position is expected to make to higher levels for approval.**

Personnel requests / reallocation, staffing template changes.
Capital equipment and requests other than normal operating expenditures.
Abolishing a position.
Changing the budget or removing positions from vacancy savings.

IV. COMPLEXITY

a. The complexity factor is evaluated based on the nature of judgment used relative to available guidelines, including written or verbal instructions, procedures, policies, regulations or references; precedents and practices; or principles, concepts, models, theories and techniques of a recognized profession.
Provide **specific** examples of available guidance and related judgment currently exercised that illustrates the following:
- Are related to the duty statements described in the job description,
- Are regular and on-going, and
- Show alternatives and how they are selected.

DOC Administrative Regulations, Clinical Standards and Procedures for Providers, Clinical Standards and Procedures for Administrators, DOC Personnel Manual, accreditation bodies compliance standards, State/Federal Statutes, State licensing/credentialing and Regulatory Board standards, Provider and Offender Schedule of Covered Medical Services, Nurse Practice Act, DOC mission Statement, US Department of Justice Publication, Practice in Correctional Facilities, American Nurses' Association's "Scope of Nursing Practice in Correctional Facilities."

This position makes recommendations on health care policy and procedures.

b. **Check the level at which the position is required to exercise analysis and judgment within available guidelines.**

○ Applies established guidelines such as verbal or written instructions, standard procedures.
○ Studies how information fits together. Applies rules, regulations, techniques, methods, and/or established procedures/practices.
○ Evaluates theories, concepts, and principles. Tailors guidelines to develop a different approach or plan when existing guidelines are inadequate. Uses precedents, practices, theories, concepts and models of subject area.
◉ Develops guidelines to implement programs that maintain agency (DOC) mission. Uses policy directives, management principles and theories and legislative intent.

c. **Give an example from the past 12 months of the typical problem/challenge the position solved on its own. How often? (Must be part of an on-going assignment.) (Not applicable for new positions.)**

n/a

V. PURPOSE OF CONTACT

The purpose of contact factor is evaluated based on the position's ongoing communications, verbal and written, with others. These communications may be for one or more of the following reasons:

☑ To exchange information/facts.
☐ To interview or investigate.
☐ To secure regulatory compliance.
☑ To advise/counsel on behaviors/actions.
☑ To clarify understanding or teach others.
☐ To restrain or arrest.
☐ To negotiate as an agency spokesperson.
☐ To officially defend an agency's position.
☑ To authorize medical treatment protocols.
☐ To arbitrate differences, as the official agency representative.

Please provide specific examples that show the purpose of this position's contacts made on a regular basis. These examples should not include supervisory contacts. Remember, the purpose or nature of the communications is important, NOT who the position contacts.

This position communicates verbally and in writing with subordinate staff, Clinical Services administrators, and executive staff regarding operational issues and policy/procedures.

VI. LINE STAFF AUTHORITY

What is the position's formal, direct supervisory responsibility? 1 Full Time Equivalent (FTE) = 2080 hours/year or 40 hours/week/52 weeks. Include only positions filled by a wage earner who has an employee/employer relationship, i.e., hire, fire, evaluate and pay. May list Interns and Contractors; however, the line staff factor will not be considered at a higher level.

a. ☐ Individual Contributor

☐ Work Leader over others,	**# FTE:**	**# Inmates:**
☑ Supervisor over others,	**# FTE:** 9	**# Inmates:**
☐ Project Manager,	**# FTE:**	**# Units:**

☐ Staff Authority (delegated authority from management to recommend direction of policy and programs in a specialized area for DOC). Complete "b." below.
☐ Senior Authority (delegated authority influence is through direct impact beyond DOC). Complete "b." below.
☐ Contract staff (non FTE)
☐ Interns (non FTE)

b. **Explain why the position should be recognized as having Staff Authority, Senior Authority or Leading Authority.**

c. **Provide an explanation of reporting relationships, chain of command, leadwork or "charge" person assignment. Explanation must reflect position numbers and FTE supervised.**

This position is supervised by 3744. This position supervises positions 3813, 26051, 1498, 10003, 6216, 6303, 8225, 31490, and 24197.

VII. TO BE COMPLETED BY THE SUPERVISOR ONLY IF CHANGE IN DUTIES

a. **Were the duties assigned to another position(s)?** ○ Yes ◉ No

If Yes, list the position number(s).

b. **What specific duties were added or deleted since the last evaluation?**

c. **Have you submitted an updated position description on the other position?** ○ Yes ○ No N/A
If No, explain the delay.

d. **If no duty changes have occurred, explain why an evaluation is requested.**

e. **What do you think the proper class for this position should be and why?**

VIII. SPECIAL ENTRY REQUIREMENTS

Do you think this position requires a special qualification that differs from other positions in the class?
◉ Yes ○ No

a. **Please describe the special qualification you believe is required (This will be evaluated by a human resources professional). Categories for qualifications include: Job-related formal courses, legal requirements, experiences or skills, equipment, and unusual travel demands. (Do not repeat minimum qualifications required for this class.)**

Preferred licensure in nursing (RN, APN, APRN).

Position must be experienced and/or licensed and able to demonstrate proven leadership and operational knowledge of healthcare management in all populations; must be knowledgeable in public health, internal medicine, family/population care with a global perspective.

b. **Why can the qualification NOT be obtained through training during the probationary/trial service period?**

Licensure/experience needed at the time of hire.

c. **For purposes of the Drug Free Workplace Act of 1988 and the Colorado Substance Abuse Policy, is the position safety-related? Safety-related positions are defined as those involving safety and health, state security, or other responsibilities involving a high degree of trust and confidence.**
◉ Yes ○ No

d. **Do the position's duties and assignments require travel on behalf of the Department? (If Yes, a valid Colorado driver's license or CDL is required at all times.)**
◉ Yes ○ No

e. **Is the position required to physically restrain and/or arrest others as a peace officer or other authority enforcing the law?**
○ Yes ◉ No
(If Yes, explain.)

CATEGORIES FOR ADA ESSENTIAL FUNCTIONS

The below categories reflect that of each Duty Statement according to the Position Description Questionnaire. Each category is selected based on the absence of it adversely affecting either job performance or reasons of safety to oneself and/or others.

I. PHYSICAL DEMANDS

A. SEDENTARY - Exert up to 10 lbs. of force occasionally and/or a negligible amount of force frequently or constantly to lift, carry, push, pull, or otherwise move objects, including the human body. involves sitting most of the time, but may involve walking or standing for brief periods of time.

7. REACHING - Extending hand(s) and arm(s) in any direction.

8. HANDLING - Seizing, holding, grasping, turning, or otherwise working with hand or hands. Fingers are involved only to the extent that they are an extension of the hand.

9. FINGERING - Picking, pinching, or otherwise working primarily with fingers rather than with the whole hand or arm as in handling.

10. FEELING - Perceiving attributes of objects, such as size, shape, temperature, or texture, by touching with skin, particularly that of fingertips.

11. TALKING - Expressing or exchanging ideas by means of the spoken word. Talking is important for those activities in which workers must impart oral information to clients or to the public, and in those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.

12. HEARING - perceiving the nature of sounds. Used for those activities which require ability to receive detailed information through oral communication, and to make fine discriminations in sounds, such as when making fine adjustments on running engines.

14. NEAR ACUITY - Clarity of vision at 20 inches or less. Use this factor when special and minute accuracy is demanded.

15. FAR ACUITY - Clarity of vision at 20 feet or more. Use this factor when visual efficiency in terms of far acuity is required in day and night/dark conditions.

16. DEPTH PERCEPTION - Three-dimensional vision. Ability to judge distances and spatial relationships so as to see objects where and as they actually are.

17. ACCOMMODATION - Adjustment of lens of eye to bring an object into sharp focus. Use this factor when requiring near point work at varying distances.

18. COLOR VISION - Ability to identify and distinguish colors.

19. FIELD OF VISION - Observing an area that can be seen up and down or to right or left while eyes are fixed on a given point. Use this factor when job performance requires seeing a large area while keeping the eyes fixed.

II. MENTAL FUNCTIONS

1. COMPARING - Judging the readily observable functional, structural, or compositional characteristics (whether similar to or divergent from obvious standards) of data, people, or things.

2. COPYING - Transcribing, entering, or posting data.

3. COMPUTING - Performing arithmetic operations and reporting on and/or carrying out a prescribed action in relation to them.

4. COMPILING - Gathering, collating, or classifying information about data, people, or things. Reporting and/or carrying out a prescribed action in relation to the evaluation is frequently involved.

5. ANALYZING - Examining and evaluating data. Presenting alternative actions in relation to the evaluation is frequently involved.

6. COORDINATING - Determining time, place, and sequence of operations or action to be taken on the basis of analysis of data. May include prioritizing multiple responsibilities and/or accomplishing them simultaneously.

7. SYNTHESIZING - To combine or integrate data to discover facts and/or develop knowledge or creative concepts and/or interpretations.

8. NEGOTIATING - Exchanging ideas, information, and opinions with others to formulate policies and programs and/or jointly arrive at decisions, conclusions, solutions, or solve disputes.

9. COMMUNICATING - Talking with and/or listening to and/or signaling people to convey or exchange information; includes giving/receiving assignments and/or directions.

10. INSTRUCTING - Teaching subject matter to others, or training others through explanation, demonstration, and supervised practice; or making recommendations on the basis of technical disciplines.

11. INTERPERSONAL SKILLS/BEHAVIORS - Dealing with individuals with a range of moods and behaviors in a tactful, congenial, personal manner so as not to alienate or antagonize them.

III. ENVIRONMENTAL CONDITIONS & PHYSICAL SURROUNDINGS

8. CONFINED/RESTRICTED WORKING ENVIRONMENT - Work is performed in a closed or locked facility providing safety and security for clients, inmates, or fellow workers.

IV. HAZARDS

DEPARTMENT OF CORRECTIONS
POSITION DESCRIPTION ASSIGNMENT PAGE
Position Number:3180 | **Agency Code:**CAA

Employee

I certify that, to the best of my knowledge, the duties and responsibilities assigned to this position are accurate and complete.
I acknowledge that this position excludes me from any and all participation in Employee Partnerships.

TINA CULLYFORD #18645
No Signature at this time

Supervisor

As I am legally responsible for the assignment of duties to subject position, I understand that I am responsible for the accuracy of this document. I certify that, to the best of my knowledge, this document is an accurate and complete representation of the position.

LEONARD WOODSON #14729
No Signature at this time

Reviewer

As I am legally responsible for the assignment of duties to subject position, I understand that I am responsible for the accuracy of this document. I certify that, to the best of my knowledge, this document is an accurate and complete representation of the position.

LACY MONDAY #31999
No Signature at this time

Employment Services and HRMES Admin Use Only

On Call: -Select-

Additional Notes:

2048 characters left

Save Close

COLORADO
Department of Corrections
Office of Clinical & Correctional Services
1250 Academy Park Loop
Colorado Springs, CO 80910

MEMORANDUM

Date:07/22/2025

To: Cullyford Tina, 18645

From: Leonard Woodson III - HQ

Subject: Promotion Memo

Facility: Headquarters

New Classification & Salary Range: Chief of Medical Services

$8810 - 14097/month

Effective Date: 8/1/2025

New Salary: $11682//month

New Supervisor: Leonard Woodson III

New Position Number: 3180

Congratulations on your new appointment! We look forward to the contributions that you will make to our team in the next level of your correctional career.

You may contact your new supervisor listed above for information about your new position and work schedule. If you have any concerns with this information you must contact your new supervisor within 5 business days.

Please note that PERA Member Contribution Rates may be affected by your change in position. For the purposes of PERA benefits, "Safety Officers" include CO I - IV ONLY (hired on/after 1/1/2020) and are eligible for increased PERA benefits.

You can find more information at copera.org. If you are moving out of or into a Correctional Officer I-IV position, your PERA benefits and eligible retirement date may be affected and your contributions will change.

My signature acknowledges my agreement and acceptance with this new appointment.

Tina M Cullyford

Employee Signature

CC: doc_hrrecords@state.co.us
HR Analyst

EMPLOYEE INFORMATION:

Employee Badge # 18645	**Employee Name** CULLYFORD, TINA MARIE	**SSN #** ###-##-2457	**PUF ID** 151232
EID 997087514	**Date of Birth** 08/05/1973	**Ethnicity** W	**Gender** F
Home Address [redacted]	**Home City** ENGLEWOOD	**Home State** [redacted]	**Home Zip** [redacted]
Home Phone [redacted]	**Mailing Address** ,	**Education Level** Bachelor's Degree	**Education Year**
Veteran Type	**Net Active Service**	**Military Status**	**Military D/C Date**
Adjusted Service Date 12/17/2012	**Agency 1 Date (DOC)** 12/17/2012	**Agency 2 Date (Facility)** 09/15/2020	**Service Start Date (State)** 12/17/2012
Accruals Date 12/17/2012	**Cert Status** 5	**Current/Previous Salary** 10808.77	**New Salary** 11682.00

GENERAL INFORMATION:

Effective Date 08/01/2025	**CPPS Action** PROMOTION - 06 P	**Agency Name** CORRECTIONS	**Action Record #** 00000-00

CURRENT POSITION INFORMATION:

Position # 6216	**Position Agency** CAA	**Class Code** C7C7XX	**Class Title** HEALTH PROFESSIONAL VII
Supervisor Badge# 18645	**Supervisor Name** CULLYFORD, TINA MARIE	**Sup. Position #** 3180	**Supervisor Agency** CAA

NEW POSITION INFORMATION:

Position # 3180	**Position Agency** CAA	**Class Code** H6G8XX	**Class Title** MANAGEMENT
Supervisor Badge # 14729	**Supervisor Name** WOODSON, LEONARD E	**Sup. Position #** 3744	**Supervisor Agency** CAA
Grade H24	**Funding Cert Name** CAAA MED MGMT	**Fund Percent** GENERAL FUND	**Pay Differential** 0E
City Code 201	**Physical Location** 10 - CLIN SVCS	**Work Location** Hybrid	**Expiration Date**
Facility HQ	**Locator Code** 10 - CLIN SVCS	**Work Unit** CLINICAL SERVICES - ADMINISTRATION	
Business Street 1250 ACADEMY PARK LOOP	**Business PO Box**	**Business City / Zip** COLORADO SPRINGS / 80910	**Business Phone** (719) 226-4541

JUSTIFICATION:

TRIAL SERVICE PROMOTION OF HEALTH PRO VII $10,808.77 TO MGMT-Clinical SERVICES $11,682 HQ TIS -0. FLSA Exempt, CO WINS Not Covered,0 -No Pay Differential

HR ONLY:

Authorized By Personnel TEGAN BREHM - LCA 471	**Appointing Authority** CLIN SVCS - LEONARD WOODSON	**Date Entered** 08/14/2025	**CPPS Entry Date**

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Requisition #	HQ 3108 H6G8XX MGMT 7.2025	Job Type	**Full Time**
Requisition Title	**Chief of Medical Services - Hybrid**	Vacancies	**1**
Working Title	**Chief of Medical Services - Hybrid**	HR Analyst	**Hibpshman, Stacey**
Department	**Department of Corrections**	HR Analyst Phone	**719-723-3973**
Division	**Clinical and Correctional Services**	HR Liaison	**Hibpshman, Stacey**
Positions		HR Liaison Phone	**719-723-3973**
Comments:			

Name	Phone	Status	Disposition	Person ID	Notices
[redacted]	[redacted]				
Cullyford, Tina M [redacted]					

7.11.2025 - DO NOT MAKE JOB OFFER WITHOUT BACKGROUND CLEARANCE.

After conducting interviews, use the codes below to indicate outcome. Write the appropriate code next to the candidate's name. Provide position #, effective date and appointing authority signature in space below and return form to HR Analyst listed on this form.

AP - Appointed; NS - Not Selected; IN - Did not appear for interview; NI- Not interested in state employment; DP - Declined Position; NR - No Response; CE - Conditions of Employment

Position 3180 Name: Tina Cullyford Effective Date: 08/01/2025 Salary $11682

Coverage Designation: NON - COVERED

Appointing Authority Signature: _____