



Southwest Health and Human Services
 Board Agenda
 Wednesday, February 20, 2013
 Government Center, 2nd Floor
 Marshall
 9:00 a.m.

HUMAN SERVICES

- A. Call to order
- B. Pledge of Allegiance
- C. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 01/16/13 board minutes

D. Financial

E. Caseload

	01/13	12/12	11/12
Social Service	3369	2530	2559
Out-of-Home Placements	116	66	64
Income Maintenance	10,838	7185	7169
Child Support Cases	3870	2419	2418
Child Support Collections	\$814,711	\$520,981	\$528,127

F. Decision Items

- 1.
- 2.

G. Discussion/Information

- 1. Success story
- 2.

COMMUNITY HEALTH

- H. Call to order
- I. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 01/16/13 board minutes
- J. Financial
- K. Caseload

	01/13	12/12	11/12
WIC		1825	1898
Family Home Visiting	44	31	35
PCA Assessments	29	17	10
Managed Care	198	173	162
Dental Varnishing	76	49	100
- L. Decision Items
 - 1. Appointment (alternate) to SCHSAC
 - 2. FP&L
 - 3.
- M. Discussion/Information
 - 1. Video Conference – Orientation to Public Health
 - 2. New Horizons Crisis Center – Relationship Series Program

GOVERNING BOARD

- N. Call to order
- O. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 01/16/13 board minutes
 - 4. Approval of 02/01/13 special board meeting minutes
- P. Financial

GOVERNING BOARD (cont.)

Q. Decision Items

1. Elisha Wolfman, Social Worker (CPS), resignation, effective 02/01/13
2. Chelsea Trump, Social Worker (CPS), resignation, effective 02/15/13
3. Kristin Malin, promotional appointment – Social Worker (CPS) to Social Worker Team Leader, 6 month probationary period, \$44,214.00 annual, effective 01/28/13
4. Dawn Anderson, Office Support Specialist, completion of 12 month probationary period, no salary increase, effective 03/08/13
5. Stacy Jorgensen, Social Services Supervisor, completion of 6 month probationary period, no salary increase, effective 03/10/13
6. Stacey Longtin, Social Services Supervisor, completion of 6 month probationary period, no salary increase, effective 03/10/13
7. Rebecca McMahon, promotional appointment – Office Support Specialist to Eligibility Worker, \$16.08 per hour, effective 03/04/13
8. Deb Moon, reclassification – Case Aide to Eligibility Worker, 6 month probationary period, \$20.71 per hour, effective 02/25/13
9. Request for Office Support Specialist
10. Request for Social Workers (CPS)
11. Request for Public Health Educator
12. Annual approval for staff vacancies
13. Public Health Labor Agreement – Local 1687
14. Cafeteria contribution for non-union staff
15. Contracts
16. Donation
17. Need Determination – ECCO DAC
18. Request for agency vehicles
19. IT equipment request
20. Families Project appointment
21. March board meeting
- 22.
- 23.

R. Discussion/Information

1. Quality Improvement Report for 2012 & Quality Improvement Plan for 2013
2. 2014 health insurance
- 3.

S. Adjournment

SOUTHWEST HEALTH & HUMAN SERVICES

Ivanhoe, Marshall, Slayton, Pipestone, Redwood and Luverne Offices

SUMMARY OF FINANCIAL ACCOUNTS REPORT

For the Month Ending: **January 31, 2013**

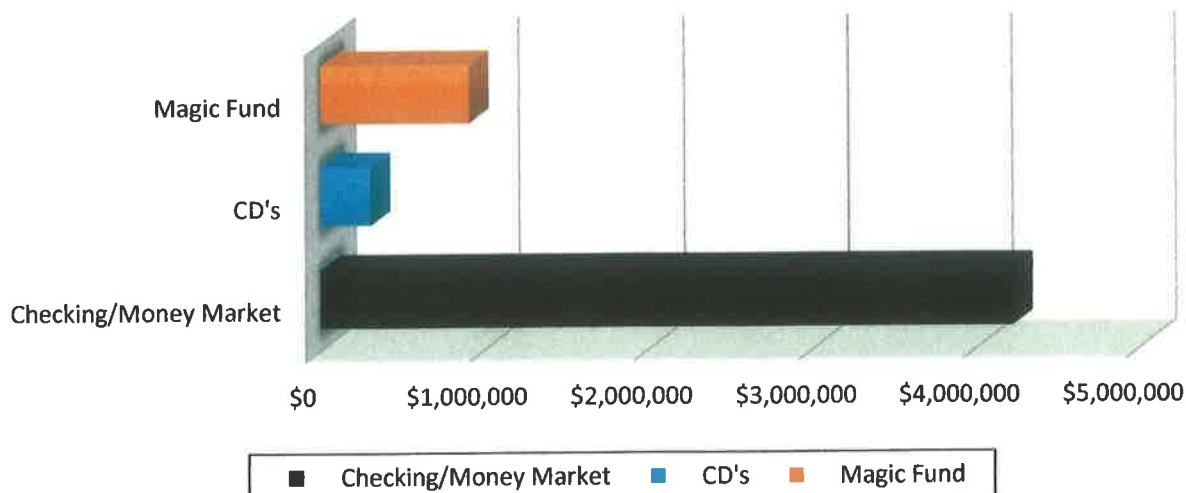
*** Income Maintenance * Social Services * Information Technology * Health ***

Description	Month	Running Balance
BEGINNING BALANCE		\$5,735,430
RECEIPTS		
Monthly Receipts	1,204,160	
County Contribution	240,164	
Interest on Investments	302	
TOTAL MONTHLY RECEIPTS		1,444,626
DISBURSEMENTS		
Monthly Disbursements	2,062,815	
TOTAL MONTHLY DISBURSEMENTS		2,062,815
ENDING BALANCE		\$5,117,241

REVENUE

<i>Checking/Money Market</i>	\$4,212,832	Average Balance last two years \$4,721,832
<i>CD's</i>	\$300,000	
<i>Magic Fund</i>	\$904,409	
<i>(January 2013 - yield .05%)</i>		
ENDING BALANCE		\$5,417,241

REVENUE DESIGNATION





Southwest Health And Human Services

As of 01/2013

TREASURER'S CASH TRIAL BALANCE

KJD 2/5/13 8:38AM

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
1	Health Services Fund			
	Receipts	208,981.64	208,981.64	
	Disbursements	64,619.02-	64,619.02-	
	Payroll	153,673.84-	153,673.84-	
	Fund Total	9,311.22-	9,311.22-	1,108,902.02
5	Human Services Fund			
	Receipts	206,751.82	206,751.82	
	Disbursements	223,625.84-	223,625.84-	
	Payroll	643.50-	643.50-	
	Dept Total	17,517.52-	17,517.52-	289,452.78
5	Human Services Fund			
	Receipts	320,513.96	320,513.96	
	Disbursements	280,881.84-	280,881.84-	
	Payroll	251,312.50-	251,312.50-	
	Dept Total	211,680.38-	211,680.38-	1,675,725.81-
5	Human Services Fund			
	Receipts	28,047.82	28,047.82	
	Disbursements	124,877.53-	124,877.53-	
	Payroll	372,631.42-	372,631.42-	
	Dept Total	469,461.13-	469,461.13-	24,709,889.05-
5	Human Services Fund			
	Receipts	543,296.20	543,296.20	
	Disbursements	217,475.50-	217,475.50-	
	SSIS	301,790.86-	301,790.86-	
	Dept Total	24,029.84	24,029.84	31,308,961.96
5	Human Services Fund			
	Information Systems			



Southwest Health And Human Services

As of 01/2013

KJD
2/5/13 8:38AM

TREASURER'S CASH TRIAL BALANCE

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
	1,408,795.11-			
	Receipts	9,604.75	9,604.75	
	Disbursements	1,033.38-	1,033.38-	
	Payroll	17,470.79-	17,470.79-	
	Dept Total	8,899.42-	8,899.42-	1,417,694.53-
5	Human Services Fund			
		471	LCTS Collaborative Agency	
		0.00		
	Disbursements	100.00-	100.00-	
	Dept Total	100.00-	100.00-	100.00-
	Fund Total	683,628.61-	683,628.61-	3,795,005.35
71	LCTS Lyon Murray Collaborative Fund			
		471	LCTS Collaborative Agency	
		73,752.45		
	Disbursements	23,616.00-	23,616.00-	
	Dept Total	23,616.00-	23,616.00-	50,136.45
	Fund Total	23,616.00-	23,616.00-	50,136.45
73	LCTS Rock Pipestone Collaborative Fund			
		471	LCTS Collaborative Agency	
		64,830.53		
	Receipts	300.00	300.00	
	Disbursements	11,788.02-	11,788.02-	
	Dept Total	11,488.02-	11,488.02-	53,342.51
	Fund Total	11,488.02-	11,488.02-	53,342.51
75	Redwood LCTS Collaborative			
		471	LCTS Collaborative Agency	
		0.00		
	Receipts	127,130.46	127,130.46	
	Disbursements	17,275.42-	17,275.42-	
	Dept Total	109,855.04	109,855.04	109,855.04
	Fund Total	109,855.04	109,855.04	109,855.04

Southwest Health And Human Services

As of 01/2013

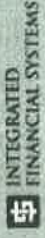
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KJD
2/5/13

TREASURER'S CASH TRIAL BALANCE

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
All Funds	5,735,430.18			
Receipts		1,444,626.65	1,444,626.65	
Disbursements		965,292.55-	965,292.55-	
SSIS		301,790.86-	301,790.86-	
Payroll		795,732.05-	795,732.05-	
Total		618,188.81-	618,188.81-	5,117,241.37

Southwest Health And Human Services



NJW
2/8/13 2:19PM
1 Health Services Fund

TRIAL BALANCE REPORT As of 01/2013

Report Basis: Cash

<u>Account</u>	<u>Beginning Balance</u>	<u>Actual This-Month</u>	<u>Actual Year-To-Date</u>	<u>Current Balance</u>
1001 Cash	1,118,213.24	9,311.22-	9,311.22-	1,108,902.02
1090 Investments	300,000.00	0.00	0.00	300,000.00
Total Assets	1,418,213.24	9,311.22-	9,311.22-	1,408,902.02
--- Liabilities and Balance-----				
Total Liabilities	0.00	0.00	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	1,418,213.24-	0.00	0.00	1,418,213.24-
2885 Revenue Control	0.00	207,226.54-	207,226.54-	207,226.54-
2887 Expenditure Control	0.00	216,537.76	216,537.76	216,537.76
Total Fund Balance	1,418,213.24-	9,311.22	9,311.22	1,408,902.02-
Total Liabilities and Balance	1,418,213.24-	9,311.22	9,311.22	1,408,902.02-
410 General Administration				
--- Liabilities and Balance-----				
Total Liabilities	0.00	0.00	0.00	0.00
Total Liabilities and Balance	0.00	0.00	0.00	0.00
1 Health Services Fund	0.00	0.00	0.00	0.00

Southwest Health And Human Services



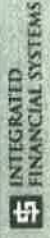
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STATEMENT OF REVENUES AND EXPENDITURES

As Of 01/2013 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2013 BUDGET	% OF BUDG	% OF YEAR
FUND 1 HEALTH SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	21,931.50-	21,931.50-	307,726.00-	7	8
STATE REVENUES	69,354.02-	69,354.02-	1,226,510.00-	6	8
FEDERAL REVENUES	62,499.44-	62,499.44-	891,380.00-	7	8
FEES	50,591.69-	50,591.69-	445,480.00-	11	8
EARNINGS ON INVESTMENTS	302.47-	302.47-	0.00	0	8
MISCELLANEOUS REVENUE	2,547.42-	2,547.42-	178,500.00-	1	8
TOTAL REVENUES	207,226.54-	207,226.54-	3,049,596.00-	7	8
EXPENDITURES					
PROGRAM EXPENDITURES	0.00	0.00	0.00	0	8
PAYROLL AND BENEFITS	153,673.84	153,673.84	2,245,694.00	7	8
OTHER EXPENDITURES	62,863.92	62,863.92	803,902.00	8	8
TOTAL EXPENDITURES	216,537.76	216,537.76	3,049,596.00	7	8

Southwest Health And Human Services



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STATEMENT OF REVENUES AND EXPENDITURES

As Of 01/2013 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2013 BUDGET	% OF BUDG	% OF YEAR
FUND 5 HUMAN SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	218,233.82-	218,233.82-	4,618,381.00-	5	8
STATE REVENUES	139,772.47-	139,772.47-	8,287,416.00-	2	8
FEDERAL REVENUES	342,125.02-	342,125.02-	6,181,865.00-	6	8
FEES	103,580.76-	103,580.76-	1,135,250.00-	9	8
EARNINGS ON INVESTMENTS	0.00	0.00	1,300.00-	0	8
MISCELLANEOUS REVENUE	52,943.53-	52,943.53-	1,436,067.00-	4	8
TOTAL REVENUES	856,655.60-	856,655.60-	21,660,279.00-	4	8
EXPENDITURES					
PROGRAM EXPENDITURES	662,277.41	662,277.41	9,322,653.00	7	8
PAYROLL AND BENEFITS	652,157.57	652,157.57	10,202,186.00	6	8
OTHER EXPENDITURES	220,922.48	220,922.48	2,135,440.00	10	8
TOTAL EXPENDITURES	1,535,357.46	1,535,357.46	21,660,279.00	7	8

SOUTHWEST HEALTH AND HUMAN SERVICES CHECK REGISTER

YEAR 2013 MONTH January PAGE 1 OF 2

DATES	CHECK/RECEIPTS #'S	DESC.	DEPOSITS	CHECKS	BALANCE
	<u>BALANCE FORWARD</u>				5,735,430.18
1/4/13	76554 x	Dep.	48,717.22		
1/4/13	76555 x	Dep.	72,117.80		
1-7-13	26083-26181	Disb		342,855.57	
1-7-13	26182-26210	Disb		71,067.30	
1-7-13	26211-26234	Disb		41,580.24	
1-7-13	26235-26240	Disb		3512.66	
1/11/13	76624 EFT x	Dep.	8,669.32		
1/11/13	76625 x	Dep.	92,659.38		
1/14/13	26241-26248	Disb		9937.79	
1/14/13	26249-26281	Disb		63,759.35	
1/14/13	26282-26338	Disb		152,117.82	
1/14/13	26339-26453	Disb		92,621.04	
1/15/13	26454-26464	Disb		2,091.19	
1/8/13	76585 x	Dep	110,871.00		
1/8/13	76586 x	Dep	37,595.98		
1/8/13	76587 x	Dep	302.47		
1/15/13	76692 x	Dep	169,400.54		
1/15/13	76693 x	Dep	28,165.80		
1/11/13	5761-5775	Payroll		312,711.36	
1/17/13	76723 x	Dep.	127,130.46		
1/18/13	26465-26721	Disb		59,706.62	
1/18/13	76765 x	Dep	158,918.40		
1/18/13	76766 x	Dep	57,797.47		
1/22/13	26722-26748	Disb		25,009.33	
1/22/13	26749-26776	Disb		57,632.73	
1/22/13	26777-26781	Disb		2,628.79	
1/22/13	26782-26918	Disb		126,821.37	

SOUTHWEST HEALTH AND HUMAN SERVICES CHECK REGISTER

YEAR 2013 MONTH January PAGE 2 OF 2

DATES	CHECK/RECEIPTS #'S	DESC.	DEPOSITS	CHECKS	BALANCE
	<u>BALANCE FORWARD</u>				
1/22/13	76785	x Dep.	661.12		
1/25/13	5776-5796	Payroll		483,020.69	
1/25/13	76831	x Dep	1,325.43		
1/25/13	76832	x Dep	204,997.82		
1/28/13	26919-26936	Disb		12,016.17	
1/28/13	26937-26951	Disb		10,980.98	
1/28/13	26952-26955	Disb		16,835.40	
1/28/13	26956-27046	Disb		95,457.25	
1/31/13	27047-27052	Disb		46562.65	
1/31/13	27053-27112	Disb		33154.16	
1/31/13	76924	x Dep.	35,363.18		
1/31/13	76925 EFT	Dep.	178,062.07		
1/29/13	76877	x Dep	3173.39		
1/29/13	76878	y Dep	129,782.26		
1/18/13	9088	sales + usetax		735.00	
1/28/13	76856	svc chg	(83.40)		
1/29/13		refund svc chg	83.40		
			1,430,711.11	2,012,815.46	5,103,325.83
1/31/13	Redwood/Pipestone MMIS 1523 (1/29/13)	Dep	13,915.54		
			1,444,626.65	2,022,815.46	5,117,241.37
					OK 2-5-13 KD



**Minnesota Department of Health
Orientation to Public Health: A video conference for new local
elected officials
Returning local elected officials also welcome!**

**Monday, March 18, 2013
1:00 to 3:00 p.m.**

The Minnesota Department of Health (MDH) is pleased to present a live, two-hour, video conference orientation on public health for new county commissioners and other local elected officials (i.e., city council members). Returning local elected officials and county administrators may also be interested in participating and are welcome to attend.

This interactive video conference will feature Commissioner of Health, Edward Ehlinger, MD. Also speaking will be Debra Burns, Director, MDH Office of Performance Improvement, and County Commissioner William Groskreutz (Faribault County). The speakers will highlight how state and local public health officials work together in real-life situations. Local elected officials will have an opportunity to ask questions of all the speakers.

The orientation will include:

- An overview of Minnesota's public health system, including the State Community Health Services Advisory Committee
- A description of county and state roles and responsibilities for public health, including public health governance
- Examples of public health in action throughout Minnesota
- Time for Q & A

New Horizons Crisis Center: Relationship Series Program Narrative Report, July 1 – December 31, 2012

Relationship Series Presentations

The relationship series program was presented to 312 students the fall 2012 semester. The Table below lists schools presented to, dates, and student numbers.

School	County	Date(s)	Students per Day
Pipestone	Pipestone	September 10-14	43
Marshall	Lyon	September 24-27	102
Marshall	Lyon	October 22 – 25	23
Edgerton	Pipestone	November 5-9	25
Murray County Central	Murray	November 16; November 19-21	49
Lakeview	Lyon	December 11-14; December 17-20	70

RECEIVED

Staff Change

Elaine Zarzana was hired when New Horizons Crisis Center first received funding from Southwest Health and Human Services in 2010. On September 28, 2012, Elaine Zarzana resigned as the Relationship Series Program Director to pursue other job and life opportunities. A current staff person, Jessica Van Iperen, assumed the Relationship Series Program Director position. Jessica had a change of job duties at New Horizons based on funding for the program she coordinates, the Lyon County Sexual Assault Multidisciplinary Action Response Team (SMART). Her FTE for SMART is scheduled to go from 1.0 FTE to .25 FTE effective January 1, 2013.

Jessica has been employed by New Horizons Crisis Center since 2009. She has assisted as a co-presenter for the relationship series in Redwood County and worked with youth to provide presentations and group sessions at Marshall East Campus Learning Alternative. Elaine gave a four-week notice to New Horizons, which allowed a month training period for Jessica. Jessica was able to shadow Elaine when she presented to classes at Pipestone Public Schools and worked one-on-one with Elaine during the training period.

Since Jessica was not scheduled to transition from 1.0 FTE to .25 FTE until January 1, 2013, other New Horizons Crisis Center staff assisted with presentations this fall 2012 semester. The staff transition was as smooth as possible. We do not anticipate any schools “missing” the relationship series programming for the 2012/2013 school year. If existing staff had not assumed these job duties, it is possible that not all schools would have received the relationship series program based on the time it takes to hire and train a new employee.

With the merger of Redwood Public Health Service and Southwest Health and Human Services in 2013, two staff will be coordinating the relationship series program. New Horizons has been providing this programming in Redwood County since 2002,

with Denise Kerkhoff coordinating and presenting the program. In 2013, both Jessica and Denise will work with all schools in Lincoln, Lyon, Murray, Redwood, Pipestone, and Rock counties to provide the relationship series program. Jessica will focus on four of the six counties and her anticipated FTE is .75. Denise will focus on two of the six counties and her anticipated FTE is .35. Denise and Jessica will assist each other if a co-presenter is needed at an area school.

Program Feedback

Students are asked to provide feedback on the relationship series program. Not all students choose to comment, as the feedback portion of the program is optional. Below are a few of the comments from students participating in the relationship series this fall semester:

- “[I learned] that I can say no.”
- “I thought this whole thing was very helpful because most people don’t know all the important stuff.”
- “I really liked it.”
- “Had a lot of fun listening to you – thanks!”
- “I liked how Jess presented these topics. We’ve all heard the same thing over and over but I better understood this time.”
- “Great job!!! Very interesting!”
- “You made the learning fun for us.”
- “You were really good and taught a lot of helpful things.”
- “Great job! I felt comfy and am now well informed.”
- “It helped me understand a lot of things better.”
- “I think if we don’t talk about abuse, more people will start doing it. The more we talk, the more prevention we will have.”
- “This information was helpful and I will use it in the future. All the topics were helpful in some way for me.”
- “This class has strengthened my beliefs.”
- “Good class. Good teacher.”

Feedback on the program is consistently positive. An average of 50% or more of students report that their beliefs and attitudes changed after participating in the program. There is a portion of students that report that their beliefs or attitudes did not change because they had already chosen abstinence or are waiting until a later date for sexual activity. Therefore, the series reinforced their current beliefs and attitudes. When we have encountered a student that negatively rates the program, some common comments that are included with the rating include: “bored because they knew all of this,” “would rather have gym,” and “knew of all this.”

We take all feedback seriously in our ongoing program evaluation. Our staff also works hard to ensure that our workshops are comfortable and accessible to students of all genders, ethnicities, belief systems, sexual orientations, ability statuses, and life experiences. In the series, we do not teach students a set of values, but rather, encourage students to define and act on their own values through connections with the trusted adults and belief systems in their lives.

Program Overview

The theory behind the relationship series program is that if students are given knowledge and tools and have an outlet to address the issues they face, they will make more positive, informed choices in their present and future relationships. The program focuses on the theme of self-respect and respect for others.

The relationship series is a 4-6 day program. The number of days is dependent on whether the school has a block schedule where the classes are 80 minutes each or the shortened class periods of 48 minutes. The primary goals of the program are:

- To give students the necessary tools and information to resist sexual pressure, to build healthy, age-appropriate relationships and to avoid unhealthy or abusive relationships.
- To reduce the incidence of sexual assault and abuse and to support victims in recovering from and/or reporting crimes; to present facts and dispel myths regarding these crimes.
- To reduce the incidence of sexually transmitted infections and unintended pregnancy.
- To make students aware of New Horizons Crisis Center as a resource for personal or family difficulties.

This series consists of lecture with a power point as a visual, group activities, videos, and daily journaling. The journals are created by New Horizons Crisis Center staff and are related to the topics covered each day; the journal also allows students to ask questions in a private manner.

Program Topics

Communication, Values, and Boundaries

- Where students get their sexual messages from (i.e., parents, media, church).
- Technological communications in relationships (i.e., texting, sexting).
- A conversation about pornography and its potential effect on gender roles and intimate relationships.
- The relationship between pornography and violence.
- The importance of knowing personal values.
- Creating relationship boundaries based on personal values.
- Defining and communicating values and boundaries.

Healthy Relationships

- Traits of healthy relationships.
- The definition of and differences between crushes, sexual attraction, jealousy, infatuation, and love. This information is included because oftentimes crucial decisions about whether or not to be sexually active are based on thinking that the student is “in love” when it may, in fact, the feelings might be sexual attraction or infatuation.
- Movie: “Teen Romantic Relationships.”

Harm and Healing (Unhealthy/Abusive Relationships)

- Traits of unhealthy relationships.
- An overview of dating violence is given, including physical, emotional, verbal, and sexual violence. Warning signs of an abusive relationship and the abuse cycle are covered.
- A discussion of sexual hookups and “friends with benefits.”
- Movie: “Dealing With Teen Dating Abuse.”

Sexual Assault

- An overview of sexual assault is given, including a definition, reporting statistics, barriers to reporting, how to get help, and victims’ feelings.
- An overview of consent in sexual relationships is given, including a definition, relevance, and legal and ethical meanings.

Sex

- There is a comprehensive conversation of all risks involved in engaging in sexual relationships with particular regard to the students’ age. Presenters review a myriad of both physical and emotional consequences.
- Setting boundaries related to all forms of physical intimacy is covered and students list personal boundaries in their journals.

Pregnancy and Sexually Transmitted Infections

- Myths about contraception and pregnancy risk are covered.
- Movie: “Avoiding the Pregnancy Trap.”
- A review of how their lives and a potential child’s life would be affected if they got pregnant or got someone pregnant at this age. This discussion is tied in heavily with the “early sexual involvement” conversation.
- How the life of a child is affected by having young parents.

Resources Available for Students

- New Horizons Crisis Center services.
- Sexually transmitted infection testing and information.
- Mental health, suicide hotlines, and other resources.

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding ("MOU") is entered into by and between the Southwest Health and Human Services (the "Employer") and the American Federation of State, County and Municipal Employees Local 1687 ("Union"). The Employer and Union are referred to at times in this Memorandum individually as a "Party" and collectively as the "Parties;" and

Whereas, the Parties may desire to hold periodic joint meetings with each other;

Be it therefore resolved, that the Parties agree to the following:

The Employer and Union may hold periodic meetings on a quarterly basis upon the request of either of the parties to discuss salary scale models, and/or other related issues for consideration during the 2014 labor negotiations. Union members attending these meetings will only be paid for their attendance at the discretion of the employer.

This Memorandum shall expire on December 31, 2013.

Employer:
Director

Date: _____

Board Chairperson

Date: _____

For the Exclusive Representative:
Union President

Kara Miller
Date: 2/12/13

AFSCME Representative

Paul Schwan
Date: 2/12/13

LABOR AGREEMENT

Between

SOUTHWEST HEALTH AND HUMAN SERVICES

And

**AMERICAN FEDERATION OF STATE,
COUNTY AND MUNICIPAL EMPLOYEES**

PUBLIC HEALTH

JANUARY 1, 2013 TO DECEMBER 31, 2013

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ARTICLE I – PURPOSE OF AGREEMENT

This Agreement is entered into between the Southwest Health and Human Services, hereinafter called the Employer, and the American Federation of State, County and Municipal Employees, hereinafter called the Union.

The intent and purpose of this Agreement is to:

- 1.1 Establish certain wages and other conditions of employment;
- 1.2 Establish procedures for the resolution of disputes concerning this Agreement's interpretation and/or application;
- 1.3 Specify the full and complete understanding of the parties; and
- 1.4 Place in written form the parties' agreement upon the terms and conditions of employment for the duration of this Agreement.

ARTICLE II – RECOGNITION

The Employer recognizes the Union as the exclusive representative for employees of the Southwest Health and Human Services, Minnesota, who perform work in Public Health who are public employees within the meaning of M.S. 179A.03, Subd. 14, excluding supervisory and clerical employees.

ARTICLE III – DEFINITIONS

- 3.1 **UNION:** Council 65, American Federation of State, County and Municipal Employees.
- 3.2 **Employer:** Southwest Health and Human Services.
- 3.3 **Union Member:** A member of the American Federation of State, County and Municipal Employees.
- 3.4 **Employee:** A member of the exclusively recognized bargaining unit.
- 3.5 **Base Pay Rate:** The employee's annual or hourly pay rate exclusive of longevity or any other special allowance.
- 3.6 **Seniority**
 - A. **Employer Seniority:** Length of continuous service with the Employer, subject to Section C.
 - B. **Job Classification Seniority:** Length of service in a job classification covered by this Agreement, subject to Section C.

C. Seniority Credit from Prior Employers:

(i) Employees who were previously employed by Lincoln, Lyon, Pipestone Public Health (LLMPPH) or a County that becomes a member of Southwest Health and Human Services (Employer), shall maintain their seniority dates from their initial employment and job classification from those prior employers, and shall be placed on the seniority list accordingly with other employees of the bargaining unit, so long as there was no interruption in continuous employment from their prior employer and the Employer. Such employees shall not be viewed as new employees and shall not serve probationary period unless such employees transfer to a new position outside their job classification pursuant to 11.2 after their employment with the Employer begins.

(ii) For the purpose of job classification seniority, employees of member counties joining the Employer shall be placed in the job classification that most closely matches the job duties that the employee performed at the member county as determined by the Employer.

(iii) For seniority credit to apply, the employee of a county that is signatory to the Southwest Health and Human Services Joint Powers Agreement for Public Health and must have been employed in the Public Health Department of that member county immediately prior to becoming employed by the Employer.

(iv) "Immediately prior" means there shall be no break in service between the employment with any of the member county or LLMPPH ending and employment with the Employer beginning. In the event that the individual is later employed by the Employer, the individual shall not subsequently be entitled to service credit for past employment with a member county or LLMPPH.

- 3.7 Overtime: Work performed at the express authorization of the Employer in excess of forty (40) hours within a seven (7) day period.
- 3.8 Layoff: Reduction in an employee's scheduled hours of work or elimination of the employee's position.
- 3.9 Trial Period: The first ninety (90) calendar days after a bargaining unit member is promoted, transferred, or accepts a position outside the bargaining unit, after having completed their initial probationary period within the bargaining unit.

ARTICLE IV – UNION SECURITY

- 4.1 The Employer shall deduct union dues from the earnings of those employees who authorize such deductions in writing. The Union shall submit such authorizations in writing to the Employer at least seven (7) days prior to the end of the pay period for which the deductions are to be effective, verifying the employees for whom full and fair share amounts shall be deducted. Such deductions shall continue in effect until canceled.
- 4.2 The Employer shall deduct each pay period an amount as directed by the Union.
- a. Withheld dues shall be forwarded to AFSCME Council 65 Administrative Office (118 Central Avenue, Nashwauk MN 55769) within ten (10) days after the deductions are made, together with a record of the amount and a list of the names of the employees from whose wages deductions were made.
- b. Deduction of dues or fees shall be made each pay period using a formula (or schedule if applicable) provided by the Union to the Employer to calculate the actual dues deduction. The union will provide a spreadsheet or formula that can be used to calculate the actual dues in an electronic Excel format or via US Mail. Dues deductions shall be continued and terminated in accordance with said authorization card.
- 4.3 The Union shall provide employees with Union authorization cards for membership and Union dues. The Employer shall not be responsible for providing such cards to employees. Cards and information regarding Union dues may be obtained through AFSCME Council 65 Administrative Office (118 Central Avenue, Nashwauk MN 55769).
- 4.4 The Union may designate employees from the bargaining unit to act as stewards and shall inform the Employer in writing of such choice.
- 4.5 The Union agrees to indemnify and hold the Employer harmless against any and all claims, suits, orders or judgments brought or issued against the Employer as a result of any action taken or not taken by the Employer under the provisions of this Article.
- 4.6 Deduct fair share fees in accordance with the provisions of M.S. 179.65, Subd. 2.
- 4.7 The Employer agrees to allow the Union to use designated bulletin boards and e-bulletin boards for the purpose of posting notices of Union meetings, election, election returns, appointments to office, and any other items specifically approved by the Employer. The Union agrees to limit the posting of such notices to designated locations.

ARTICLE V – EMPLOYER AUTHORITY

- 5.1** The Employer retains the full and unrestricted right to operate and direct the affairs of the Employer in all its various aspects including, but not limited to the right to direct the work force, select and manage all personnel, assign overtime, lay off employees due to lack of work and other legitimate reasons, make and enforce rules and regulations; determine the utilization of technology; change or eliminate existing methods, equipment or facilities; establish functions, policies and programs; set and amend budgets; establish and modify the organizational structure; and to perform any inherent managerial function not specifically limited by this Agreement.
- 5.2** Any term and condition of employment not specifically established or modified by this Agreement shall remain solely within the discretion of the Employer to modify, establish or eliminated.
- 5.3** In the event that the Employer proposes to make changes to its policies which affect a mandatory subject of bargaining, the Union shall be notified in advance. The union shall promptly notify the Employer if it is interested in negotiating regarding such subject(s). If negotiation is requested, such policies shall not be implemented for bargaining unit employees until the negotiation process is complete.

ARTICLE VI – EMPLOYEE RIGHTS – GRIEVANCE PROCEDURE

- 6.1** Definition of a Grievance. A grievance is defined as a dispute or disagreement as to the interpretation or application of the specific terms and conditions of this Agreement.
- 6.2** Union Representatives. The Employer will recognize representatives designated by the Union as the grievance representatives of the bargaining unit having the duties and responsibilities established by this Article. The Union shall notify the Employer in writing of the names of such Union representatives and of their successors when so designated.
- 6.3** Processing of a Grievance. It is recognized and accepted by the Union and the Employer that the processing of grievances as hereinafter provided is limited by the job duties and responsibilities of the employees and shall therefore be accomplished during normal working hours only when consistent with such employee duties and responsibilities. The aggrieved employee and the Union Representative shall be allowed a reasonable amount of time without loss in pay when a grievance is presented to the Employer during normal working hours provided the employee and the Union Representative have notified and received the approval of the designated supervisor who has determined that such

absence is reasonable and would not be detrimental to the work programs of the Employer.

- 6.4 Procedure.** Employees are encouraged to attempt to resolve their grievances, as defined by Section 5.1, on an informal basis with their immediate supervisor at the earliest opportunity. If the matter cannot be resolved to the employee's satisfaction by informal discussion, it shall be then processed in accordance with the following procedure:

Step 1. An employee claiming a violation concerning the interpretation or application of this Agreement shall, within twenty-one (21) calendar days after such alleged violation has occurred, present the grievance to the employee's designated representative in writing, setting forth the facts and the specific provision of the Agreement allegedly violated and the particular relief sought. The Employer-designated representative will discuss and give an answer to such Step 1 grievance within ten (10) calendar days after receipt.

Step 2. A grievance not resolved in Step 1 may be appealed to Step 2 in writing within ten (10) calendar days after the Employer-designated representative's final answer in Step 1, and shall set forth the nature of the grievance, the facts on which it is based, the provision or provisions of the Agreement allegedly violated, and the remedy requested. Any grievance not appealed in writing to Step 2 by the Union within ten (10) calendar days shall be considered waived.

If appealed, the grievance shall be presented by the Union and discussed with the Employer-designated Step 2 representative. The Employer-designated representative shall give the Union the Employer's Step 2 answer in writing within ten (10) calendar days after receipt of such Step 2 grievance.

Step 3. A grievance not resolved in Step 2 may be appealed to Step 3 within ten (10) calendar days following the Employer-designated representative's final Step 2 answer. Any grievance not appealed in writing to Step 3 by the Union within ten (10) calendar days shall be considered waived.

If appealed, the written grievance may, by mutual written agreement, be submitted to mediation through the Minnesota Bureau of Mediation Services.

Step 4. A grievance unresolved in Step 2 which the parties do not mediate or which is unresolved at Step 3 may be appealed to Step 4 and submitted to arbitration.

The Employer and the Union representative may endeavor to select a mutually acceptable arbitrator to hear and decide the grievance or may select an arbitrator in accordance with the Rules Established by the Bureau of Mediation Services. Absent any factors beyond the control of the Union or the Employer, the Union and the Employer shall select an arbitrator within ninety (90) calendar

days from the date the union appeals the grievance to Step 4 of the grievance procedure. If no selection is made within this ninety (90) day timeframe, the grievance shall be considered waived. However, no such waiver shall occur due to the failure of the Employer to engage in the selection process.

6.5 Arbitrator's Authority.

A. The arbitrator shall have no right to amend, modify, nullify, ignore, add to or subtract from the terms and conditions of this Agreement. The arbitrator shall consider and decide only the specific issue(s) submitted in writing by the Employer and the Union and shall have no authority to make a decision on any other issue not so submitted.

B. The arbitrator shall be without power to make decisions contrary to, or inconsistent with, or modifying or varying in any way the application of laws, rules or regulations having the force and effect of law. The arbitrator's decision shall be submitted in writing within thirty (30) days following the close of the hearing or the submission of briefs by the parties, whichever be later, unless the parties agree to an extension. The decision shall be binding on both the Employer and the Union and shall be based solely upon the arbitrator's interpretation or application of the express terms of this Agreement and to the facts of the grievance presented.

C. The fees and expenses for the arbitrator's services and proceedings shall be borne equally by the Employer and the Union, provided that each party shall be responsible for compensating its own representatives and witnesses. If either party desires a verbatim record of the proceedings, it may cause such a record to be made, providing it pays for the record. If both parties desire a verbatim record of the proceedings, the cost shall be shared equally.

6.6 Waiver.

If a grievance is not presented within the time limits set forth above, it shall be considered "waived". If a grievance is not appealed to the next step within the specified time limit or any agreed extension thereof, it shall be considered settled on the basis of the Employer's last answer. If the Employer does not answer a grievance or an appeal thereof within the specified time limits, the Union may elect to treat the grievance as denied at that step and immediately appeal the grievance to the next step. The time limit in each step may be extended by mutual written agreement of the Employer and the Union.

6.7 Choice of Remedy.

A grievance unresolved at Step 3 that involves a suspension, demotion or discharge of an employee who has completed the required probationary period may be appealed either to Step 4 of Article VI or a procedure such as Veterans

Preference or other statutory proceeding. If appealed to any procedure other than Step 4, the grievance is not subject to the arbitration procedure as provided in Step 4. The aggrieved employee shall elect in writing which procedure is to be utilized – Step 4 or another appeal procedure – and shall sign a statement to the effect that the choice of any other hearing precludes the aggrieved employee from making a subsequent appeal through Step 4.

ARTICLE VII – SAVINGS CLAUSE

In the event any provision of this Agreement shall be held to be contrary to law by a court of competent jurisdiction from those final judgment or decree no appeal has been taken within the time provided, such provision shall be voided. All other provisions of the Agreement shall continue in full force and effect. The voided provision may be renegotiated at the request of either party.

ARTICLE VIII – WORK SCHEDULES

- 8.1 The sole authority to establish or modify work schedules is with the Employer.
- 8.2 The Employer will give seven (7) calendar days advance notice to employees affected by the establishment of permanent change in schedule.

ARTICLE IX – OVERTIME PAY AND COMPENSATORY TIME

- 9.1 All overtime must be approved in advance by the employee's supervisor. Hours worked by non-exempt employees in excess of forty (40) hours within a seven (7) day period (as determined by the Employer) will be compensated at one and one-half (1-1/2) times the employee's regular base pay.
- 9.2 The maximum number of hours that a non-exempt employee should work in any week is 37.5 hours. With supervisory approval, non-exempt employees may work up to two and a half (2.5) hours over the regular 37.5 hours which will be earned as compensatory time.
- 9.3 For the purpose of computing overtime compensation, overtime hours worked shall not be pyramided, compounded or paid twice for the same hours worked.
- 9.4 Non-exempt employees shall make arrangement through the agency's flex schedule policy for after hours appointments whenever possible. In the event of a public health emergency or a call back to the jail following the completion of a scheduled work day with supervisory approval, compensatory time shall be earned at time and a half (1.5).
- 9.5 Compensatory time taken must be approved in advance by the employee's immediate supervisor.

- 9.6 Compensatory time will be earned and taken in 30 minute increments at a minimum. The balance of compensatory time at the end of the payroll period shall never be more than 15 hours. Time in excess of 15 hours at the end of a payroll period shall be paid out to the employee at the employee's regular rate of pay. However, in the event a public health emergency is declared, the director may authorize employees to carry over compensatory time in excess of 15 hours for up to two (2) additional pay periods before the excess time is paid out.

ARTICLE X – DISCIPLINE

The Employer will discipline employees only for just cause. Discipline will be in one or more of the following forms, as appropriate to the circumstances: oral reprimand with written documentation, written reprimand, suspension, demotion or discharge.

ARTICLE XI – PROBATIONARY PERIODS

- 11.1 All newly hired or rehired employees will serve an initial one-year probationary period.
- 11.2 At any time during the initial probationary period, a newly hired or rehired employee may be terminated at the sole discretion of the Employer. Such terminations shall not be subject to the grievance procedure.
- 11.3 All employees will serve a six (6) months probationary period in any job classification within the bargaining unit in which the employee has not served a probationary period. During the initial ninety (90) calendar day trial period, the employee may return to their prior position at their request and shall retain the job classification seniority upon reinstatement to the position previously held.
- 11.4 At any time during the six month bargaining unit probationary period, an employee promoted or reassigned may be demoted or reassigned to the employee's previous position at the sole discretion of the Employer. If an employee is returned to his or her prior position by the Employer during their bargaining unit probationary period, that employee shall retain job classification seniority upon reinstatement to the position previously held.
- 11.5 An employee who accepts a position outside of the bargaining unit shall retain his/her job classification seniority within the unit for a total period of ninety (90) calendar days during which either the employee or the Employer may return the employee to the employee's previous job classification. At the conclusion of the trial period, the employee's seniority rights under this Agreement shall terminate. Nothing in this provision shall be construed as modifying or impacting

any probationary or trial period that is or may be required in the position outside of the bargaining unit.

- 11.6 Newly hired probationary employees may use accrued sick leave as it is earned. They may use accrued vacation leave after three (3) months of employment. Employees serving probationary periods in new job classifications shall be entitled to use all accrued paid leave time consistent with the terms of Article XV.

ARTICLE XII – SENIORITY

- 12.1 In the event of layoff, employees will be laid off on the basis of job classification seniority. The Employer will endeavor to provide employees with as much notice of temporary layoff as reasonably practicable based upon the circumstances. Notification of permanent layoff will be three weeks.

The employee laid off shall then have the opportunity to bump the least senior employee in the job classification the employee most recently previously held, provided the employee has more seniority than the employee he/she intends to bump.

- 12.2 Recall from layoff will be on the basis of job classification seniority. Recall rights will continue for twelve (12) months after layoff. Recalled employees shall have ten (10) working days after notification of recall by registered mail at the employee's last known address to report to work or forfeit all recall rights.

No new employee shall be hired to work in classifications in which layoffs have occurred until all employees in those classifications on layoff status who wish to return have been recalled.

- 12.3 Seniority Lists. The Employer shall establish seniority lists by Employer and job classification seniority and will provide such lists to the Union upon request. The Union shall be notified of new hires within the bargaining unit, including job classification and rate of pay.
- 12.4 Seniority: Newly hired employees shall be placed on the seniority lists upon completion of probationary periods.
- 12.5 Employer seniority shall be used for the purpose of determining benefits.

ARTICLE XIII – JOB VACANCIES

- 13.1 Job vacancies within the agency will be posted within the agency for five (5) work days prior to being advertised publicly. Interested employees may submit application for a position after the Board approves the position to be filled, prior

to the posting date. The Employer shall have the discretion to determine whether or not to seek outside applicants.

- 13.2 Employees selected to fill a position in a higher job classification shall be subject to the conditions of Article XI, Probationary Period.
- 13.3 The Employer has the right of final decision in the selection from all applicants (internal and external) to fill jobs based on qualifications, abilities and experience and to set initial salary. In the event that an initial salary is higher than the lowest paid employee in the job classification, the Union shall be notified in advance of the recommendation to the Board. The Employer shall meet and confer with the Union upon request and provide information regarding the experience and qualifications of the successful applicant and the reason for the wages/salary.

ARTICLE XIV – HEALTH, DENTAL, LTD (Long Term Disability) AND LIFE INSURANCE PLANS hereinafter called the Cafeteria Plan

The Employer will contribute up to a maximum of five hundred ninety one (\$591.00) per month per employee for the cafeteria plan for employees taking single coverage. The Employer will contribute up to a maximum of nine hundred forty one (\$941.00) per month per employee to the cafeteria plan for employees taking dependent coverage. Employees are required to carry single or dependent health care coverage, LTD (long term disability) coverage, and life insurance using the maximum employer contributions stated above.

Effective the first of the month following the full execution of the 2013 contract, \$41.00 cafeteria contribution increase monthly.

ARTICLE XV – LEAVES

- 15.1 **Vacation Leave.** Full-time employees shall be granted paid time off as follows: Each permanent or probationary full-time employee shall earn, on the last working day of each payroll period:

3.7 hours of vacation leave for 1-5 years of service

5.55 hours of vacation leave for 6-9 years of service

6.45 hours of vacation leave for 10-14 years of service

7.35 hours of vacation leave for 15+ years of service

Vacation leave can accumulate to 224 hours. No time is accumulated after reaching the maximum. Vacation leave cannot be used during the first three months of full-time equivalency service. When taking vacation leave, the

minimum increment that can be used is one-half hours. Vacation leave cannot be used until it is earned.

No vacation leave will accrue after the employee reaches 224 hours.

Requests for vacation leave must be made to the employee's supervisor in writing and must be authorized in advance by the supervisor in writing. In the absence of the employee's supervisor, the request may be made to another supervisor in Public Health, the Deputy Director, or the Administrator.

Upon voluntary separation of employment, any employee who has six (6) months of satisfactory service will be paid for any accrued vacation leave that has not been used. Employees may not use more than three days during the last two weeks of employment. Employees terminated for misconduct shall not be entitled to be paid for accrued unused vacation leave. This shall not apply to employees terminated for poor work performance.

15.2 Medical Leave.

- a. Employees shall earn paid medical leave at the end of the payroll period at the rate of 3.7 hours.
- b. Paid medical leave will be prorated for part-time employees.
- c. Paid medical leave can be accumulated to a maximum of 450 working hours. No time is accumulated after reaching this maximum.
- d. Paid medical leave may not be used in the payroll period it is earned.
- e. When taking paid medical leave, the minimum increment that can be used is one-half hour.
- f. Employees shall use paid medical leave for FMLA leave purposes.
- g. Paid medical leave may be used for illness (self and immediate family), injury, medical and dental appointments. (Immediate family shall be spouse, children, parents, grandparents and legal wards)
- h. The Employer may require medical documentation when three days of leave is used within a thirty (30) day period. Such documentation may consist of verification of doctor's or dental appointments without disclosure of diagnosis. The Employer reserves the right to require additional information, including medical information, in the event that there is a pattern indicating the possible abuse of sick leave.
- i. If any employee receives a compensable injury and has benefits accrued under sick leave, the employee may, at his/her option, request and receive sick leave to supplement the difference between his/her regular pay and Worker's

Compensation. The total amount paid to the employee will not exceed his/her regular earnings.

When an employee cannot report to work due to an illness, the employee shall notify the receptionist so the employee's calendar can be updated. The receptionist should then notify the supervisor so that unit coverage is ensured. Medical leave due to preplanned medical appointments must be approved by the employee's supervisor in the same manner as vacation.

Employees may not use medical leave during the last two weeks of employment after submitting their resignation, except in the case of accident, injury or documented illness of the employee.

15.3 PAID MEDICAL LEAVE DURING VACATION LEAVE

When illness occurs within a period of vacation leave, the period of illness may be charged as paid medical leave and the charge against vacation leave reduced accordingly except when the employee has submitted their resignation.

15.4 FAMILY MEDICAL LEAVE ACT (FMLA) leave will be provided as required by law.

A "rolling forward" period of time for FMLA leave shall be used. Employees must use accumulated paid leave during FMLA leave.

15.5 STATUTORY LEAVES – Military leave, bone marrow donation, jury duty, and other statutory leaves will be provided by as required by law, and may be enhanced but not diminished by SWHHS policy.

15.6 BEREAVEMENT LEAVE

Each employee shall have up to 30 hours noncumulative annual bereavement leave in the event of the death of the employee's parents, children, spouse, siblings, legal wards, grandparents, grandchildren and spouse's parents. Such days shall be with pay and shall not be deducted from sick leave or vacation balances. Such leave must be taken in a minimum of ½ hour (.5) increments.

Upon exhaustion of the noncumulative bereavement leave and approval of their supervisor, an employee may use up to three (3) days of medical leave for bereavement of a parent, children, spouse, sibling, legal ward, grandparent, grandchildren and spouse's parents.

Reasonable leave time without loss of pay will be allowed to attend a funeral of current staff members or former staff members who have left the agency within the last two years.

In the event of a death in the family, the employee shall inform the supervisor in the same manner as for sick leave.

15.7 MEDICAL LEAVE SEVERANCE (Pre-7/1/2011 Employees)

Upon severance of employment under this CBA (SWHHS Public Health) with five (5) to ten (10) years of service, the employee shall be compensated at his/her current rate of pay an amount equal to 25% of the unused accrued sick leave available to the employee's credit to the date of separation. For eleven (11) to twenty (20) years of service, the employee will receive 35%, and for over twenty-one (21) years of service, the employee will receive 45%. In cases of death while still employed, the severance pay shall be paid to the employee's estate.

Employees hired after July 1, 2011 by Southwest Health and Human Services (Public Health) are not eligible for medical leave severance.

15.8 UNION LEAVE

Union Leave – Upon written request by the Union, unpaid leave shall be granted for up to a maximum of three (3) employees selected by the union to do Union business for up to a maximum of five (5) days per year.

ARTICLE XVI – HOLIDAYS

16.1 Employees shall receive the following ten and one-half (10.5) holidays:

New Year's Day	Veterans Day
Martin Luther King Day	Thanksgiving Day
President's Day	Day after Thanksgiving
Memorial Day	Christmas Eve Day at noon if Dec 24 th falls
Independence Day	on Monday, Tuesday, Wednesday or Thursday
Labor Day	Christmas Day

16.2 Non-exempt employees required to work on holidays shall be paid one and one-half (1-1/2) times the employee's base pay rate for hours worked. This is in addition to the employee's base pay. In all cases where a non-exempt employee is required to work on a holiday and such hours are in excess of forty (40) hours per week, Article 9 shall apply.

16.3 In the event that a holiday falls on a Sunday, the following Monday shall be a paid holiday, and if any of these falls on a Saturday, the preceding Friday shall be a paid holiday.

16.4 Employees shall be required to work their last regularly scheduled work day prior to the holiday and their next regularly scheduled work day after the holiday

to qualify for holiday pay, unless the employee is absent due to illness, accident, is on vacation, or due to the death in the employee's immediate family.

ARTICLE XVII – LEAVES OF ABSENCE

Leaves of absence will be provided as per law or Southwest Health and Human Services Policy.

In the event that the Employer makes changes to its policies which affect a mandatory subject of bargaining, the Union shall promptly notify the Employer if it is interested in negotiating regarding such subject (s).

ARTICLE XVIII – PART-TIME EMPLOYEES

Part-time employees shall be eligible for prorated holidays, medical leave, and vacation benefits under this Agreement.

ARTICLE XIX – COMPENSATION

19.1 Professional Licensure: The Employer will pay for one-half of any professional licensing fees when the license is required for the job. This does not include application or late fees.

19.2 Employees shall be paid in accordance with Attachment A.

19.3 Notwithstanding any provision for the continuation of the Agreement following the expiration of the term pursuant to PELRA, steps on any wage schedule shall not be automatic. The Employer reserves the right to deny or withhold steps following the expiration of the term of this Agreement.

ARTICLE XX – SAFETY

The Employer and the Union agree to jointly promote safe and healthful working conditions, to cooperate in safety matters, and to encourage employees to work in a safe manner.

A copy of the Safety Policy shall be available online to all employees.

Employees shall report unsafe conditions to one of the Safety Committee Chairpersons and/or the Administrator.

ARTICLE XXI – GENERAL PROVISION

SWHHS policies regarding the general terms and conditions of employment shall be applied, including but not limited to such matters as, expense reimbursement, flex

schedule, telecommuting, inclement weather, community service participation, and use of agency vehicles.

In the event that the Employer makes changes to its policies which affect a mandatory subject of bargaining, the Union shall promptly notify the Employer if it is interested in negotiating regarding such subject(s).

ARTICLE XXII – WAIVER

22.1 Any and all prior agreements, resolutions, practices, policies, rules and regulations regarding terms and conditions of employment, to the extent inconsistent with the provisions of this Agreement, are hereby superseded.

22.2 The parties mutually acknowledge that during the negotiations which resulted in this Agreement, each had the unlimited right and opportunity to make demands and proposals with respect to any terms or conditions of employment not removed by law from bargaining. All agreements and understandings arrived at by the parties are set forth in writing in this Agreement for the stipulated duration of this Agreement.

ARTICLE XXIII – DURATION

This Agreement shall be effective as of January 1, 2013 and shall remain in full force and effect until the 31st day of December, 2013.

FOR SOUTHWEST HEALTH AND HUMAN SERVICES

FOR AMERICAN FEDERATION OF STATE, COUNTY & MUNICIPAL EMPLOYEES

Christopher Sorensen, Director



Kara Miller, Union President

Dated _____

Dated 2/12/13

Steve Ritter, Board Chairperson



Paul Schwarz, AFSCME Representative

Dated _____

Dated 2/12/13

APPENDIX A

2013 Compensation

For 2013, non-exempt employees, 2.5% shall be added to their 2012 hourly wage. For exempt employees, 2.5% shall be added to their 2012 annual salary.

APPENDIX B

Leave Time Transfers for New County Partners to the Southwest Health and Human Services Joint Powers Organization

The Union and the Employer agree that the Employer may enter into agreements to allow the transfer of up to the maximum medical leave and vacation leave balances set forth in this Agreement for employees of new JPA members as long as the joining partner county compensates SWHHS fully for the transferred time. Nothing in this Agreement shall allow employees of new member counties to file grievances related to the amount of leave transferred pursuant to any agreement between the Employer and their member county/prior employer.

FEBRUARY 2013
BOARD APPROVAL ON THE FOLLOWING:

- IV-D Cooperative Agreement** – 01/01/13 to 12/31/13; All 6 counties, County Attorneys at \$120 and Sheriff Process Service Fees of Lyon \$45, Murray \$0, Pipestone \$75, Redwood \$50, and Rock \$40 (no contract with Lincoln).
- PH National Assn of County & City Health Officials (NACCHO)** – 01/05/13 to 07/31/13; \$4,000 grant to build the capacity of local Medical Reserve Corps (MRC) units.
- Redwood County** – 01/01/13 to 12/31/13; Office lease \$142,500 of \$11,875 monthly installments (utilities included).
- Redwood County** – 01/01/13 to 12/31/13; Information Technologies Support, \$25,375 annually paid in monthly installments of \$2114.58.
- Redwood County** – 01/01/13 to 06/30/13; Student School health services, \$2,000 per month, temporary services until the termination of the program.
- Paula Koch**– 01/01/13 to 12/31/13; client guardianship services, \$85 per month.
- Meg Jakubiec** – 01/01/13 to 12/31/13; client guardianship services, \$85 per month.
- Maggie Ersted** – 01/01/13 to 12/31/13; clinical supervision and case consultation services, \$65/hr + current IRS mileage rate.
- Avera Marshall d/b/a Avera Marshall Regional Medical Center** – 01/01/13 to 12/31/13; Mental Health Hold Orders and Civil Commitment Beds and Services, not to exceed \$975/day for hospital services (increase \$25/day).
- Sanford Luverne Hospital** – 01/01/13 to 12/31/13; Rule 25 CD Assessments, \$210 per client (no increase).
- Developmental Services Inc** – 01/01/13 to 12/31/13; Home Community Based Service contract for CAC, CADI, DD, BI (renewal).
- New Horizons Crisis Center** – 01/01/13 to 12/31/13; Block Grant payment for services, \$26,000 (increase of \$3000 for Redwood and \$3000 for Pipestone and Rock).

BOARD MEETING – 02/20/13

DONATION

- **Donation of items from St. Leo's Catholic Church in Pipestone**

Informal Quality Improvement Projects, 2012

Social Services

- QI project for centralized intake
- The internal eval of on call for 6 counties and implementation of a new procedure, not a QI project but definitely an improvement project.

Adult MH & CD unit has

- update forms across the 6 counties.
- Incorporated the use of video and phone conferencing to reach at case managers in the 6 county area for our monthly unit meetings.

Eligibility Unit

- During the year we developed a health care application rotation for workers in all four counties to more evenly distribute health care applications.
- Within the Marshall Singles Unit we developed a new in office interview rotation to provide better customer service and meet timeliness requirements for the SNAP program.
- For the Marshall Office we set up a new single point Phone Intake rotation where workers take turns answer all eligibility questions that come into the Marshall Office.
- Worked with Clerical unit to develop consistency in application packets.
- Within the Marshall Office made the requirement that a minimum of two workers from each unit (singles vs family) must be in the office. This allows for a back up for the intake worker if there is a back up of walk ins.

Children's Services

- Created an adoption referral form and clarified process
- Revamped the daycare packets
- Implemented the Circle program
- Finalized preparations for adoption files (to start in 2013)
- Started imaging daycare licensing files

Other projects discussed at the Dec. 2012 QI Council meeting:

Children's Services

- CTC packet for foster families

Public Health

- Electronic time sheets/Nightingale Notes – radically improved billing
- Maternal Child pathways
- Dental Varnishing
- PCA - streamlined caseloads

Adult Services

- Created imaging categories
- Streamlined caseloads, geographically
- SSIS errors/billed
- More specialized – EW, CAC, CADI, BI

Overall

- New supervisors for additional specialization (SS and PH)
- Physical Environment

QUALITY COUNCIL WORK PLAN/ANNUAL REPORT - 2012

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
<i>Ongoing Activities</i>							
Orientation Plans	Sherry Marks Supervisors	Orientation Plans will be standardized across all departments	25% of departments have updated orientation plans	NA	NA	December, 2012	100% completed – will want to focus on format for 2013
Policies and Procedures	Nancy Walker Sherry Marks Ardis Henriksen	Policy and Procedures will be standardized and the review process will be consistent across the agency	Standardized schedule to be prepared All required policies have gone to board	NA	NA	September, 2012 December, 2012	Policies go to board as determined by statute, grants, contracts. Have not been able to quantify.
Job Descriptions	Sherry Marks Ardis Henriksen	Job Descriptions will be standardized across the agency	75% of job descriptions reviewed and signed off annually	NA	NA	December, 2012	100% completed
Performance Reviews	Nancy Walker	Performance Reviews will be done annually	75% of performance reviews will be done annually	NA	NA	December, 2012	90% Completed
Training Plans	Focus Team	Supervisor and Staff Trainings plans will be developed	100% of departments will submit training plans for budget process	NA	NA	July, 2012	Not completed, goal for 2013 as budget is prepared. Has been added to performance review also.

QUALITY COUNCIL WORK PLAN/ANNUAL REPORT - 2012

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
2012 Activities							
After Action Reports (AAR)	Jeff Moberg (Emerg. Prep) Jason Kloss (Env. Health) Cynthia Maxwell (Inf. Disease)	AAR for outbreak investigations, emergency preparedness events and exercises will be completed and shared as appropriate					
Develop format and criteria for AAR		Format is developed	50% of format development is completed by January 2013	Quarterly starting January 2013	June, 2013	June, 2013	N/A
Develop process for using/sharing information to improve process		Process is developed by November, 2012	75% of process is developed by March 2013	Quarterly starting January 2013	September 2013	June 2013	N/A
Implement process		AAR process is used for all situations requiring AAR ongoing	75% of situations requiring AAR follows process by June 2013	Quarterly starting January 2013	December, 2013	June 2013	N/A

QUALITY COUNCIL WORK PLAN/ANNUAL REPORT - 2012

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES.	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Community Health Assessment	Carol Biren	Community Health Assessment (CHA) is completed and three top priority areas are identified					
Set-up process for assessment and community partners		Process is developed and team is organized	Team prepared to begin assessment process	Quarterly starting September 2012	June, 2012	December, 2012	Team organized by September and process developed.
Complete assessment		Assessment is completed	75% of assessment data is selected by December, 2012	Quarterly starting September 2012	December, 2013	December, 2012	90% completed
Analyze data		Data is analyzed by March, 2013	50% of assessment data is analyzed by June, 2013	Quarterly starting September 2012	March, 2014	December, 2012	25% completed
Develop Community Health Improvement Plan (CHIP)		CHIP is developed by July, 2013	50% of CHIP is developed by December, 2013	July, 2013	June, 2014	December, 2012	0% completed
Review plan annually		Plan is reviewed annually by November of each year	NA	NA	NA	November, 2013	N/A

QUALITY COUNCIL WORK PLAN/ANNUAL REPORT - 2012

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
National Accreditation Standards	Cris Gilb Carol Biren	National Accreditation Standards will be used to identify priorities to improve quality					
Organize a team		Team is organized by December, 2012					Not completed, decision by council to table until 2013
Assess standards according to PPMRS		Team will review selected standards by March 2013	100% of selected standards are reviewed and reported in PPMRS	March 2013	March 2013	March 2013	N/A
Review standards annually with self-assessment forms		Review schedule is developed and standards are reviewed per schedule by February, 2013					
Select top priority areas		Top three priority areas are selected by December, 2011					
Develop work plan for improvement		Work Plans are completed by December, 2013					

QUALITY COUNCIL WORK PLAN/ANNUAL REPORT - 2012

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Cultural Competency	QI Council/ Chairperson	Cultural Competency will be assessed and incorporated into agency work plans and training plans					
Assess cultural competence using standardized tool		Tool will be approved and plan developed for assessing	60% of staff complete survey by November 14, 2012				0%, barriers on locating an appropriate tool, goal for 2013
Analyze data		Data will be analyzed when assessment completed	100% of data will be analyzed and presented by January 1, 2013.				N/A
Select priorities		Priorities will be selected after data is analyzed	Top three priorities will be selected by Feb 28, 2013.				N/A

QUALITY COUNCIL WORK PLAN/ANNUAL REPORT - 2012

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Strategic Plan	Chris Sorensen Carol Biren Executive Team	A Strategic Plan will be developed to guide the agency's strategic priorities					
Select team	Chris, Carol, Executive Team	Team is organized by September 2012	80% of team participates in facilitated training in October, 2012	Quarterly, starting in November, 2012	December, 2012	Annually in December	99.5 % attended
Review CHA, CHIP, accreditation standards, Cultural Competency results	Team	CHA, CHIP, standards and cultural competency results are reviewed when completed and ongoing	50% of materials are compiled and reviewed by February, 2013	Quarterly, starting in November, 2012	December, 2013	Annually in December	100% of materials available
Select community partners for input	Team	Community Partners will be selected and invited to provide input	75% of community partners identified will provide input by February, 2013	Quarterly, starting in November, 2012	December, 2013	Annually in December	64% of partners provided input
Develop plan	Team	Strategic Plan is developed	75% of plan will be developed by December 2013	Quarterly, starting in November, 2012	June, 2014	Annually in December	N/A

QUALITY COUNCIL WORK PLAN/ANNUAL REPORT - 2012

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
<ul style="list-style-type: none"> Specific QI projects Family Home Visiting (FHV) 	FHV Task Force Facilitator: Cris Gilb	The goal is to improve timely contact to FHV clients	Contact made to client within one week of referral - 90% Clients satisfied with timely contact - 90%	July, 2012	December, 2012	December, 2012	Contacts: 82% Ly/Li 94% M 99% P Satisfaction 100% Recheck contacts for 2012 and report in January 2013.
<ul style="list-style-type: none"> Centralized Intake process 	Cindy Nelson Facilitator: Carol Biren	The goal is to have a streamlined, thorough, centralized intake process for multiple programs within social services and possibly other departments within the agency.	90% of implementation of streamlined intake process into our system by January 1, 2013	October, 2012 Next report February 2013	July, 2013	July, 2013	N/A
<ul style="list-style-type: none"> Forms - SWHHS Redesign 	Diane Holmberg Facilitators: Carol Biren and Ardis Henriksen	The goal is to make accessing of forms easier and more efficient for all users	50% of users will report improved access to forms	December, 2012	December, 2012	December, 2012	Forms have been moved, staff trained, will do post-survey summer, 2013

Health Services Locations

Ivanhoe, MN 507-694-1270

Marshall, MN 507-537-6713

Slayton, MN 507-836-6486

Pipestone, MN 507-825-5024

Luverne, MN 507-283-5066

Redwood Falls, MN 507-637-4041

Human Services Locations

Ivanhoe, MN 507-694-1452

Marshall, MN 507-537-6747

Slayton, MN 507-836-6144

Pipestone, MN 507-825-6720

Luverne, MN 507-283-5070

Redwood Falls, MN 507-637-4050

QI Plan

**SOUTHWEST
HEALTH AND
HUMAN SERVICES**



**2013
QUALITY IMPROVEMENT
PLAN**

I. Purpose and Scope

- A. *Quality Improvement (QI) is an integrative process that links knowledge, structures, processes and outcomes to enhance quality throughout an organization.* Through this plan the Quality Council will lead the agency in creating, implementing, maintaining, and evaluating the quality improvement efforts at Southwest Health and Human Services (SWHHS) designed to improve performance of the organization and its employees and encourage a culture of quality.
- B. *Our vision for quality improvement is to improve the quality of services provided to customers of Southwest Health and Human Services through a structured quality improvement process.*
- C. **Quality Improvement activities at Southwest Health and Human Services will include:**
1. **Core Competencies: Those activities that require ongoing review include:**
 - Reviewing health and human services orientation materials for staff training and competencies for key staff
 - Reviewing policies and procedures in assuring an agency-wide process and implementation are conducted and documented
 - Reviewing employee job descriptions
 - Reviewing supervisor and staff trainings
 - Reviewing performance review process
 - Reviewing after-action reports for outbreak investigations and emergency preparedness events and exercises
 2. **Local Public Health Assessment and Planning Process**
 - Reviewing data from the organizational self-assessments and community health assessments per the Local Public Health Assessment and Planning Process.
 - Reviewing and selecting ten areas of greatest community health need and the three standards most in need of improvement.
 - Reviewing the Community Health Improvement Plan, the QI plan and the Strategic Plan annually.
 - Reviewing National Accreditation Standards in assuring compliance with public health standards.
 3. **Those activities that require action in this plan year include:**
 - Reviewing cultural competencies in policies, procedures, written and oral materials, and staff knowledge and practice.
 - Reviewing core competencies for each position title.

II. Glossary of Terms

- A. **Quality Improvement:** an integrative process that links knowledge, structures, processes and outcomes to enhance quality throughout an organization

- B. **Core Competency: the collective learning in organizations, and involve how to coordinate diverse production skills and integrate multiple streams of technologies. It is communication, an involvement and a deep commitment to working across organizational boundaries.**
- C. Cross Sectional Representation of SWHHS includes representatives from both management and staff, all office locations, experienced and inexperienced staff, long term and short term employees, public health and human services departments, and all program areas.
- D. Executive Team: group including the director, the division directors, and the planner
- E. Focus Team: group including the director, division directors, supervisors, planner and executive assistant
- F. Local Public Health Assessment and Planning Process: Process developed by the Minnesota Department of Health Office of Performance Improvement to assess, plan, and communicate the work of local public health. The following are all part of this five-year process.
 - 1. Community Health Assessment: An assessment of the communities' health status within the jurisdiction of SWHHS using current data or new data
 - 2. Community Health Improvement Plan: An agency work plan focusing on the top priorities identified in the Community Health Assessment
 - 3. Organizational Self-assessment: An organizational assessment comparing agency practice against the National Accreditation Standards
 - 4. Strategic Plan: A carefully devised plan of action to achieve goals identified in assessments and/or brainstorming sessions.
- G. National Accreditation Standards: Standards that health departments can put in place to ensure that they are continuously improving services to keep their communities healthy.

III. Organizational Structure

- A. The Southwest Health and Human Services Boards of Directors
 - The Governing Board consists of elected officials from the counties represented in the agency and is charged with making operational decisions. Their authority is driven from the Joint Powers Act in state statute.
 - The SWHHS Community Health Board is responsible for programmatic decisions facing public health as per state statute.
 - The SWHHS Human Services Board is responsible for programmatic decisions facing human services as per state statute.
 - The Governing Board is responsible for the overall quality of services in the organization, allocation of resources for QI processes and activities, and approval of the QI plan annually.
 - QI activities and resource allocation are delegated from the Governing Board to the Agency Director and the Quality Council.
 - The annual agency budget will reflect financial resources dedicated to Quality Improvement Activities and will be approved by the governing board.

The agency will seek additional financial resources via local, state or federal grants, local funding streams, etc. to fund QI projects.

- The Governing Board receives a report annually on the health data with recommended actions for health policy decisions, progress toward program goals, recommendations based on after-action reviews and other QI efforts.
- All boards will receive periodic reports from the Quality Council and/or Agency Director related to QI activities or QI projects as the report fits the board's level of authority.
- Board members are asked to participate in QI projects and/or meetings as appropriate.

B. Agency Director

- The Agency Director serves as an ex-officio member of the Quality Council.
- The Agency Director gives direction to the Quality Council as determined by the Boards of Directors and is the liaison between the boards and the Quality Council.

C. QI Council

- The Quality Council consists of cross-sectional representation from SWHHS.
- Members are appointed by the Quality Council and serve a term of two years. Less than half of the Quality Council members can rotate off each year.
- The Quality Council is charged with carrying out the purpose and scope of quality improvement efforts at SWHHS.
- A Quality Council Charter is developed and reviewed annually.

D. Executive Team

- The Executive Team will be notified of the Quality Council's activities periodically and will hear recommendations for revision of the QI plan annually.
- Through the Strategic Plan Review and other agency assessment processes, the executive team will forward recommended QI initiatives to the Quality Council to incorporate into the QI plan.

E. Program Supervisors

- Program Supervisors are responsible for:
 - Orienting all staff to Quality Council processes, plans and resources.
 - Developing a work plan for each department.
 - Reviewing the data from the work plans on an annual basis with staff.
 - Initiating problem solving processes and /or QI improvement projects.
 - Identifying staff QI training needs, providing access to training, and tracking attendance.
 - Reporting to the Quality Council from their work plan review, QI projects, state standard gaps, and needed QI trainings.
 - Revising work plans based on findings from annual review and QI projects.
 - Identifying and selecting up to two areas needing improvement to bring to the Quality Council as priorities annually.

- Assuring implementation of QI projects.
- F. SWHHS employees
 - SWHHS employees are responsible for:
 - Working with supervisors on work plan development and reviews for their departments.
 - Compiling program data for measures.
 - Working with supervisors to identify areas for improvement and suggesting improvement projects to address these areas, including meeting the state standards.
 - Conducting quality improvement projects in conjunction with supervisors and other appropriate staff.
 - Reporting QI training needs to supervisors.

IV. Quality Improvement Activities

A. Orientation:

An orientation plan will be developed to assist new and existing employees with getting to know the different functionalities of the agency and the people he/she can access for specific information and support.

B. Policies and Procedures

An agency wide template for policies and procedures will be utilized for all policies and procedures. The policies and procedures will be available on line to all employees.

C. Job Descriptions

An agency wide template for job descriptions and performance reviews will be utilized. The SWHHS Deputy Director will lead all job description revisions and will report to the Quality Council on workforce development recommendations.

D. Performance Appraisals

An agency wide template for job descriptions and performance reviews will be utilized. A policy and process will be developed for performance appraisals and will include Quality Improvement knowledge and involvement.

E. Supervisor and Staff Trainings

A plan will be developed annually for supervisor and staff training needs. A process will be developed to share information learned at external training sessions for all supervisor staff or to bring training sessions to the agency employees.

F. After action reports/Outbreak investigations/Emergency Preparedness events and exercises

For significant outbreak investigations and emergency preparedness events and exercises, after action reports or internal debrief reports are produced to record recommendations for improvement. The Emergency Preparedness Coordinator and/or appropriate supervisor will provide summaries of those reports to the Quality Council for review. Quality Council members are briefed for projects or processes that involve multiple areas or multiple community partners.

G. Community Health Assessment and top priority areas

A Community Health Assessment will be completed in the second year of the five year Community Health Assessment and Planning cycle and three top priority areas will be identified for improvement. A Community Health Improvement Plan will be developed

to improve service in those top priority areas. The Community Health Improvement Plan will be reviewed annually.

H. National Accreditation Standards

The Quality Council will complete an organizational self-assessment annually using the National Accreditation Standards and select three standards in most need of improvement. A plan will be developed to improve compliance with the standards.

I. Strategic Plan

A strategic plan will be developed in the third year of the five year Community Health Assessment and Planning cycle to guide the agency's strategic priorities. The Strategic Plan will be reviewed annually.

J. Cultural Competency

Cultural Competency will be assessed annually and incorporated into the Community Health Improvement Plan, the Strategic Plan, the Quality Improvement Plan, and the agency training plans.

K. Core Competencies

Core Competencies will be assessed and incorporated into the training plans for the agency to enable the agency to strengthen its service delivery.

L. Specific QI projects

Any SWHHS employee can propose a QI project utilizing the QI Project Proposal form. The project should monitor activities that are high-risk, high-volume, or problem-prone. A proposal should include a description of the project, purpose or potential outcome for change, proposed team members and potential resources needed. Each project is prioritized based on alignment with the Strategic Plan, the CHIP, and the agency mission and vision, and the extent the project addresses activities that are high-risk, high volume or problem prone. The Quality Council will review and approve all QI projects and team members or resources needed. A follow-up report to the Quality Council will be required.

M. Special Project Grants: SWHHS has many special projects that are funded by grants and require specific grant duties and reports. The project leader will be responsible for reporting to the Quality Council at the beginning of the grant cycle and periodically during the grant cycle.

V. Training Plan

A. Quality Improvement trainings will be held periodically in an effort to building a quality-focused culture at SWHHS.

B. Quality Council members and supervisors will receive QI training annually either with a speaker brought to the agency or a training opportunity outside the agency.

C. New employees will receive information regarding QI improvement processes from their supervisors as part of the orientation process.

D. SWHHS staff will receive QI training on an on-going basis at staff meetings or agency meetings. This training may be done by Quality Council members or a speaker and will be held at least annually.

E. QI project team members will receive just-in-time training from Quality Council members when their team is formed and will be specific to the position and the project.

- F. Selected SWHHS staff will complete the QI culture survey annually. Baseline data is available with survey completed by focus group and data will be tracked longitudinally.
- G. A summary of training offered and participation will be included in the Annual Report.

VI. Communication Plan

Quality Improvement Activities will be reported to the Executive Committee, the Boards of Directors, and focus team on a regular basis. Quality Improvement updates will be communicated to all employees through periodic email updates and staff meetings. Supervisors will be responsible for ongoing communication to staff about the QI plan and process established within the agency. QI Project teams will display their projects through story boards displayed in the agency offices.

VII. Approval of QI Plan and Annual Evaluation

- A. The Quality Council will annually review and make suggested revisions to this QI Plan
- B. The Quality Council will ensure that the plan aligns with the State (MDH) Quality Improvement Plan, the national accreditation standards, the Minnesota Local Public Health Assessment and Planning Process, and other state and national QI efforts.
- C. The Quality Council will develop an annual report that includes progress towards targets and goals for program outcomes; accomplishments of QI projects and initiatives; extent of alignment with the strategic plan, the agency's mission and vision, the CHIP, and other agency-wide plans; trainings completed; and evaluations from QI project teams, leadership and board members.
- D. An annual report is submitted to the Executive Committee by January 31 of each year and to the Governing Board in February.
- E. A revised plan is provided to the Governing Board at the February meeting each year for approval.