



****PLEASE NOTE****

THE BOARD MEETING WILL BE HELD IN REDWOOD FALLS

Southwest Health and Human Services
 Board Agenda
 Wednesday, July 16, 2014
 Courthouse, 250 S. Jefferson St.
 Redwood Falls
 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 06/18/14 board minutes

D. Financial

E. Caseload

	06/14	05/14	04/14
Social Service	3717	3756	3763
Licensing	474	481	479
Out-of-Home Placements	130	132	133
Income Maintenance	12,121	12,139	12,132
Child Support Cases	3,660	3,671	3,669
Child Support Collections	\$914,788	\$907,135	\$891,236
Non IV-D Collections	\$61,767	\$128,686.65	\$51,680.54

9:30 a.m. F. Office of the State Auditor – 2013 Audit Report

G. Decision Items

- 1.
- 2.

H. Discussion/Information

- 1.

COMMUNITY HEALTH

- I. Call to order
- J. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 06/18/14 board minutes
- K. Financial
- L. Caseload

	06/14	05/14	04/14
WIC		2173	2171
Family Home Visiting	62	55	52
PCA Assessments	19	33	25
Managed Care	199	186	278
Dental Varnishing	106	130	126
Refugee Health	13	9	7
Latent TB Medication Distribution	27	47	22
- M. Decision Items
 - 1.
 - 2.
- N. Discussion/Information
 - 1. UCare – car seat award
 - 2. Emergency Preparedness (Cottonwood flooding) – Marie Meyers
 - 3. MDH Accreditation

GOVERNING BOARD

- O. Call to order
- P. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 06/18/14 board minutes
- Q. Financial
- R. Introduce new staff – Abbie Meyer, Social Worker (CPS)

GOVERNING BOARD (cont.)

S. Employee Recognition

- Nicole Prellwitz – 1 year
- Ann Abraham – 1 year
- Megan Gullickson – 1 year
- Krista Kopperud – 1 year
- Anita Van Veldhuizen – 1 year
- Julie Schuelke – 15 years
- Dianna Tomlinson – 40 years

T. Decision Items

1. Anita Van Veldhuizen, Office Support Specialist, completion of 12 month probationary period, no salary increase, effective 07/15/14
2. Ann Abraham, Public Health Nurse, completion of 12 month probationary period, no salary increase, effective 07/15/14
3. Megan Gullickson, Social Worker, completion of 12 month probationary period, no salary increase, effective 07/29/14
4. Krista Kopperud, Health and Human Services Planner, completion of 12 month probationary period, no salary increase, effective 08/12/14
5. Deb Clem, Social Worker, resignation, effective 06/20/14
6. Jessica Thurstin, Support Enforcement Aide, separation, effective 06/26/14
7. Paula Bloemendaal, Public Health Educator (Tobacco Control & Policy Coordinator), resignation, effective 08/01/14
8. Request for Social Worker
9. Request for Public Health Educator
10. Safety Policy Number 2 – Infection/Exposure Control Program
11. Contracts
12. Fiscal Host – Local Advisory Council
- 13.

U. Discussion/Information

1. Cultural Competency project
- 2.

V. Adjournment

Next Meeting Dates:

- **Wednesday, August 20, 2014 – Slayton**
- **Wednesday, September 17, 2014 – Marshall**
- **Wednesday, October 15, 2014 – Luverne**

SOUTHWEST HEALTH & HUMAN SERVICES

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

SUMMARY OF FINANCIAL ACCOUNTS REPORT For the Month Ending: **June 30, 2014**

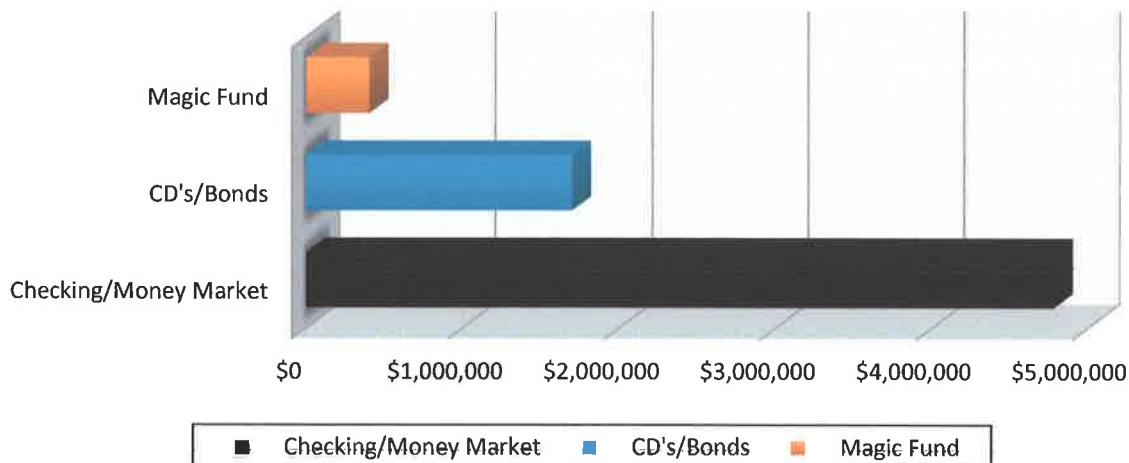
*** Income Maintenance * Social Services * Information Technology * Health ***

Description	Month	Running Balance
BEGINNING BALANCE		\$2,896,765
RECEIPTS		
Monthly Receipts	1,600,105	
County Contribution	3,075,381	
Interest on Investments	150	
TOTAL MONTHLY RECEIPTS		4,675,636
DISBURSEMENTS		
Monthly Disbursements	2,381,401	
TOTAL MONTHLY DISBURSEMENTS		2,381,401
ENDING BALANCE		\$5,191,000

REVENUE

<i>Checking/Money Market</i>	\$4,786,305	Average Balance last two years \$6,600,279
<i>CD's/Bonds</i>	\$1,699,750	
<i>Magic Fund</i>	\$404,695	
<i>(May 2014 - yield .04%)</i>		
ENDING BALANCE	\$6,890,750	

REVENUE DESIGNATION



Southwest Health and Human Services



NJW
7/2/14

12:12PM

TREASURER'S CASH TRIAL BALANCE

As of 06/2014

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
1 Health Services Fund	1,532,833.38			
Receipts		208,863.80	1,642,076.86	
Disbursements		33,208.14-	472,002.15-	
Payroll		188,135.53-	1,179,777.20-	
Journal Entries		0.00	74,962.50-	
Fund Total		12,479.87-	84,664.99-	1,448,168.39
5 Human Services Fund	947,913.02			
General Administration				
Receipts		52,362.85	310,561.68	
Disbursements		40,424.09-	333,257.52-	
Payroll		5,146.98-	50,562.00-	
Dept Total		6,791.78	73,257.84-	874,655.18
5 Human Services Fund	2,133,213.06-			
Income Maintenance				
Receipts		1,063,684.50	3,513,073.36	
Disbursements		268,311.47-	1,586,031.76-	
Payroll		307,067.34-	2,012,181.49-	
Journal Entries		0.00	169,915.00-	
Dept Total		488,305.69	255,054.89-	2,388,267.95-
5 Human Services Fund	32,305,717.42-			
Social Services				
Receipts		534.62	19,511.85	
Disbursements		89,873.03-	648,632.81-	
Payroll		483,731.02-	3,062,979.85-	
Journal Entries		0.00	254,872.50-	
Dept Total		573,069.43-	3,946,973.31-	36,252,690.73-
5 Human Services Fund	39,771,425.35			
Purchased Services,SSIS				
Receipts		3,139,354.20	6,594,326.74	
Disbursements		16,793.67-	43,680.99-	
SSIS		614,896.18-	3,623,544.84-	

Southwest Health and Human Services



NJW
7/2/14

12:12PM

As of 06/2014

TREASURER'S CASH TRIAL BALANCE

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
5	1,593,070.09-	2,507,664.35	2,927,100.91	42,698,526.26
	Human Services Fund	Information Systems		
	Receipts	5,974.00	40,343.99	
	Disbursements	223.83-	2,226.17-	
	Payroll	21,571.39-	138,213.90-	
	Dept Total	15,821.22-	100,096.08-	1,693,166.17-
5	0.00	LCTS Collaborative Agency		
	Human Services Fund			
	Receipts	34,755.00	166,264.00	
	Disbursements	34,755.00-	166,264.00-	
	Dept Total	0.00	0.00	0.00
	Fund Total	2,413,871.17	1,448,281.21-	3,239,056.59
61	123,821.48	Agency Health Insurance		
	Receipts	170,107.42	1,023,333.91	
	Disbursements	199,323.70-	863,619.61-	
	Fund Total	29,216.28-	159,714.30	283,535.78
71	115,832.97	LCTS Collaborative Agency		
	LCTS Lyon Murray Collaborative Fund			
	Receipts	0.00	49,479.87	
	Disbursements	0.00	43,773.00-	
	Dept Total	0.00	5,706.87	121,539.84
	Fund Total	0.00	5,706.87	121,539.84
73	38,376.92	LCTS Collaborative Agency		
	LCTS Rock Pipestone Collaborative Fund			
	Receipts	0.00	23,511.88	
	Disbursements	0.00	5,044.00-	

Southwest Health and Human Services



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7/2/14

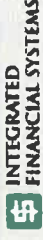
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TREASURER'S CASH TRIAL BALANCE

As of 06/2014

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
Dept Total		0.00	18,467.88	56,844.80
Fund Total	38,376.92	0.00	18,467.88	56,844.80
75 Redwood LCTS Collaborative				
	102,329.62			
Receipts		0.00	58,517.25	
Disbursements		77,940.00-	118,992.00-	
Dept Total		77,940.00-	60,474.75-	41,854.87
Fund Total	102,329.62	77,940.00-	60,474.75-	41,854.87
All Funds	6,600,532.17			
Receipts		4,675,636.39	13,441,001.39	
Disbursements		760,852.93-	4,283,524.01-	
SSIS		614,896.18-	3,623,544.84-	
Payroll		1,005,652.26-	6,443,714.44-	
Journal Entries		0.00	499,750.00-	
Total		2,294,235.02	1,409,531.90-	5,191,000.27

Southwest Health and Human Services



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7/2/14 12:12PM

TRIAL BALANCE REPORT

As of 06/2014

Report Basis: Cash

1 Health Services Fund

Account

	<u>Beginning Balance</u>	<u>Actual This-Month</u>	<u>Actual Year-To-Date</u>	<u>Current Balance</u>
-----Assets-----				
1001 Cash in Bank - Checking	1,532,833.38	12,479.87-	84,664.99-	1,448,168.39
1090 Investments	400,000.00	0.00	74,962.50	474,962.50
Total Assets	1,932,833.38	12,479.87-	9,702.49-	1,923,130.89
--- Liabilities and Balance ---				
Liabilities				
2020 Accounts Payable	0.00	667.43	0.00	0.00
Total Liabilities	0.00	667.43	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	1,932,833.38-	0.00	0.00	1,932,833.38-
2885 Revenue Control	0.00	208,863.80-	1,639,693.39-	1,639,693.39-
2887 Expenditure (Control)	0.00	220,676.24	1,649,395.88	1,649,395.88
Total Fund Balance	1,932,833.38-	11,812.44	9,702.49	1,923,130.89-
Total Liabilities and Balance	1,932,833.38-	12,479.87	9,702.49	1,923,130.89-
410 General Administration				
-----Assets-----				
Total Assets	0.00	0.00	0.00	0.00
--- Liabilities and Balance ---				
Liabilities				
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				

Southwest Health and Human Services

NJW
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5 Human Services Fund

TRIAL BALANCE REPORT
As of 06/2014
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>
410 General Administration				
1001 Cash In Bank - Checking	947,913.02	6,791.78	73,257.84-	874,655.18
Total Assets	947,913.02	6,791.78	73,257.84-	874,655.18

Liabilities and Balance-----				
2080 Medical Insurance Payable	40,941.81-	0.00	0.00	40,941.81-
2090 Due To Flexible Plan Employees	1,920.70	0.00	476.06-	1,444.64
Total Liabilities	39,021.11-	0.00	476.06-	39,497.17-
Fund Balance	908,891.91-	0.00	0.00	908,891.91-
2887 Unassigned Fund Balance	0.00	6,791.78-	73,733.90	73,733.90
Expenditure Control	908,891.91-	6,791.78-	73,733.90	835,158.01-
Total Liabilities and Balance	947,913.02-	6,791.78-	73,257.84	874,655.18-
420 Income Maintenance				
1001 Cash In Bank - Checking	2,133,213.06-	488,305.69	255,054.89-	2,388,267.95-
1090 Investments	320,000.00	0.00	169,915.00	489,915.00
Total Assets	1,813,213.06-	488,305.69	85,139.89-	1,898,352.95-

Liabilities and Balance-----				
2020 Accounts Payable	0.00	4,877.78	0.00	0.00
Total Liabilities	0.00	4,877.78	0.00	0.00
Fund Balance	1,813,213.06	0.00	0.00	1,813,213.06
2887 Unassigned Fund Balance	0.00	1,062,999.58-	3,504,101.10-	3,504,101.10-
2885 Revenue Control	0.00	569,816.11	3,589,240.99	3,589,240.99
2887 Expenditure Control	1,813,213.06	493,183.47-	85,139.89	1,898,352.95
Total Fund Balance	1,813,213.06	488,305.69-	85,139.89	1,898,352.95
Total Liabilities and Balance	1,813,213.06	488,305.69-	85,139.89	1,898,352.95
430 Social Services				

Southwest Health and Human Services

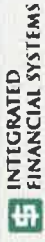


NJW
7/2/14 12:12PM
5 Human Services Fund

TRIAL BALANCE REPORT
As of 06/2014
Report Basis: Cash

Account	Beginning Balance	Actual This-Month	Actual Year-To-Date	Current Balance
-----Assets-----				
1001 Cash In Bank - Checking	32,305,717.42	573,069.43	3,946,973.31	36,252,690.73
1090 Investments	480,000.00	0.00	254,872.50	734,872.50
Total Assets	31,825,717.42	573,069.43	3,692,100.81	35,517,818.23
--- Liabilities and Balance				
Liabilities				
2020 Accounts Payable	0.00	3,504.78	0.00	0.00
Total Liabilities	0.00	3,504.78	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	31,825,717.42	0.00	0.00	31,825,717.42
2885 Revenue Control	0.00	433.95	10,914.02	10,914.02
2887 Expenditure Control	0.00	569,998.60	3,703,014.83	3,703,014.83
Total Fund Balance	31,825,717.42	569,564.65	3,692,100.81	35,517,818.23
Total Liabilities and Balance	31,825,717.42	573,069.43	3,692,100.81	35,517,818.23
-----Assets-----				
431 Purchased Services,SSIS				
1001 Cash In Bank - Checking	39,771,425.35	2,507,664.35	2,927,100.91	42,698,526.26
1205 County Advances - MFIP (Chippewa Cty)	80,749.47	0.00	0.00	80,749.47
Total Assets	39,852,174.82	2,507,664.35	2,927,100.91	42,779,275.73
--- Liabilities and Balance				
Liabilities				
2020 Accounts Payable	0.00	11,208.56	0.00	0.00
Total Liabilities	0.00	11,208.56	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	39,852,174.82	0.00	0.00	39,852,174.82
2885 Revenue Control	0.00	3,133,157.55	6,534,620.08	6,534,620.08
2887 Expenditure Control	0.00	614,284.64	3,607,519.17	3,607,519.17
Total Fund Balance	39,852,174.82	2,518,872.91	2,927,100.91	42,779,275.73
Total Liabilities and Balance	39,852,174.82	2,507,664.35	2,927,100.91	42,779,275.73
-----Assets-----				
461 Information Systems				
1001 Cash In Bank - Checking	1,593,070.09	15,821.22	100,096.08	1,693,166.17

Southwest Health and Human Services



NJW

7/2/14 12:12PM

STATEMENT OF REVENUES AND EXPENDITURES

As Of 06/2014 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2014 BUDGET	% OF BUDG	% OF YEAR
FUND 1 HEALTH SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	0.00	386,832.50	744,604.00	52	50
INTERGOVERNMENTAL REVENUES	19,419.37	90,059.04	231,500.00	39	50
STATE REVENUES	106,951.27	375,749.15	742,202.00	51	50
FEDERAL REVENUES	62,414.83	557,927.73	979,798.00	57	50
FEES	19,909.78	191,804.85	436,160.00	44	50
EARNINGS ON INVESTMENTS	22.53	654.66	0.00	0	50
MISCELLANEOUS REVENUES	146.02	36,665.46	13,550.00	271	50
TOTAL REVENUES	208,863.80	1,639,693.39	3,147,814.00	52	50
EXPENDITURES					
PROGRAM EXPENDITURES	0.00	0.00	0.00	0	50
PAYROLL AND BENEFITS	188,135.53	1,184,186.94	2,441,523.00	49	50
OTHER EXPENDITURES	32,540.71	465,208.94	706,291.00	66	50
TOTAL EXPENDITURES	220,676.24	1,649,395.88	3,147,814.00	52	50

Southwest Health and Human Services



NJW

7/2/14 12:12PM

STATEMENT OF REVENUES AND EXPENDITURES

As Of 06/2014 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2014 BUDGET	% OF BUDG	% OF YEAR
FUND 5 HUMAN SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	3,075,381.84-	3,775,345.55-	9,088,388.00-	42	50
INTERGOVERNMENTAL REVENUES	0.00	11,802.79-	37,804.00-	31	50
STATE REVENUES	204,229.17-	1,432,078.95-	3,779,362.00-	38	50
FEDERAL REVENUES	761,223.57-	3,534,926.36-	6,570,948.00-	54	50
FEES	123,730.70-	718,227.08-	1,258,000.00-	57	50
EARNINGS ON INVESTMENTS	127.66-	3,709.72-	8,500.00-	44	50
MISCELLANEOUS REVENUES	72,627.14-	780,152.74-	1,530,137.00-	51	50
TOTAL REVENUES	4,237,320.08-	10,256,243.19-	22,273,139.00-	46	50
EXPENDITURES					
PROGRAM EXPENDITURES	782,150.58	4,639,839.08	8,942,678.00	52	50
PAYROLL AND BENEFITS	805,385.10	5,286,175.52	11,086,897.00	48	50
OTHER EXPENDITURES	216,322.11	1,354,198.36	2,243,564.00	60	50
TOTAL EXPENDITURES	1,803,857.79	11,280,212.96	22,273,139.00	51	50

Southwest Health and Human Services



NJW
7/2/14 12:13PM

REVENUES & EXPENDITURES BY PROG, DEPT, AND FUND AS OF 06/2014

Report Basis: Cash

Element	Description	Account Number	Revenue	Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
900 PROGRAM	Emergency Preparedness			0.00	44,309.18-	114,000.00-	39	50
			Expend.	8,580.99	49,287.05	118,000.00	42	50
			Net	8,580.99	4,977.87	4,000.00	124	50
901 PROGRAM	Med Reserve Corps			0.00	3,500.00-	4,000.00-	88	50
			Expend.	116.29	607.18	0.00	0	50
			Net	116.29	2,892.82-	4,000.00-	72	50
483 DEPT	Health Education	Totals:						
			Revenue	24,353.14-	222,401.51-	532,150.00-	42	50
			Expend.	27,000.08	261,454.85	517,930.00	50	50
			Net	2,646.94	39,053.34	14,220.00-	275-	50
485 DEPT	Environmental Health							
800 PROGRAM	Environmental							
			Revenue	11,655.25-	54,489.02-	138,500.00-	39	50
			Expend.	6,398.37	76,177.54	162,422.00	47	50
			Net	5,256.88-	21,688.52	23,922.00	91	50
830 PROGRAM	FDA- Research(Standardization for Ins							
			Revenue	1,411.46	1,576.60	0.00	0	50
			Expend.	1,411.46	1,576.60	0.00	0	50
			Net					
485 DEPT	Environmental Health	Totals:						
			Revenue	11,655.25-	54,489.02-	138,500.00-	39	50
			Expend.	7,809.83	77,754.14	162,422.00	48	50
			Net	3,845.42-	23,265.12	23,922.00	97	50
1 FUND	Health Services Fund	Totals:						
			Revenue	208,863.80-	1,639,693.39-	3,147,814.00-	52	50
			Expend.	220,676.24	1,649,395.88	3,147,814.00	52	50
			Net	11,812.44	9,702.49	0.00	0	50

Southwest Health and Human Services

REVENUES & EXPENDITURES BY PROG, DEPT, AND FUND AS OF 06/2014

Report Basis: Cash

<u>Element</u>	<u>Description</u>	<u>Account Number</u>	<u>Current Month</u>	<u>Year-To-Date</u>	<u>Budget</u>	<u>% of Bdgt</u>	<u>% of Year</u>
5 FUND	Human Services Fund	Totals:	Revenue 4,237,320.08- Expend. 1,803,857.79 Net 2,433,462.29-	10,256,243.19- 11,280,212.96 1,023,969.77	22,273,139.00- 22,273,139.00 0.00	46 51 0	50 50 50
FINAL TOTALS	868 Accounts		Revenue 4,446,183.88- Expend. 2,024,534.03 Net 2,421,649.85-	11,895,936.58- 12,929,608.84 1,033,672.26	25,420,953.00- 25,420,953.00 0.00	47 51 0	50 50 50

**SOUTHWEST HEALTH AND HUMAN SERVICES CHECK REGISTER
JUNE 2014**

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	-DISBURSEMENTS	BALANCE
	BALANCE FORWARD				2,896,765.25
6/2/14	44483-44513	Disb		19,787.43	2,876,977.82
6/2/14	357-358 ACH	Disb		471.12	2,876,506.70
6/2/14	9158	Disb		19,756.10	2,856,750.60
6/2/14	9159	Disb		7,879.60	2,848,871.00
6/3/14	8772-8802	Dep	60,526.62		2,909,397.62
6/9/14	44514 - 44551	Disb		3,195.55	2,906,202.07
6/9/14	44552 - 44694	Disb		275,244.09	2,630,957.98
6/9/14	359 - 380 ACH	Disb		2,969.50	2,627,988.48
6/6/14	8803-24,8832-55	Dep	333,882.91		2,961,871.39
6/6/14	8856	Dep	1,097,970.50		4,059,841.89
6/9/14	9160	Disb		52,060.95	4,007,780.94
6/9/14	9161	Disb		4,980.40	4,002,800.54
6/10/14	8825-8831,8857-8897	Dep	418,550.43		4,421,350.97
6/13/14	6415-6429	PAYROLL		114,407.18	4,306,943.79
6/13/14	25652-25866 ACH	PAYROLL		386,945.47	3,919,998.32
6/13/14	8898-8936,8960-74	Dep	220,228.30		4,140,226.62
6/16/14	44695-44760	Disb		20,476.72	4,119,749.90
6/16/14	44761-44889	Disb		281,563.08	3,838,186.82
6/16/14	381-395 ACH	Disb		1,598.55	3,836,588.27
6/16/14	9162	Disb		54,739.65	3,781,848.62
6/16/14	9163	Disb		6,791.53	3,775,057.09
6/16/14	9164	Disb		11,123.74	3,763,933.35
6/17/14	8937-59,8975-8995,9001-9008	Dep	1,459,594.68		5,223,528.03
6/20/14	44890-45187 (CEI)	Disb		83,637.32	5,139,890.71
6/20/14	396-397 ACH (CEI)	Disb		371.75	5,139,518.96
6/23/14	45188-45224	Disb		3,720.52	5,135,798.44
6/23/14	45225-45350	Disb		320,871.53	4,814,926.91
6/23/14	398-405 ACH	Disb		1,782.44	4,813,144.47
6/20/14	9009-9049	Dep	261,977.30		5,075,121.77
6/23/14	9053	Dep	590,729.89		5,665,851.66
6/24/14	9050-52,9054-9079	Dep	29,759.71		5,695,611.37
6/23/14	9165	Disb		4,058.86	5,691,552.51
6/23/14	9166	Disb		16,187.46	5,675,365.05
6/27/14	6430-6448	PAYROLL		113,905.41	5,561,459.64
6/27/14	25887-26092	PAYROLL		390,394.20	5,171,065.44
6/27/14	9080-97,9103-17,9131	Dep	198,780.57		5,369,846.01
6/30/14	45351 - 45396	Disb		3,647.00	5,366,199.01
6/30/14	406 ACH	Disb		105.80	5,366,093.21
6/30/14	45397 - 45512	Disb		156,983.01	5,209,110.20
6/30/14	9167	Disb		6,103.64	5,203,006.56
6/30/14	9168	Disb		15,641.77	5,187,364.79
6/30/14	9098-102,9136-41	Dep	3,485.29		5,190,850.08
6/17/14	13948	Interest	12.32		5,190,862.40
6/17/14	13949	Interest	137.87		5,191,000.27
					5,191,000.27
					5,191,000.27
					5,191,000.27
	Balanced 7/1/14 JVP	TOTALS	4,675,636.39	2,381,401.37	

Adult - Social Services Caseload

Average	Adult Brain Injury (BI)	Adult Community Alternative Care (CAC)	Adult Community Alternatives for Disabled Individuals (CADf)	Adult Mental Health (AMH)	Adult Protective Services (APS)	Adult Services (AS)	Alternative Care (AC)	Chemical Dependency (CD)	Developmental Disabilities (DD)	Elderly Waiver (EW)	Total Programs
2014	14	14	253	324	35	875	26	478	462	318	2798
2015											
2016											
2017											

2014	Adult Brain Injury (BI)	Adult Community Alternative Care (CAC)	Adult Community Alternatives for Disabled Individuals (CADf)	Adult Mental Health (AMH)	Adult Protective Services (APS)	Adult Services (AS)	Alternative Care (AC)	Chemical Dependency (CD)	Developmental Disabilities (DD)	Elderly Waiver (EW)	Total Programs
January	14	14	259	327	31	903	24	442	464	312	2790
February	14	14	254	324	31	887	24	451	461	312	2772
March	14	14	253	320	30	885	24	487	460	311	2798
April	14	14	247	326	46	823	31	531	462	336	2830
May	14	14	246	323	52	834	32	505	463	334	2817
June	14	14	247	321	47	829	35	496	466	341	2810
July											
August											
September											
October											
November											
December											
	14	14	251	324	40	860	28	485	463	324	2803

Children's - Social Services Caseload

Average	Adolescent Independent Living (ALS)	Adoption	Child Brain Injury (BI)	Child Community Alternative Care (CAC)	Child Community Alternatives for Disabled Individuals (CADI)	Child Protection (CP)	Child Welfare (CW)	Children's Mental Health (CMH)	Early Intervention: Infants & Toddlers with Disabilities	Minor Parents (MP)	Parent Support Outreach Program (PSOP)	Total Programs
2014	43	18	0	5	33	131	103	105	1	1	12	450
2015												
2016												
2017												

2014	Adolescent Independent Living (ALS)	Adoption	Child Brain Injury (BI)	Child Community Alternative Care (CAC)	Child Community Alternatives for Disabled Individuals (CADI)	Child Protection (CP)	Child Welfare (CW)	Children's Mental Health (CMH)	Early Intervention: Infants & Toddlers with Disabilities	Minor Parents (MP)	Parent Support Outreach Program (PSOP)	Total Programs
January	39	18	0	5	33	120	105	99	0	1	16	436
February	44	18	0	5	34	128	99	105	1	1	10	445
March	44	18	0	4	32	143	102	108	1	1	10	463
April	44	17	0	4	33	131	104	108	1	1	11	454
May	44	17	0	4	33	128	103	110	1	1	17	458
June	44	18	0	4	33	110	101	107	0	1	15	433
July												
August												
September												
October												
November												
December												
	43	18	0	4	33	127	102	106	1	1	13	448

2014 KIDS IN OUT OF HOME PLACEMENT

	June	
	# of placements	Probation placements
Lincoln	4	1
Rock	17	0
Lyon	27	9
Pipestone	17	0
Redwood	39	8
Murray	8	0
Totals	112	18
Total # of kids	130	

**June 2014 - Placement by Category
130 Kids in Placements**



July 2014:

Total of 6 Children entered placement

2	Redwood	Shelter Care
3	Redwood	Foster Family Home (siblings)
1	Redwood	Probation

Total of 8 Children were discharged from placement

1	Pipestone	Child's reunification home
1	Rock	Residential treatment facility
2	Redwood	Probation
2	Murray	Foster family home (siblings)
1	Lyon	Probation
1	Lyon	Foster family home-relative

There were no adoptions this month.

**NON IVD COLLECTIONS
JUNE 2014**

PROGRAM	ACCOUNT	TOTAL
MSA/GRH	05-420-605.5802	0.00
TANF (MFIP/DWP/AFDC)	05-420-610.5803	408.54
GA	05-420-620.5803	42.00
FS	05-420-630.5803	730.37
CS (PI Fee, App Fee, etc)	05-420-640.5501	1,679.53
MA	05-420-650.5803, 5513	32,623.34
REFUGEE	05-420-680.5803	0.00
CHILDRENS		
Parental Fees, Holds	05-431-710.5501	3,636.00
Corp FC Licensing	05-431-710.5505	200.00
OOH/FC Recovery	05-431-710.5803	14,600.69
CHILDCARE		
Licensing	05-431-720.5502	1,950.00
Over Payments	05-431-721&722.5803	0.00
CHEMICAL DEPENDENCY		
CD Assessments	05-431-730.5519	4,287.11
Detox Fees	05-431-730.5520	1,395.23
MENTAL HEALTH		
Insurance Copay	05-431-740.5803	214.30
DEVELOPMENTAL DISABILITIES		
Insurance Copay	05-431-750.5803	0.00
ADULT		
Insurance Copay	05-431-760.5803	0.00
TOTAL NON-IVD COLLECTIONS		61,767

**SOUTHWEST HEALTH AND HUMAN SERVICES
SAFETY POLICY NUMBER 2**

EFFECTIVE DATE: 01/18/12

REVISION DATE: 07/16/14

AUTHORITY: Southwest Health and Human Services Joint Governing Board

--INFECTION/EXPOSURE CONTROL PROGRAM--

Section 1 - Policy

- a. Southwest Health and Human Services will establish a written Exposure Control Plan designed to eliminate or minimize employee exposure. The Exposure Control Plan will be reviewed annually and whenever necessary to reflect new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Section 2 - Purpose

- a. To identify specific procedures for Southwest Health and Human Services employees in the identification, prevention, exposure and control of infectious diseases.

Section 3 – Standard Precautions

- a. Wash hands before and after a staff member comes in contact with clients and/or blood or body fluids.
- b. Wear disposable gloves at all times when contact with blood or body fluids is anticipated.
- c. Wear protective gowns or aprons when splashes of blood or body fluid are likely to occur.
- d. Use disposable supplies whenever possible.
- e. Use masks or goggles anytime a splash to the eyes or mucous membrane is anticipated.

Section 4 – Engineering and Work Practice Controls

- a. Management will provide waterless hand sanitizer, soap and paper towels to employees to utilize in their work settings.

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SAFETY POLICY NUMBER 2**

- b. Antiseptic hand cleaners will be available to employees who do not have access to soap and water. Employees who have used antiseptic cleanser must wash their hands with soap and water as soon as possible.
- c. Employees will wear gloves when handling blood or potentially infectious materials and wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
- d. Employees will wash hands and any other skin with soap and water or flush mucous membranes with water immediately or as soon as feasible following contact with blood or other potentially infectious materials.
- e. Employees must remove all overtly contaminated PPE immediately or as soon as possible after leaving a work area. They must place PPE in an appropriately designated container for storage, washing, decontamination, or disposal. Eye goggles must be cleaned if blood or other body fluids have contaminated them.
- ~~f. Employees will wash their hands promptly after removing gloves or other PPE.~~
- gf. Employees will properly dispose of needles and sharps in the following manner:
- Contaminated needles, syringes, and sharps shall not be recapped, bent, or removed.
 - Shearing or breaking of contaminated needles is prohibited.
 - Immediately or as soon as possible after use, contaminated sharps shall be placed in an appropriate sharps container.
 - These sharp containers will be located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found.
 - Sharps containers will be inspected before, during, and after each shot clinic and will be removed when the sharps containers become $\frac{1}{2}$ to $\frac{3}{4}$ full and will be transferred to the ~~contracted drop site~~ biohazard waste container in the Marshall or Redwood Public Health office as soon as possible.
 - Sharps containers will be closed and locked prior to transfer to ~~contracted drop site~~ biohazard waste container.
- hg. Employees may not eat, drink, smoke, or apply cosmetics or lip balm or handle contact lenses in laboratories or other areas where blood or other potentially infectious materials are located.
- ih. Employees may not keep food and drink in refrigerators, freezers, or other areas where blood or other potentially infectious materials are present.

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- j. Management will allow the appropriate agency employees the opportunity to participate in identifying and choosing the safest needle devices necessary to conduct agency activities.

Section 5 – Personal Protective Equipment

- a. Protective equipment, including PPE for eyes, face, head, and extremities, protective clothing, respiratory devices, and protective shields and barriers, will be provided, used, and maintained in a sanitary and reliable condition wherever it is necessary by reason of hazards of processes or environment, chemical hazards, radiological hazards, or mechanical irritants encountered in a manner capable of causing injury or impairment in the function of any part of the body through absorption, inhalation or physical contact.
- b. Employees will wear gloves and will change gloves between each client contact when:
- Touching blood and body fluids, mucous membranes or non-intact skin of all clients.
 - Handling items or surfaces soiled with blood or body fluids.
 - ~~Giving immunizations, administering mantoux tests, C~~conducting blood screenings, doing lice checks, collecting buccal swabs, cleaning CPR equipment.
(Note: It is at the nurse's discretion to wear gloves when giving immunizations or mantoux)
 - The employee has cuts, scratches or other breaks in his/her skin and will be working with clients.
- c. Employees will wear masks and protective eyewear or face shields during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose and eyes.
- d. Employees will wear gowns or aprons during procedures that are likely to generate splashes of blood or other body fluids or when clothing may come in contact with blood and other body fluids.
- e. ~~Employees will utilize pocket masks when performing CPR.~~ Pocket masks for CPR will be made available for employees use.
- f. Employees will wear National Institute for Occupational Safety and Health (NIOSH) certified face masks that have been fit tested as mandated when providing directly observed therapy to clients in their home that have active tuberculosis. (Refer to the agency's Respiratory Protection Program Policies and Procedures in the Safety Manual for more information about fit testing).

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- g. PPE will be stored in each county office storage area. There will be a sign placed on each location for easy of location.

Section 6 – Respirator Selection

- a. Only respirators approved by the National Institute for Occupational Safety and Health (NIOSH) will be selected and used.
- b. N95 respirators will be used for airborne precautions for disease investigation and client contact activities.
- c. Fit Testing
 - Fit testing is required for tight fitting respirators and will occur after the following conditions:
 - After the employee is medically cleared for respirator use.
 - Before the employee wears the respirator while conducting agency activities.
 - Facial changes – structure or scarring.
 - Significant weight change – 10% or more.
 - Change of respirator size, make, or model.
 - As OSHA standards require.
 - After the initial fit test, fit tests must be completed annually and if there is a change in status of the wearer or if the employer changes model or type of respiratory protection.
 - The employee must be tested with the same make, model, style, and size of respirator that will be used.
 - Factors affecting the respirator seal are facial hair, facial bone structure, dentures, facial scars, eyeglasses and excessive make-up.
 - Employees wearing tight-fitting respirators must perform a user seal check each time they put on the respirator according to the manufacturer’s procedures.

Section 7 - Tuberculosis (TB)

- a. ~~Mantoux tests will be provided to employees based on a TB risk assessment and job analysis completed by the Director of Nursing or designee.~~
- b. ~~Employees reacting positively to the Mantoux test will be referred to their medical provider or agency Medical Consultant for a chest x-ray and further treatment.~~

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- ~~c. Employees exposed to TB while performing agency work activities will receive a Mantoux test within two (2) weeks from the date Public Health Services is informed of the client's active TB. Employees reacting negatively to the first Mantoux test will receive another Mantoux test within 10–12 weeks after exposure or as determined by Minnesota Department of Health guidelines.~~
- ~~d. Employees will receive training on TB at the time of the annual Mantoux test regarding:~~
- ~~• Transmission~~
 - ~~• Signs and symptoms~~
 - ~~• Medical surveillance and therapy~~
 - ~~• Follow-up~~
 - ~~Personal Protective Equipment~~
- a. All new employees who are determined by their Division Director or designee to be at risk for occupational exposure to tuberculosis must have documentation of TB screening before providing services that involve direct contact with the clients. Occupational exposure will be based on the facilities risk factors low, med, high per facility assessment conducted by Public Health.
- b. Positive Mantoux-Definition: A positive mantoux reaction for a person with direct client contact is indicted by an in-duration at the site. (A quick reference chart showing which patients should be treated for latent tuberculosis infection (LTBI) can be found on the Minnesota Department of Health website.)
- c. TB screening guideline:
- **No prior positive Mantoux:** The person without previous written documentation of a positive Mantoux test will receive a baseline Mantoux test using needle, syringe and Purified Protein Derivatives (PPD). The two-step method will be used if the person has not had a documented negative PPD test during the 12 months preceding employment. A second test will be administered 7-21 days after the first test, to ascertain a booster reaction.
 - **Positive Mantoux:** If the person has had a positive reaction to a Mantoux test upon employment or has a positive reaction to a Mantoux test in repeat testing during the course of employment, the person must provide:
 1. Documentation of a negative chest x-ray, dated after the positive Mantoux screening, before working in a position involving direct client contact
 2. Thereafter, an annual symptom screen for those at risk, based on facility assessment.
 - **Significant Adverse Reaction to Mantoux testing:** If a person indicates verbally or in a written report, a previous significant adverse reaction to a Mantoux test

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then they will be referred for a TB blood test if they are deemed at risk for exposure.

- **Negative Mantoux:** Employees that have tested negative for a mantoux and are working in a correctional facility are required to have an annual PPD (Mantoux) test. Annual Mantoux testing is required only among those at high risk for tuberculosis infection, based on facility risk assessment per CDC guidelines.
- **Symptoms:** If symptoms compatible with TB are present, the person shall be excluded from the workplace at the discretion of the Division Director or designee and consulting physician until either:
 1. A diagnosis of active TB is ruled out; or
 2. A diagnosis of active TB is established and the person is being treated and determination is made by a physician with expertise in treatment of TB, and Public Health that the employee is not infectious.
- Persons who do not have active TB, but are converters, shall be evaluated for active TB by chest X-Ray and a medical exam. They will be referred to their personal physician for LTBI preventative therapy. An annual TB symptom screen will be completed for those who are working in a facility with risk of occupational exposure. Notification of any clusters of conversion will be provided to MDH
- **TB Exposures:**
 1. All employee exposures to TB will be documented and kept in the employee's health/medical file.
 - 2. Employees exposed to active TB will have a Mantoux test done, per current CDC guidelines, after exposure and thereafter as recommended by Public Health with MDH consultation.

Section 8 – Post Blood/Body Fluid Exposure, Evaluation and Follow-Up

- a. Following an exposure, First Aid will be administered as needed and the employee will notify their supervisor and complete an incident report.
- b. Management will:
 - Make available to the exposed employee a confidential medical evaluation and follow-up.
 - Document the route of exposure.
 - Document the HBV, HCV and HIV blood borne pathogens status of the source client(s), if known.
 - Document the circumstances under which the exposure occurred.
 - Notify the source client(s) of the incident and attempt to obtain consent to collect and test the client's blood to determine the presence of HIV, HCV and/or

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- ~~HBV~~ blood borne pathogens infection. If consent is not obtained, management will establish that legally required consent cannot be obtained.
- Inform the employee of source client's ~~HIV, HCV and HBV~~ blood borne pathogens status if testing occurs.
- c. The exposed employee will have a blood sample drawn, if employee consents, as soon as possible after the exposure incident for the testing of ~~HIV, HCV and/or HBV~~ blood borne pathogen status.
- If the exposed employee consents to baseline blood collection, but does not give consent for HIV testing, the blood sample will be preserved 90 days. If within 90 days of the exposure incident, the employee elects to have the baseline blood sample tested; HIV testing will be done as soon as possible.
- d. Management will offer repeat testing to exposed employees at 6 weeks, 12 weeks, and 6 months post-exposure or at intervals as indicated by the clinician.
- e. Follow-up of the exposed employee will include:
- Counseling as recommended by the employee's physician or the SWHHS medical consultant.
 - Medical evaluation by the employee's physician or the SWHHS Medical Consultant of any acute febrile illness that occurs within twelve weeks post-exposure.
 - Use of safe and effective post-exposure measures according to recommendations for standard medical practice.
 - Management will provide the physician evaluating an exposed employee with the following:
 - Copy of this policy.
 - Description of the exposed employee's duties as they relate to the exposure incident.
 - Documentation of the route(s) of exposure and the circumstances under which exposure occurred.
 - Results of the source client's blood test if available.
 - Medical records relevant to the appropriate treatment of the employee, including vaccination status.
- f. The employee physician's or SWHHS medical consultant's written report will be obtained by the employer and given to the exposed employee within fifteen days of the completion of the evaluation.

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Section 9 – Infectious Waste Disposal

- a. Employees will place all infectious waste in closable, leak proof containers or bags that are color-coded, labeled or tagged. ~~The containers will be transported to Marshall hospital for disposal. The bagged waste will be placed in Biohazard waste containers located in Public Health in Marshall or Redwood.~~
- b. Employees will place disposable syringes, needles and other sharp items in a puncture-resistant sharps container for disposal. Sharps containers will be disposed of at the Marshall ~~hospital~~ or Redwood Public Health office.
- c. Management will examine equipment, which may become contaminated with blood or other potentially infectious materials prior to servicing or shipping and will be decontaminated, unless management can demonstrate that decontamination of the equipment is not possible. A label or tag will be attached to the equipment stating which portions remain contaminated.

Section 10 – Tags, Labels, and Bags

- a. Tags that comply with 29 CFR 1910.145 (f) will be used to identify the presence of an actual or potential biological hazard.
- b. Tags or labels will contain the word "Biohazard" or the biological hazard symbol and state the specific hazardous condition or the instructions to be communicated to employees.
- ~~c.~~ ~~Labels will be fluorescent orange or orange red or predominately so with lettering or symbols in a contrasting color.~~
- ~~d.~~c. Labels or tags may be an integral part of the container or affixed as close as safely possible to the container by string, wire or adhesive to prevent their loss or intentional removal.
- ~~e.~~d. The appropriate biohazard labels are permanently affixed to the sharps containers and hazardous waste bags used by the agency.

Section 11 – Housekeeping Practices

- a. Management will provide a product that is effective against blood borne pathogens to be used when cleaning work surfaces, equipment and areas where there is a body fluid present.

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- b. Employees will be responsible to wipe clinic work surface areas with the appropriate disinfectant before the clinic begins.
- c. Employees will be responsible to wipe areas where blood was drawn, fingers were poked, immunizations were given, urine was tested, or where used syringes were laid at the end of clinic activity or anytime there is a body fluid present on any surface.
- d. Employees will, to the best of their ability, dispose of syringes into the sharps box immediately after a shot was given rather than laid them on a surface. If necessary, the employee will place portable sharps boxes in an area that will facilitate the efficient disposal of syringes.
- e. Equipment such as ~~glucoscans, cholesterol screening devices, blood sugar machines, hemacues, and other machines used to test blood~~ will be cleaned ~~after each use depending on the amount of blood present and/or at the end of the workday, according to manufacturer's directions.~~
- f. Lyon County maintenance staff will wipe the counters and sink areas in the nursing lab and exam rooms weekly. The exam tables in the exam rooms will be wiped off weekly as well. The product they use will be effective against blood borne pathogens ~~and TB.~~
- g. Agency staff, in offices where maintenance staff doesn't do the above, will wipe the counters and sink areas in their nursing lab areas and exam rooms with the appropriate disinfectant every week.
- h. Toys or other materials in the waiting areas will be cleaned weekly with approved cleaning product.

Section 12 – Training and Education of Employees

- a. Management will provide training and education to all employees during orientation and annually thereafter.
- b. Management will maintain training records three years from the date training occurred. Training records will include:
 - Dates of the training session.
 - Summary of the training sessions.
 - Names and qualifications of person(s) conducting the training.
 - Names and job titles of all employees attending the sessions.
 - Employee names.

Section 13 - Record Keeping

- a. Records kept for this section of the policy.

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- First Report of Injury form completed and sent to the Deputy Director.
- OSHA 300 report is completed by Deputy Director.
- Results of fit testing of staff.
- Mantoux results are placed in personnel file under protected health information.

Section 14 - Other

- a. **Influenza:** Management will offer to all agency staff that has client contacts annual flu vaccination, ~~which will be provided or reimbursed by the agency, and will bill the employee's insurance or the employee may pay privately.~~
- b. ~~Employees will be encouraged to be up to date with their tetanus immunizations.~~ **Vaccinations:** Employees will be encouraged to consult their physician or health care provider for recommended vaccinations.
- c. ~~Employees who work with childbearing age women will show proof of Rubella immunization, history of having had the disease, or are born before 1957. Hepatitis B: All SWHHS employees who are determined by their Division Director or designee to be at risk for occupational exposure to Hepatitis B should have a series of Hepatitis B vaccination to be provided by the employer. Employees may decline this option. A formal declination for at-risk employees must be in the employee's medical/health file.~~
- d. Employees will refrain from direct care procedures and handling client care equipment when the employee has exudate lesions or weeping dermatitis.
- e. Employees who are ill with a communicable disease are responsible to contact their physician and follow the recommendations when to return to work.
- f. Employee will report to the Administrator and Supervisor any immuno suppression or other clinical condition that may increase the employee's risk of acquiring infection. The Administrator and Supervisor may require a medical statement from a physician and may restrict work placement depending on the health risk of the employee.
- g. Any employee known to be immuno suppressed or communicable will work with the Medical Consultant, Administrator, and Supervisor on an individual basis to assess the capacity to which the employee is able to work.

JULY 2014

GRANTS ~ AGREEMENTS ~ CONTRACTS for Board review/approval

- Lincoln County (Ivanhoe, MN)** – 07/16/14 to 12/31/14; – Amendment to current Information Technology contract for additional support service one day per week at a rate of \$55/hour plus mileage (amendment).

- Children’s Home Society (Sioux Falls, SD)** – 07/01/14 to 06/30/15; provide client residential mental health treatment services in 3 facility types, Madsen House \$226.08/day (increase of \$7.46/day), Boys Unit \$305.79/day (increase of \$10.09/day), and VanDeMark House \$216.47/day (increase of \$17.14) (renewal).

- Clearway Minnesota (Minneapolis, MN)** – 07/01/14 to 06/30/15; Grant to reduce tobacco use and secondhand smoke exposure through research, action, and collaboration, \$149,993.76 maximum paid out in installments based on reporting (renewal).

- Providers Choice, Inc. (Minneapolis, MN)** – 07/01/14 to 10/31/15; provide training workshops, technical assistance tools and establish a voluntary certification program for child care providers, \$6,868.25 based on budget proposal (new)

- United Way of Southwest Minnesota** – 07/16/14; Nurse-Family Partnership Grant to continue serving low-income women pregnant with their first child in order to improve outcomes relating to preventive health and prenatal practices for the mother, \$3,825.00 paid out in quarterly installments (new)