



Southwest Health and Human Services
 Board Agenda
 Wednesday, June 18, 2014
 Government Center, 2nd Floor (Rooms 1 & 2)
 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 05/21/14 board minutes
- D. Financial
- E. Caseload

	05/14	04/14	03/14
Social Service	3756	3763	3741
Licensing	481	479	480
Out-of-Home Placements	132	133	134
Income Maintenance	12,139	12,132	11,996
Child Support Cases	3,671	3,669	3,659
Child Support Collections	\$907,135	\$891,236	\$950,523
Non IV-D Collections	\$128,686.65	\$51,680.54	
- F. Decision Items
 - 1.
 - 2.
- G. Discussion/Information
 - 1. Success story – Megan Gullickson, Social Worker
 - 2. Human Services Performance Management System overview

COMMUNITY HEALTH

- H. Call to order
- I. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 05/21/14 board minutes

J. Financial

K. Caseload

	05/14	04/14	03/14
WIC		2171	2165
Family Home Visiting	55	52	45
PCA Assessments	33	25	27
Managed Care	186	278	216
Dental Varnishing	130	126	99
Refugee Health	9	7	15
Latent TB Medication Distribution	47	22	23

- L. Decision Items
 - 1.
 - 2.
- M. Discussion/Information
 - 1. Revisions to the Local Public Health Act
 - 2.

GOVERNING BOARD

- N. Call to order
- O. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 05/21/14 board minutes
- P. Financial
- Q. Introduce new staff; Kay Dardis, Office Support Specialist; and Julia Vick, Office Support Specialist

GOVERNING BOARD (cont.)

- R. Employee Recognition
- Deb Horejsi – 10 years
- S. Decision Items
1. Abigail Meyer, Social Worker (CPS), probationary appointment (12 months), \$36,588.00 annual, effective 06/09/14
 2. Stephanie Busjahn, Social Worker, probationary appointment (12 months), \$46,000.00 annual, effective 06/16/14
 3. Chantelle Mercie, Eligibility Worker, probationary appointment (12 months), \$16.39 per hour, effective 06/16/14
 4. Michelle Pick, Social Worker, probationary appointment (12 months), \$36,588.00 annual, effective 06/16/14
 5. Casie DeVos, Social Worker, probationary appointment (12 months), \$36,588.00 annual, effective 06/23/14
 6. Michelle Schutz, Eligibility Worker, probationary appointment (12 months), \$21.00 per hour, effective 06/23/14
 7. Nicole Deprez, Social Worker, resignation, effective 06/13/14
 8. Maureen Sauer, Child Support Officer, retirement, effective 07/31/14
 9. Request for Social Workers (3 positions)
 10. Request for Child Support Officer
 11. Personnel Policy Number 3 – Leaves and Holidays
 12. Personnel Policy Number 19 – Medical Leave for Fitness
 13. Personnel Policy Number 20 – Remote Access Allowance Policy
 14. Contracts
 15. Donation
 16. Redwood County office quotes
 - 17.
 - 18.
- T. Discussion/Information
- 1.
 - 2.
- U. Closed session – Director’s Evaluation
- V. Adjournment

Next Meeting Dates:

- **Wednesday, July 16, 2014 – Redwood**
- **Wednesday, August 20, 2014 – Slayton**
- **Wednesday, September 17, 2014 – Marshall**

SOUTHWEST HEALTH & HUMAN SERVICES

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

SUMMARY OF FINANCIAL ACCOUNTS REPORT

For the Month Ending: **May 31, 2014**

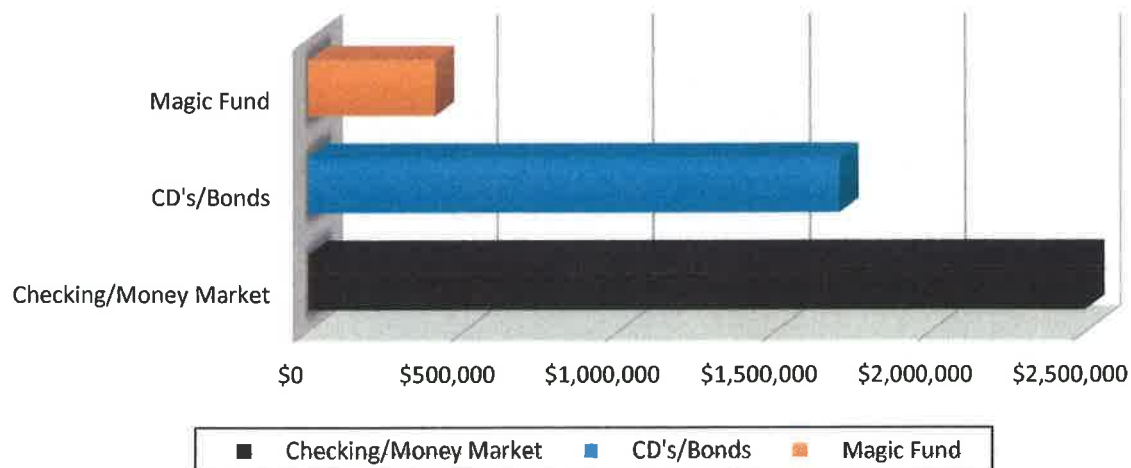
*** Income Maintenance * Social Services * Information Technology * Health ***

Description	Month	Running Balance
BEGINNING BALANCE		\$3,251,735
RECEIPTS		
Monthly Receipts	1,769,946	
County Contribution	779,269	
Interest on Investments	145	
TOTAL MONTHLY RECEIPTS		2,549,360
DISBURSEMENTS		
Monthly Disbursements	2,904,330	
TOTAL MONTHLY DISBURSEMENTS		2,904,330
ENDING BALANCE		\$2,896,765

REVENUE

<i>Checking/Money Market</i>	\$2,492,082	Average Balance last two years \$4,682,727
<i>CD's/Bonds</i>	\$1,699,750	
<i>Magic Fund</i>	\$404,683	
<i>(May 2014 - yield .04%)</i>		
ENDING BALANCE		\$4,596,515

REVENUE DESIGNATION



Southwest Health and Human Services



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TREASURER'S CASH TRIAL BALANCE As of 05/2014

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<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		390,815.38	1,433,213.06	
Disbursements		105,809.95-	438,794.01-	
Payroll		268,156.30-	991,641.67-	
Journal Entries		0.00	74,962.50-	
Fund Total		16,849.13	72,185.12-	1,460,648.26
5 Human Services Fund	947,913.02			
General Administration				
Receipts		52,875.78	258,198.83	
Disbursements		55,330.15-	292,833.43-	
Payroll		12,484.72-	45,415.02-	
Dept Total		14,939.09-	80,049.62-	867,863.40
5 Human Services Fund	2,133,213.06-			
Income Maintenance				
Receipts		579,746.12	2,449,388.86	
Disbursements		289,420.36-	1,317,720.29-	
Payroll		448,862.60-	1,705,114.15-	
Journal Entries		0.00	169,915.00-	
Dept Total		158,536.84-	743,360.58-	2,876,573.64-
5 Human Services Fund	32,305,717.42-			
Social Services				
Receipts		1,245.28	18,977.23	
Disbursements		84,688.79-	558,759.78-	
Payroll		718,187.83-	2,579,248.83-	
Journal Entries		0.00	254,872.50-	
Dept Total		801,631.34-	3,373,903.88-	35,679,621.30-
5 Human Services Fund	39,771,425.35			
Purchased Services,SSIS				
Receipts		1,211,990.45	3,454,972.54	
Disbursements		19,909.98-	26,887.32-	
SSIS		533,887.38-	3,008,648.66-	

Southwest Health and Human Services



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TREASURER'S CASH TRIAL BALANCE As of 05/2014

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<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
5	1,593,070.09-	Information Systems	419,436.56	40,190,861.91
		461		
		Human Services Fund		
		Receipts	10,346.50	34,369.99
		Disbursements	50.84-	2,002.34-
		Payroll	30,289.58-	116,642.51-
		Dept Total	19,993.92-	84,274.86-
				1,677,344.95-
5	0.00	LCTS Collaborative Agency		
		471		
		Human Services Fund		
		Receipts	0.00	131,509.00
		Disbursements	131,509.00-	131,509.00-
		Dept Total	131,509.00-	0.00
		Fund Total	468,417.10-	825,185.42
61	123,821.48	Agency Health Insurance		312,752.06
		Receipts	170,831.69	853,226.49
		Disbursements	188,358.00-	664,295.91-
		Fund Total	17,526.31-	188,930.58
71	115,832.97	LCTS Collaborative Agency		
		471		
		LCTS Lyon Murray Collaborative Fund		
		Receipts	49,479.87	49,479.87
		Disbursements	10,000.00-	43,773.00-
		Dept Total	39,479.87	5,706.87
		Fund Total	39,479.87	5,706.87
73	38,376.92	LCTS Collaborative Agency		
		471		
		LCTS Rock Pipestone Collaborative Fund		
		Receipts	23,511.88	23,511.88
		Disbursements	0.00	5,044.00-

Southwest Health and Human Services



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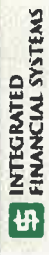
As of 05/2014

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TREASURER'S CASH TRIAL BALANCE

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
Dept Total		23,511.88	18,467.88	56,844.80
Fund Total	38,376.92	23,511.88	18,467.88	56,844.80
75 Redwood ICTS Collaborative				
	102,329.62	ICTS Collaborative Agency		
Receipts		58,517.25	58,517.25	
Disbursements		7,350.00-	41,052.00-	
Dept Total		51,167.25	17,465.25	119,794.87
Fund Total	102,329.62	51,167.25	17,465.25	119,794.87
All Funds	6,600,532.17			
Receipts		2,549,360.20	8,765,365.00	
Disbursements		892,427.07-	3,522,671.08-	
SSIS		533,887.38-	3,008,648.66-	
Payroll		1,477,981.03-	5,438,062.18-	
Journal Entries		0.00	499,750.00-	
Total		354,935.28-	3,703,766.92-	2,896,765.25

Southwest Health and Human Services



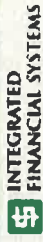
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1 Health Services Fund

TRIAL BALANCE REPORT As of 05/2014

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>
-----Assets-----				
1001 Cash in Bank - Checking	1,532,833.38	16,849.13	72,185.12	1,460,648.26
1090 Investments	400,000.00	0.00	74,962.50	474,962.50
Total Assets	1,932,833.38	16,849.13	2,777.38	1,935,610.76
---- Liabilities and Balance-----				
2020 Accounts Payable	0.00	667.43	667.43	667.43
Total Liabilities	0.00	667.43	667.43	667.43
Fund Balance				
2881 Unassigned Fund Balance	1,932,833.38	0.00	0.00	1,932,833.38
2885 Revenue Control	0.00	390,803.21	1,430,829.59	1,430,829.59
2887 Expenditure Control	0.00	374,621.51	1,428,719.64	1,428,719.64
Total Fund Balance	1,932,833.38	16,181.70	2,109.95	1,934,943.33
Total Liabilities and Balance	1,932,833.38	16,849.13	2,777.38	1,935,610.76
-----Assets-----				
Total Assets	0.00	0.00	0.00	0.00
---- 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
410 General Administration				
1 Health Services Fund				

Southwest Health and Human Services



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5 Human Services Fund

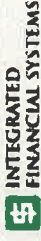
TRIAL BALANCE REPORT

As of 05/2014

Report Basis: Cash

<u>Account</u>	<u>Beginning Balance</u>	<u>This-Month</u>	<u>Actual Year-To-Date</u>	<u>Current Balance</u>
410 General Administration				
1001	947,913.02	14,939.09	80,049.62	867,863.40
	947,913.02	14,939.09	80,049.62	867,863.40
	----- Assets -----			
	Total Assets			
	--- Liabilities and Balance ---			
	Liabilities			
2080 Medical Insurance Payable	40,941.81	0.00	0.00	40,941.81
2090 Due To Flexible Plan Employees	1,920.70	476.06	476.06	1,444.64
	39,021.11	476.06	476.06	39,497.17
	Total Liabilities			
	Fund Balance			
2881 Unassigned Fund Balance	908,891.91	0.00	0.00	908,891.91
2887 Expenditure Control	0.00	15,415.15	80,525.68	80,525.68
	908,891.91	15,415.15	80,525.68	828,366.23
	Total Fund Balance			
	Total Liabilities and Balance			
	947,913.02	14,939.09	80,049.62	867,863.40
420 Income Maintenance				
1001	2,133,213.06	158,536.84	743,360.58	2,876,573.64
1090	320,000.00	0.00	169,915.00	489,915.00
	1,813,213.06	158,536.84	573,445.58	2,386,658.64
	Total Assets			
	--- Liabilities and Balance ---			
	Liabilities			
2020	0.00	4,877.78	4,877.78	4,877.78
	0.00	4,877.78	4,877.78	4,877.78
	Total Liabilities			
	Fund Balance			
2881	1,813,213.06	0.00	0.00	1,813,213.06
2885	0.00	579,298.19	2,441,101.52	2,441,101.52
2887	0.00	742,712.81	3,019,424.88	3,019,424.88
	1,813,213.06	1,63,414.62	578,323.36	2,391,536.42
	Total Fund Balance			
	Total Liabilities and Balance			
	1,813,213.06	158,536.84	573,445.58	2,386,658.64
430 Social Services				

Southwest Health and Human Services



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5 Human Services Fund

TRIAL BALANCE REPORT
As of 05/2014
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	801,631.34	3,373,903.88	35,679,621.30
1090 Investments	480,000.00	0.00	254,872.50	734,872.50
Total Assets	31,825,717.42	801,631.34	3,119,031.38	34,944,748.80
----- Liabilities and Balance -----				
2020 Accounts Payable	0.00	3,504.78	3,504.78	3,504.78
Total Liabilities	0.00	3,504.78	3,504.78	3,504.78
Fund Balance	31,825,717.42	0.00	0.00	31,825,717.42
2881 Unassigned Fund Balance	0.00	329.11	10,480.07	10,480.07
2885 Revenue Control	0.00	805,465.23	3,133,016.23	3,133,016.23
2887 Expenditure Control	31,825,717.42	805,136.12	3,122,536.16	34,948,253.58
Total Fund Balance	31,825,717.42	801,631.34	3,119,031.38	34,944,748.80
Total Liabilities and Balance	31,825,717.42	801,631.34	3,119,031.38	34,944,748.80
----- Assets -----				
431 Purchased Services,SSIS				
1001 Cash In Bank - Checking	39,771,425.35	658,193.09	419,436.56	40,190,861.91
1205 County Advances - MFIP (Chippewa Cty)	80,749.47	0.00	0.00	80,749.47
Total Assets	39,852,174.82	658,193.09	419,436.56	40,271,611.38
----- Liabilities and Balance -----				
2020 Accounts Payable	0.00	11,208.56	11,208.56	11,208.56
Total Liabilities	0.00	11,208.56	11,208.56	11,208.56
Fund Balance	39,852,174.82	0.00	0.00	39,852,174.82
2881 Unassigned Fund Balance	0.00	1,203,750.55	3,401,462.53	3,401,462.53
2885 Revenue Control	0.00	556,766.02	2,993,234.53	2,993,234.53
2887 Expenditure Control	39,852,174.82	646,984.53	408,228.00	40,260,402.82
Total Fund Balance	39,852,174.82	658,193.09	419,436.56	40,271,611.38
Total Liabilities and Balance	39,852,174.82	658,193.09	419,436.56	40,271,611.38
----- Assets -----				
461 Information Systems				
1001 Cash In Bank - Checking	1,593,070.09	19,993.92	84,274.86	1,677,344.95

Southwest Health and Human Services



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STATEMENT OF REVENUES AND EXPENDITURES

As Of 05/2014 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2014 BUDGET	% OF BUDG	% OF YEAR
FUND 1 HEALTH SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	200,681.50-	386,832.50-	744,604.00-	52	42
INTERGOVERNMENTAL REVENUES	2,380.42-	70,639.67-	231,500.00-	31	42
STATE REVENUES	45,494.43-	268,797.88-	742,202.00-	36	42
FEDERAL REVENUES	80,529.77-	495,512.90-	979,798.00-	51	42
FEES	51,484.65-	171,895.07-	436,160.00-	39	42
EARNINGS ON INVESTMENTS	21.78-	632.13-	0.00	0	42
MISCELLANEOUS REVENUES	10,210.66-	36,519.44-	13,550.00-	270	42
TOTAL REVENUES	390,803.21-	1,430,829.59-	3,147,814.00-	45	42
EXPENDITURES					
PROGRAM EXPENDITURES	0.00	0.00	0.00	0	42
PAYROLL AND BENEFITS	268,156.30	996,051.41	2,441,523.00	41	42
OTHER EXPENDITURES	106,465.21	432,668.23	706,291.00	61	42
TOTAL EXPENDITURES	374,621.51	1,428,719.64	3,147,814.00	45	42

Southwest Health and Human Services



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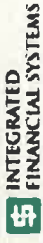
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STATEMENT OF REVENUES AND EXPENDITURES

As Of 05/2014 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2014 BUDGET	% OF BUDG	% OF YEAR
FUND 5 HUMAN SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	578,587.24	699,963.71	9,088,388.00	8	42
INTERGOVERNMENTAL REVENUES	3,960.00	11,802.79	37,804.00	31	42
STATE REVENUES	401,436.08	1,227,849.78	3,779,362.00	32	42
FEDERAL REVENUES	550,879.69	2,773,702.79	6,570,948.00	42	42
FEES	131,864.41	594,496.38	1,258,000.00	47	42
EARNINGS ON INVESTMENTS	123.44	3,582.06	8,500.00	42	42
MISCELLANEOUS REVENUES	126,873.49	707,525.60	1,530,137.00	46	42
TOTAL REVENUES	1,793,724.35	6,018,923.11	22,273,139.00	27	42
EXPENDITURES					
PROGRAM EXPENDITURES	829,044.90	3,857,688.50	8,942,678.00	43	42
PAYROLL AND BENEFITS	1,212,091.00	4,480,790.42	11,086,897.00	40	42
OTHER EXPENDITURES	241,072.73	1,137,876.25	2,243,564.00	51	42
TOTAL EXPENDITURES	2,282,208.63	9,476,355.17	22,273,139.00	43	42

Southwest Health and Human Services



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REVENUES & EXPENDITURES BY PROG, DEPT, AND FUND AS OF 05/2014

Report Basis: Cash

Element	Description	Account Number	Revenue	Expend.	Net	Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
900 PROGRAM	Emergency Preparedness		25,515.33-	44,309.18-		9,792.28	40,706.06	114,000.00-	39	42
			15,723.05-			3,603.12-		118,000.00	34	42
								4,000.00	90-	42
901 PROGRAM	Med Reserve Corps		0.00	3,500.00-		0.00	3,500.00-	4,000.00-	88	42
			202.47	490.89		202.47	490.89	0.00	0	42
			202.47	3,009.11-		202.47	3,009.11-	4,000.00-	75	42
483 DEPT	Health Education	Totals:	51,945.15-	198,048.37-		61,837.79	234,627.84	532,150.00-	37	42
			9,892.64	36,579.47		9,892.64	36,579.47	517,930.00	45	42
								14,220.00-	257-	42
485 DEPT	Environmental Health									
800 PROGRAM	Environmental		6,113.02-	42,833.77-		20,642.09	69,779.17	138,500.00-	31	42
			14,529.07	26,945.40		14,529.07	26,945.40	162,422.00	43	42
								23,922.00	113	42
830 PROGRAM	FDA- Research(Standardization for Ins		165.14	165.14		165.14	165.14	0.00	0	42
			165.14	165.14		165.14	165.14	0.00	0	42
485 DEPT	Environmental Health	Totals:	6,113.02-	42,833.77-		20,807.23	69,944.31	138,500.00-	31	42
			14,694.21	27,110.54		14,694.21	27,110.54	162,422.00	43	42
								23,922.00	113	42
1 FUND	Health Services Fund	Totals:	390,803.21-	1,430,829.59-		374,621.51	1,428,719.64	3,147,814.00-	45	42
			16,181.70-	2,109.95-		16,181.70-	2,109.95-	3,147,814.00	45	42
								0.00	0	42

Southwest Health and Human Services



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REVENUES & EXPENDITURES BY PROG, DEPT, AND FUND AS OF 05/2014

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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 1,793,724.35 Expend. 2,282,208.63 Net 488,484.28	6,018,923.11 9,476,355.17 3,457,432.06	22,273,139.00 22,273,139.00 0.00	27 43 0	42 42 42
FINAL TOTALS	859 Accounts		Revenue 2,184,527.56 Expend. 2,656,830.14 Net 472,302.58	7,449,752.70 10,905,074.81 3,455,322.11	25,420,953.00 25,420,953.00 0.00	29 43 0	42 42 42

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

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	-DISBURSEMENTS	BALANCE
	BALANCE FORWARD				3,251,700.53
5/1/14	9143	Disb		357.05	3,251,343.48
5/2/14	6362-6380	PAYROLL		115,397.29	3,135,946.19
5/2/14	24987-25211 ACH	PAYROLL		376,770.72	2,759,175.47
5/2/14	8320-56, 8364-73	Dep	204,767.39		2,963,942.86
5/5/14	43391-43422	Disb		11,395.25	2,952,547.61
5/5/14	43423-43505	Disb		121,585.24	2,830,962.37
5/5/14	306-314 ACH	Disb		1,449.77	2,829,512.60
5/6/14	8357-8363,8374-8415	Dep	224,396.61		3,053,909.21
5/9/14	8416-8483	Dep	245,243.27		3,299,152.48
5/9/14	6381-6383	PAYROLL		412.75	3,298,739.73
5/9/14	25212-25214	PAYROLL		19,221.42	3,279,518.31
5/12/14	43506 - 43575	disb		12,242.64	3,267,275.67
5/12/14	315 ACH	disb		72.00	3,267,203.67
5/12/14	43576 - 43736	Disb		388,440.61	2,878,763.06
5/12/14	316 - 331 ACH	Disb		1,829.87	2,876,933.19
5/13/14	8484-8515,8517-19,8521,8530-31	Dep	144,693.68		3,021,626.87
5/12/14	9149	Disb		5,526.16	3,016,100.71
5/12/14	9150	Disb		23,991.66	2,992,109.05
5/12/14	9151	Disb		6,621.23	2,985,487.82
5/12/14	9152	Disb		20,747.86	2,964,739.96
5/16/14	8516,8520,8522-29,8532-93	Dep	187,644.99		3,152,384.95
5/16/14	6384-6398	PAYROLL		115,446.06	3,036,938.89
5/16/14	25215-25430 ACH	PAYROLL		377,296.56	2,659,642.33
5/19/14	43737-43794	Disb		4,451.52	2,655,190.81
5/19/14	43795-43897	Disb		249,728.02	2,405,462.79
5/19/14	332-341 ACH	Disb		1,644.10	2,403,818.69
5/19/14	9153	Disb		3,300.82	2,400,517.87
5/19/14	9154	Disb		55,570.28	2,344,947.59
5/19/14	9155	Disb		53,315.28	2,291,632.31
5/20/14	8594-97,8598-8608,8613-14,8618-25	Dep	35,194.49		2,326,826.80
5/23/14	43898-44216 (CEI)	Disb		90,352.48	2,236,474.32
5/23/14	342-343 ACH (CEI)	Disb		371.75	2,236,102.57
5/23/14	44217-44337	Disb		282,313.33	1,953,789.24
5/23/14	344-351 ACH	Disb		1,029.97	1,952,759.27
5/23/14	44338-44389	Disb		6,717.44	1,946,041.83
5/23/14	8615-17,8626-8674	Dep	489,596.65		2,435,638.48
5/27/14	8675-8694	Dep	192,461.53		2,628,100.01
5/28/14	8725	Dep	578,587.24		3,206,687.25
5/30/14	6399-6414	PAYROLL		6,159.77	3,200,527.48
5/30/14	25431-25651 ACH	PAYROLL		467,276.46	2,733,251.02
5/23/14	13695	Interest	11.87		2,733,262.89
5/23/14	13696	Interest	133.35		2,733,396.24
5/30/14	44390-44433	Disb		3,043.62	2,730,352.62
5/30/14	44434-44482	Disb		60,074.56	2,670,278.06
5/30/14	352-356 ACH	Disb		857.23	2,669,420.83
5/30/14	9156	Disb		14,391.34	2,655,029.49
5/30/14	9157	Disb		4,893.37	2,650,136.12
5/30/14	8695-8724,8726-8771	Dep	246,629.13		2,896,765.25
					2,896,765.25
	Balanced 6/3/14 KD	TOTALS	2,549,360.20	2,904,295.48	2,896,765.25

Adult - Social Services Caseload

Average	Adult Brain Injury (BI)	Adult Community Alternative Care (CAC)	Adult Community Alternatives for Disabled Individuals (CADI)	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 (CADI)	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											
July											
August											
September											
October											
November											
December											
	14	14	252	324	38	866	27	483	462	321	2801

Children's - Social Services Caseload

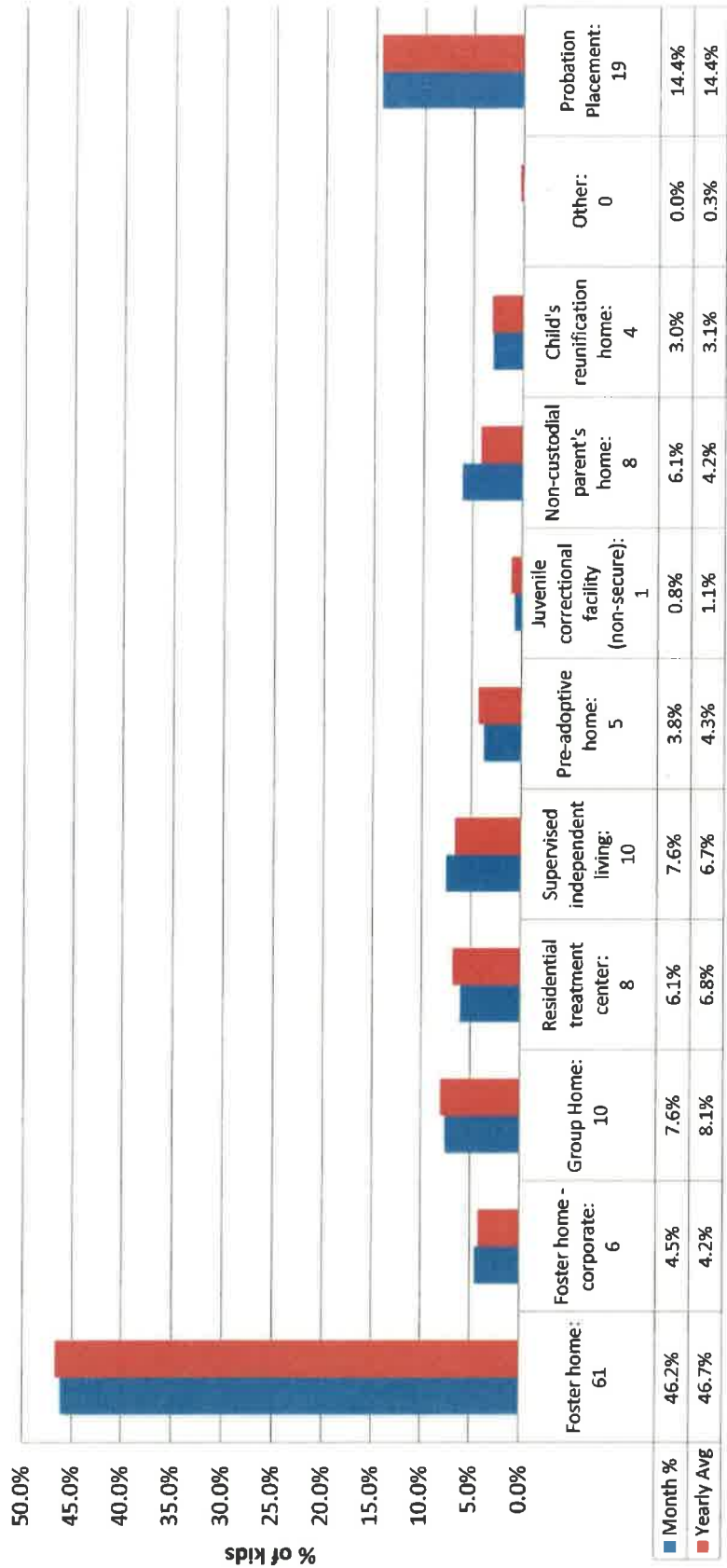
Average	Adolescent Independent Living (ALS)	Adoption	Child Brain Injury (BI)	Child Community Alternative Care (CAC)	Child Community Alternatives for Disabled Individuals (CADI)	Child Protection (CP)	Child Welfare (CW)	Children's Mental Health (CMH)	Early Intervention: Infants & Toddlers with Disabilities	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												
July												
August												
September												
October												
November												
December												
	43	18	0	4	33	130	103	106	1	1	13	451

2014 KIDS IN OUT OF HOME PLACEMENT

	May	
	# of placements	Probation placements
Lincoln	4	2
Rock	16	2
Lyon	31	8
Pipestone	18	0
Redwood	34	7
Murray	10	0
Totals	113	19
Total # of kids	132	

**May 2014 - Placement by Category
132 Kids in Placement**



**NON IVD COLLECTIONS
MAY 2014**

PROGRAM	ACCOUNT	TOTAL
MSA/GRH	05-420-605.5802	50.00
TANF (MFIP/DWP/AFDC)	05-420-610.5803	831.00
GA	05-420-620.5803	4,082.00
FS	05-420-630.5803	47.00
CS (PI Fee, App Fee, etc)	05-420-640.5501	2,299.60
MA	05-420-650.5803, 5513	89,251.54
REFUGEE	05-420-680.5803	
CHILDRENS		
Parental Fees, Holds	05-431-710.5501	1,165.00
Corp FC Licensing	05-431-710.5505	800.00
OOH/FC Recovery	05-431-710.5803	17,773.26
CHILDCARE		
Licensing	05-431-720.5502	3,400.00
Over Payments	05-431-721&722.5803	4,268.00
CHEMICAL DEPENDENCY		
CD Assessments	05-431-730.5519	3,311.95
Detox Fees	05-431-730.5520	1,344.21
MENTAL HEALTH		
Insurance Copay	05-431-740.5803	12.74
DEVELOPMENTAL DISABILITIES		
Insurance Copay	05-431-750.5803	13.25
ADULT		
Insurance Copay	05-431-760.5803	37.10
TOTAL NON-IVD COLLECTIONS		128,686.65

To: CHS Administrators and PHN Directors

MN Legislature Passes Revisions to the Local Public Health Act

On May 15, 2014 the House and Senate voted to approve the Health and Human Services Omnibus bill (HF2402/SF2087). The HHS Omnibus bill included the Revisions to the Local Public Health Act as proposed by SCHSAC. Governor Dayton is expected to sign the bill into law imminently. Congratulations and thank you to all who participated in the process to develop the bill and get it passed. It's an excellent example of the state-local public health partnership in action!

It will likely be several months before the final language of the revised Local Public Health Act is available online on the Legislative Revisor's Website. To briefly summarize, the revisions to the LPH Act will clarify public health responsibilities of community health boards; improve program efficiency; and eliminate outdated terms and provisions.

The Local Public Health Act (2014) includes the following revisions:

- The term **CHS administrator** is now defined in statute and the longstanding requirement for CHBs to appoint a CHS administrator is now explicitly referenced under CHB duties.
- The **areas of public health responsibility** are now clear in statute, and the CHB Duties specify that the areas are to be considered in CHB assessment and planning processes.
- The terms **“CHB, county or city”** replace **“local board of health”** throughout the statute. No local authorities or responsibilities have changed; the text was simplified and streamlined.
- The terms **“performance management”** and **“performance measures”** are now defined in the Act, and the practice of “implementing a performance management process” has been added to the CHB duties. The Commissioner of Health is required to implement a system-level performance management, formalizing the work that SCHSAC and the PISC have been doing for the past several years.
- The **accountability review language and process was streamlined**. The Commissioner, working with SCHSAC, will annually select a subset of the performance measures for accountability. CHBs will be notified of the selected measures by January 1st of each year. The timeline for demonstrating progress was changed to 6 months and a appeals process was added for CHBs.

OPI is in the process of updating information related to the Local Public Health Act on the MDH website. If you have immediate questions or concerns please contact Allison Thrash in the MDH Office of Performance Improvement at 651-201-3864 or allison.thrash@state.mn.us.

Minnesota Department of Health
Office of Performance Improvement
PO Box 64975
St. Paul, MN 55164

**SOUTHWEST HEALTH AND HUMAN SERVICES
PERSONNEL POLICY NUMBER 3**

EFFECTIVE DATE: 01/01/11

REVISION DATE: ~~08/01/13~~ 06/18/14

AUTHORITY: Southwest Health and Human Services Joint Governing Board

- - -LEAVES AND HOLIDAYS- - -

Section 1 – Vacation Leave

- a. 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 for 10 - 14 years of service
 - 7.35 hours of vacation leave for 15+ years of service
- b. Vacation leave will be prorated for part-time employees. Part-time employees, or employees whose status has changed from part-time to full-time (or vice-versa), are not eligible for automatic increases based upon years of service. Any increase in vacation leave is based upon total months of service.
- c. Vacation leave can accumulate to a maximum of 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 hour. Vacation leave cannot be used until it is earned.
- d. 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.
- e. 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 (3) days during the last two weeks of employment. Employees terminated for misconduct shall not be entitled to be paid accrued unused vacation leave. This shall not apply to employees terminated for poor work performance.
- f. Employees who were previously employed by Lincoln, Lyon, and Murray Human Services and Lincoln, Lyon, Murray, and Pipestone Public Health or a County that becomes a member of Southwest Health and Human Services, shall maintain their seniority dates from their initial employment, so long as there was no interruption in continuous employment from their prior employer and Southwest Health and Human Services.

**SOUTHWEST HEALTH AND HUMAN SERVICES
PERSONNEL POLICY NUMBER 3**

requesting leave to meet this requirement, but may only explain why the leave is needed); and

4. where the employer was not made aware that an employee was absent for FMLA reasons and the employee wants the leave counted as FMLA leave, timely notice (generally within two business days of returning to work) that leave was taken for an FMLA-qualifying reason.

d. Designation

1. The agency may designate an employee's absence from work FMLA leave if the circumstances giving rise to the leave is FMLA qualifying. The Agency will notify the employee that the leave is being designated FMLA leave. The Human Resources Director shall complete the appropriate FMLA designation forms in a timely manner (within five days of the leave commencing whenever possible) and forward them to the employee. The Supervisor is responsible for notifying the Human Resource Director of leaves of three days or more or intermittent leaves which may be FMLA qualifying.
2. The Human Resources Director is responsible for completing the "Employer Response to Employee Request for FMLA Leave" form and related forms in all circumstances in which an employee qualifies for leave under the FMLA, whether or not the employee specifically requests such a FMLA leave. (e.g. when an employee is on medical leave which also qualifies under FMLA, when an employee is unable to request a leave due to a medical condition, etc.). The original shall be provided to the employee and a copy retained by the Human Resources Director in a "confidential medical file" for the employee, which shall be separate from the employee's personnel file. All medical certifications shall also be retained in that file.

e. Child leave shall begin at a time requested by the employee, but may begin not more than twelve months after the birth or adoption, except in the case where the child must remain in the hospital longer than the mother, the leave may not begin more than six weeks after the child leaves the hospital.

f. During FMLA leave, the employee will be required to use any available earned, accumulated leave. However, staff may hold up to 37.5 hours of medical leave to be available upon return from leave. Employees will provide written notification to their supervisor of their intent to bank medical leave prior to FMLA leave. When the reason for the FMLA leave qualifies under the "Medical Leave" section of this policy for either the employee or an eligible family member, then earned, accumulated medical leave must be used. If the reason for FMLA leave does not qualify for use of medical leave, then any accumulated vacation leave must be used before leave without pay will be authorized.

**SOUTHWEST HEALTH AND HUMAN SERVICES
PERSONNEL POLICY NUMBER 3**

Section 6 – Educational Leave

- a. An employee may request an educational leave without pay or benefits, not to exceed 2 years, by presenting the following written documents to their supervisor who will submit it to the Board for approval:
 - Letter of request
 - Any other material felt necessary to support the request
- b. The Southwest Health and Human Services Governing Board has the sole discretion to approve or deny such leave as it sees fit.

Section 7 – Jury or Witness Duty

- a. After notice to his/her supervisor, any employee shall be granted leave with pay for service upon a jury or appearance before a court, legislative committee, or other judicial or quas-judicial body as a witness in an action involving the federal government, State of Minnesota, or a political subdivision thereof, in response to a subpoena or other direction by proper authority.
- b. The employee will be required to turn over to the agency any per diem payment received as a result of serving on a jury or as a witness. Monies received as expenses shall be kept by the employee.

Section 8 – Bereavement Leave

- a. Each employee shall have up to 30 hours non-cumulative annual bereavement leave in the event of the death of the employee's parents, children, spouse, siblings, legal wards, grandparents, grandchildren, nieces, nephews, and spouse's parents. Such days shall be with pay and shall not be deducted from medical leave or vacation balances. Such leave must be taken in a minimum of 1/2 hour (.5) hour increments.
- b. Upon exhaustion of the non-cumulative bereavement leave and approval of their supervisor, an employee may use up to three (3) days of medical leave for bereavement of parents, children, spouse, siblings, legal wards, grandparents, grandchildren, nieces, nephews, and spouse's parents.
- c. Reasonable agency time without loss of pay will be allowed to attend a funeral of current staff members or former staff members who left the agency within the last two years.
- d. In the event of a death in the family the employee shall inform the supervisor in the

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same manner as for medical leave.

Section 9 – Holidays

- a. An employee must be in pay status the day preceding and the day following a holiday to earn holiday pay. Holiday pay for part-time employees will be prorated.

- b. New Year's Day
Martin Luther King Day
President's Day
Memorial Day
Independence Day
Labor Day
Veteran's Day
Thanksgiving Day
Day after Thanksgiving
Christmas Eve Day at noon if December 24th falls on ~~Monday~~, Tuesday, Wednesday, or Thursday
If Christmas Eve falls on a Monday, then the full day holiday is observed
Christmas Day

Section 10 – Leave Without Pay

- a. Up to 37.5 hours of leave without pay per calendar year can be approved by administration. The supervisor in his/her discretion has the authority and responsibility to deny a leave request when such a request could have negative effect on the service delivery of the agency.

- b. Whenever an employee requests leave without pay under the total of 37.5 hours per calendar year, the Leave Without Pay/Overtime Authorization (AG#006) must be completed and given to the supervisor. The supervisor will then give it to the Director for final approval. At the end of the payroll period the Leave/Overtime Authorization should be attached to the employee's time sheet and routed to their supervisor. Salary, vacation, and medical leave (earned) will be prorated in the same manner as for part-time employees. Health insurance coverage will not be affected unless the employee takes leave without pay in excess of 37.5 hours per calendar year.

- c. Leave without pay of more than 37.5 hours per calendar year will require Southwest Health and Human Services Governing Board approval except when the leave is FMLA qualifying. An employee must make written application to the Governing Board setting forth the request for the leave, the requested duration of the leave and the circumstances necessitating the leave. The request must be received prior to the commencement of the leave. The Southwest Health and Human Services Governing

**SOUTHWEST HEALTH AND HUMAN SERVICES
PERSONNEL POLICY NUMBER 19**

EFFECTIVE DATE: 02/15/12

REVISION DATE: ~~05/15/13~~ 06/18/14

AUTHORITY: Southwest Health and Human Services Joint Governing Board

~~--- **WELLNESS MEDICAL LEAVE FOR FITNESS** ---~~

Section 1 - General Policy Statement

- a. It is the policy of SWHHS to promote the health and safety of employees and encourage regular participation in moderate to vigorous physical activity.
- b. SWHHS is dedicated to creating a healthy work environment that supports employee and workplace health. SWHHS feels it is important to provide employees with healthy physical activity opportunities to support our efforts to prevent disease and attain optimum health.
- c. ~~SWHHS and the Wellness Committee will:~~
 - ~~• Provide educational information and resource information on health-related activity.~~
 - ~~• Establish a physical activity notice board or circulate opportunities to staff via newsletters or e-mails.~~
 - ~~• Utilize promotional and motivational posters encouraging employees to make active choices.~~
 - ~~• Provide details or maps of suitable lunch and break time walking routes to promote walking/jogging.~~
 - ~~• Provide bikes and bike routes that are suitable for lunch and break time routes.~~
 - ~~• Provide storage racks for bikes.~~
 - ~~• Provide on-site space for physical activity.~~
 - ~~• Promote participation of BCBS fitness discount program.~~
 - ~~• Encourage participation in employee sports teams/activity groups.~~
 - ~~• Provide flexible work weeks to allow for physical activity participation before, during or after the working day.~~
 - ~~• Ensure that new working practices do not contribute to existing barriers to physical activity participation.~~
 - ~~• Employees are informed of this policy through the department director/supervisor upon orientation.~~
 - ~~• Encourage employees to promote a physically active environment both at work and at home.~~
 - ~~• Director/supervisors are encouraging and/or are a role model, provide support to employees for physical activity opportunities.~~

**SOUTHWEST HEALTH AND HUMAN SERVICES
PERSONNEL POLICY NUMBER 19**

Section 2 - Employee Benefit

- a. Employees who have accumulated medical leave balances may trade their medical leave hours to cover the cost of ~~health and wellness-related fitness~~ expenses for the employee, spouse and their eligible dependents as defined by eligibility to be on a parents' insurance, ~~or aged 18 and younger.~~
- b. General Provisions
- Maximum of \$ ~~1,000~~ 1,200 (gross pay) in claims per employee per calendar year, ~~beginning the year of 2013.~~
 - Claims can be submitted for expenses incurred for the employee, spouse, or eligible dependents, as defined under the agency's health insurance plan.
 - A minimum of three weeks (112.50 hours) of medical leave must remain after reimbursement; only medical leave can be cashed in for this taxable reimbursement.
 - Employees who are in the process of terminating employment are not eligible for this program.
 - Expenses that have been reimbursed by flexible spending or VEBA are not eligible.
 - Staff may only be reimbursed for the net cost of any expense, less any other reimbursements such as the BCBS-Preferred One fitness discount.
- c. Eligible Expenses
- Health club memberships, swim passes, and swimming lessons (single, couple, family if eligible and including any tax and/or enrollment fees)
 - ~~Smoking cessation programs~~
 - ~~Weight loss programs~~
 - ~~Stress management classes/programs~~
 - Fitness/exercise programs (i.e., Jazzercise, Curves, martial arts, etc...)
 - Personal trainers
 - New or used stationary personal exercise equipment that can be used year-round in the home (i.e., treadmill, exercise bike, stair-stepper, etc....) or non-stationary exercise equipment (i.e., bike, jogger stroller, child carrier, and helmets)
 - Maintenance/repairs/warranties on eligible equipment
 - Recreational Equipment (i.e., rollerblades, skis, snow shoes, canoes/Kayakseanes etc.)
 - Monitoring devices (i.e., pedometer, heart rate monitor, ~~and scale~~, Fitbit, and GPS watch)
 - Fitness media (DVDS, videos, and games (i.e., fitness games or Wii fit)). Title must be in request.

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- Running, walking, cross-trainer or aerobic shoes

d. Expenses not Eligible

- Club membership of a primarily social nature (i.e., Country club/golf course membership)
- Clothing items (i.e., shirts ~~running shoes~~, shorts, jackets, etc...)
- ~~Food/supplements purchased in conjunction with a weight loss program~~
- Medical related expenses (i.e., lab tests, prescriptions, glucose monitor, blood pressure monitor, etc...)
- Camping equipment (i.e., tents, ~~canoes~~, packs, etc...)
- Fees (i.e., registrations, park entrances, court/green fees, lift tickets, lockers, tanning, etc...)
- ~~Sports equipment for an activity that is used in school, league, or organized sports (i.e., tennis, football, basketball, baseball, hockey, golf, etc.)~~
- Bike racks, car mountings, or carriers used to haul fitness equipment.
- Gaming systems, such as Wii or Xbox that are not fitness based.

Section 3 – Procedures

- a. To claim a reimbursement under this program, submit a Medical Leave for Fitness Reimbursement Form with appropriate documentation attached, to the Wellness Coordinator. Providing the request meets the general provisions and is an eligible expense, it will be approved within 10 business days. You will be reimbursed on your regular payroll check, providing it is approved by Monday noon the week of payroll.
- b. Submission Deadlines
- Expenses must be submitted in the year incurred. Reimbursement requests may not exceed the maximum amount of \$ 1,0001,200 per payroll year and must be received before the last full payroll period of the year in order to be processed for that year.

**SOUTHWEST HEALTH AND HUMAN SERVICES
PERSONNEL POLICY NUMBER 20**

EFFECTIVE DATE: 01/01/11

REVISION DATE: ~~03/14/12~~ 07/01/14

AUTHORITY: Southwest Health and Human Services Joint Governing Board

--- Remote Access Allowance Policy ---

Section 1 - Policy Statement

- a. Southwest Health and Human Services is committed to providing employees the tools and resources they need to perform their job responsibilities successfully. Employees whose position requires them to have remote accessibility may receive extra compensation, in the form of an allowance, to cover business-related costs. The requirement of remote accessibility can include the need for a cell phone, or a personal digital assistant (i.e., Smart phone). This policy is intended to meet the need to require remote access, while promoting good stewardship of the agency's resources.

Section 2 - Applicability

- a. This policy applies to positions which require the incumbent to have remote access to complete the responsibilities of his/her position. The requirement of remote accessibility must be included on the job profile for the position and approved by the individuals in the position's reporting structure, including the Agency Director. To be eligible, the position must be exempt from the Fair Labor Standards Act and meet one of three conditions: business travel, daily/after-hours communication or emergency contact. The conditions are described in the Definitions section below.

Section 3 - Definitions

- a. **Wireless communication devices**
 - 1. Equipment used as to obtain remote access and can include a cell phone, or a personal digital assistant (i.e., Smart phone).
- b. **Allowance**
 - 1. The allowance is a set dollar amount determined by the type of wireless communication device required. The approved allowance will be paid to the employee via the bi-weekly payroll process. The allowance does not constitute an increase to base pay, and therefore, will not be included in any percentage calculations for benefits or pay adjustments. The allowance is considered taxable income, in accordance with IRS regulations.

**SOUTHWEST HEALTH AND HUMAN SERVICES
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c. Conditions

1. **Business Travel**
The need for constant use of a wireless communication device for an employee who must frequently travel to do business, but needs to remain in touch with others for business purposes.
2. **Daily/After-Hours Communication**
The need for constant and immediate communications through the day (if your position requires you to be away from your desk frequently) or after hours for an employee whose position, the significant portion of which, supports or is otherwise responsible for programs, services or systems.
3. **Emergency Contact**
The requirement to be available for emergency contact as an employee whose duties require them to be immediately contacted, anywhere, anytime (24/7).

Section 4 - Program Guidelines

- a. Wireless communication devices should not be selected as an alternative to other means of communications – e.g., land-lines, and work computers with internet access – when such alternatives would provide adequate but less costly service to the agency.

Section 5 - Security

- a. All Smart phones that download information from the agency network such as email or calendar must have Director's approval even if not being reimbursed by the allowance.
- b. Note: If the employee's job description does not include the need for a wireless communication device, then the employee is not eligible for an allowance.
- c. Additionally, cell phones are available to check out for employees who are traveling for business and need to be available via wireless communication for client services, contacting a supervisor, or for safety when traveling out of town or to a non-public location such as a client's home.
- d. Any exceptions to this policy must be approved by either the ~~Director of Business Management~~ Deputy Director or the Agency Director.
- e. If an employee's phone or remote device that downloads information from the agency network such as email or calendar is lost, stolen, no longer being used, given to family member, etc., the employee must notify their supervisor immediately. The supervisor will in turn notify IT. If the phone or remote device is still in the employee's possession, they must give the phone to IT to be cleared of agency information. If the phone or remote device is lost or stolen, IT will attempt to wipe the phone remotely.

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PERSONNEL POLICY NUMBER 20**

Section 6 - Equipment

- a. The employee must purchase the equipment and own it personally. The employee may, at his or her own expense, add extra services or equipment features, as desired.
- b. With respect to personal digital assistants, the IT department should also be contacted to discuss equipment compatibility.
- c. Because the wireless communication devices are owned personally by the employee, and the allowance provided is taxable income, the employee may use the device for both business and personal purposes.

Section 7 - Allowance

- a. The allowance amounts are set at ~~\$20-\$30~~ and ~~\$45-\$55~~, depending on the type of allowance and amount of business use per the Allowance Request Form.
- b. ~~\$20-\$30~~ per month allowance cell phone only, job description required, frequent travel, daily/off hours communication, and 24/7 emergency contact.
- c. ~~\$45-\$55~~ per month allowance Smart phone, job description required, frequent travel, daily/off hours communication, 24/7 emergency contact, and access job required of email and calendar. Qualifying employees should use the Allowance Request Form that is available through the shared employee "forms" file on the agency's network or contact the ~~Director of Business Management~~ Deputy Director. Employees should complete the form and obtain the appropriate signatures which include their Supervisor or Director. The approved form and job description should be sent to the ~~Director of Business Management~~ Deputy Director. A copy of the Allowance Request Form must also be kept on file with accounting.
- d. It is the department head's responsibility to review the cell phone needs in his or her department on at least an annual basis. The ~~Director of Business Management~~ Deputy Director must be notified of any changes or discontinuations during the year.
- e. The allowance expires at the end of each fiscal year. The ~~Director of Business Management~~ Deputy Director and the Agency Director will review and approve the renewal of the allowances each fiscal year.

Agency Form Regarding This Policy:

Ag#014 – Remote Access Allowance Request Form

JUNE 2014

GRANTS ~ AGREEMENTS ~ CONTRACTS

for Board review/approval

- Rock County (Luverne, MN) – 07/01/14 to 12/31/15; – New office lease agreement of \$121,125 for 18 months or \$6729.17/mo, utilities included (old rate of \$2428.75/mo + utilities (renewal).**
- 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, Boys Unit \$305.79/day, and VanDeMark House \$216.47/day (no increase) (renewal).**
- REM Southwest Services (Marshall, MN) – 01/01/14 to 12/31/14; provide non-waivered client semi-independent living skills (SILS) (renewal).**
- REM South Central Services (Redwood Falls, MN) – 01/01/14 to 12/31/14; provide non-waivered client semi-independent living skills (SILS) (renewal).**
- Prairie Community Services (Morris, MN) – 01/01/14 to 12/31/14; provide non-waivered client semi-independent living skills (SILS) (renewal).**
- Client Community Services Inc (Worthington, MN) – 01/01/14 to 12/31/14; provide non-waivered client semi-independent living skills (SILS) (renewal).**
- Divine House (Willmar, MN) – 01/01/14 to 12/31/14; provide non-waivered client semi-independent living skills (SILS) (renewal).**
- Heartland Industries (Redwood Falls, MN) – 01/01/14 to 12/31/14; provide non-waivered client semi-independent living skills (SILS) (renewal).**
- SWCIL (Marshall, MN) – 01/01/14 to 12/31/14; provide non-waivered client semi-independent living skills (SILS) (renewal).**
- Avera McKennan d/b/a Avera Behavioral Health (Sioux Falls, SD) – 07/01/14 to 06/30/15; provide for mental health orders and civil commitment beds and services, rate of \$896/day for hospital services (\$26/day increase) plus 75% medical care expenses up to limit of \$10,000 (renewal).**
- MDH Public Health Emergency Preparedness (PHEP) – 07/01/13 to 06/30/17; amendment for the budget period of July 2014 through June 2015; amended amount \$138,000 + original grant amount \$114,000 for new total grant \$252,000 (new).**

BOARD MEETING – 06/18/14

DONATION

- **Richard Englan donated diapers.**

Access Control / Camera Systems Proposal for: Loren Gewerth

Redwood County


Public Health Building
Redwood Falls, MN 56283

507-637-4031



By: Integrated Protection Systems
John West
14115 Lincoln St. NE,
Ham Lake, MN 55304
612-414-3513

Licensed Bonded and Insured



IPS Integrated
Protection
Systems

Scope of Work

Access Control System install:

1. IPS to supply and install Two Kantech KT-400 door controller to be located in the network server room.
2. Customer to supply and install 115 Volt AC Power to the Kantech System from existing Power Panel
3. IPS to supply and install Eight Doors with Card readers, Rex Detectors and Door position Sensors
4. IPS to supply and Install Eight electronic locks on the access doors
5. IPS will supply a new Altronix power supply to power the new locks.
6. IPS will supply and install all wire required for the access control system
7. IPS to make all connections, program and test the access control system
8. IPS will provide and install all door hardware required and discussed in the project walk
9. IPS will make the network connection and work with the IT department to ensure that the systems is on line and working with the head-end equipment

Parts List:

- X2 Kantech KT-400 Access Control Panel
- X1 Power Supply (provides System power)
- X1 Battery Back Up (Emergency back up power)
- X4 Kantech Lock relays
- X8 Man Door Contacts, Kantech P325XSF readers w/KP, T.Rex-LT Sensors
- X9 Electronic Door Strikes
- X1 Power Supply for Locks

Access Control Cost Details

(Does not include state or local sales taxes. These will be added to the final invoice)

Access Control System ----- **\$12,597.00**
 Includes all parts from parts list for the Access Control System, as well as labor to install program and train on all of the mentioned systems.

Electronic Locks ----- **\$3,805.00**
 Includes all electronic locks and hardware for the 8 doors in question, including installation and parts. A trip charge is also included in the final number.

- | | | |
|----|----------------------------------|---------------|
| 1. | Main Entrance N Side | \$892.10 |
| 2. | Lobby Entrance | \$451.00 |
| 3. | Lobby Doors (N&S) | \$258.00 each |
| 4. | South End of Conference | \$258.00 |
| 5. | East Entrance Door | \$293.00 |
| 6. | Financial Maintenance | \$293.00 |
| 7. | Social Worker Rest Room Ent | \$258.00 |
| 8. | End Of South Hallway | \$293.00 |
| 9. | Additional Door at east entrance | \$293.00 |

Total Access Control System ----- **\$16,402.00**





Camera Cost Details

(Does not include state or local sales taxes. These will be added to the final invoice)

Camera project **\$3840.00**

Includes 4 1080P IP indoor cameras, wire and connectors as well as labor to install program and train on all of the mentioned systems. Cameras to be install in locations provided by the customer. Customer to provide IP addresses as required and the network POE ports as needed. All cameras will be connected to the customers existing Kantech 32 camera NVR for recording and management.





Service Agreement Option

1. This agreement includes the repair and or replacement of any faulty equipment (under normal operation conditions) provided and installed by Integrated Protection Systems (IPS) for the term of the agreement. See the attached parts list for complete list of covered components. This agreement will allow the budgeting of a fixed cost over the term, for the maintenance of the system.
2. This agreement also includes 2 site visits per year by IPS to ensure the proper operation and maintenance of the Access Control System.
3. Items not covered by the agreement will be covered under normal time and material rates and service hours. Non covered items would include any acts of god i.e. Fire, Flood lightning and storm damage; as well as problems caused by power outages and surges and brown-outs. Other destruction, corruption, misuse or other accidental mishaps caused or inflicted by employees, customers or others while visiting the facility will not be covered under this plan as well and will be billed as a normal service call.

Annual agreement cost **\$1,307.00** (Five year term option)

By signing this document you have agreed with the terms and conditions of the Service Agreement .

Check the Service Agreement Options

- Five Year Term
- I Decline the Service Agreement Option at this time

Signature

Date

Printed name

PO Number

Site Address

Site Address

If approved, Please scan and e-mail back to John@IPSSEC.com



Proposal Approval

Customer responsibilities:

1. All AC power requirements for the proposed systems are the responsibility of the customer. All locations where power is needed will be indicated in the proposal and/or during the site walk-through with the IPS representative.
2. Phone lines will be analog and will be active and tagged for the IPS tech at the demarc in the phone room prior to the install date.
3. All Network and IP information is the responsibility of the customer. All locations where a network drop is needed will be indicated in the proposal and/or during the site walk-through with the IPS representative.

Warranty :

All equipment has a one year parts warranty. Warranty does not cover any "acts of God" such as lightning and or water damage. All warranty parts replacement will be done during normal business hours at normal service rates.

By signing this document you have agreed with the proposed scope of work and equipment list provided, as well as the "customer responsibilities" and warranty. Please sign and date below if you would like to accept this proposal and start the ordering process.

Check the Service Agreement Options

- Five Year Term
- I Decline the Service Agreement Option at this time

Signature

Date

Printed name

PO Number

Site Address

If approved, Please scan and e-mail back to John@IPSSEC.com