



Southwest Health and Human Services  
 Board Agenda  
 Wednesday, March 18, 2015  
 Government Center, 2<sup>nd</sup> Floor  
 Marshall  
 9:00 a.m.

**HUMAN SERVICES**

- A. Call to order
- B. Pledge of Allegiance
- C. Consent Agenda
  - 1. Amend/Approval of Agenda
  - 2. Identification of Conflict of Interest
  - 3. Approval of 02/18/15 board minutes
- D. Financial
- E. Caseload
 

	02/15	01/15	12/14
Social Service	3,641	3,630	3,695
Licensing	493	495	495
Out-of-Home Placements	137	131	126
Income Maintenance	12,325	12,250	12,440
Child Support Cases	3,526	3,525	3,552
Child Support Collections	\$821,275	\$809,404	\$937,647
Non IV-D Collections	\$78,816	\$119,135	\$129,958
- F. Decision Items
  - 1.
  - 2.
- G. Discussion/Information
  - 1. Success story – Lori Sanderson, Social Worker

**COMMUNITY HEALTH**

- H. Call to order
- I. Consent Agenda
  - 1. Amend/Approval of Agenda
  - 2. Identification of Conflict of Interest
  - 3. Approval of 02/18/15 board minutes

J. Financial

K. Caseload

	02/15	01/15	12/14
WIC		2223	2233
Family Home Visiting	89	100	97
PCA Assessments	24	25	24
Managed Care	248	233	231
Dental Varnishing	130	100	115
Refugee Health	1	2	0
Latent TB Medication Distribution	36	38	43

L. Decision Items

- 1.
- 2.

M. Discussion/Information

- 1. Water Lab summary for 2014 – Chad Cunningham
- 2. Erin Simmons – American Lung Association

**GOVERNING BOARD**

N. Call to order

O. Consent Agenda

- 1. Amend/Approval of Agenda
- 2. Identification of Conflict of Interest
- 3. Approval of 02/18/15 board minutes

P. Financial

Q. Employee Recognition

- Kristin Deacon, 10 years, Nursing Supervisor, Slayton
- Melissa Novosad, 10 years, Social Worker, Marshall
- Kelly Hengel, 25 years, Social Worker, Redwood Falls

**GOVERNING BOARD (cont.)**

- R. Decision Items
1. Tiffany Bailey, Accounting Technician, probationary appointment (12 months), \$16.50 per hour, effective 03/23/15
  2. Sue Versaevel, temporary appointment, \$20.00 per hour, effective 03/16/15
  3. Betsy Plotz, Registered Dietitian, leave without pay request
  4. Rachel Vierra, Public Health Educator, resignation, effective 03/04/15
  5. Melissa Novosad, Social Worker (MSW), resignation, effective 03/20/15
  6. Sharon Fried, Case Aide, retirement, effective 03/31/15
  7. Request for Public Health Educator
  8. Request for Social Worker
  9. Request for Case Aide
  10. Personnel Policy Number 3 – Leaves and Holidays
  11. Personnel Policy Number 19 – Medical Leave for Fitness
  12. Contracts
  13. Donations
  14. Imaging request – Child Support Services Unit
  15. IT request
- S. Discussion/Information
- 1.
- T. Adjournment

**Next Meeting Dates:**

- **Wednesday, April 15, 2015 – Marshall**
- **Wednesday, May 20, 2015 – Marshall**
- **Wednesday, June 17, 2015 - Marshall**

# SOUTHWEST HEALTH & HUMAN SERVICES

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

## SUMMARY OF FINANCIAL ACCOUNTS REPORT

For the Month Ending: **January 1, 2015**

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

Description	Month	Running Balance
<b>BEGINNING BALANCE</b>		<b>\$4,783,728</b>
<b>RECEIPTS</b>		
Monthly Receipts	1,988,591	
County Contribution	17,558	
Interest on Investments	416	
<b>TOTAL MONTHLY RECEIPTS</b>		<b>2,006,565</b>
<b>DISBURSEMENTS</b>		
Monthly Disbursements	2,400,656	
<b>TOTAL MONTHLY DISBURSEMENTS</b>		<b>2,400,656</b>
<b>ENDING BALANCE</b>		<b>\$4,389,637</b>

## REVENUE

<i>Checking/Money Market</i>	<b>\$4,389,637</b>
<i>CD's/Bonds</i>	<b>\$1,893,750</b>
<i>Magic Fund</i>	<b>\$0</b>

Average Balance  
last two years  
**\$6,154,073**

**ENDING BALANCE** **\$6,283,387**

## REVENUE DESIGNATION



Checking/Money Market
  CD's/Bonds
  Magic Fund

# Southwest Health and Human Services



KJD  
3/5/15 10:46AM

Treasurer's Cash Trial Balance As of 02/2015

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
1	Health Services Fund			
	1,613,823.07			
	Receipts	177,926.13	497,231.54	
	Disbursements	118,690.80-	188,635.21-	
	Payroll	188,092.32-	374,700.01-	
	Journal Entries	0.00	900.00	
	<b>Fund Total . . . . .</b>	<b>128,856.99-</b>	<b>65,203.68-</b>	<b>1,548,619.39</b>
5	Human Services Fund			
	410	General Administration		
	791,336.93			
	Receipts	46,487.33	90,826.58	
	Disbursements	49,000.04-	88,115.90-	
	Payroll	11,005.59-	21,391.38-	
	<b>Dept Total . . . . .</b>	<b>13,518.30-</b>	<b>18,680.70-</b>	<b>772,656.23</b>
5	Human Services Fund			
	420	Income Maintenance		
	2,562,473.99-			
	Receipts	702,613.40	1,033,711.02	
	Disbursements	240,353.87-	682,734.33-	
	Payroll	336,794.07-	664,804.86-	
	Journal Entries	0.00	2,040.00	
	<b>Dept Total . . . . .</b>	<b>125,465.46</b>	<b>311,788.17-</b>	<b>2,874,262.16-</b>
5	Human Services Fund			
	430	Social Services		
	40,209,023.49-			
	Receipts	694.12	3,470.35	
	Disbursements	110,280.27-	284,277.46-	
	Payroll	519,668.71-	1,035,275.66-	
	Journal Entries	0.00	3,060.00	
	<b>Dept Total . . . . .</b>	<b>629,254.86-</b>	<b>1,313,022.77-</b>	<b>41,522,046.26-</b>
5	Human Services Fund			
	431	Purchased Services,SSIS		
	47,964,588.65			
	Receipts	809,135.50	1,168,425.45	
	Disbursements	439.30-	599.30-	
	SSIS	606,083.44-	1,115,707.75-	

# Southwest Health and Human Services



KJD  
3/5/15

10:46AM

Treasurer's Cash Trial Balance

As of 02/2015

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
5	1,794,967.25-	202,612.76	52,118.40	48,016,707.05
		Information Systems		
		7,131.00	14,150.00	
		800.63-	1,594.39-	
		21,743.47-	43,159.37-	
		15,413.10-	30,603.76-	1,825,571.01-
5		LCTS Collaborative Agency		
	0.00	1,495.00	1,495.00	1,495.00
		1,495.00	1,495.00	
		328,613.04-	1,620,482.00-	2,568,978.85
<b>61</b>		Agency Health Insurance		
	52,721.51	260,632.71	450,604.67	
		183,488.59-	459,533.19-	
		77,144.12	8,928.52-	<b>43,792.99</b>
71		LCTS Collaborative Agency		
	137,922.21	0.00	42,225.50-	
		0.00	42,225.50-	95,696.71
		0.00	42,225.50-	95,696.71
73		LCTS Collaborative Agency		
	70,596.26	450.00	650.00	
		0.00	4,923.00-	
		450.00	4,273.00-	66,323.26

# Southwest Health and Human Services



KJD 3/5/15 10:46AM

As of 02/2015

Treasurer's Cash Trial Balance

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
Fund Total . . . . .	70,596.26	450.00	4,273.00-	66,323.26
75 Redwood LCTS Collaborative				
471 LCTS Collaborative Agency	84,241.34	14,214.00-	19,788.00-	
Disbursements		14,214.00-	19,788.00-	64,453.34
Dept Total . . . . .				
Fund Total . . . . .	84,241.34	14,214.00-	19,788.00-	64,453.34
77 Local Advisory Council				
477 Local Advisory Council	1,772.99	0.00	0.00	1,772.99
Dept Total . . . . .				
Fund Total . . . . .	1,772.99	0.00	0.00	1,772.99
All Funds .....	6,150,538.23			
Receipts		2,006,565.19	3,260,564.61	
Disbursements		717,267.50-	1,772,426.28-	
SSIS		606,083.44-	1,115,707.75-	
Payroll		1,077,304.16-	2,139,331.28-	
Journal Entries		0.00	6,000.00	
Total .....		394,089.91-	1,760,900.70-	<b>4,389,637.53</b>

# Southwest Health and Human Services



KJD  
3/5/15 10:47AM

Trial Balance  
As of 02/2015

Report Basis: Cash

1 Health Services Fund

<u>Account</u>	<u>Beginning Balance</u>	<u>Actual This-Month</u>	<u>Actual Year-To-Date</u>	<u>Current Balance</u>
1001 Cash in Bank - Checking	1,613,823.07	128,856.99-	65,203.68-	1,548,619.39
1090 Investments	334,962.50	0.00	900.00-	<b>334,062.50</b>
<b>Total Assets</b>	<b>1,948,785.57</b>	<b>128,856.99-</b>	<b>66,103.68-</b>	<b>1,882,681.89</b>
--- Liabilities and Balance ---				
Liabilities				
<b>Total Liabilities</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
Fund Balance				
2881 Unassigned Fund Balance	1,948,785.57-	0.00	0.00	1,948,785.57-
2885 Revenue Control	0.00	177,372.19-	496,190.05-	496,190.05-
2887 Expenditure Control	0.00	306,229.18	562,293.73	562,293.73
<b>Total Fund Balance</b>	<b>1,948,785.57-</b>	<b>128,856.99</b>	<b>66,103.68</b>	<b>1,882,681.89-</b>
<b>Total Liabilities and Balance</b>	<b>1,948,785.57-</b>	<b>128,856.99</b>	<b>66,103.68</b>	<b>1,882,681.89-</b>
410 General Administration				
--- Assets ---				
<b>Total Assets</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
--- Liabilities and Balance ---				
Liabilities				
<b>Total Liabilities</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Total Liabilities and Balance</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
1 Health Services Fund				

# Southwest Health and Human Services



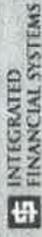
KJD  
3/5/15 10:47AM

5 Human Services Fund

Trial Balance  
As of 02/2015  
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	791,336.93	13,518.30	18,680.70	772,656.23
<b>Total Assets</b>	791,336.93	13,518.30	18,680.70	772,656.23
---- Liabilities and Balance ----				
Liabilities				
2080 Medical Insurance Payable	40,941.81	0.00	0.00	40,941.81
2090 Due To Flexible Plan Employees	2,028.02	109.54	109.54	1,918.48
<b>Total Liabilities</b>	38,913.79	109.54	109.54	39,023.33
<b>Fund Balance</b>				
2881 Unassigned Fund Balance	752,423.14	0.00	0.00	752,423.14
2887 Expenditure Control	0.00	13,627.84	18,790.24	18,790.24
<b>Total Fund Balance</b>	752,423.14	13,627.84	18,790.24	733,632.90
<b>Total Liabilities and Balance</b>	791,336.93	13,518.30	18,680.70	772,656.23
420 Income Maintenance				
1001 Cash In Bank - Checking	2,562,473.99	125,465.46	311,788.17	2,874,262.16
1090 Investments	625,915.00	0.00	2,040.00	623,875.00
<b>Total Assets</b>	1,936,558.99	125,465.46	313,828.17	2,250,387.16
---- Liabilities and Balance ----				
Liabilities				
<b>Total Liabilities</b>	0.00	0.00	0.00	0.00
<b>Fund Balance</b>				
2881 Unassigned Fund Balance	1,936,558.99	0.00	0.00	1,936,558.99
2885 Revenue Control	0.00	701,035.78	944,187.80	944,187.80
2887 Expenditure Control	0.00	575,570.32	1,258,015.97	1,258,015.97
<b>Total Fund Balance</b>	1,936,558.99	125,465.46	313,828.17	2,250,387.16
<b>Total Liabilities and Balance</b>	1,936,558.99	125,465.46	313,828.17	2,250,387.16
430 Social Services				
----- Assets -----				

# Southwest Health and Human Services



KJD  
3/5/15 10:47AM

Trial Balance  
As of 02/2015

Report Basis: Cash

5 Human Services Fund

Account	Beginning Balance	Actual This-Month	Actual Year-To-Date	Current Balance
1001 Cash In Bank - Checking	40,209,023.49-	629,254.86-	1,313,022.77-	41,522,046.26-
1090 Investments	938,872.50	0.00	3,060.00-	935,812.50
<b>Total Assets</b>	39,270,150.99-	629,254.86-	1,316,082.77-	40,586,233.76-
--- Liabilities and Balance----- Liabilities				
<b>Total Liabilities</b>	0.00	0.00	0.00	0.00
<b>Fund Balance</b>				
2881 Unassigned Fund Balance	39,270,150.99	0.00	0.00	39,270,150.99
2885 Revenue Control	0.00	579.28-	2,679.98-	2,679.98-
2887 Expenditure Control	0.00	629,834.14	1,318,762.75	1,318,762.75
<b>Total Fund Balance</b>	39,270,150.99	629,254.86	1,316,082.77	40,586,233.76
<b>Total Liabilities and Balance</b>	39,270,150.99	629,254.86	1,316,082.77	40,586,233.76
<b>431 Purchased Services,SSIS</b>				
----- Assets-----				
1001 Cash In Bank - Checking	47,964,588.65	202,612.76	52,118.40	48,016,707.05
1205 County Advances - MFIP (Chippewa Cty)	80,749.47	0.00	0.00	80,749.47
<b>Total Assets</b>	48,045,338.12	202,612.76	52,118.40	48,097,456.52
--- Liabilities and Balance----- Liabilities				
<b>Total Liabilities</b>	0.00	0.00	0.00	0.00
<b>Fund Balance</b>				
2881 Unassigned Fund Balance	48,045,338.12-	0.00	0.00	48,045,338.12-
2885 Revenue Control	0.00	801,311.10-	1,159,205.67-	1,159,205.67-
2887 Expenditure Control	0.00	598,698.34	1,107,087.27	1,107,087.27
<b>Total Fund Balance</b>	48,045,338.12-	202,612.76-	52,118.40-	48,097,456.52-
<b>Total Liabilities and Balance</b>	48,045,338.12-	202,612.76-	52,118.40-	48,097,456.52-
<b>461 Information Systems</b>				
----- Assets-----				
1001 Cash In Bank - Checking	1,794,967.25-	15,413.10-	30,603.76-	1,825,571.01-
<b>Total Assets</b>	1,794,967.25-	15,413.10-	30,603.76-	1,825,571.01-
--- Liabilities and Balance-----				

# Southwest Health and Human Services



KJD 3/5/15 10:48AM

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RM- Stmt of Revenues & Expenditures

As Of 02/2015 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO- DATE	2015 BUDGET	% OF BUDG	% OF YEAR
FUND 1 HEALTH SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	17,557.75-	190,855.00-	763,420.00-	25	17
INTERGOVERNMENTAL REVENUES	4,970.32-	25,749.35-	336,450.00-	8	17
STATE REVENUES	38,659.15-	64,205.75-	813,453.00-	8	17
FEDERAL REVENUES	78,611.84-	155,638.98-	965,792.00-	16	17
FEES	36,671.41-	58,038.04-	485,899.00-	12	17
EARNINGS ON INVESTMENTS	62.43-	463.16-	1,200.00-	39	17
MISCELLANEOUS REVENUES	839.29-	1,239.77-	1,300.00-	95	17
TOTAL REVENUES	177,372.19-	496,190.05-	3,367,514.00-	15	17
EXPENDITURES					
PROGRAM EXPENDITURES	0.00	0.00	0.00	0	17
PAYROLL AND BENEFITS	188,092.32	374,700.01	2,567,555.00	15	17
OTHER EXPENDITURES	118,136.86	187,593.72	799,959.00	23	17
TOTAL EXPENDITURES	306,229.18	562,293.73	3,367,514.00	17	17

# Southwest Health and Human Services



KJD 3/5/15 10:48AM

RM- Stmt of Revenues & Expenditures

Page 3

As Of 02/2015 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO- DATE	2015 BUDGET	% OF BUDG	% OF YEAR
FUND 5 HUMAN SERVICES FUND REVENUES					
CONTRIBUTIONS FROM COUNTIES	0.00	87,850.96-	9,179,271.00-	1	17
INTERGOVERNMENTAL REVENUES	8,294.98-	8,960.72-	36,804.00-	24	17
STATE REVENUES	308,417.66-	406,327.67-	3,903,232.00-	10	17
FEDERAL REVENUES	996,919.68-	1,172,872.73-	6,832,224.00-	17	17
FEES	117,412.46-	239,328.77-	1,750,500.00-	14	17
EARNINGS ON INVESTMENTS	353.73-	2,624.49-	15,000.00-	17	17
MISCELLANEOUS REVENUES	80,153.65-	203,753.11-	1,210,923.00-	17	17
<b>TOTAL REVENUES</b>	<b>1,511,552.16-</b>	<b>2,121,718.45-</b>	<b>22,927,954.00-</b>	<b>9</b>	<b>17</b>
EXPENDITURES					
PROGRAM EXPENDITURES	730,689.40	1,458,748.68	8,659,766.00	17	17
PAYROLL AND BENEFITS	891,757.69	1,767,770.71	11,929,861.00	15	17
OTHER EXPENDITURES	217,827.65	520,890.60	2,338,327.00	22	17
<b>TOTAL EXPENDITURES</b>	<b>1,840,274.74</b>	<b>3,747,409.99</b>	<b>22,927,954.00</b>	<b>16</b>	<b>17</b>

# Southwest Health and Human Services

REVENUES & EXPENDITURES BY PROG, DEPT, AND FUND AS OF 02/2015

KJD  
3/5/15 11:57AM



Report Basis: Cash

Element	Description	Account Number	Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
510 PROGRAM	SHIP		16,548.11-	36,960.59-	270,000.00-	14	17
			30,034.82	43,623.31	270,265.00	16	17
			13,486.71	6,662.72	265.00	2,514	17
530 PROGRAM	Cleanway Grant		0.00	0.00	150,000.00-	0	17
			5,515.32	11,280.65	143,031.00	8	17
			5,515.32	11,280.65	6,969.00-	162-	17
900 PROGRAM	Emergency Preparedness		33,569.98-	33,569.98-	110,000.00-	31	17
			8,432.12	16,794.96	120,597.00	14	17
			25,137.86-	16,775.02-	10,597.00	158-	17
901 PROGRAM	Med Reserve Corps		0.00	0.00	3,500.00-	0	17
			21.47	47.34	2,796.00	2	17
			21.47	47.34	704.00-	7-	17
483 DEPT	Health Education	Totals:	57,491.85-	78,767.55-	606,300.00-	13	17
			55,233.86	98,538.95	688,859.00	14	17
			2,257.99-	19,771.40	82,559.00	24	17
485 DEPT	Environmental Health						
800 PROGRAM	Environmental		6,358.32-	29,090.11-	138,000.00-	21	17
			8,876.83	21,606.13	161,721.00	13	17
			2,518.51	7,483.98-	23,721.00	32-	17
820 PROGRAM	Healthy Homes Grant		0.00	0.00	18,079.00-	0	17
			1,382.50	1,923.93	18,229.00	11	17
			1,382.50	1,923.93	150.00	1,283	17
830 PROGRAM	FDA- Research(Standardization for Ins						
			408.88	408.88	0.00	0	17
			408.88	408.88	0.00	0	17
485 DEPT	Environmental Health	Totals:	6,358.32-	29,090.11-	156,079.00-	19	17
			10,668.21	23,938.94	179,950.00	13	17
			4,309.89	5,151.17-	23,871.00	22-	17
1 FUND	Health Services Fund	Totals:	177,372.19-	496,190.05-	3,367,514.00-	15	17
			306,229.18	562,293.73	3,367,514.00	17	17
			128,856.99	66,103.68	0.00	0	17

# Southwest Health and Human Services

REVENUES & EXPENDITURES BY PROG, DEPT, AND FUND AS OF 02/2015

KJD  
3/5/15 11:57AM



Report Basis: Cash

Element	Description	Account Number	Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
740 PROGRAM	Mental Health (Both Adults/Children)		24,072.17-	24,072.17-	866,038.00-	3	17
			Revenue				
			Expend.				
			Net	24,072.17-	866,038.00-	3	17
741 PROGRAM	Mental Health/Adults Only		Revenue	49,004.45-	647,500.00-	8	17
			Expend.	185,527.61	1,426,324.00	13	17
			Net	136,523.16	778,824.00	18	17
742 PROGRAM	Mental Health/Children Only		Revenue	87,388.95-	555,000.00-	16	17
			Expend.	264,259.41	1,408,536.00	19	17
			Net	176,870.46	853,536.00	21	17
750 PROGRAM	Developmental Disabilities		Revenue	91,864.18-	688,008.00-	13	17
			Expend.	53,381.22	408,451.00	13	17
			Net	38,482.96-	279,557.00-	14	17
760 PROGRAM	Adult Services		Revenue	203,714.09-	1,437,000.00-	14	17
			Expend.	22,301.74	146,000.00	15	17
			Net	181,412.35-	1,291,000.00-	14	17
431 DEPT	Purchased Services,SSIS	Totals:	Revenue	1,159,205.67-	13,753,900.00-	8	17
			Expend.	1,107,087.27	6,844,766.00	16	17
			Net	52,118.40-	6,909,134.00-	1	17
461 DEPT	Information Systems		Revenue	14,150.00-	78,500.00-	18	17
0 PROGRAM			Expend.	44,753.76	350,215.00	13	17
			Net	30,603.76	271,715.00	11	17
461 DEPT	Information Systems	Totals:	Revenue	14,150.00-	78,500.00-	18	17
			Expend.	44,753.76	350,215.00	13	17
			Net	30,603.76	271,715.00	11	17
471 DEPT	LCTS Collaborative Agency		Revenue	1,495.00-	0.00	0	17
702 PROGRAM	LCTS		Expend.	1,495.00-	0.00	0	17
			Net	1,495.00-	0.00	0	17
471 DEPT	LCTS Collaborative Agency	Totals:	Revenue	1,495.00-	0.00	0	17
			Expend.	1,495.00-	0.00	0	17
			Net	1,495.00-	0.00	0	17
5 FUND	Human Services Fund	Totals:	Revenue	2,121,718.45-	22,927,954.00-	9	17
			Expend.	3,747,409.99	22,927,954.00	16	17
			Net	1,625,691.54	0.00	0	17

# Southwest Health and Human Services

REVENUES & EXPENDITURES BY PROG, DEPT, AND FUND AS OF 02/2015



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>
FINAL TOTALS	837 Accounts		Revenue 1,688,924.35-	2,617,908.50-	26,295,468.00-	10	17
			Expend. 2,146,503.92	4,309,703.72	26,295,468.00	16	17
			Net 457,579.57	1,691,795.22	0.00	0	17

**SOUTHWEST HEALTH AND HUMAN SERVICES CHECK REGISTER  
FEBRUARY 2015**

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	- DISBURSEMENTS	BALANCE
	<b>BALANCE FORWARD</b>				4,783,728.44
2/2/15	52691 - 52718	Disb		6,466.58	4,777,261.86
2/2/15	52719- 52752	Disb		123,012.39	4,654,249.47
2/2/15	ACH 703 - 707	Disb		757.67	4,653,491.80
2/3/15	11851-881,11887-891	Dep	55,683.82		4,709,175.62
2/6/15	6671-6694	PAYROLL		121,258.76	4,587,916.86
2/6/15	29473-29708 ACH	PAYROLL		416,842.35	4,171,074.51
2/6/15	11843-11850, 11882-11886, 11892-11937	Dep	413,061.54		4,584,136.05
2/9/15	ACH 708	Disb		169.00	4,583,967.05
2/9/15	52753-52784	Disb		1,668.21	4,582,298.84
2/9/15	709-721	Disb		1,831.44	4,580,467.40
2/9/15	52785-52917	Disb		244,939.54	4,335,527.86
2/9/15	52918 - 52924	Disb		2,829.14	4,332,698.72
2/2/15	9247	Disb		7,162.67	4,325,536.05
2/2/15	9248	Disb		14,814.62	4,310,721.43
2/9/15	9249	Disb		8,185.45	4,302,535.98
2/9/15	9250	Disb		9,162.54	4,293,373.44
2/9/15	9251	Disb		3,394.39	4,289,979.05
2/9/15	9253	Disb		3,047.05	4,286,932.00
2/9/15	9254	Disb		4,574.50	4,282,357.50
2/9/15	9238	Disb		1.00	4,282,356.50
2/10/15	11938-956,11963-975	Dep	55,824.08		4,338,180.58
2/11/15	9256	Disb		3,047.19	4,335,133.39
2/11/15	9257	Disb		4,632.00	4,330,501.39
2/12/15	9258	Disb		56,580.36	4,273,921.03
2/17/15	52925 - 52959	Disb		4,750.68	4,269,170.35
2/17/15	52960 - 53072	Disb		330,427.14	3,938,743.21
2/17/15	ACH 722 - 734	Disb		1,300.56	3,937,442.65
2/13/15	11957-962,11976-12032	Dep	185,384.27		4,122,826.92
2/17/15	9260	Disb		3,365.29	4,119,461.63
2/17/15	9261	Disb		71,069.61	4,048,392.02
2/17/15	12043-44,55,57-58,60,62,73-80	Dep	59,516.96		4,107,908.98
2/20/15	6695-6709	PAYROLL		122,563.69	3,985,345.29
2/20/15	29709-29936 ACH	PAYROLL		416,639.36	3,568,705.93
2/20/15	53073-53350 CEI	Disb		88,309.84	3,480,396.09
2/20/15	735 ACH CEI	Disb		82.24	3,480,313.85
2/23/15	53351-53422	Disb		6,343.35	3,473,970.50
2/23/15	53423-53508	Disb		161,239.10	3,312,731.40
2/23/15	736-739 ACH	Disb		547.20	3,312,184.20
2/20/15	12033-42,45,47-51,53-54,56,59,61,63,72,12081-99,12102-108,12110,12114,12136-12158	Dep	630,673.12		3,942,857.32
2/23/15	9262	Disb		2,037.82	3,940,819.50
2/23/15	9263	Disb		11,110.23	3,929,709.27
2/24/15	9264	Disb		1,670.90	3,928,038.37
2/25/15	12109,12111-113,12115-135,12159-250	Dep	430,362.80		4,358,401.17
2/25/15	9265	Disb		5,047.05	4,353,354.12
2/25/15	9266	Disb		4,617.00	4,348,737.12
2/27/15	53509-53532	Disb		10,031.82	4,338,705.30
2/27/15	53533- 53637	Disb		124,228.09	4,214,477.21
2/27/15	740-745 ACH	Disb		479.08	4,213,998.13
2/27/15	12251-261,263-265,268-270,272,274,276-277,279-280,282,12285-128288	Dep	176,246.44		4,390,244.57
2/13/15	9259 original/dup ck cashed	manual war		419.20	4,389,825.37
2/9/15	9255	Neg rcpt	-604.00		4,389,221.37
2/26/15	17397	Interest	416.16		4,389,637.53
					4,389,637.53
	<b>Balanced 03/02/15 LMD</b>	<b>TOTALS</b>	<b>2,006,565.19</b>	<b>2,400,656.10</b>	

# 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	242	331	37	842	28	484	464	334	2789
2015	12	14	223	321	35	828	24	410	460	332	2656
2016											
2017											

2015	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	12	13	224	323	36	821	24	416	461	332	2662
February	12	14	221	318	34	834	24	403	458	331	2649
March											
April											
May											
June											
July											
August											
September											
October											
November											
December	12	14	223	321	35	828	24	410	460	332	2656

# 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	42	18	0	4	31	127	104	106	0	1	16	449
2015	36	15	0	3	28	151	126	102	0	1	26	486
2016												
2017												

2015	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	36	15	0	3	28	142	120	100	0	1	28	473
February	35	15	0	3	27	160	132	103	0	1	23	499
March												
April												
May												
June												
July												
August												
September												
October												
November												
December												
	36	15	0	3	28	151	126	102	0	1	26	486

2015 KIDS IN OUT OF HOME PLACEMENT

February		
	# of placements	Probation placements
Lincoln	8	1
Lyon	38	3
Murray	3	1
Pipestone	19	2
Redwood	47	5
Rock	10	0
<b>Totals</b>	<b>125</b>	<b>12</b>
<b>Total # of kids</b>	<b>137</b>	

**February 2015 - Placements by Category  
137 Kids in Placement**



## February 2015:

### Total of 18 Children entered placement

4	Lincoln	Foster Home
1	Lyon	Group Home
1	Lyon	Residential Treatment Center
1	Lyon	Foster Home
1	Murray	Probation
1	Pipestone	Group Home
6	Redwood	Foster Home
2	Redwood	Non-custodial parents home
1	Redwood	Probation

### Total of 5 Children were discharged from placement

1	Lyon	Foster Home
1	Pipestone	Probation
2	Redwood	Foster Home
1	Redwood	Probation

There were 0 adoptions this month

## NON IVD COLLECTIONS

*FEBRUARY 2015*

PROGRAM	ACCOUNT	TOTAL
MSA/GRH	05-420-605.5802	0.00
TANF (MFIP/DWP/AFDC)	05-420-610.5803	4,066.00
GA	05-420-620.5803	685.79
FS	05-420-630.5803	1,643.00
CS (PI Fee, App Fee, etc)	05-420-640.5501	402.75
MA	05-420-650.5803, 5513	36,894.55
REFUGEE	05-420-680.5803	0.00
<b>CHILDRENS</b>		
Parental Fees, Holds	05-431-710.5501	3,297.50
Corp FC Licensing	05-431-710.5505	200.00
OOH/FC Recovery	05-431-710.5803	18,033.59
<b>CHILDCARE</b>		
Licensing	05-431-720.5502	1,400.00
Over Payments	05-431-721&722.5803	1,111.50
<b>CHEMICAL DEPENDENCY</b>		
CD Assessments	05-431-730.5519	4,626.06
Detox Fees	05-431-730.5520	5,290.30
<b>MENTAL HEALTH</b>		
Insurance Copay	05-431-740.5803	66.00
Over Payments	05-431-741 or 742.5803	0.00
<b>DEVELOPMENTAL DISABILITIES</b>		
Insurance Copay	05-431-750.5803	46.75
<b>ADULT</b>		
Insurance Copay	05-431-760.5803	1,052.17
<b>TOTAL NON-IVD COLLECTIONS</b>		<b>78,816</b>

# Environmental Health Water Analysis Laboratory 2014 Year End Report

For the year 2014, the Environmental Health Water Analysis Laboratory processed a total of 906 samples performing 1316 tests. This is an increase from 814 samples received and 1168 tests performed in 2013.

## Revenue Summary

Revenue for the water lab was \$22,723 for 2014 which was an increase from \$20,552 in 2013. Lab testing was performed for municipal water systems, commercial interests, and private well owners.

## Test Frequency

A major concern for safe drinking water is the presence of Total Coliform Bacteria in the water. Most coliform bacteria do not themselves usually cause disease, but if they show up in a water test, they can indicate that surface contamination has somehow gotten into the water, and disease organisms may also be present. Coliform bacteria are also good indicators of sanitary protection because they are killed by disinfection the same way that most disease organisms are killed.

Total Coliform Bacteria can be tested using two different methods: Colilert and the Membrane Filtration Technique (MFT). The Colilert method shows either the presence or absence of Total Coliform Bacteria while the MFT method will yield a direct count of Total Coliform Bacteria. Combining the two methods, 69% of tests performed were for Total Coliform Bacteria.

Nitrate-Nitrogen is also an important analyte to test for; especially for pregnant and nursing women, infants, and the immune deficient. The condition of methemoglobinemia (blue baby syndrome) which can be fatal can occur in infants and susceptible adults if the Nitrate-Nitrogen level exceeds 10 mg/L. Nitrate-Nitrogen tests accounted for 7% of tests performed.

Sulfates are a concern to infants and to adults that cannot tolerate the higher Sulfate levels in the water. Sulfates level above 400 mg/L can cause symptoms such as dehydration and diarrhea. The percentage of tests requesting Sulfates was 5%.

Most of the Fecal Coliform tests and Total Plate Count tests performed were requested from a local business on their product. These tests accounted for 10% of total tests performed.

## Distribution Data

Lyon County continues to submit more samples as expected with the greater population base. The highest number of samples received, tests performed, and revenue collected, comes from Lyon County regarding the six counties individually.

## Sample Data

The table below shows historical revenue and sample testing trends.

Year	Revenue	Number of Samples Received	Annual Number of Tests Submitted
2006	22,088	861	1257
2007	22,316	809	1427
2008	18,351	693	1119
2009	22,338	767	1281
2010	25,780	1085	1486
2011	22791	998	1290
2012	21891	884	1271
2013	20,552	814	1168
2014	22,772	906	1316

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

**Section 2 – Medical Leave**

- a. Each probationary, temporary, and permanent employee shall earn medical leave at the end of the payroll period at the rate of 3.7 hours. Medical leave will be prorated for part-time employees. Medical leave can accumulate to a maximum of 450 hours. No time is accumulated after reaching this maximum. Medical leave may not be used in the payroll period it is earned.
- b. When taking medical leave, the minimum increment that can be used is one-half hour. In addition, the agency may designate any qualifying leave for employee or family medical purposes, paid or unpaid, as counting toward an employee's FMLA entitlement (FMLA § 825.208).
- c. Medical leave may be used for illness (self and immediate family), injury, medical and dental appointments. (Immediate family shall be spouse, children, parents, grandparents and legal wards of the employee or as allowed by state statute). Medical leave may be used for reasons of prenatal and postnatal care for the length of time prescribed, and verified in writing, by a physician.
- d. When an employee cannot report to work due to an illness the employee shall notify the receptionist so the employee's calendar can be updated. The receptionist should then notify the supervisor so that unit coverage is ensured.
- e. When illness occurs within a period of vacation leave, the period of illness may be charged as medical leave and the charge against vacation leave reduced accordingly.
- f. No employee will be paid for accrued medical leave at the time of separation, except those employees in the Public Health Collective Bargaining Unit. Payment of unused medical leave will be paid out to the Public Health Collective Bargaining Unit as per the Collective Bargaining Agreement.
- g. The employer may require medical documentation when three days of leave are used within a thirty (30) day period. Such documentation may consist of verification of doctor's or dental appointments without disclosure of diagnosis. The employer reserves the right to request additional information, including medical information, in the event that there is a pattern indicating the possible abuse of sick leave.
- h. Medical leave due to preplanned medical appointments must be approved by the employee's supervisor in the same manner as vacation.
- i. If any employee receives a compensable injury and has benefits accrued under sick leave, the employee may at his/her option, request and receive sick leave to supplement the difference between his/her regular pay and Worker's Compensation.

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

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

**Section 3 – FMLA Leave**

- a. An “eligible employee” is an employee of a covered employer who:
  - 1. Has been employed by the employer for at least 12 months, and
  - 2. Has been employed for at least 1,250 hours of service during the 12-month period immediately preceding the commencement of the leave,
- b. Eligible employees may take leave for:
  - 1. The birth of a child;
  - 2. The placement of a child for adoption or foster care;
  - 3. To care for the employee’s spouse, son, daughter or parent with a serious health condition;
  - 4. A serious health condition that renders the employee unable to perform the functions of his/her job;
  - 5. To care for the employee’s spouse, son, daughter, parent, or next of kin with a serious injury or illness incurred during active duty military service;
  - 6. For the purposes of FMLA leave, “child” is defined as a biological, adopted or foster son or daughter, stepchild, legal ward, or a child of a person standing in loco parentis who is: (a) under the age of 18 years; or (b) 18 years of age or older and incapable of self-care because of mental or physical disability.

**c. Requesting Leave**

Eligible employees seeking to use FMLA leave shall be required to provide written notice to the Human Resources Director, except in emergency circumstances, when oral notice may be given:

- 1. 30-day advance notice the need to take FMLA leave when the need is foreseeable;
- 2. notice "as soon as practicable" when the need to take FMLA leave is not foreseeable ("as soon as practicable" generally means at least verbal notice to the employer within one or two business days of learning of the need to take FMLA leave);
- 3. sufficient information for the employer to understand that the employee needs leave for FMLA-qualifying reasons (the employee need not mention FMLA when

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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.

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PERSONNEL POLICY NUMBER 3**

- g. For as long as an employee is on FMLA leave the agency will make its cafeteria contribution towards health insurance.
- h. The agency will require that an employee's FMLA leave be supported by appropriate documentation.

  - 1. For the employee's serious health conditions, the leave must be supported by a certification issued by the health care provider of the employee. The agency will notify the employee, in writing, that such certification is required. The certification shall contain all of the information permitted by law. Failure of the employee to submit complete Certification of Health Care Provider forms, with all information, may result in a denial of FMLA leave.
  - 2. The employee must provide the medical certification within fifteen (15) days of a request for certification.
  - 3. The agency will also require medical certification from the eligible family member's health care provider to support a leave request for a leave to care for an eligible family member. In cases where the employee's use of FMLA leave to care for an immediate family member is of an intermittent nature, a medical certification will be required verifying this fact during each 12-month period in which the employee uses FMLA leave for this purpose.
  - 4. Other appropriate documentation, including military records, verification of adoption and similar records, may be required by the employer.
- i. **Second Opinion**

  - 1. In General - In any case in which the employer has reason to doubt the validity of the certification provided by the health care provider, the employer may require, at the expense of the employer, that the eligible employee obtain the opinion of a second health care provider designated or approved by the employer concerning any information certified by the employee's health care provider.
  - 2. Limitation - Health care provider designated or approved under paragraph (1) shall not be employed on a regular basis by the employer.
  - 3. Resolution of Conflicting Opinions

    - In General – In any case in which the second opinion differs from the opinion in the original certification provided, the employer may require, at the expense of the employer, that the employee obtain the opinion of a third health care provider designated or approved jointly by the employer and the employee concerning the information certified.

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- Finality – The opinion of the third health care provider concerning the information certified shall be considered to be final and shall be binding on the employer and the employee.
- 4. Subsequent Recertification - The employer may require that the eligible employee obtain subsequent re-certifications on a reasonable basis.
- 5. In cases where the employee's use of FMLA leave is of an intermittent nature, a medical certification will be required verifying this fact during each 12-month period in which the employee uses FMLA leave.
- j. As a condition of restoring an employee whose FMLA leave was occasioned by the employee's own serious health condition that made the employee unable to perform the employee's job, Southwest Health and Human Services will require all employees who are certified for FMLA leave obtain and present certification from the employee's health care provider that the employee is able to resume work.
- k. For additional information refer to "Family and Medical Leave Act" (FMLA) U.S. Department of Labor website.

**Section 4 - Parenting Leave**

- a. A parental leave of up to 612 weeks shall be granted to a natural parent or adoptive parent, who requests such leave in conjunction with the birth or adoption of a child. To be eligible, the employee must have been employed for at least 1 year at half time. The 6 weeks of leave shall include any period of paid leave already provided. The employee shall be required to use all eligible paid leave during the parental leave period. This policy is provided for those employees who do not meet eligibility requirements under the Family Medical Leave Act and shall not be construed as being in addition to FMLA rights.
  - The leave must begin no later than 6 weeks following the birth or adoption.
  - The employee may continue all group insurance during the leave at the employee's expense.

**Section 5 – Statutory Leaves**

- a. Employees are entitled to certain statutory leaves under state and federal law. In order to request such leaves, the employee must make a written request to their immediate supervisor and the Deputy Director/Human Resources Director. Leaves may be granted or denied based upon whether the employee qualifies for the statutory leave(s); the employee has made the request for leave in a timely manner and provided the appropriate documentation.

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- b. Such statutory leaves include such leaves as military leaves, voting leave, bone marrow donation leave and school conference leave.

**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.

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- d. In the event of a death in the family the employee shall inform the supervisor in the 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 24<sup>th</sup> falls on 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

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

circumstances necessitating the leave. The request must be received prior to the commencement of the leave. The Southwest Health and Human Services Governing Board have the sole discretion to approve or deny such leave as it sees fit.

- d. Any unauthorized absence from work shall be considered absence without leave and be subject to disciplinary action and time without pay. Three days of absence without authorization may be deemed as a resignation, but such leave may be covered by subsequent approval of leave if conditions warrant.

Agency Forms Regarding This Policy

AG#006 - Leave Without Pay/Overtime Authorization

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

EFFECTIVE DATE: 02/15/12

REVISION DATE: ~~11/19/14~~ 03/18/15

AUTHORITY: Southwest Health and Human Services Joint Governing Board

**--- 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.

**Section 2 - Employee Benefit**

- a. Employees who have accumulated medical leave balances may trade their medical leave hours to cover the cost of fitness expenses for the employee, spouse and their eligible dependents as defined by eligibility to be on a parents' insurance.
- b. General Provisions
  - Maximum of \$ ~~1,200~~1500 (gross pay) in claims per employee per calendar year.
  - 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 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)
  - Fitness/exercise programs (i.e., Jazzercise, Curves, martial arts, etc...)
  - Personal trainers
  - New or used stationary personal exercise equipment that can be used

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

year-round in the home (i.e., treadmill, exercise bike, stair-stepper, **weight lifting equipment, free weights, stability ball**, 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/Kayaks, **paddle boards and paddles, tennis/racquetball racquets**, etc.)
- Monitoring devices (i.e., pedometer, heart rate monitor, Fitbit, and GPS watch)
- Fitness media (DVDS, videos, and games (i.e., fitness games or Wii fit). Title must be in request.
- 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, shorts, jackets, etc...)
- Medical related expenses (i.e., lab tests, prescriptions, glucose monitor, blood pressure monitor, etc...)
- Camping equipment (i.e., tents, 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.

**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

- Reimbursement requests may not exceed the maximum amount of **\$1,2500** per calendar year. The date of expense dictates which calendar year the expense will be applied to. Expenses for the previous year must be submitted to the Wellness Coordinator no later than the Monday noon deadline of the second payroll date of the new year.

**MARCH 2015**  
**BOARD APPROVAL ON THE FOLLOWING:**

- IV-D Cooperative Agreement (DHS) – 01/01/15 to 12/31/15;** Agreement with all 6 counties and DHS; County Attorney fee at \$120/hour and County Sheriff Process Service fees at \$45 Lyon, \$75 Lincoln, \$75 Pipestone, \$50 Redwood, \$40 Rock (renewal).
- William Toulouse, Quarnstrom & Doering PA (Marshall, MN) - 01/01/15 – 12/31/15;** Legal services, \$2,000/month or \$24,000 annually (no increase) (renewal).
- Progress Inc (Pipestone, MN) - 01/01/15 – 12/31/15;** Paper shredding services, \$.58/pound and \$8.25/hr recycling pickup (renewal).
- Marsh & McLennan Agency (Minneapolis, MN) - 02/12/15 – open renewal;** A collaborative engagement agreement and BCBS confidentiality release agreement to use a new medical claims analysis tool that will help develop cost containment strategies as well as better understand the cost drivers of health claims(new).
- DHS Adult Mental Health Grant – Community Support Program - 01/01/15 – 12/31/15;** A CSP grant to support mental health clients within the 6 counties, \$158,112 LLM, \$53,888 Pipestone, \$57,345 Redwood, \$56,106 for a total of \$325,451 (renewal).
- DHS Business Associate Agreement & Information and Privacy Security Agreement - 03/18/15 – open;** Agreements covering HIPPA and privacy rules (renewal).
- MDH NACCHO Medical Reserve Corps (MRC) Grant - 01/07/15 – 07/31/15;** A grant for MRC units for providing updates of programs and plans \$3,500 (renewal).

## **BOARD MEETING – 03/18/15**

### **DONATIONS**

- **Foster family Chris & Rebecca Ingebretsen and their 2 children (Rock County) donated 2 back packs**
- **Our Savior's Lutheran Church in Canby donated Easter baskets**

# Southwest Health and Human Services

## Child Support Services Unit – Case Files

### Document Scanning Service Pricing

#### **Document Scanning**

##### **Source Document Scanning**

~~\$.06/image~~

**Your Price: \$ .04/image**

Includes: 11” x 17” Images and Smaller  
Black & White, Multi-Page Image Format  
Positive or Negative Images  
TIFF Group 4 File  
300 dpi Resolution  
Auto Exposure for Image Clarity

##### **Clerical**

**\$ 15.00/hr.**

Includes: Document Preparation (removing staples, post-it-notes, etc.)  
Section Division (if required for indexing)  
Document Division (if required for indexing)

##### **Data Indexing**

**\$ 18.00/hr.**

Includes: Populating the Key Index or Search Fields  
Manual Data Entry or by Data File

##### **Pick Up/Delivery (can be shared between dept's.)**

**\$ 75.00/stop**

Includes: Pick Up/ Delivery by indigital, Inc. Employee and Vehicle

##### **CD-ROM Disk**

**\$ 15.00/ea.**

##### **Secure FTP File Transfer**

**N/C**

# Southwest Health and Human Services

## Child Support Services Unit – Case Files

### Project Estimate

indigital, Inc. has the capacity to process literally hundreds of boxes of records in a short period of time. We operate two production facilities can provide services to box up your files and transfer off-site to either of our secure locations for conversion processing. Our facilities are climate controlled, secure and provide the space necessary for short-term storage and retention prior to returning the files back to you, or providing secure shredding for destruction during the course of the conversion process.

**File Requests:** indigital processes all file requests while files are out for scanning at no additional file pull and retrieval fees. A production team along with a project lead associate would be assigned to your project for microfilm scanning, data indexing and quality control requirements achieving your monthly schedule and ultimately, your project completion goal.

### Case Files:

The following estimate is based on an *initial sample* and on a calculated measurement of 1 linear foot (12”) of files.

#### Per 1 ft. of Files

- Approximately 2735 scanned images
- Approx. 24 case files

#### Case Files: (per 1 ft. of files)

2735 Scanned Images @ \$ .04/ea.	\$ 109.40
3 Clerical Hours @ \$ 15.00/hr.	\$ 45
1 Data Indexing Hours @ \$ 18.00/hr.	<u>\$ 18</u>

**Estimate: \$ 172.40**

### Project Estimate:

Per client email: Approximately 34.5 file drawers of “pre-dieting” Case Files. Each drawer is estimated at 2 ft. in length. It is estimated that the “dieting” of the files will result in a 50% reduction in the amount of pages to be scanned or 17 file drawers of Case Files.

#### Estimated Volume and Cost:

17 drawers @ 2 ft. each	
92,990 Scanned Images @ \$ .04/ea.	\$ 3719.60
102 Clerical Hours @ \$ 15.00/hr.	\$ 1530.00
34 Data Indexing Hours @ \$ 18.00/hr.	<u>\$ 612.00</u>

**Estimate: \$ 5861.00**

# ONLINE PRICE QUOTATION

Quote Number: 10202208

Today's Date : 2/26/2015 7:45:41 PM

Created By: matt@tcmi.com

Quote Name: SWHHS - ML350 Gen9

Quote Created Date : 2/26/2015 7:44:43 PM

Contract: MN - STATE OF MINNESOTA (WSCA/NASPO) (14279)

Product availability and product discontinuation are subject to change without notice. The prices in this quotation are valid for 30 days from quote date above. Please include the quote number and contract from this quote on the corresponding purchase order.

items/description	part no	unit price	qty	ext price
HP ProLiant ML350 Gen9 Hot Plug 8SFF Configure-to-order Tower Server 754536-B21	Base	\$4,351.53	1	\$4,351.53
HP ProLiant ML350 Gen9 Hot Plug 8SFF Configure-to-order Tower Server	754536-B21			
<b>Warranty</b>	Included			
3 years parts, labor and onsite service (3/3/3) standard warranty. Certain restrictions and exclusions apply.				
HP ML350 Gen9 Intel Xeon E5-2620v3 (2.4GHz/6-core/15MB/85W) FIO Processor Kit	726658-L21			
HP 32GB (2x16GB) Dual Rank x4 DDR4-2133 CAS-15-15-15 Registered Memory Kit	726719-32G			
<b>Linux Operating Systems</b>	Included			
For additional information and selection of Linux Enterprise products and add-ons <a href="#">[Click Here]</a>				
HP iLO Advanced including 1yr 24x7 Technical Support and Updates Single Server License	512485-B21			
<b>Management - included with this Server</b>	Included			
HP iLO Management Engine w/t Intelligent Provisioning				
<b>Network card</b>	Included			
Embedded 1Gb 4-port 331i Network Adapter				
<b>Drive cage</b>	Included			
HP 8-Bay Small Form Factor Drive Cage				
HP 9.5mm SATA DVD-ROM JackBlack Gen9 Optical Drive	726536-B21			
HP 600GB 6G SAS 10K rpm SFF (2.5-inch) SC Enterprise 3yr Warranty Hard Drive	652583-B21			
HP 600GB 6G SAS 10K rpm SFF (2.5-inch) SC Enterprise 3yr Warranty Hard Drive	652583-B21			
HP 600GB 6G SAS 10K rpm SFF (2.5-inch) SC Enterprise 3yr Warranty Hard Drive	652583-B21			
HP Smart Array P440ar/2GB FBWC 12Gb 2-ports Int FIO SAS Controller + Cable Kit	749974-SC1			
HP 500W Flex Slot Platinum Hot Plug Power Supply Kit	720478-B21			
<b>Fan</b>	Included			
HP (3) Hot Plug Non-Redundant Fans				
HP 8GB USB Enterprise Mainstream Flash Media Drive Key Kit	737953-B21			
HP 5y Nbd ML350 Gen9 FC SVC	U7BK1E	\$920.80	1	\$920.80

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HP 500W Flex Slot Platinum Hot Plug Power Supply Kit	720478-B21	\$218.27	1	\$218.27
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SubTotal : \$5,490.60

Total : \$5,490.60

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The terms and conditions of the MN - STATE OF MINNESOTA (WSCA/NASPO) will apply to any order placed as a result of this inquiry, no other terms or conditions shall apply.

To access the HP Public Sector Online Store where this quote was created, go to:

<http://gem.compaq.com/gemstore/entry.asp?SiteID=13158>

\* HP is not liable for pricing errors. If you place an order for a product that was incorrectly priced, we will cancel your order and credit you for any charges. In the event that we inadvertently ship an order based on a pricing error, we will issue a revised invoice to you for the correct price and contact you to obtain your authorization for the additional charge, or assist you with return of the product. If the pricing error results in an overcharge to you, HP will credit your account for the amount overcharged.

\* This quotation may contain open market products which are sold in accordance with HP's Standard Terms and Conditions. HP makes no representation regarding the TAA status for open market products. Third party items that may be included in this quote are covered under the terms of the manufacturer warranty, not the HP warranty.

\* Please contact HP Public Sector Sales with any questions or for additional information:

K12 Education:	800-888-3224	Higher Education:	877-480-4433
State Local Govt:	888-202-4682	Federal Govt:	800-727-5472
Fax:	800-825-2329	Returns:	800-888-3224

\* For detailed warranty information, please go to [www.hp.com/go/specificwarrantyinfo](http://www.hp.com/go/specificwarrantyinfo). Sales taxes added where applicable. Freight is FOB Destination.

# The Computer Man, Inc.



1105 Canoga Park Drive  
 Marshall, MN 56258  
 Phone (507) 532-7562  
 Fax (507) 532-2680  
 www.tcmi.com

2/26/2015

Quote # 614764

## Quote

business partner



**Microsoft** Partner

Silver Midmarket Solution Provider



*Prepared For*

Southwest Health & Human Services  
 607 West Main Street Suite 100  
 Marshall, MN 56258

PO Number	Terms	Rep
	Net 10 Days	MWT

Description	Qty	Price	Extended Price
Microsoft Windows Server Standard 2012 R2 SNGL OLP NL 2Proc Open Value Year 3 Addition V9983855	1	800.03	800.03T

Thank you for your business.	<b>Subtotal</b>	\$800.03
	<b>Sales Tax (6.875%)</b>	\$55.00
	<b>Total</b>	\$855.03

Quote valid for 2 weeks  
 from date.