



SOUTHWEST
HEALTH & HUMAN
SERVICES

Southwest Health and Human Services
Board Agenda
Wednesday, March 16, 2016
Public Health Conference Rooms
Government Center, 2nd Floor
Marshall
9:00 a.m.

HUMAN SERVICES

- A. Call to order
- B. Pledge of Allegiance
- C. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 02/17/16 board minutes

D. Financial

E. Caseload

	02/16	01/16	12/15
Social Service	3,681	3,598	3,610
Licensing	481	475	481
Out-of-Home Placements	178	178	169
Income Maintenance	12,923	12,916	12,860
Child Support Cases	3,335	3,325	3,347
Child Support Collections	\$835,990	\$752,048	\$841,689
Non IV-D Collections	\$154,741	\$45,339	\$44,857

F. Decision Items

- 1.

G. Discussion/Information

- 1. Child protection services
- 2. Day care licensing

COMMUNITY HEALTH

- H. Call to order
- I. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 02/17/16 board minutes
- J. Financial
- K. Caseload

	02/16	01/16	12/15
WIC		2308	2310
Family Home Visiting	60	50	75
PCA Assessments	17	14	19
Managed Care	305	290	246
Dental Varnishing	91	98	105
Refugee Health	5	7	47
Latent TB Medication Distribution	22	18	22
- L. Decision Items
 - 1.
- M. Discussion/Information
 - 1. Western Community Action/Volag – Angela Larson/Refugee Health – Dawn Jenniges
 - 2. Environmental Health – Jason Kloss
 - 3. Quality Improvement/Performance Management – Krista Kopperud, Carol Biren

GOVERNING BOARD

- N. Call to order
- O. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 02/17/16 board minutes
- P. Financial
- Q. Introduce new staff; Ashley VanOverbeke, Eligibility Worker

GOVERNING BOARD (cont.)

R. Employee Recognition

- Tiffany Bailey, 1 year, Accounting Technician, Marshall
- Jason Kloss, 5 years, Environmental Health Manager, Slayton
- Tara Vander Steen, 5 years, Lead Eligibility Worker, Luverne
- Cindy Nelson, 25 years, Social Services Division Director, Marshall

S. Decision Items

1. Tiffany Bailey, Accounting Technician, completion of 12 month probationary period, 1% salary increase, effective 03/23/16
2. Tanlee Noomen, Office Support Specialist, probationary appointment (12 months), \$12.72 per hour, effective 03/07/16
3. Jacquelyn Wilson, Office Support Specialist, probationary appointment (12 months), \$12.72 per hour, effective 03/09/16
4. Amy Lubben, Social Worker (CPS) (Trainee), trainee period (12 months), \$36,594.00 annual, effective 03/08/16
5. Thomas Carter, Information Technology Specialist, Senior, resignation, effective 03/11/16
6. Request for Social Worker Team Leader – Adult Mental Health
7. Child Protection FTE's and service request
 - Case Aide
 - Social Worker (CPS)
 - Social Worker (CPS)
 - Social Worker (CPS)
 - Social Services Supervisor
8. Contracts
9. Donation
 - Our Savior's Lutheran Church of Canby donated Easter baskets
10. IT request
11. QI Report 2015, QI Plan 2016, QI Work Plan 2016 approval

T. Discussion/Information

- 1.

U. Adjournment

Next Meeting Dates:

- **Wednesday, April 20, 2016 – Marshall**
- **Wednesday, May 18, 2016 – Marshall**
- **Wednesday, June 15, 2016 - Marshall**

Notice of Pay Equity Compliance

Presented to

Southwest Health and Human Services

for successfully meeting the requirements of the Local Government Pay Equity Act M.S. 471.991 - 471.999 and Minnesota rules Chapter 3920. This notice is a result of an official review by Minnesota Management & Budget and your 2016 pay equity report.

Your cooperation in complying with the local government pay equity requirements is greatly appreciated.

February 18, 2016

Date



Myron Frans, Commissioner

SOUTHWEST HEALTH & HUMAN SERVICES

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

SUMMARY OF FINANCIAL ACCOUNTS REPORT

For the Month Ending: **February 29, 2016**

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

Description	Month	Running Balance
BEGINNING BALANCE		\$3,332,807
RECEIPTS		
Monthly Receipts	2,462,951	
County Contribution	78,692	
Interest on Investments	191	
TOTAL MONTHLY RECEIPTS		2,541,834
DISBURSEMENTS		
Monthly Disbursements	2,469,687	
TOTAL MONTHLY DISBURSEMENTS		2,469,687
ENDING BALANCE		\$3,404,954

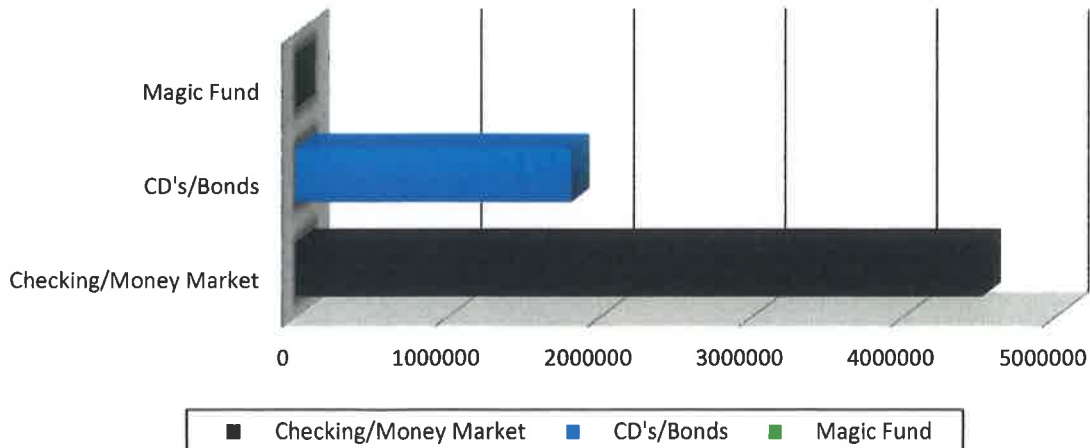
REVENUE

<i>Checking/Money Market</i>	\$3,404,954
<i>CD's/Bonds</i>	\$1,800,000
<i>Magic Fund</i>	\$0

Average Balance
last two years
\$5,744,171

ENDING BALANCE **\$5,204,954**

REVENUE DESIGNATION



Southwest Health and Human Services

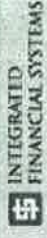


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Treasurer's Cash Trial Balance As of 02/2016

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
1 Health Services Fund	1,436,504.12			
Receipts		291,953.00	603,087.88	
Disbursements		71,403.99-	169,149.20-	
Payroll		200,676.84-	403,457.20-	
Fund Total		19,872.17	30,481.48	1,466,985.60
5 Human Services Fund	352,118.99			
Receipts		47,981.94	96,725.42	
Disbursements		38,914.92-	98,328.24-	
Payroll		14,407.19-	31,804.36-	
Dept Total		5,340.17-	33,407.18-	318,711.81
5 Human Services Fund	3,696,135.62-			
Receipts		720,598.06	1,016,282.00	
Disbursements		231,979.06-	558,301.56-	
Payroll		343,994.49-	688,515.26-	
Dept Total		144,624.51	230,534.82-	3,926,670.44-
5 Human Services Fund	8,365,745.02			
Receipts		1,135,376.25	1,669,635.93	
Disbursements		180,672.27-	333,339.31-	
SSIS		546,232.05-	1,122,897.36-	
Payroll		579,899.51-	1,140,248.44-	
Dept Total		171,427.58-	926,849.18-	7,438,895.84
5 Human Services Fund	2,035,385.63-			
Receipts		774.50	3,399.00	
Disbursements		487.24-	3,440.22-	
Payroll		26,701.37-	52,660.21-	
Dept Total		26,414.11-	52,701.43-	2,088,087.06-

Southwest Health and Human Services



KJD

3/2/16

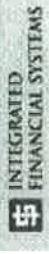
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Treasurer's Cash Trial Balance

As of 02/2016

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
5	Human Services Fund	471	LCTS Collaborative Agency	
	Receipts	0.00		
	Dept Total	39,824.00	39,824.00	39,824.00
	Fund Total	39,824.00	39,824.00	39,824.00
		18,733.35-	1,203,668.61-	1,782,674.15
61	Agency Health Insurance			75,942.80
	Receipts	0.00		
	Disbursements	304,826.16	553,642.94	
	Fund Total	233,881.79-	477,700.14-	
		70,944.37	75,942.80	
71	LCTS Lyon Murray Collaborative Fund	471	LCTS Collaborative Agency	
	Dept Total	28,987.61	0.00	28,987.61
	Fund Total	28,987.61	0.00	28,987.61
73	LCTS Rock Pipestone Collaborative Fund	471	LCTS Collaborative Agency	
	Receipts	35,699.21		
	Disbursements	500.00	550.00	
	Dept Total	0.00	4,473.00-	31,776.21
	Fund Total	500.00	3,923.00-	31,776.21
		35,699.21	3,923.00-	
75	Redwood LCTS Collaborative	471	LCTS Collaborative Agency	
	Receipts	22,416.99		
	Disbursements	350.00-	4,972.00-	
	Dept Total	350.00-	4,972.00-	17,444.99
	Fund Total	22,416.99	4,972.00-	17,444.99

Southwest Health and Human Services



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Treasurer's Cash Trial Balance As of 02/2016

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
77 Local Advisory Council	1,301.38	86.64-	159.48-	
Disbursements		86.64-	159.48-	1,141.90
Dept Total.....				
Fund Total.....	1,301.38	86.64-	159.48-	1,141.90
All Funds	4,511,252.07			3,404,953.26
Receipts	2,541,833.91		3,983,147.17	
Disbursements	757,775.91-		1,649,863.15-	
SSIS	546,232.05-		1,122,897.36-	
Payroll	1,165,679.40-		2,316,685.47-	
Total	72,146.55		1,106,298.81-	

Southwest Health and Human Services



KJD
3/2/16 1:40PM
1 Health Services Fund

Trial Balance
As of 02/2016
Report Basis: Cash

Account	Beginning Balance	Actual This-Month	Actual Year-To-Date	Current Balance
-----Assets-----				
1001 Cash in Bank - Checking	1,436,504.12	19,872.17	30,481.48	1,466,985.60
1090 Investments	320,000.00	0.00	0.00	320,000.00
Total Assets	1,756,504.12	19,872.17	30,481.48	1,786,985.60
--- Liabilities and Balance-----				
Liabilities				
Total Liabilities	0.00	0.00	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	1,756,504.12	0.00	0.00	1,756,504.12
2885 Revenue Control	0.00	291,472.11	602,530.45	602,530.45
2887 Expenditure Control	0.00	271,599.94	572,048.97	572,048.97
Total Fund Balance	1,756,504.12	19,872.17	30,481.48	1,786,985.60
Total Liabilities and Balance	1,756,504.12	19,872.17	30,481.48	1,786,985.60
-----Assets-----				
Total Assets	0.00	0.00	0.00	0.00
--- Liabilities and Balance-----				
Liabilities				
Total Liabilities	0.00	0.00	0.00	0.00
Total Liabilities and Balance	0.00	0.00	0.00	0.00
410 General Administration	0.00	0.00	0.00	0.00
1 Health Services Fund	0.00	0.00	0.00	0.00

Southwest Health and Human Services



KJD
3/2/16 1:40PM
5 Human Services Fund

Trial Balance
As of 02/2016
Report Basis: Cash

Account	Beginning Balance	Actual This-Month	Actual Year-To-Date	Current Balance
410 General Administration				
1001 Cash In Bank - Checking	352,118.99	5,340.17-	33,407.18-	318,711.81
Total Assets	352,118.99	5,340.17-	33,407.18-	318,711.81
--- Liabilities and Balance---				
Liabilities				
2090 Due To Flexible Plan Employees	1,599.96	206.62-	206.62-	1,393.34
Total Liabilities	1,599.96	206.62-	206.62-	1,393.34
Fund Balance				
2881 Unassigned Fund Balance	353,718.95-	0.00	0.00	353,718.95-
2887 Expenditure Control	0.00	5,546.79	33,613.80	33,613.80
Total Fund Balance	353,718.95-	5,546.79	33,613.80	320,105.15-
Total Liabilities and Balance	352,118.99-	5,340.17	33,407.18	318,711.81-
420 Income Maintenance				
1001 Cash In Bank - Checking	3,696,135.62-	144,624.51	230,534.82-	3,926,670.44-
1090 Investments	592,000.00	0.00	0.00	592,000.00
Total Assets	3,104,135.62-	144,624.51	230,534.82-	3,334,670.44-
--- Liabilities and Balance---				
Liabilities				
Total Liabilities	0.00	0.00	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	3,104,135.62	0.00	0.00	3,104,135.62
2885 Revenue Control	0.00	718,652.18-	1,013,715.81-	1,013,715.81-
2887 Expenditure Control	0.00	574,027.67	1,244,250.63	1,244,250.63
Total Fund Balance	3,104,135.62	144,624.51-	230,534.82	3,334,670.44
Total Liabilities and Balance	3,104,135.62	144,624.51-	230,534.82	3,334,670.44
431 Social Services				
1001 Cash In Bank - Checking	8,365,745.02	171,427.58-	926,849.18-	7,438,895.84

Southwest Health and Human Services

KJD
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5 Human Services Fund

Trial Balance
As of 02/2016
Report Basis: Cash

Account	Beginning Balance	Actual This-Month	Actual Year-To-Date	Current Balance
1090 Investments	888,000.00	0.00	0.00	888,000.00
1205 County Advances - MFP (Chippewa Cty)	80,749.47	0.00	0.00	80,749.47
Total Assets	9,334,494.49	171,427.58	926,849.18	8,407,645.31
--- Liabilities and Balance-----				
Liabilities	0.00	0.00	0.00	0.00
Total Liabilities	0.00	0.00	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	9,334,494.49	0.00	0.00	9,334,494.49
2885 Revenue Control	0.00	1,026,483.08	1,560,587.54	1,560,587.54
2887 Expenditure Control	0.00	1,197,910.66	2,487,436.72	2,487,436.72
Total Fund Balance	9,334,494.49	171,427.58	926,849.18	8,407,645.31
Total Liabilities and Balance	9,334,494.49	171,427.58	926,849.18	8,407,645.31
461 Information Systems				
-----Assets-----				
1001 Cash In Bank - Checking	2,035,385.63	26,414.11	52,701.43	2,088,087.06
Total Assets	2,035,385.63	26,414.11	52,701.43	2,088,087.06
--- Liabilities and Balance-----				
Liabilities	0.00	0.00	0.00	0.00
Total Liabilities	0.00	0.00	0.00	0.00
Fund Balance				
2881 Unassigned Fund Balance	2,035,385.63	0.00	0.00	2,035,385.63
2885 Revenue Control	0.00	774.50	3,399.00	3,399.00
2887 Expenditure Control	0.00	27,188.61	56,100.43	56,100.43
Total Fund Balance	2,035,385.63	26,414.11	52,701.43	2,088,087.06
Total Liabilities and Balance	2,035,385.63	26,414.11	52,701.43	2,088,087.06
471 LCTS Collaborative Agency				
-----Assets-----				
1001 Cash In Bank - Checking	0.00	39,824.00	39,824.00	39,824.00
Total Assets	0.00	39,824.00	39,824.00	39,824.00
--- Liabilities and Balance-----				
Liabilities	0.00	0.00	0.00	0.00

Southwest Health and Human Services



KJD
 3/2/16 1:40PM
 5 Human Services Fund

Trial Balance
 As of 02/2016
 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>
Total Liabilities	0.00	0.00	0.00	0.00
Fund Balance				
2885 Revenue Control	0.00	39,824.00-	39,824.00-	39,824.00-
Total Fund Balance	0.00	39,824.00-	39,824.00-	39,824.00-
Total Liabilities and Balance	0.00	39,824.00-	39,824.00-	39,824.00-
5 Human Services Fund	0.00	0.00	0.00	0.00

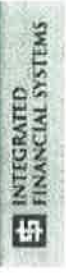
Southwest Health and Human Services

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RM- Stmt of Revenues & Expenditures

As Of 02/2016

Report Basis: Cash



DESCRIPTION	CURRENT MONTH	YEAR TO- DATE	2016 BUDGET	% OF BUDG	% OF YEAR
FUND 1 HEALTH SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	59,517.25-	195,599.50-	782,398.00-	25	17
INTERGOVERNMENTAL REVENUES	6,074.84-	28,908.82-	327,100.00-	9	17
STATE REVENUES	54,138.04-	118,356.74-	921,568.00-	13	17
FEDERAL REVENUES	111,918.55-	166,018.16-	1,124,712.00-	15	17
FEES	59,776.94-	92,289.52-	448,995.00-	21	17
EARNINGS ON INVESTMENTS	30.49-	1,041.71-	3,000.00-	35	17
MISCELLANEOUS REVENUES	16.00-	316.00-	0.00	0	17
TOTAL REVENUES	291,472.11-	602,530.45-	3,607,773.00-	17	17
EXPENDITURES					
PROGRAM EXPENDITURES	0.00	0.00	0.00	0	17
PAYROLL AND BENEFITS	200,676.84	403,457.20	2,862,402.00	14	17
OTHER EXPENDITURES	70,923.10	168,591.77	745,371.00	23	17
TOTAL EXPENDITURES	271,599.94	572,048.97	3,607,773.00	16	17

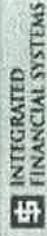
Southwest Health and Human Services

KJD 3/2/16 1:40PM

RM- Stmt of Revenues & Expenditures

As Of 02/2016

Report Basis: Cash



DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2016 BUDGET	% OF BUDG	% OF YEAR
FUND 5 HUMAN SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	19,175.04	217,995.19	9,546,442.00	2	17
INTERGOVERNMENTAL REVENUES	6,030.94	6,444.72	10,000.00	64	17
STATE REVENUES	286,885.37	385,112.54	4,712,344.00	8	17
FEDERAL REVENUES	1,091,380.18	1,408,152.93	7,305,662.00	19	17
FEES	168,973.42	305,154.44	1,916,800.00	16	17
EARNINGS ON INVESTMENTS	160.13	5,469.01	27,000.00	20	17
MISCELLANEOUS REVENUES	213,128.68	289,197.52	1,333,500.00	22	17
TOTAL REVENUES	1,785,733.76	2,617,526.35	24,851,748.00	11	17
EXPENDITURES					
PROGRAM EXPENDITURES	699,455.46	1,472,908.29	9,238,507.00	16	17
PAYROLL AND BENEFITS	956,117.11	1,914,894.82	13,012,977.00	15	17
OTHER EXPENDITURES	149,101.16	433,598.47	2,600,264.00	17	17
TOTAL EXPENDITURES	1,804,673.73	3,821,401.58	24,851,748.00	15	17

Southwest Health and Human Services

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3/2/16 1:40PM

Revenues & Expend by Prog,Dept,Fund

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Report Basis: Cash

Element	Description	Account Number	Revenue	Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
530 PROGRAM	Clearway Grant			0.00	0.00	149,000.00-	0	17
			Expend.	6,583.02	16,134.39	133,677.00	12	17
			Net	6,583.02	16,134.39	15,323.00-	105-	17
900 PROGRAM	Emergency Preparedness		Revenue	34,768.19-	34,768.19-	117,300.00-	30	17
			Expend.	4,754.02	13,045.94	130,861.00	10	17
			Net	30,014.17-	21,722.25-	13,561.00	160-	17
901 PROGRAM	Med Reserve Corps		Revenue	0.00	0.00	3,500.00-	0	17
			Expend.	11.19	72.50	1,733.00	4	17
			Net	11.19	72.50	1,767.00-	4-	17
483 DEPT	Health Education	Totals:	Revenue	53,323.58-	119,048.09-	522,900.00-	23	17
			Expend.	29,675.96	69,878.33	566,820.00	12	17
			Net	23,647.62-	49,169.76-	43,920.00	112-	17
485 DEPT	Environmental Health		Revenue	8,195.84-	32,455.82-	234,400.00-	14	17
800 PROGRAM	Environmental		Expend.	12,346.31	26,044.97	234,336.00	11	17
			Net	4,150.47	6,410.85-	64.00-	10,017	17
820 PROGRAM	Healthy Homes Grant		Revenue	5,427.20-	5,427.20-	40,000.00-	14	17
			Expend.	714.21	4,205.35	23,101.00	18	17
			Net	4,712.99-	1,221.85-	16,899.00-	7	17
485 DEPT	Environmental Health	Totals:	Revenue	13,623.04-	37,883.02-	274,400.00-	14	17
			Expend.	13,060.52	30,250.32	257,437.00	12	17
			Net	562.52-	7,632.70-	16,963.00-	45	17
1 FUND	Health Services Fund	Totals:	Revenue	291,472.11-	602,530.45-	3,607,773.00-	17	17
			Expend.	271,599.94	572,048.97	3,607,773.00	16	17
			Net	19,872.17-	30,481.48-	0.00	0	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund



Report Basis: Cash

Element	Description	Account Number	Revenue	Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
742 PROGRAM	Mental Health/Children Only		Revenue	65,455.53-	115,756.67-	957,137.00-	12	17
			Expend.	105,303.26	239,667.27	1,467,408.00	16	17
			Net	39,847.73	123,910.60	510,271.00	24	17
750 PROGRAM	Developmental Disabilities		Revenue	64,435.00-	107,683.64-	792,617.00-	14	17
			Expend.	27,145.75	64,378.01	417,435.00	15	17
			Net	37,289.25-	43,305.63-	375,182.00-	12	17
760 PROGRAM	Adult Services		Revenue	98,277.28-	184,438.58-	1,090,000.00-	17	17
			Expend.	6,549.57	13,684.26	110,500.00	12	17
			Net	91,727.71-	170,754.32-	979,500.00-	17	17
765 PROGRAM	Adults Waivers		Revenue	59,807.11-	89,252.13-	484,000.00-	18	17
			Expend.	17,295.96	17,849.36	17,000.00	105	17
			Net	42,511.15-	71,402.77-	467,000.00-	15	17
431 DEPT	Social Services	Totals:	Revenue	1,026,483.08-	1,560,587.54-	15,505,393.00-	10	17
			Expend.	1,197,910.66	2,487,436.72	16,106,612.00	15	17
			Net	171,427.58	926,849.18	601,219.00	154	17
461 DEPT	Information Systems		Revenue	774.50-	3,399.00-	28,500.00-	12	17
0 PROGRAM	...		Expend.	27,188.61	56,100.43	348,907.00	16	17
			Net	26,414.11	52,701.43	320,407.00	16	17
461 DEPT	Information Systems	Totals:	Revenue	774.50-	3,399.00-	28,500.00-	12	17
			Expend.	27,188.61	56,100.43	348,907.00	16	17
			Net	26,414.11	52,701.43	320,407.00	16	17
471 DEPT	LCTS Collaborative Agency		Revenue	39,824.00-	39,824.00-	0.00	0	17
702 PROGRAM	LCTS		Expend.					17
			Net	39,824.00-	39,824.00-	0.00	0	17
471 DEPT	LCTS Collaborative Agency	Totals:	Revenue	39,824.00-	39,824.00-	0.00	0	17
			Expend.					17
			Net	39,824.00-	39,824.00-	0.00	0	17
5 FUND	Human Services Fund	Totals:	Revenue	1,785,733.76-	2,617,526.35-	24,851,748.00-	11	17
			Expend.	1,804,673.73	3,821,401.58	24,851,748.00	15	17
			Net	18,939.97	1,203,875.23	0.00	0	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund



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	921 Accounts		Revenue 2,077,205.87-	3,220,056.80-	28,459,521.00-	11	17
			Expend. 2,076,273.67	4,393,450.55	28,459,521.00	15	17
			Net 932.20-	1,173,393.75	0.00	0	17

SOUTHWEST HEALTH AND HUMAN SERVICES CHECK REGISTER

FEBRUARY 2016

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	- DISBURSEMENTS	BALANCE
	BALANCE FORWARD				3,332,806.71
2/1/16	64582-64594	Disb		1,251.98	3,331,554.73
2/1/16	64595-64618	Disb		45,216.20	3,286,338.53
2/1/16	1334-1337 ACH	Disb		283.34	3,286,055.19
2/1/16	9390	Disb		14,414.50	3,271,640.69
2/5/16	7149-7176	PAYROLL		131,848.05	3,139,792.64
2/5/16	35635-35877 ACH	PAYROLL		449,379.09	2,690,413.55
2/5/16	16865-16973	Dep	462,237.26		3,152,650.81
2/8/16	9391	Disb		2,418.55	3,150,232.26
2/8/16	64619-64671	Disb		4,832.52	3,145,399.74
2/8/16	64672-64773	Disb		188,352.57	2,957,047.17
2/8/16	1338-1356 ACH	Disb		1,724.98	2,955,322.19
2/8/16	9392	Disb		12,759.34	2,942,562.85
2/9/16	16974-17008	Dep	60,362.44		3,002,925.29
2/10/16	9393	Disb		8,272.09	2,994,653.20
2/11/16	9394	Disb		52,603.22	2,942,049.98
2/12/16	17009-17083	Dep	218,134.21		3,160,184.19
2/16/16	64774-64818	Disb		22,342.71	3,137,841.48
2/16/16	1357 ACH	Disb		189.20	3,137,652.28
2/16/16	64819-64945	Disb		200,368.82	2,937,283.46
2/16/16	1358-1374 ACH	Disb		1,560.68	2,935,722.78
2/16/16	9395	Disb		17,983.16	2,917,739.62
2/16/16	17084-17115	Dep	126,481.85		3,044,221.47
2/16/16	64946	Disb		13,170.78	3,031,050.69
2/19/16	64947-65035	Disb		10,075.80	3,020,974.89
2/19/16	65036-65219	Disb		69,721.42	2,951,253.47
2/19/16	1375-1378 ACH	Disb		2,223.33	2,949,030.14
2/19/16	7177-7196	PAYROLL		132,191.98	2,816,838.16
2/19/16	35878-36114 ACH	PAYROLL		450,991.90	2,365,846.26
2/17/16	22159	Interest	95.29		2,365,941.55
2/17/16	22440	Interest	95.33		2,366,036.88
2/19/16	17116-17162	Dep	427,290.63		2,793,327.51
2/22/16	65220-65221	Disb		3,997.70	2,789,329.81
2/22/16	65222-65313	Disb		328,483.12	2,460,846.69
2/22/16	1379-1384 ACH	Disb		620.76	2,460,225.93
2/22/16	9396	Disb		92,245.39	2,367,980.54
2/23/16	17163-17209	Dep	642,605.28		3,010,585.82
2/24/16	9397	Disb		10,367.23	3,000,218.59
2/24/16	36115-36116 ACH	PAYROLL		1,268.38	2,998,950.21
2/26/16	17210-17276	Dep	505,144.59		3,504,094.80
2/29/16	65314-65348	Disb		12,176.73	3,491,918.07
2/29/16	65349-65447	Disb		141,278.87	3,350,639.20
2/29/16	1385-1393 ACH	Disb		1,131.79	3,349,507.41
2/29/16	9398	Disb		43,876.18	3,305,631.23
2/29/16	17277-17300	Dep	99,387.03		3,405,018.26
2/29/16	65448	Disb		65.00	3,404,953.26
					3,404,953.26
	Balanced LMD 03/02/16	TOTALS	2,541,833.91	2,469,687.36	

Adult - Social Services Caseload

Average	Adult Brain Injury (BI)	Adult Community Alternative Care (CAC)	Adult Community Access for Disability Inclusion (CADI)	Adult Essential Community Supports	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	242	14		331	37	842	28	484	464	334	2789
2015	12	227	13		306	34	817	23	403	460	352	2652
2016	13	238	12	0	297	41	821	19	390	453	360	2642
2017												

*Note: CADI name change and there is a new category (Adult Essential Community Supports)

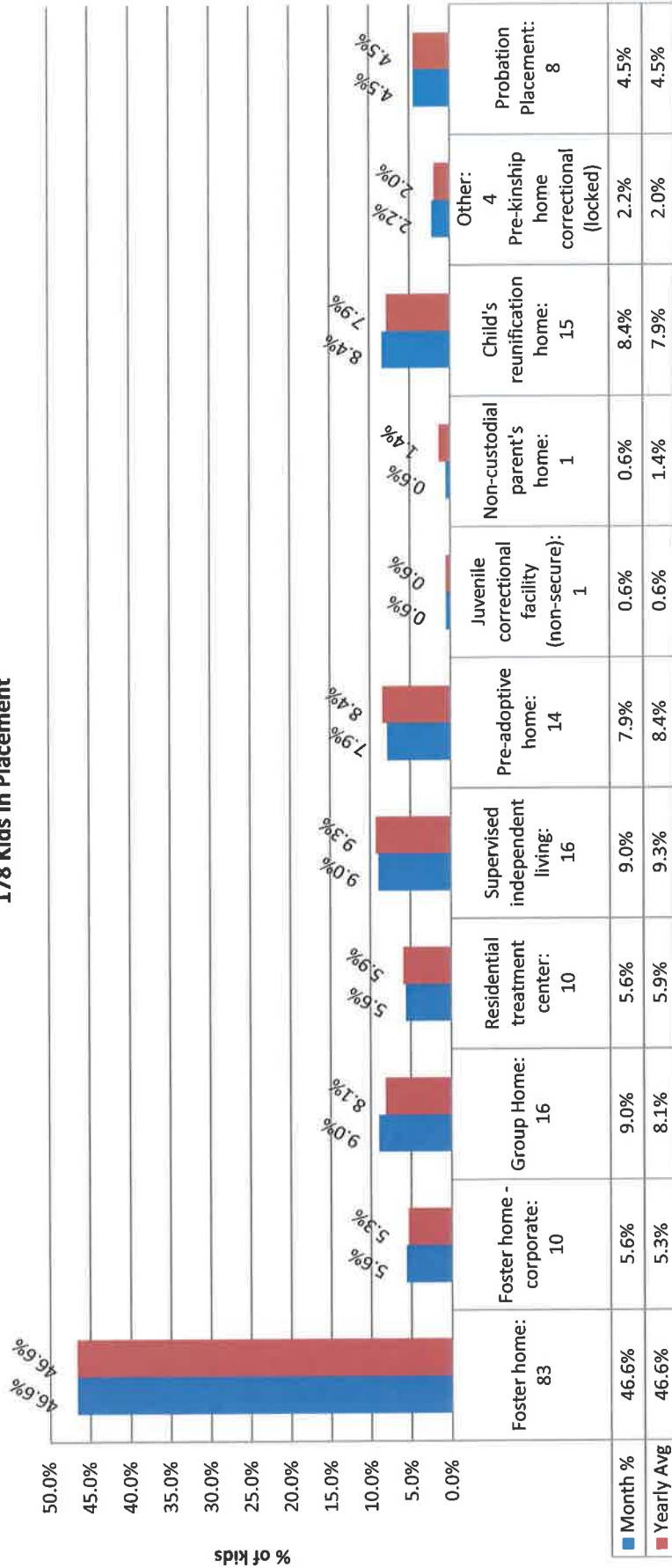
2016	Adult Brain Injury (BI)	Adult Community Access for Disability Inclusion (CADI)	Adult Community Alternative Care (CAC)	Adult Essential Community Supports	Adult Mental Health (AMH)	Adult Protective Services (APS)	Adult Services (AS)	Alternative Care (AC)	Chemical Dependency (CD)	Developmental Disabilities (DD)	Elderly Waiver (EW)	Total Programs
January	13	237	12	0	297	40	815	19	367	452	358	2610
February	13	238	12	0	297	42	827	19	412	453	361	2674
March												
April												
May												
June												
July												
August												
September												
October												
November												
December												
	13	238	12	0	297	41	821	19	390	453	360	2642

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	38	15	1	3	30	153	127	96	0	1	18	482
2016	40	15	2	4	35	180	146	86	0	0	13	520
2017												

2016	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	40	15	2	4	35	179	138	87	0	0	13	513
February	39	15	2	4	34	180	154	85	0	0	13	526
March												
April												
May												
June												
July												
August												
September												
October												
November												
December												
	40	15	2	4	35	180	146	86	0	0	13	520

February 2016 - Placements by Category
178 Kids in Placement



March 2015: Total kids in placement = 178

Total of 7 Children entered placement

1	Lyon	Residential Treatment
2	Murray	Foster Care
2	Pipestone	Group Home
1	Redwood	Foster Care
1	Redwood	Group Home

Total of 7 Children were discharged from placement (discharges from previous month)

1	Lincoln	Supervised Independent Living
1	Pipestone	Residential Treatment
3	Redwood	Non-Custodial Parent
1	Redwood	Foster Home
1	Rock	Residential Treatment

NON IVD COLLECTIONS
FEBRUARY 2016

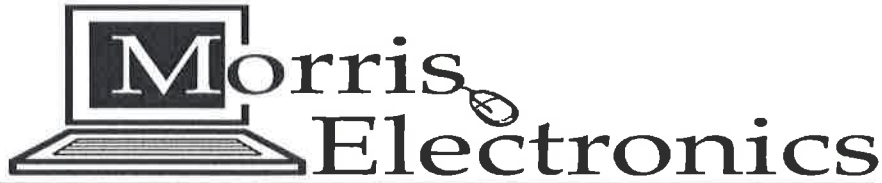
PROGRAM	ACCOUNT	TOTAL
MSA/GRH	05-420-605.5802	289.00
TANF (MFIP/DWP/AFDC)	05-420-610.5803	4,268.66
GA	05-420-620.5803	3,960.14
FS	05-420-630.5803	3,802.00
CS (PI Fee, App Fee, etc)	05-420-640.5501	378.78
MA Recoveries & Estate Collections (25% retained by agency)	05-420-650.5803	87,620.83
REFUGEE	05-420-680.5803	0.00
CHILDRENS		
Parental Fees, Holds	05-431-710.5501	21,067.51
OOH/FC Recovery	05-431-710.5803	16,919.16
CHILDCARE		
Licensing	05-431-720.5502	1,600.00
Corp FC Licensing	05-431-710.5505	400.00
Over Payments	05-431-721&722.5803	178.72
CHEMICAL DEPENDENCY		
CD Assessments	05-431-730.5519	8,218.29
Detox Fees	05-431-730.5520	6,034.98
MENTAL HEALTH		
Insurance Copay	05-431-740.5803	2.65
Over Payments	05-431-741 or 742.5803	0.29
DEVELOPMENTAL DISABILITIES		
Insurance Copay/Overpayments	05-431-750.5803	0.00
ADULT		
Insurance Copay/Overpayments	05-431-760.5803	0.00
TOTAL NON-IVD COLLECTIONS		154,741

MARCH 2016
BOARD APPROVAL ON THE FOLLOWING:

- IV-D Cooperative Agreement (DHS) – 01/01/16 to 12/31/16;** Agreement with all 6 counties and DHS; County Attorney fee at \$120/hour and County Sheriff Process Service fees at \$45 average across the Counties (no change) (renewal).

- Trimin Systems Inc / MN Counties Computer Cooperative (MnCCC) – 01/01/16 to 12/31/18;** CMHS service agreement for computer management services, \$2,502 for 2016, remaining years will be calculated on a yearly basis (renewal).

- Lamar Advertising Company (Sioux Falls, SD) – 03/01/16 to 02/19/17;** Clearway contract for billboard advertising, \$6950 (renewal).



511 Atlantic Ave., Morris, MN 320-589-1781

To: Thomas Carter
 Southwest Health and Human Services
 Phone: 507-532-1223
 Fax:

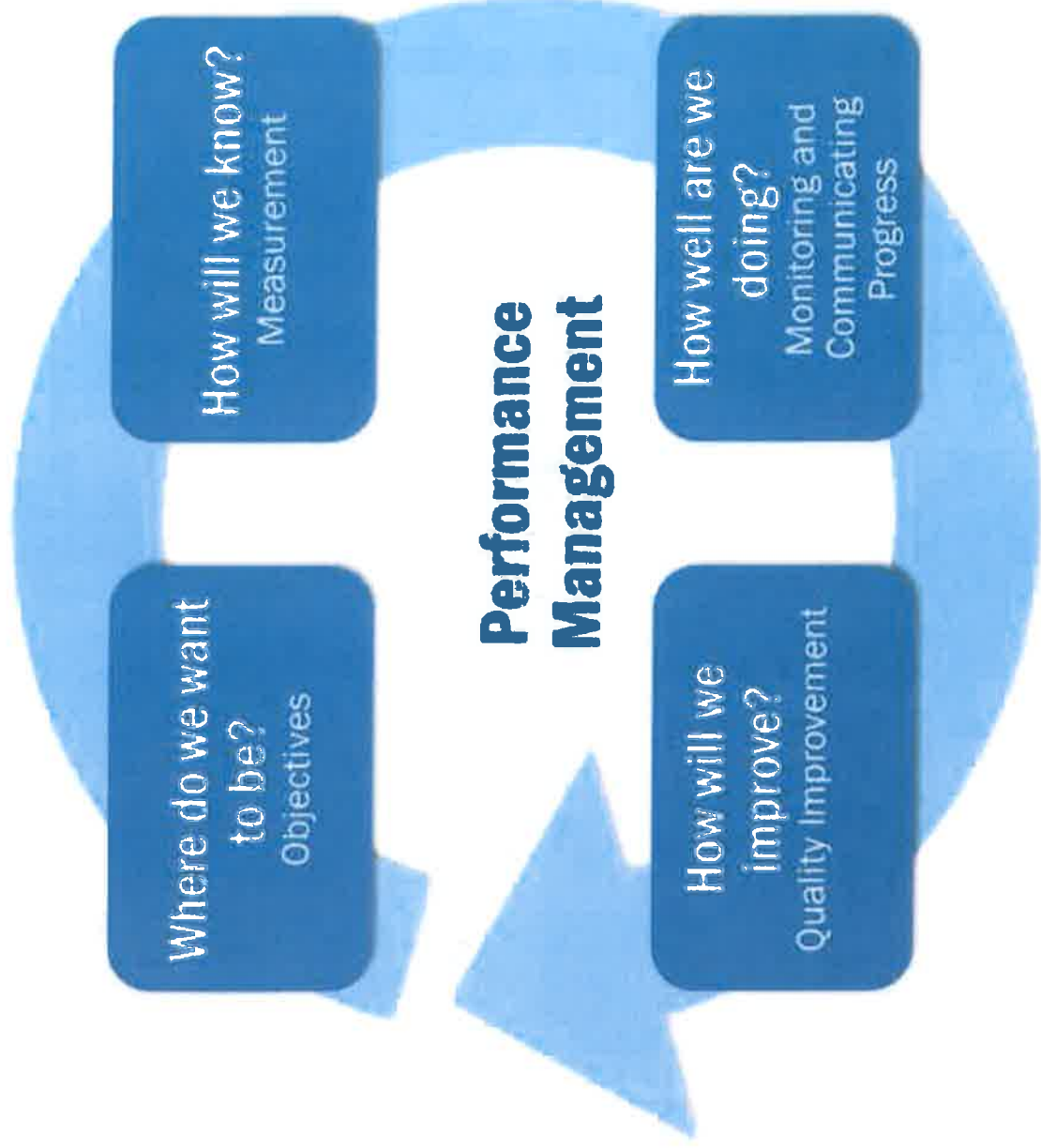
Date
 2/4/2016

From: Morris Electronics Inc
 Shawn Larsen
 Phone: 320-589-1781
 Cell: 320-287-0922
 Fax: 320-589-3596
 E-mail: shawn.larsen@morriselectronics.net

Qty	Part #	Description	per unit \$	extended \$
1	1033533	Barracuda Spam Firewall 200 With One Year Energize Updates	\$ 2,233.10	\$ 2,233.10
1	1087846	Barracuda Spam Firewall 200 With Three Years Energize Updates	\$ 3,176.80	\$ 3,176.80
1	1766152	Barracuda Spam Firewall 200 With Five Years Energize Updates	\$ 4,021.15	\$ 4,021.15

Qty	Part #	Description	per unit \$	extended \$
1	3145339	Barracuda Spam Firewall 200 With One Year Energize Updates And Instant Replacement	\$ 2,619.52	\$ 2,619.52
1	3145340	Barracuda Spam Firewall 200 With Three Years Energize Updates And Instant Replacement	\$ 4,169.16	\$ 4,169.16
1	3145341	Barracuda Spam Firewall 200 With Five Years Energize Updates And Instant Replacement	\$ 5,559.88	\$ 5,559.88

Minnesota's Public Health System Performance Management Model



Informal QI Projects

2015

- Imaging/Scanning Project
- Veteran's Law Clinic
- Social Security and Child Support Clinic
- Shared Folder Clean-up/SharePoint
- Marshall Area Health System Partnership/SPCC
- UA procedures and forms updates
- Preceptorship, SMSU, RN to BSN
- Paperless billing for immunizations and mantoux testing
- New pay structure for PH and HS
- HR functions and support
- FMLA and other HR functions streamlined and analyzed
- Retention tracking
- Dress code workgroup and guidelines revised
- Imaging advancement
- Child Protection Task Force recommendations
- Review of Family Group Decision Making volume to increase referrals
- Efiling
- Guardianship process and payments
- Program Improvement Plan for Child and Family Services Review
- Children's Justice Initiative progress in Murray County
- Work with Collaboratives to implement new programs
- Targeted Case Management review
- Person Centered planning
- Relationship with Lower Sioux
- Active shooter training/safety training
- Outreach to SMSU
- Grant process team
- Random moment revenue team
- Circle expansion
- Service agreement process
- DD/CW specialty
- Rule 5 improvement meetings with accounting
- Revised placement packets
- Business Org set up improvement in ssis
- Training with county attorney to review court expectations/requirements for CP
- Lyon County collaboration with CP, Co. Atty and law enforcement agencies

QUALITY COUNCIL REPORT - 2015

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Quality Improvement Projects	Supervisors	All staff will be engaged in the QI process	100% of departments will participate in a QI project	June 30, 2015	Ongoing	Dec 2015	80% of the units engaged in a QI project for 2015. 2 of the other 3 units were in the process of incorporating standards from perspective state agencies

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Quality Improvement Culture	Executive Team	Complete a Quality survey to measure QI culture/awareness	Complete survey by Sept 2015		Nov 2015	Dec 2015	Not completed in 2015. Plans to complete in 2016

QUALITY COUNCIL REPORT - 2015

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Implement Performance Management Systems	Executive Team/ Supervisors	Implement PM measures in all departments	100% of departments will implement PM	Dec 2015	Nov 2016	Dec 2015	Performance management training has been completed and training will be ongoing.

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Organizational Culture	QI Council/ Executive Team/ Supervisors	Organizational Culture will be assessed and plan developed in 2015	Engage with consultant to develop and administer an assessment tool. Develop plan by Dec 31, 2015 to improve organizational culture	Sept 2015	Dec. 31, 2015	Dec 2015	A 3 year plan is in place. All staff kick-off meeting will be held March 9 and dates planned for World Cafés and Learning Journeys.

QUALITY COUNCIL REPORT - 2015

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Cultural Competency	QI Council/ Executive Team/ Supervisors	Cultural Competency will be assessed and plan developed in 2015	Engage with consultant to develop and administer an assessment tool. Develop plan by Dec 31, 2015 to improve cultural competency	Update every 6 months	Dec. 31, 2016	Dec 2015	This project is in the discussion and planning phase.

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Specific QI projects							
Mental Health Transitions <i>Approved Dec 11, 2014</i>	Christine Versaevel/Stacy Jorgensen	To improve the transition from CMH to AMH services, making this transition better for the consumer, being able to meet their needs in a consistent, shortened time frame	Consistent transition plan in place by the end of 2015	August 2015	Dec 2015	Dec 2015	Project is complete with teams developed and implementation ongoing of CMH and AMH coordinated meetings to review cases.
PH Core Competencies	PH Supervisors	To assess staff's public health core competencies, develop	Complete 100% of staff surveys of PH core	December 2015, June 2016,	December 2016	December 2015	Assessment of Competencies completed in

QUALITY COUNCIL REPORT - 2015

<p><i>Approved Aug 13, 2015</i></p>		<p>workforce development plans around gaps in competencies and skills and update job descriptions to include PH core competencies.</p>	<p>competencies by November 2015. Complete workforce development plan by June 2016. Complete review of 100% of the PH job descriptions by December 2016.</p>	<p>December 2016</p>			<p>Oct 2015. Workforce Development is on Target for June 2016</p>
<p>Closed-charts – PH <i>Approved Feb 13, 2014</i></p>	<p>Marie Meyers</p>	<p>To develop a systematic method for closing and storing Public Health files and a systematic method for the destruction of those files when eligible.</p>	<p>By Dec 31, 2015 100% of Historic and current charts will be filed and stored according to procedures developed.</p>	<p>Every 6 months.</p>	<p>Dec 2015</p>	<p>Dec 2015</p>	<p>Project is closed. All files in the Lyon county office are scanned or destroyed according to guidelines.</p>
<p>PH Family Home Visiting Customer Satisfaction <i>Approved March 12, 2015</i></p>	<p>Kristin Deacon</p>	<p>To assure the Growing Great Kids Family Home Visiting Program is meeting the needs of the clients SWHHS serves.</p>	<p>By Dec 31, 2015 Measure the satisfaction of clients in the Growing Great Kids Family Home Visiting Program</p>	<p>Every 6 months</p>	<p>August 2015</p>	<p>August 2015</p>	<p>Brief survey was completed and provided to FHV clients June-August 2015. Response rate was high and clients were very favorable to FHV services.</p>

QUALITY COUNCIL REPORT - 2015

<p>Instant Messaging <i>Approved May 8, 2014</i></p>	<p>Jessica Hieronimus and Deb Seidel</p>	<p>The goal is to create more options for communication and interaction between coworkers located in different offices, without additional ongoing costs or utilizing additional resources.</p>	<p>By Dec 31, 2015 have a user friendly communication system that is available in all offices.</p>	<p>Monthly</p>	<p>Dec 31. 2015</p>	<p>Jan 2016</p>	<p>Instant messaging is on a certain number of staff computers. Training for all staff will be dependent on new vendor for product. Project will be brought to the Executive Team to further clarify which staff should have this as a program on their computers.</p>
<p>Accreditation <i>Approved July 2014</i></p>	<p>Krista Kopperud and Michelle Salfer</p>	<p>The goal is to become accredited with Public Health Accreditation Board (PHAB).</p>	<p>Review 100% of Public Health practice against 12 Domains set by the PHAB by January 2018. Submit Statement of Intent to PHAB by January 2018. Become accredited by December 2019.</p>	<p>Quarterly Updates</p>	<p>December 2019</p>	<p>Dec 2015</p>	<p>Accreditation is on track. Five Domains were launched and reviewed in 2015</p>

QUALITY COUNCIL REPORT - 2015

Financial File Cleanup <i>Approved April 9, 2015</i>	Kathryn Herding/Jennifer Beek	To better organize the shared Financial File making it a more useful resource for the Eligibility Workers	Buy August 2015 to have a more standardized process for adding information to the shared Financial File	August 2015	September 2015	The financial file cleanup project has been completed with files cleaned up and consolidated
New personal set-up <i>Approved April 9, 2015</i>	Kathryn Herding/Jennifer Beek	To make the transition of starting a new job smoother for new staff and supervisors	By Oct 31, 2015 a new worker set-up document will be developed and utilized to assure computer programs are set-up correctly as well as forms signed and completed.	October 31, 2015	November 2015	10-8-15. Project is complete. HR has put together new employee set-up information.
Phone Intake <i>Approved April 9, 2015</i>	Kathryn Herding/Jennifer Beek	To have DHS required information for SNAP benefits and services communicated for all clients requesting information.	Mandatory information is provided consistently each time a call is placed for SNAP benefits and services	Ongoing	Dec 2015	Random calls are being completed monthly and to measure progress of staff communicating and providing information

QUALITY COUNCIL REPORT - 2015

<p>Preplacement Forms <i>Approved April 9, 2015</i></p>	<p>Michelle Buysse</p>	<p>To create a form that is more user friendly to assist workers in making decisions about placement and to assist with decisions that are in the best interest of their client.</p>	<p>By June 1, 2015 a form will be developed to assist workers with placement decisions.</p>	<p>June 1, 2015</p>	<p>June 2015</p>	<p>regarding SNAP benefits to all clients requesting such information</p>
<p>HR & Accounting System <i>Approved May 14, 2015</i></p>	<p>Nancy Walker and Karla Drown</p>	<p>Maximize the use of a product that was purchased to maximize report outcomes and minimize time of staff to prepare for audits, meet and confer and negotiations.</p>	<p>Understanding the capabilities of the system to reduce manual reports, improve time management and further interconnect the HR system and payroll</p>	<p>Every 6 months.</p>	<p>July 2016</p>	<p>HR Project is on target for completion in December 2016. Project is 40% completed. All payroll increases and insurances are automated. Next steps include a meeting to be held with the payroll vendor,</p>

QUALITY COUNCIL REPORT - 2015

<p>Adult Protection Services Team development</p> <p><i>Approved May 14, 2015</i></p>	<p>Stacey Longtin</p>	<p>Multidisciplinary APS teams in all 6 of the SWHHS counties. To develop strategies to stop and prevent maltreatment of our most vulnerable population</p>	<p>To develop APS teams in all 6 of the SWHHS counties and build a support network in each county related to vulnerable adult population.</p>	<p>Every 6 months</p>	<p>Dec 2015</p>		<p>utilizing the HR system for seniority lists, and using the HR system for open enrollment.</p>
<p>MnChoices Assessment Unit</p> <p><i>Approved May 14, 2015</i></p>	<p>Dale Hiland, Jennifer Klein, Stacey Longtin and Marie Meyers</p>	<p>To create and implement a MnChoices assessment team for SWHHS for the purpose of the team doing solely MnChoices assessments</p>	<p>Study the feasibility of a MnChoices assessment team to enhance the MnChoices assessments and to increase revenue for assessments and</p>	<p>Quarterly</p>	<p>Dec 2015</p>	<p>Dec 2015</p>	<p>Project completed and determined an assessment team for new assessments would meet the needs of SWHHS for Mnchoices</p>

QUALITY COUNCIL REPORT - 2015

<p>HIPAA review</p> <p><i>Approved May 14, 2015</i></p>	<p>Michelle Salfer</p>	<p>Remain HIPAA compliant</p>	<p>To actively review policies, provide trainings and review plans to remain HIPAA compliant.</p>	<p>Quarterly</p>	<p>Dec 2015</p>	<p>Jan 2016</p>	<p>assessments. A Decision team was formed to develop procedures and to answer staff questions regarding Mnchoices.</p> <p>A consultant was hired and policies reviewed. Plans to complete this project are on track for Spring 2016</p>
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QUALITY COUNCIL WORK PLAN - 2016

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Quality Improvement Culture	Executive Team	Complete a Quality survey to measure QI culture/awareness	Complete survey to measure Quality Improvement awareness by Dec 31, 2016	Every 6 months	December 2017	June and December 2016	
Educate staff on QI	Krista Kopperud	Educate staff on Quality Improvement process	To have all staff educated on the Quality Improvement Process	Every 6 months	December 2017	June and December 2016	

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Implement Performance Management Systems	Executive Team/ Supervisors	Implement PM measures in 50% of all departments	50% of departments will implement PM	Every 6 months	Dec 2016	June and December 2016	

QUALITY COUNCIL WORK PLAN - 2016

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
QI project identified PM	Supervisors	Staff will be engaged in the PM/QI process	50% of departments will participate in a QI project from PM measures	Every 6 months	Dec 2016	June and December 2016	

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Organizational Culture	QI Council/ Executive Team/ Supervisors	Organizational Culture will be assessed and plan developed in 2015	Engage with consultant to develop and administer an assessment tool. Develop plan by Dec 31, 2016 to improve organizational culture	Every 6 months	Dec. 31, 2016	June and December 2016	

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Cultural Competency	QI Council/ Executive Team/	Cultural Competency will be assessed and plan developed in 2016	Engage with consultant to develop and administer an	Every 6 months	Dec. 31, 2016	June 2016/ Dec 2016	

QUALITY COUNCIL WORK PLAN - 2016

	Supervisors			assessment tool. Develop plan by Dec 31, 2016 to improve cultural competency				
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Quality Planning Projects

ACTIVITY	STAFF RESPONSIBLE	GOALS	OBJECTIVES	PROGRESS REPORTS DUE	COMPLETION DATE	QC REVIEW DATE	OUTCOMES
Specific QI projects							
PH Core Competencies	PH Supervisors	To assess staff's public health core competencies, develop workforce development plans around gaps in competencies and skills and update job descriptions to include PH core competencies.	Complete 100% of staff surveys of PH core competencies by November 2015. Complete workforce development plan by June 2016. Complete review of 100% of the PH job descriptions by December 2016.	June 2016, December 2016	December 2016	December 2016	
<i>Approved Aug 13, 2015</i>							

QUALITY COUNCIL WORK PLAN - 2016

Accreditation <i>Approved July 2014</i>	Krista Kopperud and Michelle Salfer	The goal is to become accredited with Public Health Accreditation Board (PHAB).	Review 100% of Public Health practice against 12 Domains set by the PHAB by January 2018. Submit Statement of Intent to PHAB by January 2018. Become accredited by December 2019.	Every 6 months	December 2019	January and July 2016
HIPAA review <i>Approved May 14, 2015</i>	Carol Biren	Remain HIPAA compliant	To actively review policies, provide trainings and review plans to remain HIPAA compliant.	Quarterly	December 2016	January and July 2016
HR and Accounting System	Nancy Walker and Karla Drown	Maximize the use of a product that was purchased to maximize report outcomes and minimize time of staff to prepare for audits and confer and negotiations.	Understanding the capabilities of the system to reduce manual reports, improve time management and further interconnect the HR system and payroll	Every 6 months	December 2016	June and December 2016

Health Services Locations

Ivanhoe, MN 507-694-1452
Marshall, MN 507-537-6713
Slayton, MN 507-836-6144
Pipestone, MN 507-825-5024
Luverne, MN 507-283-5070
Redwood Falls, MN 507-637-4041

Human Services Locations

Ivanhoe, MN 507-694-1452
Marshall, MN 507-537-6747
Slayton, MN 507-836-6144
Pipestone, MN 507-825-6720
Luverne, MN 507-283-5070
Redwood Falls, MN 507-637-4050

QI Plan

**SOUTHWEST
HEALTH AND
HUMAN SERVICES**



**SOUTHWEST
HEALTH & HUMAN
SERVICES**

20156

QUALITY IMPROVEMENT

PLAN

Published: December 31, 2014

I. Purpose and Scope

- A. *Quality Improvement (QI) is an integrative process that links knowledge, structures, processes and outcomes to enhance quality throughout an organization.* Through this plan the Quality Council will lead the agency in creating, implementing, maintaining, and evaluating the quality improvement efforts at Southwest Health and Human Services (SWHHS) designed to improve performance of the organization and its employees and encourage a culture of quality. This process will enhance SWHHS's ability to meet the overall mission of providing quality services in a respectful, caring, and cost-effective manner.

- B. *Our vision for quality improvement is to improve the quality of services provided to customers of Southwest Health and Human Services through a structured quality improvement process.*

- C. Quality Improvement activities at Southwest Health and Human Services will include:
 1. Executive Team and FOCUS Team requests
 2. Implementation of Public Health Accreditation Projects (when applicable)
 3. Other agency-wide assessments and/or surveys, such as an employee survey or customer satisfaction survey
 4. Performance measure review for Human Services and Public Health
 5. Monitoring of Department-level projects for those that have the potential to impact other program areas

II. Glossary of Terms

- A. **Quality Improvement:** an integrative process that links knowledge, structures, processes and outcomes to enhance quality throughout an organization
- B. **Core Competency:** the collective learning in organizations, and involve how to coordinate diverse production skills and integrate multiple streams of technologies. It is communication, an involvement and a deep commitment to working across organizational boundaries.
- C. **Cross Sectional Representation of SWHHS** includes representatives from both management and staff, all office locations, experienced and inexperienced staff, long term and short term employees, public health and human services departments, and all program areas.
- D. **Executive Team:** group including the Director, the Division Directors, Management Information Supervisor and the Planner
- E. **Focus Team:** group including the Director, Division Directors, Supervisors, and Planner
- F. **Local Public Health Assessment and Planning Process:** Process developed by the Minnesota Department of Health ~~Office of Performance Improvement~~ Public Health Practice Section to assess, plan, and communicate the work of local public health. The following are all part of this five-year process.

1. Community Health Assessment: An assessment of the communities' health status within the jurisdiction of SWHHS using current data or new data
 2. Community Health Improvement Plan: An agency work plan focusing on the top priorities identified in the Community Health Assessment
 3. Organizational Self-assessment: An organizational assessment comparing agency practice against the National Accreditation Standards
 4. Strategic Plan: A carefully devised plan of action to achieve goals identified in assessments and/or brainstorming sessions.
- G. National Accreditation Standards: Standards that health departments can put in place to ensure that they are continuously improving services to keep their communities healthy.

III. Organizational Structure

A. The Southwest Health and Human Services Boards of Directors

- ~~The Governing Board consists of elected officials from the counties represented in the agency and is charged with making operational decisions. Their authority is driven from the Joint Powers Act in state statute.~~
- The SWHHS Community Health Board is responsible for programmatic decisions facing public health as per state statute.
- The SWHHS Human Services Board is responsible for programmatic decisions facing human services as per state statute.
- ~~The Governing Board consists of elected officials from the counties represented in the agency and is charged with making operational decisions. Their authority is driven from the Joint Powers Act in state statute.~~
 - The Governing Board is responsible for the overall quality of services in the organization, allocation of resources for QI processes and activities, and approval of the QI plan annually.
 - QI activities and resource allocation are delegated from the Governing Board to the Agency Director and the Quality Council.
 - The annual agency budget will reflect financial resources dedicated to Quality Improvement Activities and will be approved by the governing board. The agency will seek additional financial resources via local, state or federal grants, local funding streams, etc. to fund QI projects.
 - All ~~B~~boards will receive periodic reports from the Quality Council and/or Agency Director related to QI activities or QI projects as the report fits the ~~B~~board's level of authority.
 - Board members are asked to participate in QI projects and/or meetings as appropriate.

B. Agency Director

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

C. QI Council

- The Quality Council consists of cross-sectional representation from SWHHS.
- Members are appointed by the Quality Council and serve a term of **no less than** two years. Less than half of the Quality Council members can rotate off each year.
- The Quality Council is charged with carrying out the purpose and scope of quality improvement efforts at SWHHS.
- A Quality Council Charter is developed and reviewed annually.

D. Executive Team

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

E. Program Supervisors

- Program Supervisors are responsible for:
 - ~~○ Developing a work plan for each department.~~
 - Reviewing ~~the data from the work plans~~ performance measures on an annual basis with staff.
 - Initiating ~~performance management (PM) problem solving processes~~ and /or QI improvement projects.
 - Reporting to the Quality Council ~~from their work plan review~~ on their PM, QI projects, state standard gaps, and needed QI trainings.
 - ~~○ Revising work plans based on findings from annual review and QI projects.~~
 - Identifying and selecting one area needing improvement ~~from performance measures~~ to bring to the Quality Council as priorities annually.
 - Assuring implementation of QI projects.

F. SWHHS employees

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

IV. Training Plan

- A. Quality Improvement trainings will be held periodically in an effort to building a quality-focused culture at SWHHS.
- B. Quality Council members and supervisors will receive QI training annually ~~either with a speaker brought to the agency or a training opportunity outside the agency.~~

- C. New employees will receive information regarding QI improvement processes during new ~~staff employee~~ orientation.
- D. SWHHS staff will receive QI training on an on-going basis at staff meetings or agency meetings. ~~This training may be done by Quality Council members or a speaker and will be held at least annually.~~
- E. QI project team members will receive Quality Improvement Technical Assistance from Quality Council members when their team is formed and will be specific to the position and the project.
- F. ~~Selected~~ SWHHS staff will complete a QI culture survey ~~every two years~~ periodically. Baseline data ~~will be used to determine if additional training is needed is available with survey completed by focus group and data will be tracked longitudinally.~~

V. Communication Plan

Quality Improvement Activities will be reported to the Executive Committee, the Boards of Directors, and ~~the Ffocus Tteam~~ on a regular basis. Quality Improvement updates will be communicated to all employees through periodic email updates and staff meetings. Executive Team Members, Supervisors, and Quality Council members will be responsible for ongoing communication to staff about the QI plan and process established within the agency.

VI. Approval of QI Plan and Annual Evaluation

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

VII. Monitoring of the QI Plan

- A. The Council will review the QI Plan and all related processes annually to ensure they remain adaptive to change and meet the needs of all who are impacted by QI efforts. The evaluation will include comparison of actual results to target, problem identification and analysis for gaps in performance, and plans for improving performance.
- B. Cross-departmental QI projects will be monitored by the Council on a regular basis. After a project is initiated, the project lead will provide updates, as requested during Council meetings. The updates will include progress on reaching the project's aim, barriers encountered, strategies to address those barriers and project successes.

- C. Upon completion of department-wide projects, leads will report results through presentation of a one-page project summary. If the project did not meet its aim, the team will need to determine if it will continue with a different QI project addressing the same project, or it will abandon the effort. If the project met or exceeded its aim, the project team will determine what efforts will be needed to sustain the improvements and offer suggestions on how to further implement improvements and offer suggestions on how to further implement improvements to other related areas.
- D. The Council will submit an annual report to the Executive Team and Southwest Health and Human Services Board for approval which summarizes:
 - 1. Department-wide QI projects (both formal and informal) and their outcomes
 - 2. A QI Work Plan for the following year
 - 3. Any recommended changes to the QI Plan

VIII. Information on Quality Council Work Plan

- The Council utilizes a work plan to document its meetings and current QI projects occurring across the agency. This working document describes the QI project, goals, objectives, and measures with responsible person(s)/team(s) and time-framed targets.
- The Council utilizes the work plan in conjunction with the QI Plan.