

**GOODHUE COUNTY
HEALTH & HUMAN SERVICES (GCHHS)**



REQUEST FOR BOARD ACTION

Requested Board Date:	11/18/2025	Staff Lead:	Ruth Greenslade
Consent Agenda:	☒ Yes ☐ No	Attachments:	☒ Yes ☐ No
Action Requested:	Approve Cannabis Substance Use Prevention (CSUP) grant contract amendment		

BACKGROUND:

In 2024, Goodhue County Health and Human Services (GCHHS) was awarded a Cannabis and Substance Use Prevention (CSUP) grant through the Minnesota Department of Health (MDH). The grant amount was \$103,316 for the budget year November 1, 2024-October 31, 2025.

MDH required CSUP grantees to conduct an assessment and develop a theory of change/logic model showing project goals, objectives, and activities to inform our work plan and evaluation efforts. MDH provided grantees training on evidence-based, evidence-informed or promising practices in cannabis and substance use education, prevention, and policy, systems, and environmental change. A summary of the Goodhue County CSUP assessment, listing our work plan activities, is attached for your information.

CSUP is ongoing funding for MDH and each Minnesota Tribal Nation and Community Health Board (CHB). It was authorized by Chapter 21- MN Laws; Article 1 in the 2023 session, when adult-use cannabis was legalized. CSUP comes from the state general fund. There was \$10 million authorized for fiscal year 2025. In 2024 the legislature decreased CSUP for fiscal year 2026 from \$10 million to \$6 million, which may have reduced our award to \$70,000 per year. However, in 2025 the legislature restored \$2.5 million of the previous cuts by reallocating MDH funds.

The attached amendment includes a grant award of \$91,510 for November 1, 2025-October 31, 2026 and \$91,510 for November 1, 2026-October 31, 2027.

RECOMMENDATION: GCHHS recommends approval as requested.

Minnesota Department of Health Grant Project Amendment Cover Sheet

You have received a grant project amendment from the Minnesota Department of Health (MDH). Information about the grant project amendment, including funding details, are included below. Contact your MDH Grant Manager if you have questions about this cover sheet.

Attachment: Amendment

Contact for MDH: Fred Ndip, 651-431-2449, health.csup.mdh@state.mn.us

CHB SWIFT Information	Grant Project Agreement Information	Program & Funding Information
Name of MDH Grantee: Goodhue County Health and Human Services	Grant Project Agreement Number: 260274	MDH Program Name: CSUP
SWIFT Vendor Number: 0000197327 SWIFT Vendor Location Code: 001	Effective Date: November 21, 2024, OR the date all signatures are collected, and the agreement is fully executed, whichever is later. Expiration Date: 6/30/2028	Total State Grant Funds: \$286,336 Total Federal Grant Funds: \$0 Total Grant Funds (<i>all funds</i>): \$286,336

Minnesota Department of Health Community Health Board Grant Project Amendment

Grant Project Agreement Effective Date:	11/21/2024	Original Grant Project Agreement Amount:	\$103,316
Original Grant Project Agreement Expiration Date:	6/30/2026	Previous Amendment(s) Amount:	\$0
Current Grant Project Agreement Expiration Date:	6/30/2026	This Amendment Amount:	\$183,020
New Grant Project Agreement Expiration Date:	6/30/2028	New Grant Project Agreement Total:	\$286,336

This Grant Project Amendment is between the State of Minnesota, acting through its Commissioner of the Minnesota Department of Health (hereinafter “MDH”) and Goodhue County Health and Human Services, 426 West Avenue, Red Wing, MN, 55066 (hereinafter “Grantee”).

Recitals

1. MDH has a grant project agreement with Grantee identified as **260274** (“Original Grant Project Agreement”) to award grants to local public health departments to create prevention and education programs focusing on cannabis and substance use prevention.
2. This grant is being amended to extend the end date and add two additional years of funding for the grantee to continue to create prevention and education programs focusing on cannabis and substance use prevention.
3. MDH and Grantee are willing to amend the Original Grant Project Agreement as stated below.

Grant Project Amendment

Amended or deleted grant project agreement terms will be ~~struck out~~, and the added grant project agreement terms will be underlined.

REVISION 1. Clause 2.2. “Expiration date” is amended as follows:

~~June 30, 2026~~, June 30, 2028, or until all obligations have been fulfilled to the satisfaction of MDH, whichever occurs first.

REVISION 2. Clause 4.1. “Grant Award” is amended as follows:

Reimbursement will be in accordance with the agreed-upon budget contained in ~~Exhibit B~~, Exhibit B1, which is attached and incorporated into this grant project agreement.

REVISION 3. Clause 4.3. “Total Obligation” is amended as follows:

The total obligation of MDH for all compensation and reimbursements to Grantee under this grant project agreement will not exceed ~~\$103,316~~ \$286,336.

REVISION 4. Clause 6.1. MDH's Authorized Representative

MDH's Authorized Representative for purposes of administering this grant project agreement is ~~Kristine Igo, Director~~, Fred Ndip, Community Initiatives Supervisor, Office of Statewide Health Improvement Initiatives, P.O. Box 64975, St. Paul MN 55164-0975, ~~651-201-5809, kris.igo@state.mn.us, 651-431-2449,~~ fred.ndip@state.mn.us or their successor, and has the responsibility to monitor Grantee's performance and the final authority to accept the activities performed under this grant project agreement. If the activities performed are satisfactory, MDH's Authorized Representative will certify acceptance on each invoice submitted for payment.

REVISION 5. Clause 12. "Suspension for Insufficient Funding" is added as follows:

In the event of temporary lack of funding or appropriation, MDH may suspend its obligations under this Grant Agreement without terminating it. This suspension will be for the duration of the lack of funding or appropriation and shall not be considered a termination of the Grant Agreement. MDH will not be assessed any penalty if the Grant Agreement is terminated because of the decision of the Minnesota Legislature, or other funding source, not to appropriate funds.

12.1 Grantee will be notified in writing of the temporary suspension, and Grantee's ability to perform under the Grant Agreement will be suspended during this period. MDH will provide reasonable notice to Grantee of the lack of funding or appropriation and shall notify Grantee once funding is restored or appropriated, and at MDH's discretion, performance under the Grant Agreement may resume.

12.2 MDH may convert the suspension for insufficient funding to termination under clause 11 upon written notice to Grantee.

12.3 Grantee may reject MDH's suspension for insufficient funding by written response to the notice of suspension. If Grantee rejects suspension, the notice of suspension shall be effective as a notice of termination under clause 11 with the same effective date as was provided for the suspension.

REVISION 6. Clause 13. "Requirements for Other Legal Agreements" is added as follows:

13.1 Grantee must utilize a formal legal agreement if it engages with another party to carry out a portion of the activities listed in this Grant Agreement. Grantee must provide timely notice to MDH of any such agreement prior to the other party/ies performing work under this Grant Agreement. Such notice must include the name of the other party; description of the activities to be performed; dates activities will be performed; and the total budget.

13.2 Grantee must monitor the activities of the other party/ies to ensure funds are used for authorized purposes; is in compliance with the terms and conditions of the legal agreement, Minn. Stat. § 16B.97, subd. 4(a)(1), and other relevant statutes and regulations; and that performance goals are achieved.

13.3 If MDH becomes aware of unsatisfactory performance and or noncompliance, MDH reserves the right to require Grantee to terminate the legal agreement with the other party.

- 13.4 No legal agreement with any other party shall terminate or in any way affect the legal responsibility of the Grantee to MDH for timely and satisfactory performance of the Grant Agreement.
- 13.5 Grantee and the other party must not enter into a legal agreement with vendors who are suspended or debarred by the State of Minnesota or the federal government. The list of debarred vendors in Minnesota is available at: Suspended/Debarred Vendors (<https://mn.gov/admin/osp/government/suspended-debarred/>). The list of suspended and debarred entities by the federal government is available at www.sam.gov.

Revision 7. “Digital Materials” is added as follows:

Any digital materials created, and shared outside of the grantee’s organization, Grantee is required to comply with State of Minnesota’s Digital Accessibility Standard. This requirement flows down to any subcontractors and or any third-party entity the Grantee may utilize and compensate with MDH grant funds. The statewide Standard can be viewed online at [Accessibility | Policies & Standards / Minnesota IT Services](#)

Except as amended herein, the terms and conditions of the Original Grant Project Agreement and all previous amendments remain in full force and effect. The Original Grant Project Agreement, and all previous amendments, are incorporated by reference into this amendment.

[signatures on next page]

APPROVED:

1. State Encumbrance Verification

Individual certifies that funds have been encumbered as required by Minn. Stat. §§ 16A.15 and 16C.05.

Signature: Sarah Martin Digitally signed by Sarah Martin
Date: 2025.09.25 09:55:31 -05'00'

SWIFT Contract & Initial PO: 260274_3000127496

2. Grantee

Grantee certifies that the appropriate persons(s) have executed the grant project agreement on behalf of Grantee as required by applicable articles, bylaws, resolutions, or ordinances.

Signature: _____

Title: HHS Director

Date: _____

Signature: _____

Title: _____

Date: _____

Signature: _____

Title: _____

Date: _____

Signature: _____

Title: _____

Date: _____

3. Minnesota Department of Health

Grant project agreement approval and certification that State funds have been encumbered as required by Minn. Stat. §§ 16A.15 and 16C.05.

Signature: _____
(with delegated authority)

Title: _____

Date: _____

Distribution:

All parties on the DocuSign envelope will receive a copy of the fully executed grant project agreement.

Exhibit B₁ – Grantee's Budget

The budget shown below is for reference only and is non-binding.

Category	Budget Period 1 November 21, 2024 – October 31, 2025	Total
Salary/Fringe	\$59,089	\$59,089
Contractual Services	\$0	\$0
Travel	\$0	\$0
Supplies & Equipment	\$0	\$0
Other	\$34,836	\$34,836
Subtotal (direct)	\$93,925	\$93,925
Indirect	\$9,391	\$9,391
Total	\$103,316	\$103,316

<u>Category</u>	<u>Budget Period 2</u> <u>November 1, 2025 –</u> <u>October 31, 2026</u>
<u>Salary/Fringe</u>	<u>\$67,675.57</u>
<u>Contractual Services</u>	<u>\$0</u>
<u>Travel</u>	<u>\$800.00</u>
<u>Supplies</u>	<u>\$0</u>
<u>Equipment</u>	<u>\$0</u>
<u>Other</u>	<u>\$11,098.43</u>
<u>Subtotal (direct)</u>	<u>\$79,574.00</u>
<u>Indirect</u>	<u>\$11,936.00</u>
<u>Total</u>	<u>\$91,510.00</u>



Grantee's Indirect Cost Rate for this Grant Agreement is as follows. MDH will notify Grantee, in writing, if the rate allowed changes and the effective date of such change.

☒ Indirect costs are allowed by Funder

☒ Grantee does not have a NICRA and is requesting to use the federal de minimis rate

Rate: ~~10%~~ 15%

Ensure that administrative costs are explained and justifiable. MDH will accept up to the Grantee's current federally approved indirect cost rate agreement. If Grantee does not have a federally approved indirect cost rate agreement, MDH will accept an indirect rate of up to ~~10~~ 15 percent of the total direct charges.

Future Budget Periods

Budget Period 3 November 1, 2026 – October 31, 2027 Award: \$91,510.

Certificate Of Completion

Envelope Id: 998A46CA-06AE-4CB7-8808-73C15E66B336

Status: Sent

Subject: REQ 3207 GA A1 CSUP Grant Amendment 1 for Goodhue County

Source Envelope:

Document Pages: 7

Signatures: 0

Envelope Originator:

Certificate Pages: 2

Initials: 0

Diane M Lauren

AutoNav: Enabled

625 Robert St. N

Envelopeld Stamping: Enabled

PO Box 64975

Time Zone: (UTC-06:00) Central Time (US & Canada)

St. Paul, MN 55164

Diane.Lauren@state.mn.us

IP Address: 156.98.136.30

Record Tracking

Status: Original

Holder: Diane M Lauren

Location: DocuSign

10/30/2025 4:15:34 PM

Diane.Lauren@state.mn.us

Security Appliance Status: Connected

Pool: StateLocal

Storage Appliance Status: Connected

Pool: Department of Health

Location: Docusign

Signer Events

Signature

Timestamp

Nina Arneson

nina.arneson@co.goodhue.mn.us

HHS Director

Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Not Offered via Docusign

Sent: 10/30/2025 4:19:52 PM

Viewed: 10/30/2025 4:25:59 PM

MDH Delegated

Health.delegated_signature@state.mn.us

Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Not Offered via Docusign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Diane M Lauren

Diane.Lauren@state.mn.us

Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Not Offered via Docusign

MDH Encumbrance

health.encumbrance@state.mn.us

Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Not Offered via Docusign

Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	10/30/2025 4:19:52 PM
Payment Events	Status	Timestamps

Goodhue County Cannabis & Substance Use Prevention (CSUP) Assessment Summary

November 2025

Key Informant Interviews:

Who we heard from:

- Pastor
- Probation Officer
- Licensed Alcohol and Drug Counselor
- Recreational cannabis user
- Individuals working with youth
- Women, Infant, Children Staff
- Home and Community Based Services Supervisor.

Emerging Trends:

High Potency Products:

- Today's cannabis products contain much higher levels of THC than in past decades; some concentrated forms reach up to 95%. (*NIDA.NIH.GOV*)
- High THC potency increases risk of addiction, higher likelihood to overdose, and causes Cannabis Induced Psychosis. (*The Problem with the Current High Potency THC Marijuana from the Perspective of an Addiction Psychiatrist*).

Minnesota Poison Control Reports Rising:

- 176% increase in cannabis-related calls throughout the state (2018–2023), 281 (2018) → 788 (2023).

Note: Poison Control data likely underrepresents true cannabis-related incidents.

Community Health Needs Assessment:

- 16% of Goodhue County adults and 19% of HHS Clients, Food Shelf Customers, and CARE Clinic are current cannabis users, per our 2024 survey, an increase from 2021 (9% and 12%).

Minnesota Student Survey:

- 13% of Goodhue County 11th grade students participating in the 2025 Minnesota Student Survey reported using marijuana in the last 12 months. Only 48% of 11th graders said using marijuana once or twice a week was risky.

Planned Actions:

- **Expand Communications:** Coordinate and participate in a regional cannabis communication campaign.
- **Youth Prevention & Cessation:** Provide quit kits, promote alternatives to suspension, and implement INDEPTH in schools.
- **Priority Outreach:** Share cannabis education materials with pregnant and breast/chest-feeding individuals.
- **Safe Storage:** Engage with community partners and retailers to educate and potentially distribute storage devices.

