



# GOODHUE COUNTY MINNESOTA

TO EFFECTIVELY PROMOTE THE SAFETY, HEALTH, AND WELL-BEING OF OUR RESIDENTS

## GOODHUE COUNTY HEALTH & HUMAN SERVICES (GCHHS) AGENDA

COUNTY BOARD ROOM  
RED WING, MN  
DECEMBER 17, 2019  
10:30 A.M.

1. CALL TO ORDER
2. REVIEW AND APPROVE BOARD MEETING AGENDA:
3. REVIEW AND APPROVE PREVIOUS MEETING MINUTES:

Documents:

[NOVEMBER 2019 HHS BOARD MINUTES.PDF](#)

4. REVIEW AND APPROVE THE FOLLOWING ITEMS ON THE CONSENT AGENDA:
  - a. Child Care Licensure Approvals

Documents:

[CHILD CARE APPROVALS.PDF](#)

5. ACTION ITEMS:

- a. Accounts Payable

Documents:

[ACCOUNTS PAYABLE.PDF](#)

- b. Valley View Recovery Center-Residential Treatment Center For Substance Abuse Services

Letter of Need Request  
Jacob McGuire, CEO

Documents:

[LETTER OF NEED REQUEST.PDF](#)

6. INFORMATIONAL ITEMS:

- a. Emergency Preparedness  
Heather Arndt

Documents:

[EP PRESENTATION.PDF](#)

- b. Local Public Health Annual Report  
Ruth Greenslade

Documents:

[LOCAL PUBLIC HEALTH ANNUAL REPORT - 2018.PDF](#)

7. FYI-MONTHLY REPORTS:

- a. Placement Report

Documents:

[PLACEMENT REPORT.PDF](#)

- b. Child Protection Report

Documents:

[CHILD PROTECTION REPORT.PDF](#)

- c. 2020-2021 Goodhue County STAY Award Letter

Documents:

[GOODHUE COUNTY STAY AWARD LETTER.PDF](#)

- d. County, City, Tribal, And State Health And Human Services Worker Day

Documents:

[COUNTY, CITY, TRIBAL AND STATE HEALTH AND HUMAN SERVICES WORKER DAY.PDF](#)

8. ANNOUNCEMENTS/COMMENTS:

- a. Goodhue County Annual Legislative Lunch  
December 17, 2019  
11:30 am at the EOC

9. ADJOURN

- a. Next HHS Board Meeting Will Be January 21, 2020

**PROMOTE, STRENGTHEN, AND PROTECT THE HEALTH OF INDIVIDUALS, FAMILIES, AND  
COMMUNITIES**

**GOODHUE COUNTY  
HEALTH & HUMAN SERVICES BOARD MEETING  
MINUTES OF NOVEMBER 19, 2019**

The Goodhue County Health and Human Services Board convened their regularly scheduled meeting at 11:25 A.M., Tuesday, November 19, 2019, in the Goodhue County Board Room located in Red Wing, Minnesota.

**BOARD MEMBERS PRESENT:**

Brad Anderson, Paul Drotos, Linda Flanders, Susan Johnson, Jason Majerus, Barney Nesseth, and Nina Pagel

**STAFF AND OTHERS PRESENT:**

Nina Arneson, Mary Heckman, Mike Zorn, Lisa Woodford, Theresa Miller, Katie Tang, David Anderson and Ruth Greenslade

**AGENDA:**

On a motion by J. Majerus and seconded by S. Johnson, the Board unanimously approved the November 19, 2019 Agenda.

**MEETING MINUTES:**

On a motion by J. Majerus and seconded by B. Nesseth, the Board unanimously approved the Minutes of the H&HS Board Meeting on October 15, 2019.

H&HS Board Chair P. Drotos welcomed Goodhue County Commissioner Linda Flanders to her first HHS Board meeting and a board picture was taken.

**CONSENT AGENDA:**

On a motion by B. Nesseth and seconded by B. Anderson, the Board unanimously approved all items on the consent agenda.

**ACTION ITEMS:**

On a motion by J. Majerus and seconded by B. Nesseth, the Board unanimously approved payment of all accounts as presented.

On a motion by J. Majerus and seconded by B. Anderson, the Board unanimously approved GCHHS annual renewed contracts.

Goodhue County Health & Human Services Board  
Meeting Minutes of November 19, 2019

On a motion by S. Johnson and seconded by B. Anderson, the Board unanimously voted to recommend to the Goodhue County Board that an updated Tobacco Retail Ordinance be approved.

The Board also directed staff to follow up with a Committee of the Whole for additional information and clarifications about the removal of provisions to penalize underage youth for purchase, use, or possession of tobacco products.

INFORMATIONAL ITEMS:

Waiver Management Team Update by Theresa Miller and Katie Tang  
3<sup>rd</sup> Quarter 2019 Fiscal Report presented by Mike Zorn

FYI & REPORTS:

Placement Report  
Child Protection Report  
Quarterly Trend Report  
WIC Management Evaluation  
Goodhue County DHS Performance Report-Adult Protection and Child Support  
Southeast MN Mental Health Crisis Center Update  
Farming in Tough Times- A Rural Mental Well-Being Discussion  
E-Cigarettes Education

ANNOUNCEMENTS/COMMENTS:

ADJOURN:

On a motion by S. Johnson and seconded by J. Majerus, the Board unanimously approved adjournment of this session of the Health & Human Services Board Meeting at or around 12:35 pm.

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



**REQUEST FOR BOARD ACTION**

<b>Requested Board Date:</b>	December 17, 2019	<b>Staff Lead:</b>	Kris Johnson
<b>Consent Agenda:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Attachments:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Action Requested:</b>	Approve Child Care Licensure Actions		

**BACKGROUND:**

**Child Care Relicensures:**

- Karen Nowariak      Red Wing
- Kelsey Strauss      Goodhue
- Sheri Lidgerding      Red Wing
- Tina Liebler      Pine Island

**Child Care Licensures:**

- Sara Bauer      Zumbrota

Number of Licensed Family Child Care Homes: 83

**RECOMMENDATION:** Goodhue County HHS Department recommends approval of the above.

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



**REQUEST FOR BOARD ACTION**

<b>Requested Board Date:</b>	December 17, 2019	<b>Staff Lead:</b>	Mike Zorn
<b>Consent Agenda:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Attachments:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Action Requested:</b>	Approve November 2019 HHS Warrant Registers		

**BACKGROUND:**

This is a summary of Goodhue County Health and Human Services Warrant Registers for: November 2019

	Date of Warrant		Check No.	Series	Total Batch
IFS	November 1, 2019	ACH	29297	29312	\$ 13,337.15
IFS	November 1, 2019		447637	447687	\$ 42,226.32
IFS	November 8, 2019	ACH	29356		\$ 39,076.70
IFS	November 8, 2019		447832	447860	\$ 39,820.30
IFS	November 15, 2019	ACH	29383	29401	\$ 10,728.61
IFS	November 15, 2019		447951	447987	\$ 22,778.06
IFS	November 22, 2019	ACH	29402	29408	\$ 928.46
IFS	November 22, 2019		447988	448029	\$ 18,562.56
IFS	November 27, 2019	ACH	29504	29518	\$ 2,264.05
IFS	November 27, 2019		448153	448203	\$ 47,455.26
SSIS	November 27, 2019	ACH	29419	29437	\$ 41,082.97
SSIS	November 27, 2019		448092	448147	\$ 225,608.34
IFS	November 27, 2019	ACH	29438	29503	\$ 10,364.16
IFS	November 27, 2019		448148	448152	\$ 43,594.01
<b>Total</b>					<b>\$ 557,826.95</b>

**RECOMMENDATION:** Goodhue County HHS Recommends Approval as Presented.

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



**REQUEST FOR BOARD ACTION**

<b>Requested Board Date:</b>	December 17, 2019	<b>Staff Lead:</b>	Nina Arneson
<b>Consent Agenda:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Attachments:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Action Requested:</b>	Approve Statement of Need Letter – High Intensity Inpatient Chemical Dependency Treatment Services – Valley View Recovery Center		

**BACKGROUND:**

Goodhue County currently does not have any inpatient chemical dependency treatment services. Goodhue County has received a notice from River View Recovery Center looking to bring their services to Goodhue County, Red Wing, Minnesota. Under the Minnesota Rules, Counties are allowed to comment on the need for chemical dependency treatment services in their county.

On November 20, 2018 Valley View Recovery requested and the HHS Board approved a Letter of Need for a low – medium intensity services; and at this time the request is for high intensity inpatient chemical dependency treatment services.

Attached, please find the request from Valley View Recovery Center and a draft letter for such request stating that there is a need in Goodhue County. Please know this letter is not considered an endorsement of the agency by GCHHS.

**RECOMMENDATION:** The GCHHS Department recommends approval as requested.



## Valley View Recovery Center

11/15/2019

Goodhue County Board

Valley View Recovery Center requests a letter of need to open a residential treatment center for substance abuse, for 54 adults, in Goodhue County. We were already approved for a request for a specific medium and low residential facility but would like to open up the option of a high intensity. We have tried to find a suitable location for a medium and low facility, in town, but we have come across many barriers. Our biggest barrier being that we need a variance for zoning and no neighborhood wants it in their backyard. For a medium and low facility to work, it needs to be in town, located near employment opportunities, meetings, and easy access to transportation. We are in the process of opening a sober rental unit, and hopefully others to follow, that will accommodate the issue of transitional housing. In conjunction with outpatient treatment services, we hope this will be sufficient, at this time, for the need of the community if another type of facility were to be available. A high intensity facility can be located out of town as clients only leave if they are transported to and from. If the letter of need just states, Residential treatment, instead of a specific intensity, it allows us more options.

The clientele will come from inmates who meet the criteria being released from the Goodhue County jail, referrals from Goodhue county probation and Goodhue County Social Services, and clients assessed appropriately from a substance abuse assessment who meet the criteria. Valley View Recovery Center staff will maintain excellent communication with all referents to maintain its proposed program capacity.

Valley View Recovery Center will provide residential Chemical Dependency Treatment-Mental Health (MI/CD) treatment and will accept male and female clients age 18 and above. Men and women will be housed on separate levels of the building and will not be integrated. The facility will provide 24/7 supervision to increase safety and public confidence. The facility will provide 3 meals per day. The clinical staff will consist of Treatment and Clinical Supervisors, Licensed Alcohol and Drug Counselors, Treatment Technicians, Peer Recovery Specialists, Care Coordinators, Social Workers, and Assessment Specialists.

Clients will primarily derive from Goodhue County; however, the facility will accept clients from any county if the need is not being met by Goodhue County clients.

We feel the need is apparent as there are no current residential treatment facilities in Goodhue County. Goodhue County clients currently travel to Olmsted County or

further away to get this level of care. The current substance abuse treatment facilities in Goodhue County only consist of outpatient. From owning another residential facility, that houses many Goodhue clients, we feel a facility in your county would be beneficial so family members and healthy support networks can visit and start rebuilding their relationships. Also, it would highly benefit clients in Drug Court and on probation as Probation and Drug Court staff would be able to easily visit the client and the clients in Drug Court may even be transported to and from Drug Court by facility staff. Please feel free to contact me with any questions. I look forward to working closely with Goodhue County representatives to provide quality, client centered care which will lower relapse and recidivism rates.

Sincerely,

Jacob McGuire, CEO

Valley View Recovery Center

Jacob.mcguire@valleyviewrecovery.org



Goodhue County  
**Health and Human Services**

426 West Avenue  
Red Wing, MN 55066  
(651) 385-3200 • Fax (651) 267-4879

December , 2019

Jodi Harpstead, Commissioner of Department of Human Services  
MH-CD Licensing Division  
PO Box 6242  
St. Paul, 55164-0242

Re: Statement of Need for Valley View Recovery Center

Dear Commissioner Harpstead:

I am writing to provide this **Statement of Need** for development of a high intensity residential treatment center services for substance abuse in Goodhue County.

**Valley View Recovery Center**  
[www.valleyviewrecovery.org](http://www.valleyviewrecovery.org)

This is based on the need we have in Goodhue County for additional chemical dependency services.

Please feel free to contact me for additional information at [nina.arneson@co.goodhue.mn.us](mailto:nina.arneson@co.goodhue.mn.us) or 651-385-6115.

Thank you and have a great day!

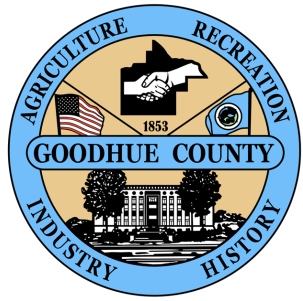
Sincerely,

Nina Arneson, M.S.  
Goodhue County Health and Human Services Director

Cc: Jacob McGuire, Valley View Recovery Center CEO  
Abby Villaran, GCHHS Social Services Supervisor  
Mary Heckman, GCHHS Deputy Director

*"Promote, Strengthen and Protect the Health of Individuals, Families, and Communities"*  
*Equal Opportunity Employer*

[www.co.goodhue.mn.us](http://www.co.goodhue.mn.us)



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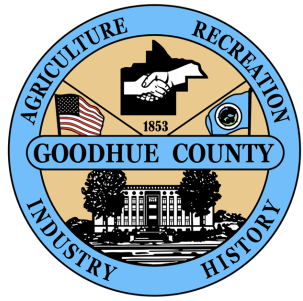
# 2019-2020 Emergency Preparedness Duties

Heather Arndt

GCHHS Emergency Preparedness Coordinator

Goodhue County Health and Human Services Board

December 17, 2019



# GCHHS' Role in Disaster Response



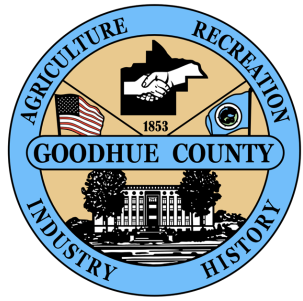
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Mass Dispensing

Congregate Care Shelter

Family Assistance Center

Evacuation Coordination



# Mass Dispensing



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Mass Immunization / Vaccination  
or Mass Dispensing of Prophylaxis

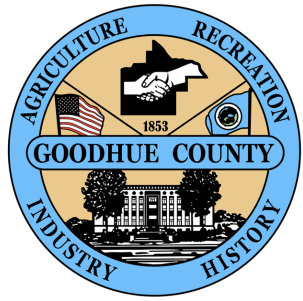
Sites:

Red Wing, Cannon Falls & Zumbrota

Staffed by:

GCHHS Staff, Medical Reserve Corps Volunteers





# Congregate Care Shelter



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Public shelter for people temporarily displaced due to disaster

Sites:

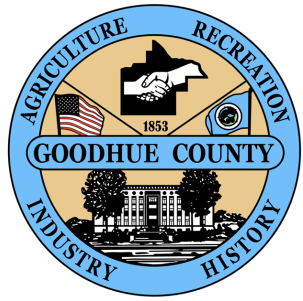
Schools / Churches Throughout the County

Staffed by:

GCHHS Staff, Medical Reserve Corps Volunteers







# Family Assistance Center



**Public Health**  
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A safe place for families waiting on information about loved ones after a large scale incident resulting in many missing and/or deceased.

Sites:

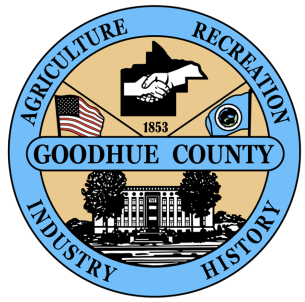
Schools / Churches

Staffed by:

GCHHS staff, Medical Examiner, MRC Volunteers







# Evacuation Coordination



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Help coordinate transportation assets for long term care facilities, day cares, and physically and/or developmentally disabled persons evacuating due to:

- Nuclear power plant incident
- Natural disaster
- Aerial Chemical release

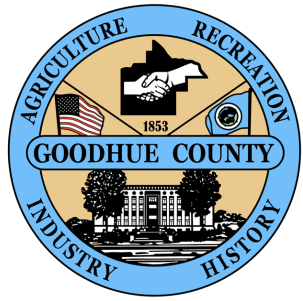
Sites:

HHS work from HHS Office

Staffed by:

GCHHS Staff





# All Hazards Emergency Operations Plan (AH-EOP)

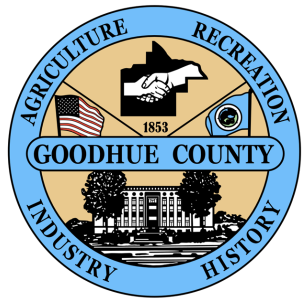


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- Comprehensive document covering HHS responses.
- Links to larger plans as appropriate.

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# Public Health Emergency Preparedness (PHEP)



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- **PHEP Response Capabilities**

- Gives detailed depth to grant duties.
- National Standards for Local, Tribal, and Territorial Public Health
- Established by
  - Centers for Disease Control and Prevention
  - Center for Preparedness and Response

- **PHEP Grant duties**

- Tells us what we need to work on during the grant year.
- Three kinds of Grant duties:
  - **Recurring Duties:** Annual Requirements
  - **Base Duties:** MDH Designated
  - **Elective Duties:** County Selected
- Grant year matches State Fiscal Year (01 July – 30 June)



# Capability vs

# Grant Duty



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Capability & Medical Countermeasure Dispensing and Administration

## Function 3: Activate medical countermeasure dispensing/administration operations

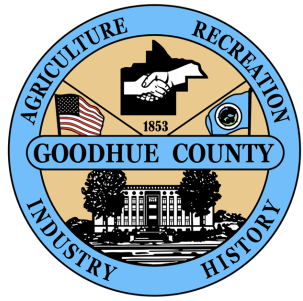
**Function Definition:** Coordinate with partners and stakeholders to ensure resources, including personnel, equipment, technology, and physical space, are activated to dispense/administer medical countermeasures.

### Tasks

- Task 1: Activate medical countermeasure dispensing/administration operations based on needs of the incident.** Notify and then activate the participating network of sites that will dispense/administer medical countermeasures to achieve coverage goals commensurate with the incident.
- Task 2: Notify and assemble personnel who will support medical countermeasure dispensing/administration.** Alert and assemble personnel who will support medical countermeasure dispensing/administration according to the roles, responsibilities, and resources needed to achieve medical countermeasure coverage goals.
- Task 3: Provide medical countermeasures to public health responders and critical workforce.** Dispense/administer medical countermeasures to public health responders and critical workforce based on the incident needs and relevant guidance, such as targeting vaccine prioritization to certain population groups.
- Task 4: Implement security measures for medical countermeasure dispensing/administration.** Implement site-specific security measures to ensure facility safety, personnel safety, product integrity, and crowd management when dispensing or administering medical countermeasures.
- Task 5: Provide information to the public.** Inform the public about dispensing/administration site locations, operational periods (days and hours open), and populations targeted to receive medical countermeasures.

## Base Duty 8.3 B

8.3 B. Each CHB/THD must activate one open POD in accordance with their plans during the full-scale exercise (FSE) on June 17, 2020.



# Current Grant Duty Examples



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## **Annual / Recurring**

- Staff Training, MDH Training
- Training and Exercise Plan
- Volunteer Notification
- Health Alert Notification (HAN) forwarding
- Health Care Coalition membership
- Access and Functional Needs in Plans
- Community Engagement

## **Elective Duty**

- Revise Continuity of Operations Plans

## **Community Resilience Base Duties**

- Work with partners

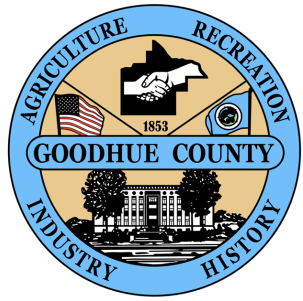
## **Countermeasures and Mitigation Base Duties**

- Full Scale Exercise
- Open one (1) Point of Dispensing
- IMATS training and exercise  
Inventory Management & Tracking System

## **Surge Management Base Duties**

- Volunteer Communication





# Upcoming Big Events



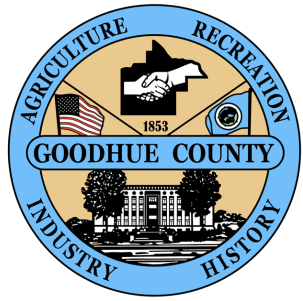
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## **Prairie Island Nuclear Power Plant**

- Drill June 11th
- Functional Exercise July 21<sup>st</sup> (next grant year)

## **MDH Mass Dispensing Anthrax Response**

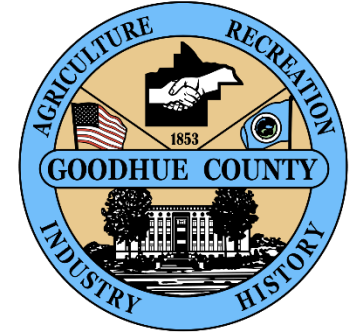
- Full Scale Exercise June 17<sup>th</sup>



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Thank you!

Questions?



# Local Public Health Act Performance Measures in 2018

An Overview of 2018 Local Public Health Annual Reporting Data for  
**Goodhue County Health and Human Services Board**

Ruth Greenslade, GCHHS Healthy Communities Supervisor

**December 17, 2019**

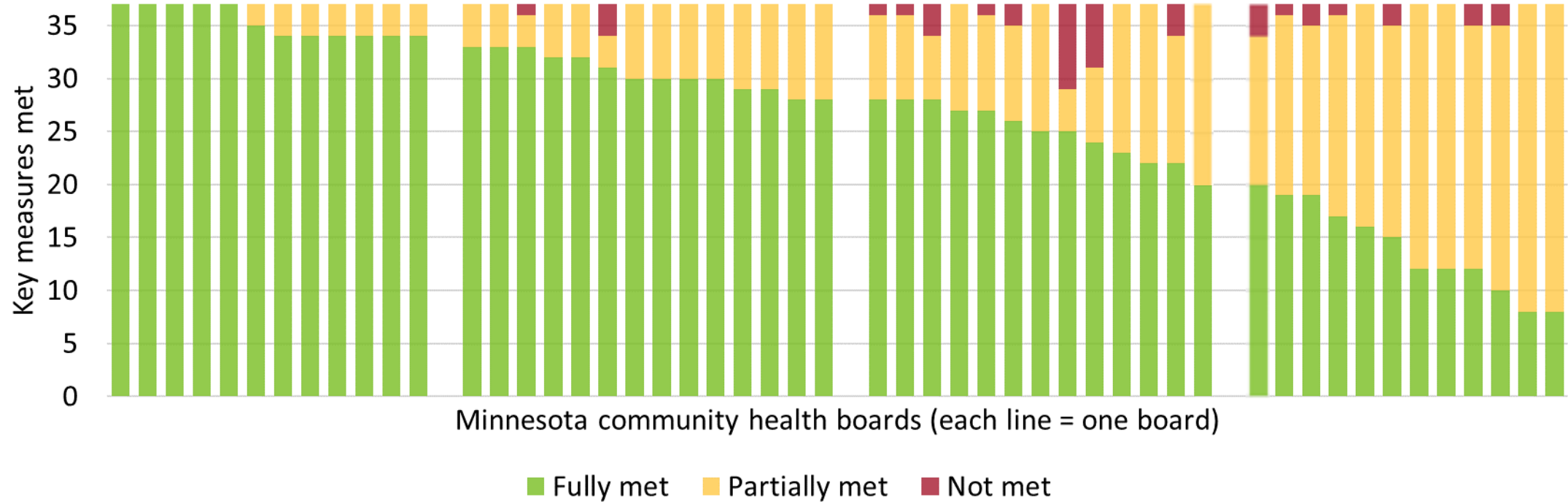


# Overview of Annual Reporting

- All community health boards report annually to MDH on a set of performance measures (51 boards in 2018)
- Data reported in 2019 on capacity and services for 2018 calendar year
- Measures relate to the six areas of public health responsibility in the Local Public Health Act
- Reports facilitate comparisons with other community health boards and with community health board's own historical data

# At a Glance: Minn. Community Health Board Capacity to Meet National Measures, 2018

Goodhue

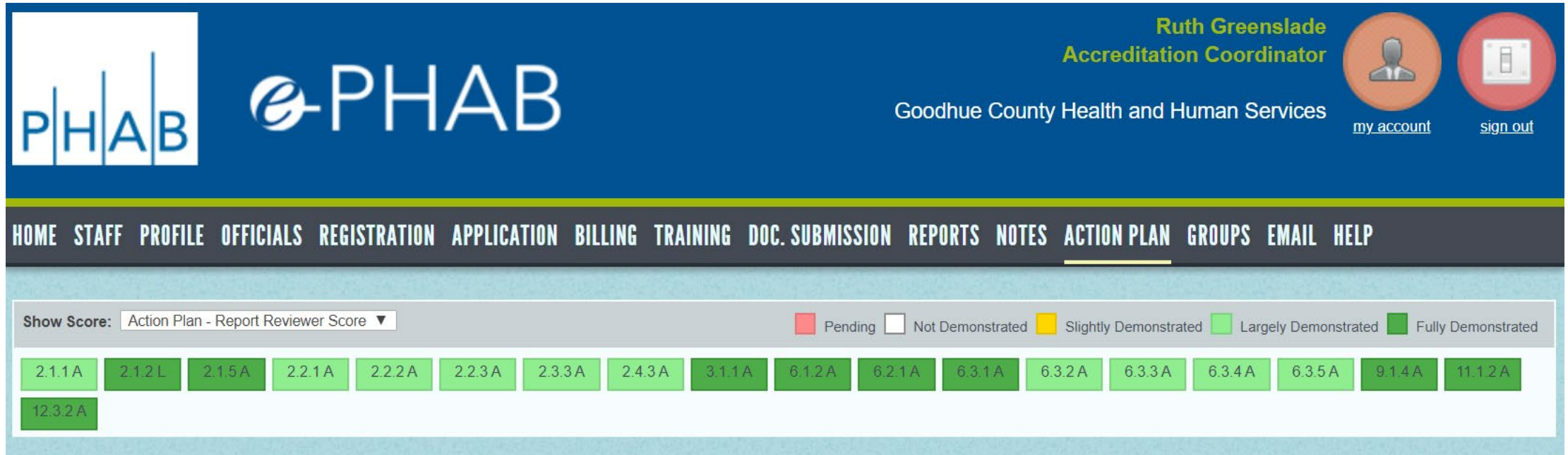


# 2019 Action Plan Report



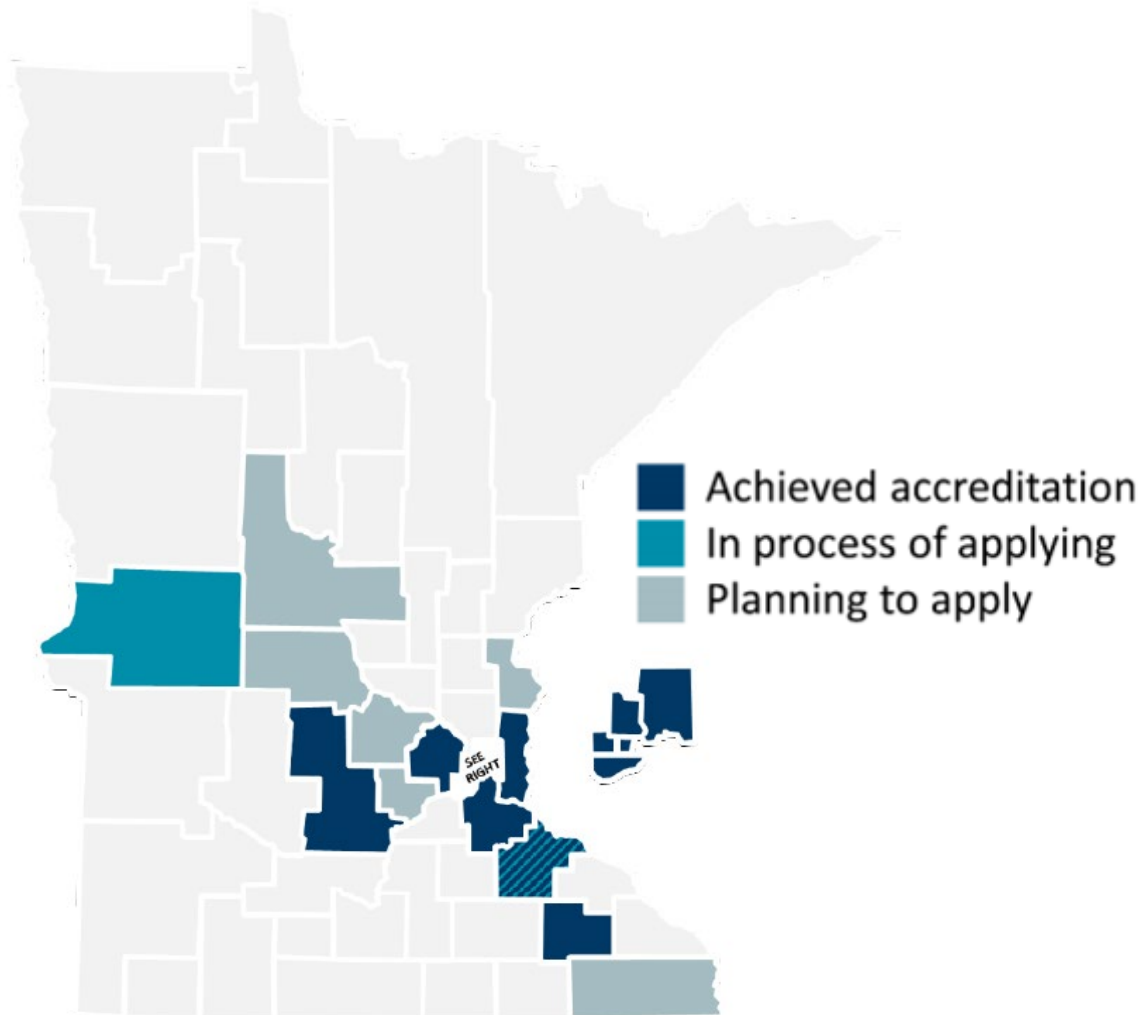
 Largely Demonstrated

=  Partially met



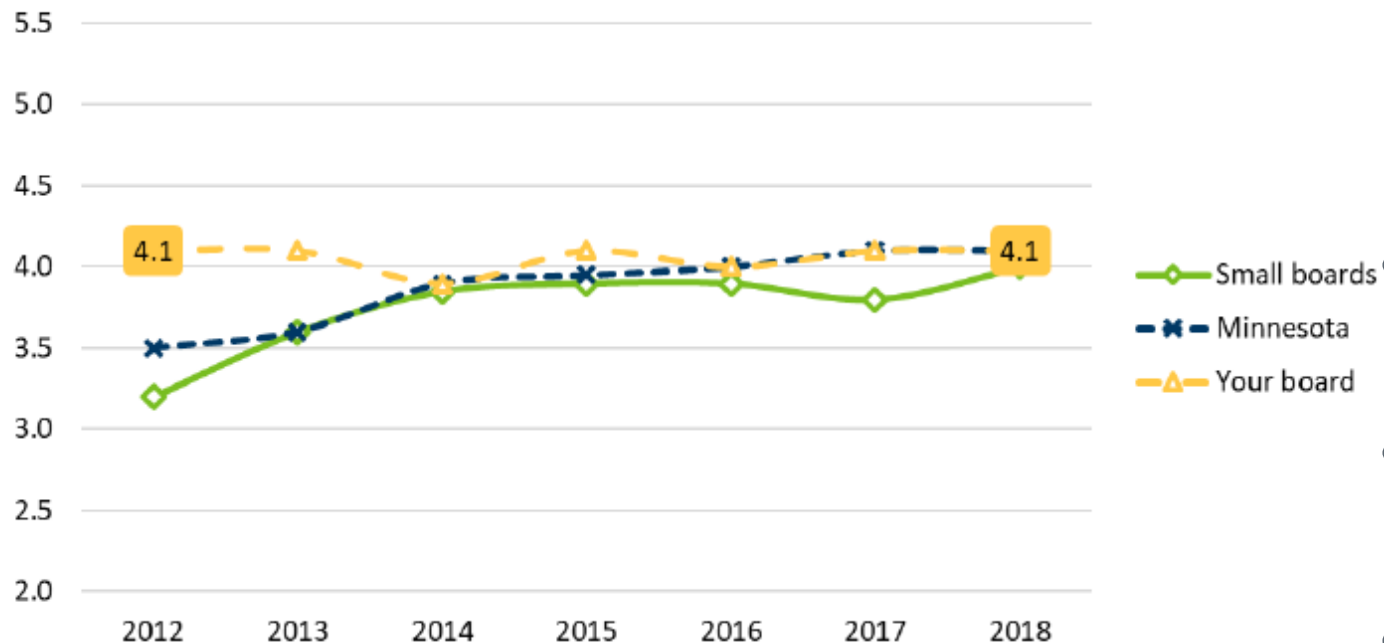
The screenshot shows the e-PHAB web application interface. At the top left is the PHAB logo. The main header area is dark blue with the e-PHAB logo and the text "Goodhue County Health and Human Services". On the right side of the header, it identifies "Ruth Greenslade Accreditation Coordinator" with a user icon and "my account" link, and a "sign out" link with a mobile device icon. Below the header is a navigation menu with links: HOME, STAFF, PROFILE, OFFICIALS, REGISTRATION, APPLICATION, BILLING, TRAINING, DOC. SUBMISSION, REPORTS, NOTES, ACTION PLAN (highlighted), GROUPS, EMAIL, HELP. The main content area shows a "Show Score:" dropdown menu set to "Action Plan - Report Reviewer Score". Below this is a legend for scores: Pending (red), Not Demonstrated (white), Slightly Demonstrated (yellow), Largely Demonstrated (light green), and Fully Demonstrated (dark green). A row of colored boxes represents the scores for various standards: 2.1.1A (light green), 2.1.2L (dark green), 2.1.5A (light green), 2.2.1A (light green), 2.2.2A (light green), 2.2.3A (light green), 2.3.3A (light green), 2.4.3A (light green), 3.1.1A (dark green), 6.1.2A (dark green), 6.2.1A (dark green), 6.3.1A (dark green), 6.3.2A (light green), 6.3.3A (light green), 6.3.4A (light green), 6.3.5A (light green), 9.1.4A (dark green), 11.1.2A (dark green), and 12.3.2A (dark green).

# 2018 Accreditation Highlights



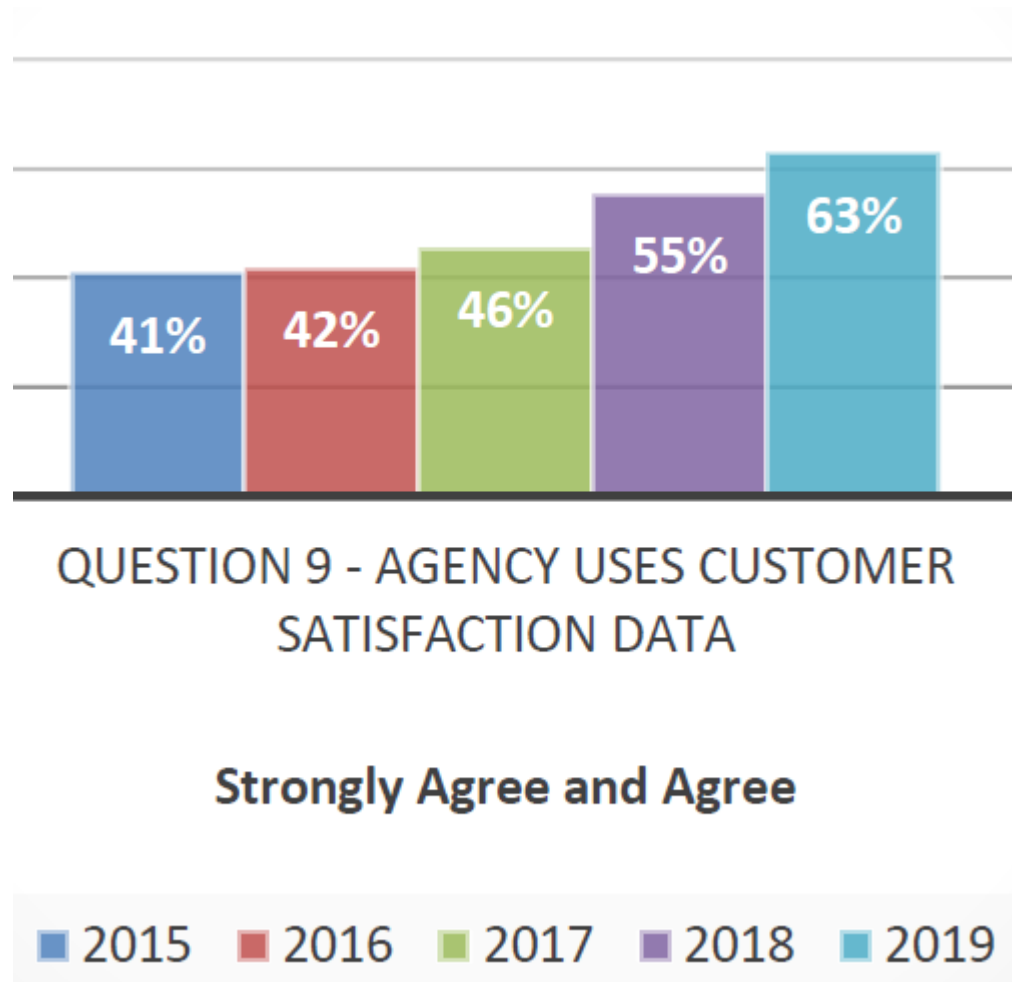
# 2018 Quality Improvement Maturity

Your community health board's organizational QI maturity score, with median scores from similarly-sized boards, 2012-present



- Quality Improvement Maturity Score based on responses to 10 questions
- 2012-2013: supervisors/directors responses
- 2014-2018: responses from GCHHS staff survey
- At the state average for small departments

# 2018 Quality Improvement Activities

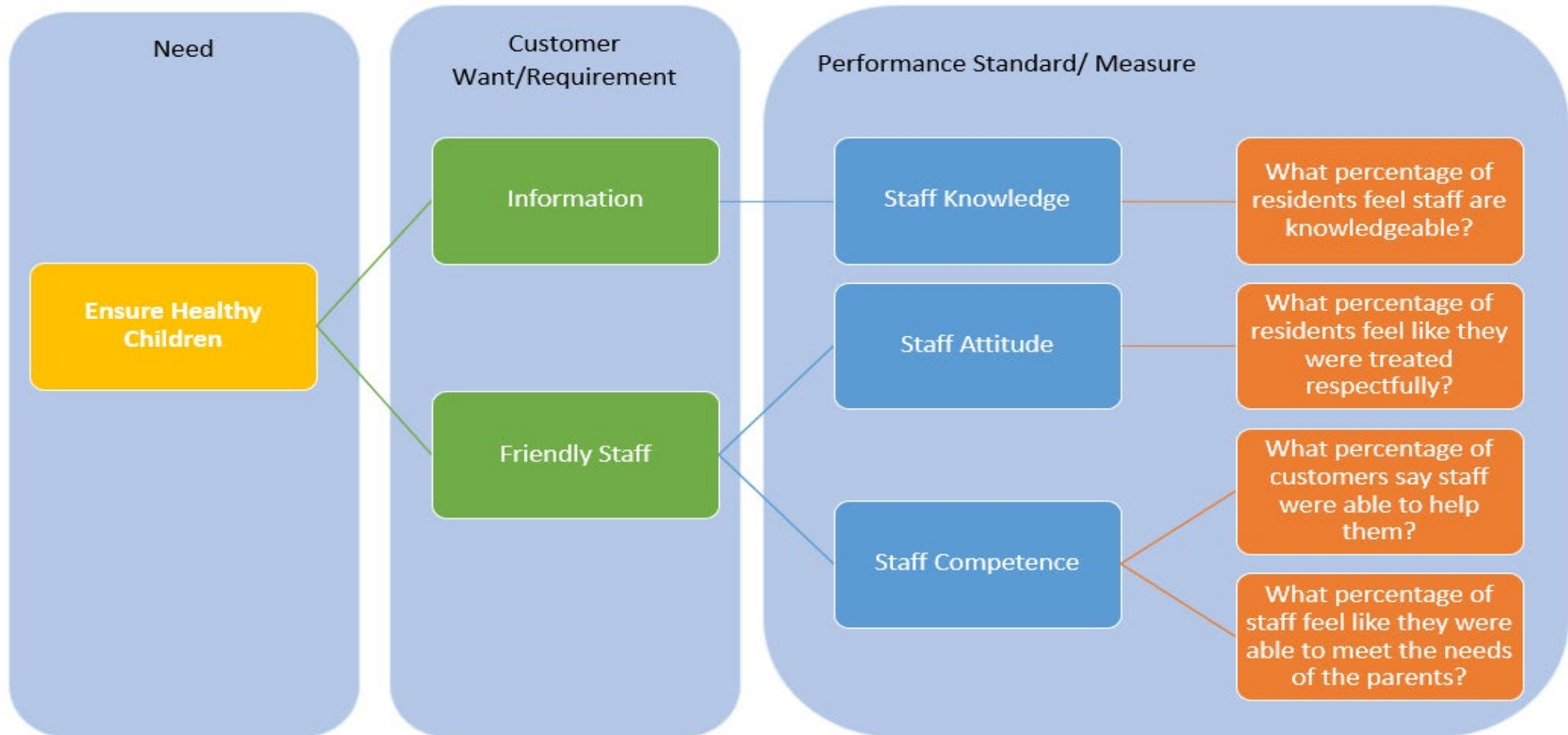


## 2018 Pilot Customer Groups:

- Parents (birth-5) – Family Health promotion
- Adults – Flu vaccine promotion
- New hires – GCHHS onboarding
- All staff – GCHHS internal communication
- All staff – GCHHS all-staff meetings

# 2018 Quality Improvement Activities

## Family Health CTQ Tree



# Next steps: Strengthening public health in Minnesota

- SCHSAC convened a workgroup in 2017-2018 to address concerns about wide variability in Minnesota's public health system
- Workgroup elevated two priorities:
  - Clarify basic public health responsibilities
  - Identify new ways to carry responsibilities out
- A technical group of local and state officials developed a set of foundational public health responsibilities, and is working toward articulating the existing gap and finding new/innovative ways of doing business
- More information: [www.health.state.mn.us/schsac](http://www.health.state.mn.us/schsac)



Thank you!  
Questions?

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



**Monthly Report**

**CD Placements**

**CONSOLIDATED FUNDING LIST FOR NOVEMBER 2019**

**In-Patient Approval:**

#00570600R – 60 year old male – one previous treatment – MNATC, Rochester  
#04373350R – 29 year old male – two previous treatments – Cedar Ridge, Stillwater  
#03322154R – 37 year old female – two previous treatments – MNATC, Rochester  
#04349127R – 26 year old female – no previous treatment – MNATC, Rochester  
#03045671R – 37 year old female – numerous previous treatments – New Life Trtmnt Center, Woodstock  
#01633798R – 52 year old male – two previous treatments – MNATC, Rochester  
#00302712R – 35 year old female – numerous previous treatments – Four Winds Lodge, Brainerd  
#00315974R – 30 year old female – numerous previous treatments – MNATC, Rochester  
#03098800R – 37 year old male – two previous treatments – NorthStar Regional, Shakopee  
#05974690R – 34 year old male – one previous treatment – Oakridge, Rochester  
#00302717R – 33 year old male – numerous previous treatments – Oakridge, Rochester

**Outpatient Approvals:**

#02920267 – 35 year old female – no previous treatment – STS, Minneapolis  
#03237669R – 34 year old male – four previous treatments – Midwest Recovery, Red Wing  
#00354425R – 36 year old male – numerous previous treatments – NuWay 3Rs, Minneapolis  
#05096305R – 31 year old male – numerous previous treatments – NuWay 3Rs, Minneapolis  
#05418395R – 28 year old male – one previous treatment – Common Ground, Red Wing  
#03042921R – 33 year old female – numerous previous treatments – CMMHC, St. Cloud  
#00188491R – 36 year old male – two previous treatments – Valhalla Place, Woodbury  
#01213484R – 30 year old male – numerous previous treatments – RCCS, St. Paul  
#00230360R – 47 year old male – numerous previous treatments – Common Ground, Red Wing  
#00027515R – 34 year old female – two previous treatments – Common Ground, Red Wing

**Halfway House Approval:** None

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



**Monthly Update  
Child Protection Assessments/Investigations**

	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
<b>January</b>	18	18	21	25	21
<b>February</b>	11	26	22	21	20
<b>March</b>	23	16	17	27	34
<b>April</b>	24	32	17	22	20
<b>May</b>	24	21	31	19	23
<b>June</b>	7	17	28	23	16
<b>July</b>	14	18	21	22	16
<b>August</b>	17	19	33	11	19
<b>September</b>	31	25	20	17	25
<b>October</b>	30	18	28	28	29
<b>November</b>	20	22	19	22	24
<b>December</b>	17	15	16	19	
<b>Total</b>	<b>236</b>	<b>247</b>	<b>273</b>	<b>256</b>	<b>247</b>

*Promote, Strengthen, and Protect the Health of Individuals, Families, and Communities!*



Date: 11/15/2019

AGENCY: Goodhue County

AGENCY DIRECTOR: Nina Arneson

AGENCY STAY PROGRAM COORDINATOR: Kris Johnson

DHS INDEPENDENT LIVING COORDINATOR: Kim Lemcke

I am pleased to inform you that Goodhue County has been awarded funding to help eligible youth who are or have been in out-of-home placement learn needed independent living skills through the Successful Transition to Adulthood for Youth (STAY) program. The federal Title IV-E funds are made available through the Chafee Foster Care Program for Successful Transition to Adulthood. The agency's funding for calendar years 2020 and 2021 is as follows:

	2020	2021
<b>"BIG IDEA" FUNDING</b>	<b>\$28,760</b>	<b>\$28,760</b>
<b>DIRECT SERVICES FUNDING</b>	<b>\$7,800</b>	<b>\$7,800</b>
<b>TOTAL</b>	<b>\$36,560</b>	<b>\$36,560</b>

### **Period of Funding**

All funds must be expended by Dec. 31, 2020 for calendar year 2020 funds and by Dec. 31, 2021 for calendar year 2021 funds. Funds do not roll over to the following year.

Quarterly payments will be based on actual reimbursement determined by BRASS code expenditure data. All purchased services and staff expenditures for independent living services must be recorded in the Social Service Information System (SSIS) using BRASS code 146 – Adolescent Life Skills Training. The total of all four quarterly payments in a calendar year cannot exceed the total award.

### **Agency Duties**

- Minn. Stat., section 260C.212, subd. 1(c)(12), requires agencies to provide youth ages 14 and older who are in out-of-home placement with a written independent living plan to be signed by the youth. In accordance with STAY eligibility provisions, all youth who receive STAY-funded services (whether in placement or not) must have an independent living plan documenting needs and goals.
- Every youth ages 14 and older, whether served with STAY funds or not, must be documented in SSIS by completing the "MNYTD IL Services" screen.

### **"Big Idea" Duties**

Agency staff will be expected to participate in monthly online meetings, 1 or 2 in-person trainings, as well as ongoing monitoring and evaluation efforts to include surveys and interviews. Department staff will work with agencies to monitor progress toward goals and assist in troubleshooting barriers.

## Reporting Requirements

Agencies who have been awarded “big idea” funding are required to submit STAY program quarterly reports to the Department, which are due on the 15<sup>th</sup> of April, July, October, and December. All agencies will submit an annual final report by January 31<sup>st</sup>. The Department will send the report templates to the agency electronically. Please see [Bulletin #19-68-14](#) for more information.

## Eligible Youth

Youth under state guardianship or permanent custody to an agency, who are expected to remain in placement until age 18 or older, should be the highest priority. All placements must be entered into SSIS in order for the department to verify eligibility.

For calendar year 2020 and 2021, eligibility is defined in the following chart:

<b>Minimum age</b>	14
<b>Maximum age</b>	23 <sup>rd</sup> birthday
<b>Eligibility for youth in foster care</b>	Youth ages 14 - 20 who are on a county or tribal social services caseload and are in an out-of-home placement for at least 30 consecutive days after age 14. This means any youth in foster care, including extended foster care, may be served starting at age 14 up to their 21 <sup>st</sup> birthday. This includes all child welfare/protection, children’s mental health, and developmental disabilities workgroups.
<b>Eligibility for youth who aged out of foster care at age 18 or older</b>	Youth who aged out of foster care at age 18, 19 or 20 may be served up until their 23 <sup>rd</sup> birthday.
<b>Eligibility for youth who exited foster care to adoption or transfer of permanent legal and physical custody to a relative</b>	Youth who exited foster care to either adoption or transfer of permanent legal and physical custody to a relative <b>after age 16</b> may be served until their 23 <sup>rd</sup> birthday.
<b>Eligibility for youth who exited foster care for reasons other than adoption, transfer of permanent legal and physical custody to a relative, or aging out of foster care (e.g., reunification)</b>	Youth who exited foster care for reasons other than adoption, transfer of permanent legal and physical custody to a relative, or aging out of foster care (e.g., youth who were reunified) may be served if they were on a county or tribal social services caseload and experienced an out-of-home placement for at least 30 consecutive days after age 14. These youth may be served until their 23 <sup>rd</sup> birthday.

## Technical Assistance

Agencies not participating in the “big idea” can still participate in some of the activities to learn and be inspired for upcoming funding cycles. Those opportunities will be sent out as they arise and are scheduled.

If you have questions about the STAY program, contact Kim Lemcke at 651-431-4686, or [kim.lemcke@state.mn.us](mailto:kim.lemcke@state.mn.us).

Sincerely,

A handwritten signature in black ink, appearing to read "Jamie Sorenson". The signature is stylized and somewhat cursive, with the first name "Jamie" written in a larger, more prominent script than the last name "Sorenson".

Jamie Sorenson, Director

Child Safety and Permanency Division





## STATE of MINNESOTA

# Proclamation

WHEREAS: County, city, tribal, and state health and human services workers are dedicated to improving health, protecting the vulnerable, and providing outstanding public services to the people of Minnesota through their prevention efforts, administration of programs, and provision of services; and

WHEREAS: County, city, tribal, and state health and human services workers are responsible for the prudent expenditure of millions of dollars annually and must meet the highest standards of job performance in program and services delivery; and

WHEREAS: The duties performed by county, city, tribal, and state health and human services workers require the use of a variety of skills in order to provide services to clients, communities, and the general public; and

WHEREAS: The nature of federal and state legislation necessitates that county, city, tribal, and state health and human services workers continually expand their knowledge, skills, and expertise related to their professions and the needs of the communities they serve; and

WHEREAS: The State of Minnesota recognizes the valuable public services that county, city, tribal, and state health and human services workers perform each and every day for the health, prevention, and protection of Minnesotans.

NOW, THEREFORE, I, TIM WALZ, Governor of Minnesota, do hereby proclaim Wednesday, December 11, 2019, as:

## COUNTY, CITY, TRIBAL AND STATE HEALTH AND HUMAN SERVICES WORKER DAY

in the State of Minnesota.



IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Minnesota to be affixed at the State Capitol this 11<sup>th</sup> day of December.

Handwritten signature of Tim Walz in black ink.

GOVERNOR

Handwritten signature of Steve Pimm in black ink.

SECRETARY OF STATE