



GOODHUE COUNTY MINNESOTA

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

GOODHUE COUNTY HEALTH & HUMAN SERVICES (GCHHS) AGENDA

MAY 19, 2020 10:30 A.M.

WEB ACCESS: [HTTPS://GLOBAL.GOTOMEETING.COM/JOIN/251052597](https://global.gotomeeting.com/join/251052597)

CALL IN NUMBER: 1 877 568 4106

ACCESS CODE: 251-052-597

VIRTUAL MEETING NOTICE

"Due to concerns surrounding the spread of COVID-19, it has been determined that in-person meetings or meetings conducted under Minn. Stat. 13D.02 a are not practical or prudent. Therefore, meetings that are governed by the Open Meeting Law will temporarily be conducted by telephone or other electronic means pursuant to Minn. Stat. 13D.021."

Goodhue County Health and Human Services Board will be conduct a board meeting pursuant to this section on May 19, 2020 at 10:30 a.m. via GoToMeeting platform. The board and staff will attend the meeting via GoToMeeting by video or phone. The public is welcome to monitor the meeting by logging into <https://global.gotomeeting.com/join/251052597> or calling [1 877 568 4106](tel:18775684106) beginning at 10:20 a.m. or any time during the meeting. Access Code: 251-052-597

New to GoToMeeting: Get the app now and be ready when your meeting starts
<https://global.gotomeeting.com/install/251052597>

Tips for the Virtual Meeting

1. CALL TO ORDER
2. REVIEW AND APPROVE BOARD MEETING AGENDA:
3. REVIEW AND APPROVE PREVIOUS MEETING MINUTES:
 - a. HHS Board Minutes

Documents:

[4-21-2020 HHS BOARD MINUTES.PDF](#)

4. REVIEW AND APPROVE THE FOLLOWING ITEMS ON THE CONSENT AGENDA:

- a. GCHHS And GCED Annual Contracts

Documents:

[GCHHS AND GCED ANNUAL CONTRACTS.PDF](#)

- b. PHEP Grant Amendment

Documents:

[PHEP GRANT AMENDMENT.PDF](#)

5. ACTION ITEMS:

a. Accounts Payable

Documents:

[ACCOUNTS PAYABLE.PDF](#)

b. Mental Health Month Proclamation

Nina Arneson

Documents:

[MENTAL HEALTH AWARENESS MONTH.PDF](#)
[MENTAL HEALTH MONTH- PROCLAMATION.PDF](#)

6. INFORMATIONAL ITEMS:

a. 1st Quarter 2020 Fiscal Report

Documents:

[1ST QUARTER 2020 FISCAL REPORT.PDF](#)

b. COVID-19 Update

Nina Arneson

Documents:

[5-19-2020 COVID-19 HHS BOARD UPDATE - OUTLINE.PDF](#)

7. ANNOUNCEMENTS/COMMENTS:

a. Goodhue County Child And Family Collaborative

[COVID-19 RESILIENCE VIDEO](#)

b. Thank You Goodhue County

[COVID-19 VIDEO](#)

8. ADJOURN

a. Next Meeting Will Be June 16, 2020 At 10:30 A.M.

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

**GOODHUE COUNTY
HEALTH & HUMAN SERVICES BOARD MEETING
MINUTES OF APRIL 21, 2020**

VIRTUAL MEETING NOTICE

“Due to concerns surrounding the spread of COVID-19, it has been determined that in-person meetings or meetings conducted under Minn. Stat. 13D.02a are not practical or prudent. Therefore, meetings that are governed by the Open Meeting Law will temporarily be conducted by telephone or other electronic means pursuant to Minn. Stat. 13D.021.”

The Goodhue County Health and Human Services Board convened their regularly scheduled meeting at 10:33 A.M., Tuesday, April 21, 2020, via Video GoToMeeting.

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, Ruth Greenslade, Heather Arndt, Jessica Seide, Scott Arneson, Brooke Hawkenson, Vicki Iocco, Stacy Lance, and Rachel Fergus.

HHS Board Chair Drotos asked for a moment of silence in respect for the people that have been affected by COVID-19.

AGENDA:

On a motion by L. Flanders and seconded by J. Majerus, the Board approved the April 21, 2020 Agenda.

MEETING MINUTES:

On a motion by J. Majerus and seconded by S. Johnson, the Board approved the Minutes of the H&HS Board Meeting on March 17, 2020.

ACTION ITEMS:

On a motion by B. Anderson and seconded by S. Johnson, the Board unanimously approved payment of all accounts as presented.

On a motion by B. Anderson and seconded by J. Majerus the Board unanimously approved the personnel request to replace one fulltime GCHHS Deputy Director due to upcoming retirement.

On a motion by B. Anderson and seconded by S. Johnson, the Board unanimously approved the personnel request to hire one HHS Systems Application Specialist due to upcoming retirement.

Goodhue County Health & Human Services Board
Meeting Minutes of April 21, 2020

INFORMATIONAL ITEMS:

GCHHS COVID-19 Update given by Nina Arneson, Heather Arndt, Brooke Hawkenson, Jessica Seide, and Mary Heckman.

ANNOUNCEMENTS/COMMENTS:

ADJOURN:

On a motion by B. Anderson and seconded by S. Johnson, the Board unanimously approved adjournment of this session of the Health & Human Services Board Meeting at or around 12:02 pm.

DRAFT

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



REQUEST FOR BOARD ACTION

Requested Board Date:	May 19, 2020	Staff Lead:	Mary Heckman
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approve Contracts with Goodhue County Education District (GCED) for community-based services from July 1, 2020 to June 30, 2021.		

BACKGROUND:

Goodhue County Health and Human Services (GCHHS) and Goodhue County Education District (GCED) continue to have an important working agreement in place to benefit the children, families, and communities of Goodhue County. In addition, since 2011, GCHHS has contracted with Fernbrook Family Center, Inc. to provide children’s mental health services in Goodhue County and this includes providing services to children who attend GCED.

We are currently working on a new job description for a retiring employee that we share with the GCED. As we always do at HHS, we look for efficiencies when replacing staff and what does the community need for services that this position can provide.

This year’s contract remains the same amount for the upcoming 2021 school year.

RECOMMENDATION:

Goodhue County Health and Human Services recommends approval of these contracts.

Goodhue County Health and Human Service Professional Service Agreement
With Goodhue County Education District

Goodhue County Education District(s)(GCED) (#252, #253, #256, #813, #2172, #2805) located at 395 Guernsey Lane, Red Wing, MN 55066, hereafter referred to as the “Agency” and

Goodhue County Health & Human Services, 426 West Avenue, Red Wing, Minnesota 55066 hereafter referred to as the “Contractor” enter into this agreement for the period from July 1, 2020 to June 30, 2021.

This contract may be extended by written agreement between the Agency and the Contractor.

WITNESSETH

WHEREAS, the Contractor is an organization licensed by the Department of Human Services and the Minnesota Department of Health to provide **Case Management and Supportive Services;**

WHEREAS, the Contractor and the Agency agree to participate in providing Interagency coordinated services and programs for children; and

WHEREAS, it is to the Contractor’s and the Agency’s best interest, the community’s benefit, and the enhancement of Children’s Mental Health to provide a clinical and family based component in order for children with disabilities to satisfactorily progress emotionally, socially and educationally; and

WHEREAS, the Contractor is required to provide mental health services in accordance with the Comprehensive Mental Health Act; and

NOW, THEREFORE, in consideration of the mutual understandings and agreements set forth, the Agency and the Contractor agree as follows:

1. **Agency and Contractor Duties:**

The Goodhue County Education District agrees to provide funding towards these collaborative services and the contractor agrees to furnish the following:

1.	<u>Child General Case Management - 193X</u>	<u>\$165,000.00</u>
2.	<u>Child Rule 79 Case Management - 490X</u>	<u>\$120,000.00</u>
3.	<u>DD Waiver Case Management - 591X</u>	<u>\$ 90,873.00</u>

Agency agrees to provide the facility, including appropriate space for the provision of mental health including the services for children/families enrolled in the program. The classrooms and other facilities in which students receive instruction, related services and supplemental aids and services shall be essentially equivalent to regular education programming, shall provide an atmosphere conducive to learning, and shall meet student’s special physical, sensory, and emotional needs.

NOW THEREFORE, IT IS AGREED, by and between the Contractor and the Agency, the conditions of the contract as follows:

- a. Provide direct individual, group and family services to qualified students with disabilities in the Goodhue County Education District. The IEP/IFSP of these qualified students with disabilities contains documentation of the need for the services.
- b. Provide direct services to the parents (guardians) and families of the Interagency County Education District Program children through parent education, case management, crisis planning and intervention, and mental health consultation.

- c. Serve as support liaison between home, school, and community agencies. Case managers and social workers will participate in an interagency committee related to children in the Education District school child study team meetings on children served. In addition to providing general clinical input, the case managers and social workers will complete evaluations and make recommendations for program placement transition.
- d. Ensure that the mental health professional shall participate on an interagency County Education District committee to consider the special needs and develop appropriate services for each student.
- e. Provide mental health consultation to special education staff, regular education staff, school administrators, and other Agency personnel as appropriate.
- f. The Contractor will employ social worker to provide services to children participating in the Early Childhood Education Program. All County social workers must pass the State Merit System exam and be “certified” by Minnesota Merit System for County hire. Personnel may also hold licenses from Board of Teaching, Commissioner of MDE or Board of Social Work.
- g. A Mental Health Practitioner Social Workers/Family Therapist/Consultant will be subcontracted through the contractor for the length of this contract.
- h. Direct service will be provided according to student’s IEP/IFSP each day school is in session, including the regular school year, extended school year and beyond. The student’s IEP/IFSP will document need for services, including need for extended school year.
- i. Schedule flexibility will be allowed so that evening parent education and family services may be provided and the mental health component can be integrated and coordinated with the education component.
- j. Services will consist of program development and implementation, including case management diagnostic assessments, crisis planning and intervention, treatment planning, individual and group counseling, parent education, family counseling, consultation, team meetings, report writing, and meeting other applicable policies and procedures of the Contractor and the Agency. The process of providing a service offered through this contractual agreement will be done as an IEP/IFSP team decision function and not solely by a decision of a district or Contractor.
- k. Direct clinical time and direct administrative supervision will be provided by the Contractor staff.

2. Cost and Delivery of Purchased Services

- a. The total amount to be paid to the Contractor for the Purchased Services shall not exceed **\$375,873.00**
- b. It is understood and agreed that in the event the reimbursement to the Contractor and/or the County from State and Federal sources is not obtained and continued at a level sufficient to allow for the purchase of the indicated quantity of Purchased Services, the obligations for each party hereunder shall thereupon be modified or terminated; notification by the party seeking modification/termination must be served on all parties at least 60 days prior to proposed action.
- c. The Director of Special Education for Goodhue County Education District and the Director of Goodhue County Health & Human Services shall be responsible for oversight of the contracted services when such services are being submitted for reimbursement for special education aids.

3. Eligibility for Services

Eligibility for services under this contract shall be:

- a. All children must have legal residence in Goodhue County as per MN Statute 120A.22.
- b. All children must be identified as disabled according to Minnesota Department of Education regulations and be in need of special education services.
- c. All children determined to be eligible for the Setting IV must be at least three (3) years old but less than twenty-one (21) years old.
- d. The Contractor and the Agency shall secure, and then share:
 - 1. Joint release of information.
 - 2. Assessment report (child).

3. ISP, IEP.
4. Parent Conference/Periodic Review(s) Reports.

Written reports shall contain documentation of student progress toward ISP, IEP Goals/Objectives.

- e. The Contractor shall follow established written due process procedures for terminating services to a client. The Agency shall be notified in 30 days.

4. Payment for Purchased Services

The Contractor will invoice the Agency in July of each year for the previous SFY. The Agency shall reimburse the Contractor 100 percent of the billed costs for the provision of the services in item 1 within 60 days of receipt of the bill.

5. Audit and Record Disclosures

- a. Allow Director of the Contractor and the Minnesota Department of Human Services access to the Agency's facility records at regular office hours to exercise their responsibility to monitor Purchased services.
- b. Records pertaining to the contract at the Contractor's Offices and the Agency's offices for three years for audit purposes.

6. Safeguard of Client Information

The use or disclosure by any party of information concerning an eligible client in violation of any rule of confidentiality provided for in the MN Data Practices Act, HIPAA or FERPA, or for any purpose not directly connected with the Contractor and the Agency responsibility with respect to the Purchased Services hereunder is prohibited except on written consent of such eligible client, the client's attorney or the client's responsible parent or guardian.

7. Equal Employment Opportunity and Civil Right Non-Discrimination

The Contractor agrees to comply with the Civil Rights Act of 1964, Title VII (42 USC 2000e); including Executive Order No. 11246, and Title VI (42 USC 2000d); and the Rehabilitation Act of 1973, as amended by Section 504; Minnesota Statutes, section 363A.02; and all applicable federal and state laws, rules regulations and orders prohibiting discrimination in employment, facilities and services. The Contractor shall not discriminate in employment, facilities, and in the rendering of Purchased Services hereunder on the basis of race, color, religion, age, gender, sexual orientation, disability, marital status, public assistance status, creed, or national origin.

8. Fair Hearing and Grievance Procedures

Contractor agrees to provide for a fair hearing and grievance procedure in conformance with Minnesota Statute; section 256.045, and in conjunction with the Fair Hearing and Grievance Procedures established by administrative rules of the State Department of Human Services and administrative rules of the Department of Education.

9. Bonding, Indemnify, Insurance and Audit Clause

- a. Bonding: Contractor shall obtain and maintain at all times, during the term of this agreement, a fidelity bond covering the activity of its personnel authorized to receive or distribute monies, in an amount not less than 1/6 of the not to exceed total in 2.a.

b. Indemnify: Contractor agrees that it will, at all times, indemnify and hold harmless the Agency from any and all liability, loss, damages, costs of expenses which may be claimed against the Contractor:

1. By reason of any service client's suffering personal injury, death, or property loss, or damages either while participating in or receiving services from the Contractor under this agreement, or
2. By reason of the service client's causing injury to, or damage to, the property of another Person during any time when the Contractor or his assigns, or employee thereof, has undertaken or is furnishing the care and service called for under this agreement.

c. Insurance: The Contractor further agrees, in order to protect itself and the Agency under the indemnity provisions set forth above, to at all times during the term of this contract, have and keep in force a liability insurance policy of not less than \$1,000,000/\$3,000,000.

d. Audit: The Contractor agrees that within 60 days after the termination date of this contract, an audit of said records will be conducted by a Certified Public Accounting firm, with a copy of same available to the Agency upon request.

10. Conditions of the Parties' Obligations

a. Before the termination date specified in Section 1 of this agreement, the Contractor and the Agency may evaluate the performance of this agreement to determine whether such performance merits review of this agreement.

b. Any alterations, variations, modifications, or waivers of provisions of this agreement shall be valid only when they have been submitted in writing, duly signed, and attached to the original of this agreement.

c. No claim for services furnished by the Contractor, not specifically provided in this agreement, will be allowed by the Agency.

11. Subcontracting

The Contractor and the Agency may enter into subcontracts for any of the goods and services contemplated under this agreement without prior written notification. All subcontracts shall be subject to the requirements of this contract. The Contractor and the Agency shall be responsible for the performance of any subcontractor retained by that party in performance of its duties under this contract.

12. Miscellaneous

Entire Agreement: It is understood and agreed that the entire agreement of the parties is contained herein and that this agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof, as well as any previous agreements presently in effect between the Contractor and the Agency relating to the subject matter hereof.

IN WITNESS WHEREEEOF, the Contractor and the Agency have executed this Agreement as of the day and year first above written.

APPROVED BY:

By: _____
Agency: GCED Board Chair Date _____

By: _____
Agency: GCED Director Date _____

By: _____
Contractor: GCHHS Board Chair Date _____

By: _____
Contractor: GCHHS Director Date _____

By: _____
Goodhue County Attorney Date _____

Goodhue County Education District Professional Service Agreement
With Goodhue County Health and Human Services

The **Goodhue County Health & Human Services**, 426 West Avenue, Red Wing, Minnesota 55066, hereafter referred to as the "Agency" and

Goodhue County Education District(s) (#252, #253, #256, #813, #2172, #2805) located at 395 Guernsey Lane, Red Wing, MN 55066 hereafter referred to as the "Contractor" enter into this agreement for the period from **July 1, 2020** to **June 30, 2021**.

This contract may be extended by written agreement between the Agency and the Contractor.

WITNESSETH

WHEREAS, The Contractor is an organization certified by the Minnesota Department of Education to provide **Educational Assistance setting IV Special Education Services**;

WHEREAS, the Contractor and the Agency agree to participate in providing Interagency coordinated services and programs for children; and

WHEREAS, it is to the Contractor and the Agency best interest, the community's benefit, and the enhancement of Children's Mental Health to provide a clinical and family based component in order for children with disabilities to satisfactorily progress emotionally, socially and educationally; and

WHEREAS, the Contractor along with the Agency will fund the Setting IV and Early Childhood Programs for Children; and

NOW, THEREFORE, in consideration of the mutual understandings and agreements set forth, the Contractor and the Agency agree as follows:

1. **Agency and Contractor's Duties**

The Goodhue County Health & Human Services agrees to provide funding towards these collaborative services and the Contractor agrees to furnish the following:

1. **Educational Assistance setting IV - 139X** **\$526,870.00**
2. **Transportation to Ensure School Stability for Students in Foster Care - 416X** **\$5000.00**
(These funds can be used for Educational Assistance if transportation funding is not utilized)

Contractor agrees to provide the facility, including appropriate space for the provision of mental health including the services for children/families enrolled in the program. The classrooms and other facilities in which students receive instruction, related services and supplemental aids and services shall be essentially equivalent to regular education programming, shall provide an atmosphere conducive to learning, and shall meet student's special physical, sensory, and emotional needs.

NOW THEREFORE, IT IS AGREED, by and between the Contractor and the Agency, the conditions of the contract as follows:

- a. Direct service will be provided according to student's IEP/IFSP each day school is in session, including the regular school year, extended school year and beyond. The student's IEP/IFSP will document need for services, including need for extended school year.
- b. Schedule flexibility will be allowed so that evening parent education and family services may be provided and the mental health component can be integrated and coordinated with the education

component.

- c. Services will consist of program development and implementation, including diagnostic assessments, treatment planning, individual and group counseling, parent education, family counseling, consultation, team meetings, report writing, and meeting other applicable policies and procedures of the Contractor and the Agency. The process of providing a service offered through this contractual agreement will be done as an IEP/IFSP team decision function and not solely by a decision of the Contractor or the Agency.

2. Cost and Delivery of Purchased Services

- a. The total amount to be paid to the Contractor for the Purchased Services shall not exceed **\$531,870.00.**
- b. It is understood and agreed that in the event the reimbursement to the Contractor and/or the County from State and Federal sources is not obtained and continued at a level sufficient to allow for the purchase of the indicated quantity of Purchased Services, the obligations for each party hereunder shall thereupon be modified or terminated; notification by the party seeking modification/termination must be served on all parties at least 60 days prior to proposed action.
- c. The Director of Special Education for Goodhue County Education District and the Director of Goodhue County Health & Human Services shall be responsible for oversight of the contracted services when such services are being submitted for reimbursement for special education aids.

3. Eligibility for Services

Eligibility for services under this contract shall be:

- a. All children must have legal residence in Goodhue County as per MN Statute 120A.22.
- b. All children must be identified as disabled according to Minnesota Department of Education regulations and be in need of special education services.
- c. All children determined to be eligible for the Setting IV must be at least three (3) years old but less than twenty-one (21) years old.
- d. The Contractor and the Agency shall secure, and then share:
 1. Joint release of information.
 2. Assessment report (child).
 3. ISP, IEP.
 4. Parent Conference/Periodic Review(s) Reports.

Written reports shall contain documentation of student progress toward ISP, IEP Goals/Objectives.

- e. The Contractor shall follow established written due process procedures for terminating services to a client. The Agency shall be notified in 30 days.

4. Payment for Purchased Services

- a. Certification of expenditures: The Contractor shall submit invoices for Contract Services provided, to the Agency in January and July of each year. The invoice shall show total program and administrative expenditures for the SFY.

5. Audit and Record Disclosures

- a. Allow Director of the Agency and the Minnesota Department of Human Services access to the Contractor's facility records at regular office hours to exercise their responsibility to monitor purchased services.

- b. Records pertaining to the contract at the Contractor offices and the Agency offices for three years for audit purposes.

6. Safeguard of Client Information

The use or disclosure by any party of information concerning an eligible client in violation of any rule of confidentiality provided for in the MN Data Practices Act, HIPAA or FERPA, or for any purpose not directly connected with the Contractor's or Agency's responsibility with respect to the Purchased Services hereunder is prohibited except on written consent of such eligible client, the client's attorney or the client's responsible parent or guardian.

7. Equal Employment Opportunity and Civil Right Non-Discrimination

The Contractor agrees to comply with the Civil Rights Act of 1964, Title VII (42 USC 2000e); including Executive Order No. 11246, and Title VI (42 USC 2000d); and the Rehabilitation Act of 1973, as amended by Section 504; Minnesota Statutes, section 363A.02; and all applicable federal and state laws, rules regulations and orders prohibiting discrimination in employment, facilities and services. The Contractor shall not discriminate in employment, facilities, and in the rendering of Purchased Services hereunder on the basis of race, color, religion, age, gender, sexual orientation, disability, marital status, public assistance status, creed, or national origin.

8. Fair Hearing and Grievance Procedures

The Contractor agrees to provide for a fair hearing and grievance procedure in conformance with Minnesota Statute; section 256.045, and in conjunction with the Fair Hearing and Grievance Procedures established by administrative rules of the State Department of Human Services and administrative rules of the Department of Education.

9. Bonding, Indemnify, Insurance and Audit Clause

a. Bonding: The Contractor shall obtain and maintain at all times, during the term of this agreement, a fidelity bond covering the activity of its personnel authorized to receive or distribute monies, in an amount not less than 1/6 of the not to exceed total in 2.a.

b. Indemnify: The Contractor agrees that it will, at all times, indemnify and hold harmless the Agency from any and all liability, loss, damages, costs of expenses which may be claimed against the Contractor or Agency:

1. By reason of any service client's suffering personal injury, death, or property loss, or damages either while participating in or receiving from the Contractor under this agreement, or while on premises owned, leased or operated by the Contractor, or while being transported to or from said premises in any vehicle owned, operated, chartered or otherwise contracted for by the Contractor or his assigns; or
2. By reason of the service client's causing injury to, or damage to, the property of another person during any time when the Contractor or his assigns, or employee thereof, has undertaken or is furnishing the care and service called for under this agreement.

c. Insurance: The Contractor further agrees, in order to protect itself and the Agency under the indemnity

provisions set forth above, to at all times during the term of this contract, have and keep in force a liability insurance policy of not less than \$1,000,000/\$3,000,000.

d. Audit: The Contractor agrees that within 60 days after the termination date of this contract, an audit of said records will be conducted by a Certified Public Accounting firm, with a copy of same available to the Agency upon request.

10. Conditions of the Parties' Obligations

a. Before the termination date specified in Section 1 of this agreement, the Contractor and the Agency may evaluate the performance of this agreement to determine whether such performance merits review of this agreement.

b. Any alterations, variations, modifications, or waivers of provisions of this agreement shall be valid only when they have been submitted in writing, duly signed, and attached to the original of this agreement.

c. No claim for services furnished by the Contractor, not specifically provided in this agreement, will be allowed by the Agency.

11. Subcontracting

The Contractor and the Agency may enter into subcontracts for any of the goods and services contemplated under this agreement without prior written notification. All subcontracts shall be subject to the requirements of this contract. The Contractor and the Agency shall be responsible for the performance of any subcontractor retained by that party in performance of its duties under this contract.

12. Miscellaneous

Entire Agreement: It is understood and agreed that the entire agreement of the parties is contained herein and that this agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof, as well as any previous agreements presently in effect between the Contractor and the Agency relating to the subject matter hereof.

IN WITNESS WHEREEOF, the Contractor and the Agency have executed this Agreement as of the day and year first above written.

APPROVED BY:

By: _____
Agency: GCHHS Board Chair

Date

By: _____
Agency: GCHHS Director

Date

By: _____
Contractor: GCED Board Chair

Date

By: _____
Contractor: GCED Director

Date

By: _____
Goodhue County Attorney

Date

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



REQUEST FOR BOARD ACTION

Requested Board Date:	5/19/2020	Staff Lead:	Ruth Greenslade
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approve Public Health Emergency Preparedness grant amendment.		

BACKGROUND: Goodhue County Health and Human Services has a Public Health Emergency Preparedness (PHEP) grant through the Minnesota Department of Health (MDH) – Office of Emergency Preparedness to receive federal funding from the Centers for Disease Control (CDC).

Preparing for and responding to emergencies is a mandated area of public health responsibility under MN Statutes 145.A. These are funds we’ve received annually since 2002 to help carry out this responsibility.

Recent award amounts are shown below. Our award amounts are based on the federal budget and the formula used by MDH to divide the funds. The award amount for future years is to be determined based on continued funding from CDC.

2014-2015	\$27,827
2015-2016	\$44,523
2016-2017	\$41,406
2017-2018	\$39,570
2018-2019	\$39,228
2019-2020	\$37,172
2020-2021	\$37,208

The current 5-year grant contract for July 1, 2019 through June 30, 2024 needs to be amended with the 2020-2021 award amount to Goodhue County Health and Human Services of **\$37,208**.

PHEP funds can be used towards the public health COVID-19 response. For the 2019-2020 PHEP grant year, MDH discontinued some PHEP grant duties, while other duties will be carried over to be completed in 2020-2021.

RECOMMENDATION: HHS Department recommends approval as requested.

Minnesota Department of Health Community Health Board Grant Project Agreement Amendment

Grant Project Agreement Start Date:	7/1/2019	Current Project Amendment Amount	\$ 37,208
Original Grant Project Agreement Expiration Date:	6/30/2024	Original Grant Project Agreement Amount:	\$37,172
Current Grant Project Agreement Expiration Date:	6/30/2024	Previous Project Amendment(s) Total:	\$ -0-
Requested Grant Project Agreement Expiration Date:	Not Applicable	Requested Total Grant Project Agreement Amount:	\$ 74,380

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

Recitals

1. The State has a grant project agreement with the Grantee identified as SWIFT Contract #162018 | SWIFT PO # 3000067088 (“Original Grant Project Agreement”) to provide measurable and sustained progress in the implementation and execution of Public Health Emergency Preparedness and Response Capabilities: National Standards for State, Local, Tribal and Territorial Public Health. This preparedness program is authorized under the federal Public Health Service (PHS) Act of 1944, as *amended* (PHS Act) (42 USC §247d-(3) (b)). If applicable, contingent supplemental emergency response awards are authorized under 42 USC § 247b-(a) and (d)] subject to available funding and other requirements and limitations under 42 U.S.C. §243.
2. This amendment provides supplemental federal funding based on continuation funding from CDC for Budget Period 2 (BP2) grant duties, exercises, plans and other deliverables. Funding for this budget period requires the successful completion and acceptance of all duties and deliverables including AARIPs by the State prior to June 30, 2021.
3. The State and the Grantee are willing to amend the Original Grant Project Agreement as stated below.

Grant Agreement Amendment

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

REVISION 1. 4. “Consideration and Payment” is amended as follows:

4.1 Consideration. The STATE will pay for all services performed by the GRANTEE under this grant project agreement as follows:

(a) Compensation. The GRANTEE will be paid on a reimbursement basis only.

Each specific Budget Period award is available only for the specific Budget Period for which it is awarded. Funds remaining and not fully liquidated at the end of each Budget Period will be cancelled and will not

be available to the GRANTEE in any subsequent Budget Period. GRANTEE shall maintain separate accounting records and source documentation for each award; funds may not be comingled.

Public Health Emergency Preparedness (PHEP) Awards

Award Name	Budget Period	Award Amount
Budget Period 1 PHEP	Budget Period 1 July 1, 2019-June 30, 2020	\$37,172
Budget Period 2 PHEP	Budget Period 2 July 1, 2020-June 30, 2021	\$ <u>37,208</u>
Budget Period 3 PHEP	Budget Period 3 July 1, 2021-June 30, 2022	\$ To Be Determined
Budget Period 4 PHEP	Budget Period 4 July 1, 2022-June 30, 2023	\$ To Be Determined
Budget Period 5 PHEP	Budget Period 5 July 1, 2023-June 30, 2024	\$ To Be Determined

(b) *Total Obligation.* The total obligation of the STATE for all compensation and reimbursements to the GRANTEE under this grant project agreement will not exceed ~~Thirty seven thousand one hundred seventy-two dollars (\$37,172)~~ \$74,380.00.

4.2 Terms of Payment.

(a) *Invoices.* The State will promptly pay the GRANTEE after the GRANTEE presents an itemized invoice for the services actually performed and the State's Authorized Representative accepts the invoiced services. Invoices must be submitted in a timely fashion and according to the following schedule:

Invoice Submission Schedule

Invoice Due	Invoice Activity Period	Deadline for Receipt
1st Quarter	July 1 -30 September	October 31
2nd Quarter	October 1- December 31	January 31
3rd Quarter	January 1- March 31	April 30
4th Quarter/ BP Final Invoice	April 1- June 30	July 31

The State reserves the right to deny payment of invoices not received within thirty (30) days of the invoice deadline.

(b) *Federal Funds.* Payments under this grant project agreement will be made from federal funds obtained by the STATE through Title 47, 42 U.S.C. §247d-3b, CFDA number 93.069, of Section 319C-1 of the Public Health Service (PHS) Act (47 USC § 247d-3a), including public law and all amendments. The Notice of Grant Award (NGA) number is pending. The GRANTEE is responsible for compliance with all federal requirements imposed on these funds and accepts full financial responsibility for any requirements imposed by the Grantee's failure to comply with federal requirements. If at any time federal funds become unavailable, this agreement shall be terminated immediately upon written notice of by the STATE to the GRANTEE. In the event of such a termination, GRANTEE is entitled to payment, determined on a pro rata basis, for services satisfactorily performed.

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 following page]

APPROVED:

1. STATE ENCUMBRANCE VERIFICATION

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

Signed: _____

Date: _____

SWIFT Contract/PO No(s). _____

2. GRANTEE

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

By: _____

Title: _____

Date: _____

By: _____

Title: _____

Date: _____

3. MINNESOTA DEPARTMENT OF HEALTH

By: _____ (with delegated authority)

Title: _____

Date: _____

Distribution:

- MDH – Original (fully executed) Grant Project Agreement Amendment
- Grantee
- State’s Authorized Representative

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



REQUEST FOR BOARD ACTION

Requested Board Date:	May 19, 2020	Staff Lead:	Mike Zorn
Consent Agenda:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Attachments:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Action Requested:	Approve April 2020 HHS Warrant Registers		

BACKGROUND:

This is a summary of Goodhue County Health and Human Services Warrant Registers for: April 2020

	Date of Warrant		Check No.		Total Batch
			Series		
IFS	April 3, 2020	ACH	30518	30534	\$31,848.25
IFS	April 3, 2020		450227	450252	\$49,743.85
IFS	April 6, 2020		450332	450332	\$15.00
IFS	April 10, 2020	ACH	30554	30558	\$19,015.34
IFS	April 10, 2020		450362	450390	\$13,072.98
IFS	April 17, 2020	ACH	30559	30565	\$3,065.08
IFS	April 17, 2020		450391	450414	\$15,711.74
IFS	April 24, 2020	ACH	30597	30606	\$2,946.05
IFS	April 24, 2020		450490	450521	\$32,419.53
SSIS	April 30, 2020	ACH	30649	30670	\$50,835.29
SSIS	April 30, 2020		450524	450576	\$187,219.84
IFS	April 30, 2020	ACH	30607	30648	\$4,355.47
IFS	April 30, 2020		450522	450523	\$1,299.78
Total					\$411,548.20

RECOMMENDATION: Goodhue County HHS Recommends Approval as Presented.

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



REQUEST FOR BOARD ACTION

Requested Board Date:	May 19, 2020	Staff Lead:	Nina Arneson
Consent Agenda:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Adopt a resolution to recognize May as Mental Health Month in Goodhue County		

BACKGROUND:

For the past several years, the Goodhue County Health and Human Services Board has recognized May as Mental Health Month in Goodhue County. This has included the community work with "[Make It Ok](#)" campaign. This recognition helps to inform the public about the importance of mental health in our community.

Now, more than ever, it is important to celebrate May as Mental Health Month. Living through a public health emergency like COVID-19 can be extremely stressful. Individuals may be experiencing anxiety, frustration, anger, and fear for themselves, and their loved ones. While it is critical during this time to take care of our physical health, we also need to pay attention to our mental health. Goodhue County continues to support the mental health and well-being of our community through community work, programming, and resources.

RECOMMENDATION: HHS Department recommends approval as requested.



Goodhue County
Health and Human Services

426 West Avenue
Red Wing, MN 55066
(651) 385-3200 • Fax (651) 267-4882

MENTAL HEALTH MONTH IN GOODHUE COUNTY

Proclamation

WHEREAS, many national, state and local organizations and residents of Goodhue County provide advocacy for and services to people with mental illness have observed the month of May each year as Mental Health Month; and

WHEREAS, mental wellbeing is important for people of all ages, races, social classes and walks of life; and

WHEREAS, mental illnesses are real and prevalent in our nation where 1 in 6 children and 1 in 5 adults will experience mental health concerns in their lifetime; and

WHEREAS, all individuals and communities are impacted by mental illness through family, friends and coworkers; and

WHEREAS, [Goodhue County Health Assessment](#) and [Goodhue County Health Improvement Plan](#) have identified Mental Health and Wellbeing as one of the top 2018-2023 Health Priorities for Goodhue County; and

WHEREAS, Goodhue County Health and Human Services, Goodhue County Child and Family Services Collaborative, Mental Health Coalition, mental health providers, schools, residents, and many others are collaborating to work to reduce mental health stigma, raise awareness for suicide prevention, provide services and promote well-being and resilience every day and especially during COVID-19; and

NOW THEREFORE, BE IT RESOLVED, that the Goodhue County Health and Human Services Board hereby recognize the role that mental health services, physical health, health promotion and awareness plays in achieving mental wellness of all residents by recognizing the month of May as “Mental Health Month.”

Paul Drotos, Goodhue County Commissioner
Goodhue County Health and Human Services Board Chair

Date

Promote, Strengthen and Protect the Health
of Individuals, Families and Communities!
Equal Opportunity Employer
www.co.goodhue.mn.us/HHS





Goodhue County
Health and Human Services

426 West Avenue
Red Wing, MN 55066
(651) 385-3200 • Fax (651) 267-4882

DATE: May 19, 2020
TO: Goodhue County Health and Human Services (HHS) Board
FROM: Mike Zorn, Deputy Director
RE: First Quarter 2020 Fiscal Report

In the first quarter of CY 2020, Goodhue County Health & Human Services Agency had the following budget financial summary.

- We expended 25% (\$4,424,428) of our budget (\$17,871,630) 25% of the way through the year. Last year at this time, we expended 26%.
- We have collected 15% (\$2,737,264) of our anticipated revenue (\$17,871,630), 25% of the way through the year. Last year at this time, we collected 15%.

Children in Out of Home Placement:

We have expended 28.8% (\$515,526) of our budget (\$1,792,000), 25% of the way through the year, which resulted in being over budget 3.77% or \$67,526.

County Burials:

We have expended 119% (\$17,865) of our budget (\$15,000), 25% of the way through the year. We had 6 county burials in the first quarter, whereas in 2019 we had a total of 13.

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of Individuals, Families and Communities!
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State Hospital Costs:

We have expended 13% (\$52,059) of our budget (\$391,381). Last year at this time, we expended \$200,052. We continue to anticipate this given the state crisis with mental health, the situation with Anoka-Metro Regional Treatment Center where clients do not have any other place to go.

Salaries, Benefits, Overhead and Capital Equipment:

On agency salaries, benefits, overhead and capital equipment line items, we have expended 23% of our budget 25% of the way through the year.

Staffing Revenues Additional Staff:

For the first quarter report, total staffing revenue is 30.19% (\$1,226,217) 25% through the year of the total 2020 budget of \$4,061,896 for these revenue categories.

COVID-19 Pandemic:

Due to the pandemic HHS case management revenue is expected to be reduced some due to limited technology that some clients that are receiving these services have access to. Telehealth/Telemedicine has been approved for client case management, so revenue should main steady for those clients with access to video conferencing technology.

HHS will have some additional personnel expenses associated with the pandemic as two part time employees have increased their hours to help with COVID-19 response and additional costs are anticipated.

HHS will have some additional costs associated to establish policies and practices for social distance for employees, routine environmental cleaning and disinfection, and implementing safety practices for preparing the workplace to protect employees and clients.

At this point it is too early to tell if any other revenues will be impacted and whether the State/Federal revenues would be increased and/or decreased depending on the program.



Goodhue County



REVENUES & EXPENDITURES BUDGET REPORT

Report Basis: Cash

From: 01/2020 Thru: 03/2020

Percent of Year: 25%

11 Fund
Health & Human Service Fund

479 Dept
PHS Administration

<u>Account Number</u>	<u>Description</u>	<u>Status</u>	<u>03/2020</u> <u>Amount</u>	<u>Selected</u> <u>Months</u>	<u>2020</u> <u>Budget</u>	<u>% Of</u> <u>Budget</u>
11-479-479-0000-6174	Mandatory Medicare		213.35	483.72	909.00	53
11-479-479-0000-6201	Telephone		230.18	715.36	3,000.00	24
11-479-479-0000-6202	Cell Phone		108.66	328.12	1,050.00	31
11-479-479-0000-6203	Postage/Freight		578.00	1,596.73	4,913.00	33
11-479-479-0000-6241	Advertising		.00	454.50	280.00	162
11-479-479-0000-6243	Association Dues/Memberships		.00	918.75	2,000.00	46
11-479-479-0000-6244	Subscriptions		.00	161.00	150.00	107
11-479-479-0000-6268	Software Maintenance Contracts		.00	6,384.00	25,202.00	25
11-479-479-0000-6278	Consultant Fees		.00	0.00	910.00	0
11-479-479-0000-6283	Other Professional & Tech Fees		177.31	1,618.21	8,836.00	18
11-479-479-0000-6302	Copies/Copier Maintenance		436.54	1,940.54	4,500.00	43
11-479-479-0000-6331	Mileage		.00	13.80	70.00	20
11-479-479-0000-6332	Meals & Lodging		.00	0.00	500.00	0
11-479-479-0000-6342	Land & Building Lease/Rent		18,767.75	18,767.75	75,071.00	25
11-479-479-0000-6351	Insurance		.00	9,621.49	9,078.00	106
11-479-479-0000-6357	Conferences/Schools/Training		208.00	461.38	400.00	115
11-479-479-0000-6405	Office Supplies		9.45	63.08	1,300.00	5
11-479-479-0000-6414	Food & Beverages		126.00	209.58	158.00	133
11-479-479-0000-6480	Equipment/Furniture<\$5,000		.00	0.00	1,400.00	0
479 Dept	TOTALS PHS Administration	Revenue	.00	.00	7,500.00-	0
		Expend.	51,500.23	130,346.62	305,663.00	43
		Net	51,500.23	130,346.62	298,163.00	44
11 Fund	TOTALS Health & Human Service Fund	Revenue	887,347.95-	2,737,263.79-	17,871,630.00-	15
		Expend.	1,547,247.95	4,424,428.48	17,871,630.00	25
		Net	659,900.00	1,687,164.69	.00	0
FINAL TOTALS:	583 Accounts	Revenue	887,347.95-	2,737,263.79-	17,871,630.00-	15
		Expend.	1,547,247.95	4,424,428.48	17,871,630.00	25
		Net	659,900.00	1,687,164.69	.00	0

ACCOUNT #	DESCRIPTION	ACTUAL	ACTUAL	BUDGET	% OF	% OF
		2019	THRU 3/20	2020	BUDGET	YEAR
11-430-710-3410-6020	ELECTRIC HOME MONITORING	\$7,418.00	\$2,172.00	\$7,000.00	31%	25%
11-430-710-3710-6020	CHILD SHELTER -SS	\$20,529.23	\$14,217.20	\$2,500.00	569%	25%
11-430-710-3711-6020	REGULAR CRISIS CARE - CS					25%
11-430-710-3750-6025	NORTHSTAR KINSHIP ASSISTANCE			\$7,500.00	0%	25%
11-430-710-3780-6025	NORTHSTAR ADOPTION ASSISTANCE			\$6,000.00	0%	25%
11-430-710-3800-6057	RULE 4 TRMT FOSTER CARE - SS	\$178,235.97	\$23,466.03	\$150,000.00	16%	25%
11-430-710-3810-6057	REGULAR FOSTER CARE - SS	\$478,949.08	\$107,823.26	\$575,000.00	19%	25%
11-430-710-3810-6058	REGULAR FOSTER CARE - SS-CS- EXPENSES	\$29,215.51	\$5,739.51	\$35,000.00	16%	25%
11-430-710-3814-6056	EMERGENCY FOSTER CARE PROVIDER	\$8,030.00	\$2,002.00	\$8,000.00	25%	25%
11-430-710-3814-6057	EMERGENCY FOSTER CARE	\$10,086.96	\$1,592.17	\$5,000.00	32%	25%
11-430-710-3820-6020	RELATIVE CUSTODY ASSISTANCE					25%
11-430-710-3830-6020	PAYMENTS FOR RECIPIENTS - RULE 8 SS	\$103,186.43	\$26,223.48	\$80,000.00	33%	25%
11-430-710-3831-6020	PAYMENTS FOR RECIPIENTS - RULE 8 CS	\$17,646.11	\$27,357.01	\$16,000.00	171%	25%
11-430-710-3850-6020	DEPT OF CORR GROUP FACILITY - SS	\$269,132.09	\$71,188.64	\$257,500.00	28%	25%
11-430-710-3852-6020	DEPT OF CORR GROUP FACILITY - CS	\$310,531.23	\$36,144.90	\$350,000.00	10%	25%
11-430-710-3880-6020	EXTENDED FOSTER CARE - IND LIVING 18-20	\$71,467.93	\$23,635.12	\$40,000.00	59%	25%
11-430-710-3890-6020	SHORT TERM FOSTER CARE/RESPITE CARE	\$218.73		\$2,500.00	0%	25%
11-430-740-3830-6020	PAYMENT FOR RECIPIENTS - RULE 5 SS	\$323,700.06	\$170,243.96	\$250,000.00	68%	25%
11-430-740-3831-6020	RULE 5 CS		\$3,720.91	\$0.00		25%
	TOTAL OUT OF HOME PLACEMENT	\$1,828,347.33	\$515,526.19	\$1,792,000.00	28.8%	25%
	Over/(Under) Budget for percent of year	\$1,795,000.00	\$67,526.19	\$448,000.00	25%	25%
	Percent Over/(Under) Budget	-\$33,347.33			3.77%	

December	
November	
October	
September	
August	
July	
June	
May	
April	
March	3.77%
February	2.85%
January	2.36%
Over/Under Budget 2019	1.86%

Goodhue County



STATEMENT OF REVENUES AND EXPENDITURES

As Of 03/2020 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 Budget	% OF BUDG	% OF YEAR
PROGRAM 600 INCOME MAINTENANCE					
SALARIES					
SALARIES & BENEFITS	202,079.06	622,110.82	2,942,629.00	21	25
TOTAL SALARIES	202,079.06	622,110.82	2,942,629.00	21	25
OVERHEAD					
AGENCY OVERHEAD	51,817.68	96,848.33	338,852.00	29	25
TOTAL OVERHEAD	51,817.68	96,848.33	338,852.00	29	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	12,750.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	12,750.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 Budget	% OF BUDG	% OF YEAR
PROGRAM 640 CHILD SUPPORT AND COLLECTIONS					
SALARIES					
SALARIES & BENEFITS	53,977.86	161,769.30	700,520.00	23	25
TOTAL SALARIES	53,977.86	161,769.30	700,520.00	23	25
OVERHEAD					
AGENCY OVERHEAD	20,128.83	45,088.46	167,868.00	27	25
TOTAL OVERHEAD	20,128.83	45,088.46	167,868.00	27	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	0.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	0.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 Budget	% OF BUDG	% OF YEAR
PROGRAM 700 SOCIAL SERVICES PROGRAM					
SALARIES					
SALARIES & BENEFITS	271,876.45	817,007.94	3,547,140.00	23	25
TOTAL SALARIES	271,876.45	817,007.94	3,547,140.00	23	25
OVERHEAD					
AGENCY OVERHEAD	37,190.63	86,042.60	360,064.00	24	25
TOTAL OVERHEAD	37,190.63	86,042.60	360,064.00	24	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	12,250.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	12,250.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 Budget	% OF BUDG	% OF YEAR
PROGRAM PUBLIC HEALTH					
SALARIES					
SALARIES & BENEFITS	251,451.89	752,508.06	3,147,239.00	24	25
TOTAL SALARIES	251,451.89	752,508.06	3,147,239.00	24	25
OVERHEAD					
AGENCY OVERHEAD	36,846.51	82,270.95	291,772.00	28	25
TOTAL OVERHEAD	36,846.51	82,270.95	291,772.00	28	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	0.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	0.00	0	25

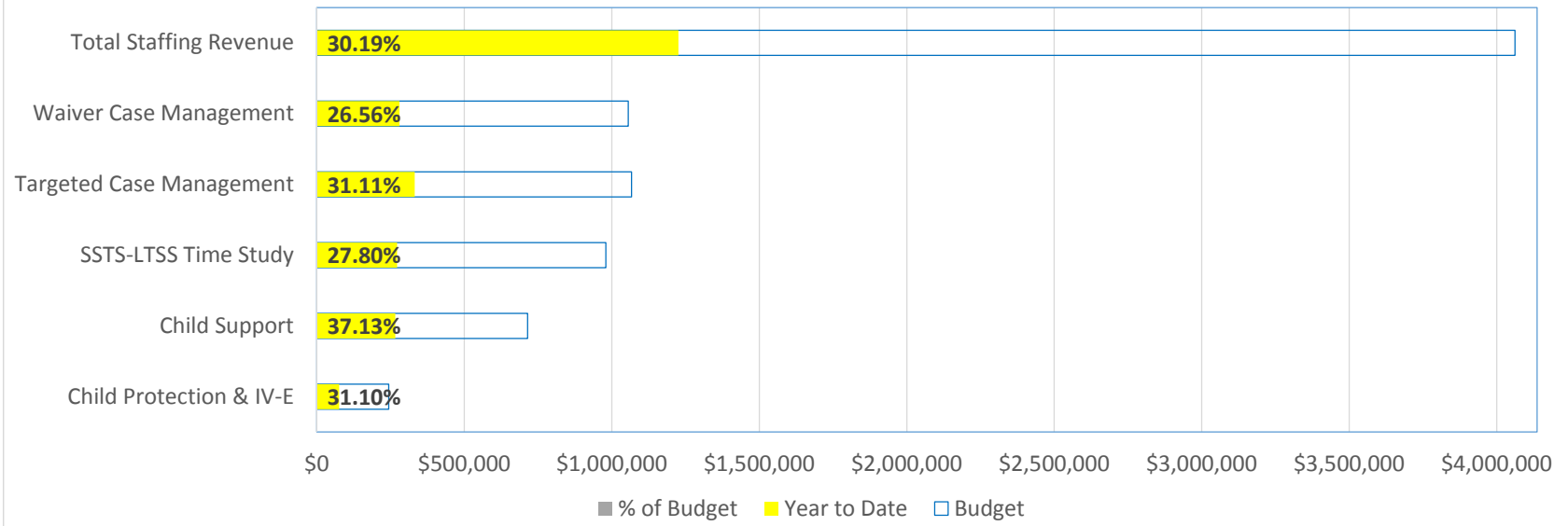
DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 Budget	% OF BUDG	% OF YEAR
FUND 11 HEALTH & HUMAN SERVICE FUND					
SALARIES					
SALARIES & BENEFITS	779,385.26	2,353,396.12	10,337,528.00	23	25
TOTAL SALARIES	779,385.26	2,353,396.12	10,337,528.00	23	25
OVERHEAD					
AGENCY OVERHEAD	145,983.65	310,250.34	1,158,556.00	27	25
TOTAL OVERHEAD	145,983.65	310,250.34	1,158,556.00	27	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	25,000.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	25,000.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 Budget	% OF BUDG	% OF YEAR
FINAL TOTALS	925,368.91	2,663,646.46	11,521,084.00	23	25

STATEMENT OF REVENUES AND EXPENDITURES

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 Budget	% OF BUDG	% OF YEAR
HHS Staffing Revenues					
11-420-640-0000-5289 CS ST MA Incentive	3,948.75-	9,331.99-	26,000.00-	36	25
11-420-640-0000-5290 CS ST Incentives	0.00	6,927.00-	12,000.00-	58	25
11-420-640-0000-5355 CS Fed Admin	42,500.00-	214,184.00-	575,000.00-	37	25
11-420-640-0000-5356 CS Fed Incentive	0.00	29,452.15-	90,000.00-	33	25
11-420-640-0000-5379 CS Fed MA Incentive	2,369.25-	5,599.19-	12,000.00-	47	25
11-430-700-0000-5292 State LTSS	0.00	91,760.00-	319,800.00-	29	25
11-430-700-0000-5383 Fed LTSS	0.00	112,039.00-	390,000.00-	29	25
11-430-700-3810-5380 Fed MA SSTS	0.00	33,248.00-	140,000.00-	24	25
11-430-710-0000-5289 Child Protection	0.00	0.00	155,596.00-	0	25
11-430-710-3810-5366 FC IV-E	75,904.42-	75,904.42-	80,000.00-	95	25
11-430-710-3810-5367 IV-E SSTS	0.00	19,123.00-	70,000.00-	27	25
11-430-710-3930-5381 CW-TCM	0.00	106,221.00-	350,000.00-	30	25
11-430-730-3050-5380 Rule 25 SSTS	0.00	16,238.00-	60,000.00-	27	25
11-430-740-3830-5366 IV-E Rule 5	0.00	0.00	8,500.00-	0	25
11-430-740-3900-5381 Child MA MH-TCM	0.00	0.00	6,000.00-	0	25
11-430-740-3900-5401 SCHA Child MH-TCM	0.00	0.00	3,000.00-	0	25
11-430-740-3910-5240 St Adult MH-TCM	288.50-	2,019.50-	3,000.00-	67	25
11-430-740-3910-5381 MA Adult MH-TCM	23,281.59-	52,127.90-	185,000.00-	28	25
11-430-740-3910-5401 SCHA Adult MH-TCM	43,275.00-	130,979.00-	400,000.00-	33	25
11-430-740-3930-5401 SCHA Pathways	5,427.52-	18,027.12-	70,000.00-	26	25
11-430-760-3930-5381 Adult VA/DD-TCM	12,765.66-	22,580.43-	50,000.00-	45	25
11-463-463-0000-5290 St AC Waiver	1,854.98-	2,608.24-	11,000.00-	24	25
11-463-463-0000-5292 St MA CM Waivers	19,457.39-	68,765.76-	250,000.00-	28	25
11-463-463-0000-5382 Fed MA CM Waivers	19,431.93-	68,714.86-	250,000.00-	27	25
11-463-463-0000-5402 SCHA Waivers	32,221.42-	101,514.28-	370,000.00-	27	25
11-463-463-0000-5429 SCHA Care Coord	14,152.93-	38,852.95-	175,000.00-	22	25
TOTAL HHS Staffing Revenues	296,879.34-	1,226,217.79-	4,061,896.00-	30	25

HHS Staffing Revenue Q1/2020
25% of Year





Minnesota Department of Human Services
Elmer L. Andersen Building
Commissioner Jodi Harpstead
Post Office Box 64998
St. Paul, Minnesota 55164-0998

May 1, 2020

Mr. Brad Anderson
Chair, Goodhue County Board of Commissioners
509 West 5th Street
Red Wing, MN 55066

Re: Calendar year 2019 financial reporting

Dear Commissioner Anderson:

It is my pleasure to commend you and your staff for perfect performance in meeting the Department of Human Services (DHS) financial reporting requirements for calendar year 2019. All key quarterly fiscal reports for programs your county participates in were submitted to our Financial Operations Division on or before the report deadlines and in perfect order. This effort required submission of 32 major reports covering the four calendar quarters of 2019. These reports are:

Local Collaborative Time Study (LCTS)*	Income Maintenance Expense
MFIP Consolidated Fund	Social Service Fund
Client Statistics	Title IV-E
SEAGR	BRASS-Based Grant Fiscal Report

*If your county participates in a "local collaborative," submission of this report may require the collection of multiple local partner reports for consolidated submission to DHS.

I know this accomplishment requires planning, an efficient operation, and teamwork within your county Human Services Department. The result is timely revenue for your county and compliance with federal reporting for us at the State. Please congratulate your management and staff on this superb effort.

Sincerely,

A handwritten signature in black ink that reads 'Jodi Harpstead'.

Jodi Harpstead
Commissioner


Cc: Nina Arneson, Goodhue County Director

Goodhue County Health and Human Services Board


5-19-2020 COVID-19 Update

- **COVID-19 Situation Awareness**
Nina Arneson HHS Director
- **Response Planning & Emergency Preparedness**
Heather Arndt, HHS Emergency Preparedness Coordinator
- **Response Operations**
Brooke Hawkenson, Family Health Supervisor
- **Response Communications**
Jessica Seide, Community Health Specialist / Public Information Officer
- **COOP - Agency Responsibilities**
Mary Heckman, Deputy Director and Mike Zorn, Deputy Director


How to Protect Yourself



Cover Your Cough



Wear a Mask



Wash Your Hands

Protect yourself and your loved ones from COVID-19:

- Stay home and avoid gatherings with people outside of your household.
- Keep 6 feet of space between yourself and other people when you do go out.
- Wear a facemask or cloth face covering when you go to places where keeping space between people is difficult, such as the grocery store or pharmacy.
- Wash your hands often.
- Cover your coughs and sneezes.
- Clean and disinfect frequently touched objects and surfaces.

Tips for wearing facemasks or cloth face coverings:

Wearing a facemask or cloth face covering helps protect others in case you're infected but don't have symptoms.

- Wash your hands before putting on your mask and after taking it off.
- Cover your nose and mouth and try to fit it snugly against the sides of your face.
- Keep the mask on your face the whole time you are out. Don't put the mask around your neck or on your forehead.
- Make sure you can breathe easily. Children younger than 2 years or anyone who has trouble breathing, or is unable to remove the mask without assistance should not wear a mask.
- Wash your mask after each time you wear it.
- Don't buy or wear surgical or N95 masks.

[Learn more about COVID-19 from MN Dept. of Health](#)

<https://www.health.state.mn.us/diseases/coronavirus/index.html>

<https://mn.gov/covid19/for-minnesotans/stay-safe-mn/stay-safe-mn.jsp>