



GOODHUE COUNTY MINNESOTA

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

GOODHUE COUNTY HEALTH & HUMAN SERVICES (GCHHS) AGENDA

ONLINE VIA GOTOMEETING

JUNE 15, 2021

10:30 A.M.

WEB ACCESS: [HTTPS://GLOBAL.GOTOMEETING.COM/JOIN/146645829](https://global.gotomeeting.com/join/146645829)

CALL IN NUMBER: [1 866 899 4679](tel:18668994679)

ACCESS CODE: 146-645-829

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."

Goodhue County Health and Human Services Board will conduct a board meeting pursuant to this section on June 15, 2021 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/146645829> or calling [1 866 899 4679](tel:18668994679) beginning at 10:20 a.m. or any time during the meeting. Access Code: 146-645-829

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[Tips for the Virtual Meeting](#)

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

Documents:

[MAY 18, 2021 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](#)

- b. Regional Fraud Prevention Investigation (FPI) Cooperative Agreement

Documents:

[FPI COOPERATIVE AGREEMENT.PDF](#)

c. Red Wing Housing & Redevelopment Authority (HRA) Bridges Cooperative Agreement

Documents:

[HRA BRIDGES COOPERATIVE AGREEMENT.PDF](#)

5. ACTION ITEMS:

a. Accounts Payable

Documents:

[ACCOUNTS PAYABLE.PDF](#)

b. Goodhue County Education District (GCED) Contracts
Kris Johnson and Cheri Johnson

Documents:

[GCED CONTRACTS.PDF](#)

c. Community Living Infrastructure (CLI) Grant
Kris Johnson and Ruth Greenslade

Documents:

[CLI GRANT.PDF](#)

d. Personnel Requests
Nina Arneson

Documents:

[PERSONNEL REQUESTS.PDF](#)
[NEW - SCHOOL ATTENDANCE SPECIALIST.PDF](#)
[NEW - HOUSING RESOURCE SPECIALIST.PDF](#)
[NEW - WAIVER NURSE OR CARE COORDINATOR.PDF](#)
[REPLACEMENT - WAIVER NURSE OR CARE COORDINATOR.PDF](#)

e. Personnel Request
Nina Arneson

Documents:

[PERSONNEL REQUEST.PDF](#)
[REPLACEMENT - FISCAL OFFICER TO ACCOUNTING SUPERVISOR.PDF](#)

6. INFORMATIONAL ITEMS:

a. Mental Health During & After COVID-19 Pandemic
Kris Johnson & Maggie Cichosz

Documents:

[MENTAL HEALTH JUNE 2021 BOARD PRESENTATION.PDF](#)

b. HHS COVID-19 Update
Nina Arneson

Documents:

7. FYI-MONTHLY REPORTS:

a. Child Protection Report

Documents:

[CHILD PROTECTION REPORT.PDF](#)

b. HHS Staffing Report

Documents:

[HHS STAFFING REPORT.PDF](#)

8. ANNOUNCEMENTS/COMMENTS:

9. ADJOURN

- a. Next ANNUAL HHS Board Meeting Will Be Thursday July 1, 2021
11:00 AM (or immediately following the County Board Meeting)
Cannon Valley Fairgrounds
Cannon Falls, Minnesota

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

**GOODHUE COUNTY
HEALTH & HUMAN SERVICES BOARD MEETING
MINUTES OF MAY 18, 2021**

The Goodhue County Health and Human Services Board convened their regularly scheduled meeting at 10:30 A.M., Tuesday, May 18, 2021, online via GoToMeeting.

Brad Anderson, Paul Drotos, Linda Flanders, Todd Greseth, Susan Johnson, Jason Majerus, and Nina Pagel.

STAFF AND OTHERS PRESENT:

Nina Arneson, Kris Johnson, Mike Zorn, Lisa Woodford, Leota Lind, Scott Schufman, Jessica Schleck, Jessica Seide, Scott Arneson, Ruth Greenslade, Maggie Cichoz, Denise Withers, Heather Arndt, and Brooke Hawkenson.

AGENDA:

On a motion by P. Drotos and seconded by B. Anderson, the Board unanimously approved the May 18, 2021 Agenda.

MEETING MINUTES:

On a motion by J. Majerus and seconded by B. Anderson, the Board unanimously approved the Minutes of the H&HS Board Meeting on April 20, 2021.

CONSENT AGENDA:

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

ACTION ITEMS:

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

INFORMATIONAL ITEMS:

Toward Zero Deaths (TZD) Update by Jessica Seide
SCHA Update by Leota Lind, CEO and Scott Schufman, CFO
COVID-19 HHS Update by Nina Arneson and Staff

Goodhue County Health & Human Services Board
Meeting Minutes of May 18, 2021

FYI & REPORTS:

Child Protection Report
GCHHS Q1 2021 Fiscal Report
HVMHC Annual Report 2020
HVMHC Residential Services Flier

ANNOUNCEMENTS/COMMENTS:

Nina Arneson announced the Annual HHS Board Meeting on July 1, 2021, may be taking place at the Cannon Valley Fair in Cannon Falls, Minnesota instead of meeting virtually. More information will be coming.

ADJOURN:

On a motion by P. Drotos and seconded by S. Johnson, the Board approved adjournment of this session of the Health & Human Services Board Meeting at or around 11:52 am.

DRAFT

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



REQUEST FOR BOARD ACTION

Requested Board Date:	June 15, 2021	Staff Lead:	Katie Bystrom
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Action Requested:	Approve Child Care Licensure Actions		

BACKGROUND:

Child Care Relicensures:

- Carol Ludwig Cannon Falls
- Jessica Kasa Cannon Falls
- Ashley Giefer Cannon Falls
- Judy Grudem Zumbrota
- Tiffany Stensland Zumbrota
- Jessica Paulsen Zumbrota
- Carrie Cordes Red Wing

Child Care Licensures:

Number of Licensed Family Child Care Homes: 76

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

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



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



REQUEST FOR BOARD ACTION

Requested Board Date:	June 15, 2021	Staff Lead:	Mike Zorn
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approve regional, multi-county Fraud Prevention Investigation (FPI) Agreement Renewal		

BACKGROUND:

Minnesota Statute §256.983 obligates the Minnesota Department of Human Services (DHS) to develop a Fraud Prevention Investigation (FPI) program. The state funds the county-administered fraud prevention investigation program through a state allocation. Goodhue County has been a part of a regional, multi-county FPI program with Wabasha, Houston and Winona since 1996. Recently, for the first time Mower County has been included in the FPI funding, and Fillmore was moved from our region to the new Mower County region for fraud prevention services. The funding for our region stayed the same.

Our regional FPI program is led and hosted by Wabasha County’s – Human Services, and Sheriff Departments. Wabasha County maintains the cooperative agreements with all the participating counties and is the recipient of the Minnesota Department of Human Services grant that provides funding for the region.

Renewal of this agreement is required for the continued funding of the FPI program. The funding amount from July 1, 2021 to June 30, 2023 is \$90,000 per year with understanding that all the expenses to be covered by this grant. At this time, Wabasha County is waiving the agreed upon administrative fee for this contract cycle, but it may be needed at the next cycle.

RECOMMENDATION: HHS recommends approval of the multi-county FPI contract renewal.

**REGIONAL ADMINISTRATIVE AGENCY
COOPERATIVE AGREEMENT
FRAUD PREVENTION INVESTIGATION PROGRAM**

This Agreement by and between WABASHA County Human Services, acting as the lead agency for the regional Fraud Prevention Investigation (FPI) program (hereinafter REGIONAL ADMINISTRATIVE AGENCY) and GOODHUE County through its Human Services Department (hereinafter COUNTY AGENCY).

WHEREAS, the REGIONAL ADMINISTRATIVE AGENCY contracts with the State of Minnesota's Department of Human Services, Financial Fraud and Abuse Investigations Division (hereinafter STATE) to administer the FPI program in GOODHUE County, under contract number GRK% 194359 which is incorporated herein by reference.

WHEREAS, the intent of this Agreement achieves mutually beneficial goals by establishing the organizational and operational structures for providing FPI services to counties in a geographical area in accordance with operational requirements, forms and reporting mechanisms as contained in the FPI Program Guidelines (FPI Guidelines) which are incorporated herein by reference.

NOW, THEREFORE, it is agreed:

1. **TERM OF AGREEMENT.**

1.1 **Effective date.** The effective date of this Agreement is 07/01/2021.

1.2 **Expiration date.** The expiration date of this Agreement is 06/30/2023.

2. **COUNTY AGENCY DUTIES.** The COUNTY AGENCY will:

2.1 Cooperate with the STATE and the FPI REGIONAL ADMINISTRATIVE AGENCY in fulfilling goals and objectives of the FPI Program pursuant to the FPI Guidelines, United States laws, federal regulations, State of Minnesota (State or state) laws, applicable Department rules and county ordinances.

2.2 Cooperate with the REGIONAL ADMINISTRATIVE AGENCY in monitoring fraud referrals, completed investigations and case actions taken as a result of fraud prevention investigations.

2.3 Cooperate with the REGIONAL ADMINISTRATIVE AGENCY and the STATE in submission of narrative, financial and/or statistical reports either as required in FPI Guidelines or as requested by the STATE.

2.4 Ensure that eligibility workers under its control make FPI referrals to the investigator representing the REGIONAL ADMINISTRATIVE AGENCY, cooperate with case action reporting requirements and participate in funded FPI program related training.

2.5 Evaluate FPI referral rates among COUNTY AGENCY eligibility workers in order to help identify fraud detection training needs.

2.6 Refer for criminal prosecution public assistance recipients and providers who have committed intentional program violations (IPV) or, when such prosecutions are declined by a COUNTY AGENCY attorney or the COUNTY AGENCY decides not to pursue criminal

prosecution of an IPV, pursue administrative disqualification of a provider or recipient in lieu of criminal prosecution in compliance with Minnesota Statutes, section 256.046.

3. **REGIONAL ADMINISTRATIVE AGENCY DUTIES.** The REGIONAL ADMINISTRATIVE AGENCY will:

- 3.1 Provide FPI services and report FPI Program activity to the COUNTY AGENCY.
- 3.2 Use qualified investigative staff to provide FPI services.
- 3.3 Annually provide training to COUNTY AGENCY eligibility workers in fraud detection to assist them in identifying cases that should be referred. Provide training to COUNTY AGENCY eligibility workers on FPI forms and procedures.
- 3.4 Assist the COUNTY AGENCY in the identification and disqualification of individuals through the administrative disqualification hearing process when a completed fraud prevention investigation identifies an intentional program violation and no criminal action is contemplated.

4. **CONSIDERATION AND PAYMENT.** There will be no funds paid out by either agency under this Agreement. Each agency will be responsible for its own costs in performing its stated duties.

5. **AUTHORIZED REPRESENTATIVES.**

- 5.1 **REGIONAL ADMINISTRATIVE AGENCY.** The REGIONAL ADMINISTRATIVE AGENCY's authorized representative is **John Dahlstrom** or his/her successor.
- 5.2 **COUNTY AGENCY.** The COUNTY AGENCY's authorized representative is **Nina Arneson** or his/her successor.

6. **ASSIGNMENT.** COUNTY AGENCY shall neither assign nor transfer any rights or obligations under this Agreement without the prior written consent of the REGIONAL ADMINISTRATIVE AGENCY.

7. **AMENDMENTS.** Any amendments to this Agreement shall be in writing, and shall be executed by the same parties who executed the original Agreement, or their successors in office.

8. **CANCELLATION.** This Agreement may be canceled by the REGIONAL ADMINISTRATIVE AGENCY or COUNTY AGENCY at any time, with or without cause, upon thirty (30) days written notice to the other party.

9. **STATE AUDITS.** Under Minn. Stat. §16C.05, subd. 5, the books, records, documents, and accounting procedures and practices of the COUNTY AGENCY and its employees, agents, or subcontractors relevant to this contract shall be made available and subject to examination by the REGIONAL ADMINISTRATIVE AGENCY and STATE, including the FPI contracting Agency/Division, Legislative Auditor, and State Auditor for a minimum of six years from the end of this Agreement.

10. **INFORMATION PRIVACY AND SECURITY.** For purposes of executing its responsibilities and to the extent set forth in this Agreement, the COUNTY AGENCY will be processing health care bills or payments on behalf of the State, and/or conducting other health care operations on behalf of State. In carrying out its duties, COUNTY AGENCY will be handling protected health information and other private information concerning individual State clients. As such, COUNTY AGENCY

agrees to be bound by the state and federal laws protecting the privacy of information, including the Data Practices Act, Minnesota Health Records Act, Health Insurance Portability Accountability Act (HIPAA), Health Information Technology for Economic and Clinical Health Act (HITECH) (42 USC 201 note, 42 USC 17931), and federal drug and alcohol treatment regulations.

Because COUNTY AGENCY is handling protected health information and providing health care services to clients on behalf of State, COUNTY AGENCY must comply with the terms of the Information Privacy Agreement signed by its County Administrator and the STATE, which is on file in the State Privacy Official's Office located at State's Central Office, 540 Cedar Street, St. Paul, MN 55164-0998 and is incorporated herein by reference.

11. **LIABILITY.** The COUNTY AGENCY and the REGIONAL ADMINISTRATIVE AGENCY agree that each party will be responsible for its own acts and the results thereof to the extent authorized by law and shall not be responsible for the acts of the other and the results thereof. The COUNTY AGENCY and the REGIONAL ADMINISTRATIVE AGENCY liabilities shall be governed by the provisions of the Municipal Tort Claims Act, Minnesota Statutes, section 466.01 to 466.15, and other applicable law.

12. **DEBARMENT BY STATE, ITS DEPARTMENTS, COMMISSIONS, AGENCIES OR POLITICAL SUBDIVISIONS**

COUNTY AGENCY certifies that neither it nor its principals is presently debarred or suspended by the state, or any of its departments, commissions, agencies, or political subdivisions. COUNTY AGENCY'S certification is a material representation upon which this contract is based. COUNTY AGENCY shall provide immediate written notice to the REGIONAL ADMINISTRATIVE AGENCY'S Authorized Representative if at any time it learns that this certification was erroneous when submitted or becomes erroneous by reason of changed circumstances.

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY, AND VOLUNTRARY EXCLUSION

Federal money will be used or may potentially be used to pay for all or part of the work under the grant contract, therefore the COUNTY AGENCY must certify the following, as required by the regulations implementing Executive Order 12549. COUNTY AGENCY'S certification is a material representation upon which this contract award is based.

CERTIFICATION REGARDING DEBARMENT, SUSPENSION INELIGIBILITY AND VOLUNTARY EXCLUSION- LOWER TIER COVERED TRANSATIONS

1. The prospective lower tier participant certifies, by submission of this contract, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
 2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this contract.
13. **JURISDICTION AND VENUE.** This contract, and amendments and supplements thereto, shall be governed by the laws of the State of Minnesota. Venue for all legal proceedings arising out of this contract, or breach thereof, shall be in the state or federal court with competent jurisdiction in REGIONAL ADMINISTRATIVE AGENCY'S County, Minnesota.

14. **WAIVER.** If the REGIONAL ADMINISTRATIVE AGENCY fails to enforce any provision of this contract, that failure does not waive the provision or the REGIONAL ADMINISTRATIVE AGENCY'S right to enforce it.
15. **CONTRACT COMPLETE.** This contract contains all negotiations and agreements between the REGIONAL ADMINISTRATIVE AGENCY and the COUNTY AGENCY. No other understanding regarding this contract, whether written or oral may be used to bind either party.
16. **OTHER PROVISIONS.** None.

IN WITNESS WHEREOF, the parties have caused this Agreement to be duly executed intending to be bound thereby.

APPROVED:

COUNTY AGENCY:

BY: _____

TITLE: _____

DATE: _____

REGIONAL ADMINISTRATIVE AGENCY:

BY: *[Signature]*

TITLE: SOCIAL SERVICES DIRECTOR

DATE: 5/28/2021

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



REQUEST FOR BOARD ACTION

Requested Board Date:	June 15, 2021	Staff Lead:	Abby Villaran
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approve Red Wing Housing Authority & GCHHS Bridges Cooperative Grant Agreement		

BACKGROUND:

The Bridges Program helps persons with a mental illness access housing, treatment, supportive services, and income supports; and to promote cooperation and partnerships with local entities.

Previously, Red Wing HRA and GCHHS received 9 vouchers, for this agreement it has increased to 12 vouchers to help those in our community.

Term of the agreement is July 1, 2021, through June 30, 2023.

RECOMMENDATION: HHS recommends approval of the HRA Bridges Cooperative Grant Agreement.

Red Wing Housing and Redevelopment Authority & Goodhue County Health and Human Services Bridges Cooperative Agreement

I. PARTIES

This agreement is made on this 1st day of JULY, 2021, by and between Red Wing Housing and Redevelopment Authority (HA) and Goodhue County Health and Human Services (LMH Entity).

II. TERM OF AGREEMENT

Term of the agreement is July 1, 2021, through June 30, 2023.

III. PURPOSE

This document is a Cooperative Agreement to help persons with a mental illness access housing, treatment, supportive services, and income supports; and to promote cooperation between the HA and LMH Entity.

IV. GUIDING PRINCIPLES

A. Individuals with mental illness will have fair and equitable access to housing.

Awarding of housing subsidy will be based solely on meeting eligibility criteria, not on participation in service programs.

B. The housing agency (HA) and the local mental health entity (LMH Entity) jointly recognize that:

1. Persons with a mental illness are diverse in terms of their strengths, motivations, goals, backgrounds, needs, and disabilities.

2. Not all individuals with a mental illness who apply for housing will need to be Participants of the LMH Entity or linked to supportive services in order to live successfully in the community.

3. People with a mental illness are members of the community with all the rights, privileges, opportunities, and responsibilities accorded other individuals.

4. People with a mental illness have the right to meaningful choices in matters affecting their lives.

5. In developing the Cooperative Agreement and managing the grant, the input of Participants and persons with a mental illness in the community will be sought.

6. Nothing in this agreement precludes the LMH Entity from providing services to housing applicants or participants who are not LMH Entity participants and who request mental health services while the Cooperative Agreement is in effect.

C. Therefore, the HA and LMH Entity resolve:

1. To make available as many housing options as possible, coordinated with Behavioral Health Service Agencies and partners providing Housing Stabilization Services and tailored to meet the needs and preferences of each person with a mental illness;
2. To help ensure that housing and supportive services are, to the extent possible:
 - a. Based on the individual's needs, preferences, and choices;
 - b. Safe, decent, sanitary, affordable, and accessible to transportation;
 - c. offered in the least restrictive manner; and
 - d. Flexible in terms of site, intensity, and schedule.
3. To work cooperatively to achieve the stated purpose.

V. RESPONSIBILITIES

A. The LMH Entity will (as agreed to by the Goodhue County Health and Human Services authorities):

1. Be responsible for outreach to institutional, segregated, correctional supervision, and homeless settings where eligible Participants may currently reside.
2. Be responsible for identifying and referring to the HA or to the local Continuum of Care Coordinated Assessment low-income individuals in need of housing who have mental illnesses and/or individuals who have mental illness who are also homeless. This may include determining initial eligibility of the mental illness and/or when applicable, the homelessness status.
3. Assisting people with the Bridges application process.
4. Inform Participants of the range of housing options that could meet their needs and preferences. Encourage participants to consider all housing in the community.
5. Provide assistance to participants in understanding their rights and responsibilities under a lease. This includes explaining the eviction notification and appeals process.

6. Provide consultation to the HA in the management of disputes or differences between Participants or between Participants and the HA.
7. Provide assistance, advice and services to individuals with mental illness who are experiencing problems related to housing in resolving disputes or other differences with other Participants or with the HA.
8. Encourage participants to make rental payments in a timely manner.
9. Assist participants in maintaining the unit in good repair.
10. Provide emergency response on a 24-hour basis to Participants and/or the HA. Work with Participants to develop individualized crisis plans. Twenty-four (24) hour service will be provided by the Southeast Minnesota Mobile Crisis Response Unit, <https://www.crisisresponsesoutheastmn.com/>.
11. Provide certification, with the consent or agreement of the applicant or participant, that the LMH Entity is providing and will continue to provide services to the applicant or participant. Such assistance may continue as long as the Participant is eligible for and requests it, throughout their tenure in housing.
12. Provide, or identify and refer to specific agencies to provide, any necessary mental health and support services to Participants, as needed and as agreed to by the Participant. These services may include the following:
 - a. Case management services;
 - b. Diagnosis and treatment of mental illness;
 - c. Services targeted to assist Participants in maintaining their housing and preventing future episodes of homelessness;
 - d. Rehabilitation, vocational training, and employment assistance;
 - e. Income support and benefits;
 - f. General health care and dental services;
 - g. Alcohol and/or other drug abuse treatment;
 - h. Consumer and family involvement; and

i. Legal protection (including protection provided under civil rights laws, such as the Fair Housing Act, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990).

B. The HA will:

1. Provide to the LMH Entity a copy of its formally adopted admission policies. The admission policy will include, but is not limited to:

a. A Participant selection and assignment plan which covers:

- The organization of the waiting list;
- The method by which applicants will be chosen from the waiting list and offered available Bridges vouchers, including any of the HA's selection preferences and their relative weights; and
- The process for maintaining the waiting list, including notification of applicants, situations where the list may be closed, and monitoring the length of wait time.

b. the HA's standards for determining:

- Eligibility;
- Suitability for occupancy; and
- The bedroom size of the voucher.

c. The HA's verification policy and procedures.

2. Provide to the LMH Entity a copy of the HA's:

a. Requirements for maintaining participation in the Bridges program;

b. Leasing procedures;

c. Appeals and/or grievance procedures;

d. Policy regarding holding units for Participants who are unavoidably absent from their units for a period of time, as in the case of extended medical or psychiatric crisis.

3. Provide new Participants with an explanation of Participant rights and responsibilities, including payment of rent and income reporting requirements.
4. Provide new Participants with an orientation of the Bridges Voucher Program.
5. Work with supportive service agencies to provide information to new Participants to familiarize them with community resources.
6. Notify Participants when other rental subsidies become available, including notification when the Section 8 Housing Choice Voucher waiting list will be open and other permanent rental subsidy opportunities become available.

C. Both agencies will jointly:

1. Work to reduce barriers for persons who are experiencing homelessness.
2. Reach out to institutions and other segregated settings to inform prospective recipients about housing and services.
3. Meet regularly during the term of the grant to review program performance, including referral and intake processes, housing choice, and Participant comments. Mandatory program performance reviews will take place the third Wednesday of every January, April, July, and October during the grant cycle.

Meetings are scheduled as follows: July 21, 2021, October 20, 2021, January 19, 2022, April 20, 2022, July 20, 2022, October 19, 2022, January 18, 2023, and April 19, 2023.

Additional program performance reviews will be scheduled as needed.

4. Develop and regularly update a list of all the current housing resources available to persons with low incomes in the community, including all publicly and privately-owned assisted housing, consulting with the HUD field office to help ensure completeness of the list. This list should include both housing programs that are administered by the HA and those that are not.
5. Work together to preserve and/or increase the supply of affordable and supportive housing available to persons with mental illnesses and provide as broad a range of choices (e.g., locale, level of services, integration with non-disabled persons) as possible by:

- a. Strengthening relationships with property owners, educating property owners about the Bridges program, and seeking new property owners to participate in the Bridges program; and
 - b. Educating program Participants on available housing programs and allowing Participant choice in which to apply for in addition, or in replacement of, the Housing Choice Voucher program.
6. Administer all of its policies and procedures on a nondiscriminatory basis in accordance with the Fair Housing Act, 42 U.S.C. 3601, which prohibits discrimination in the sale or rental of housing on the basis of disability, and Section 504 of the Rehabilitation Act of 1973 which states that no persons shall be denied an opportunity to participate in or benefit from any federally assisted program because of disability. In particular, under the Fair Housing Act, the available units may be used by individuals with mental disorders, who are not referred by, or Participants of, the mental health authority, but who meet housing program eligibility criteria.
7. Develop, in accordance with concerns for client confidentiality, a mutual referral process for any Participant who needs, and who appears eligible for, mental health, supportive services, or housing. When referrals are made, the parties will help ensure the coordination of support services and housing to the mutual client.
8. Provide technical assistance and training efforts to include:
 - a. Training for mental health staff on HUD housing assistance programs;
 - b. Training for HA staff on understanding mental illnesses, long-term homelessness, mental health programs and the service delivery system, and in recognizing the unique needs, strengths, and skills of individuals with mental health illnesses;
 - c. Training for landlords and managers of rental units on the advantages of renting under the Section 8 Housing Choice Voucher, understanding the Participant population, and the ongoing cooperative efforts between housing and mental health authorities to meet the housing needs of the population; and
 - d. Training for both agencies on fair housing and reasonable accommodation requirements of the Fair Housing Amendments Act of 1988, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990.
9. Develop and document strategies for preventing and managing behavioral health and housing crises involving Participants.

10. Identify and adhere to requirements or standards regarding confidentiality of Participant information, such as requiring the Participant's permission to release information to either agency.

11. Involve participants and, as requested by the Participant, family and community members, in efforts to plan, deliver, monitor, and evaluate the quality of housing and supportive services.

12. Develop and maintain a list of current community behavioral health services and providers of Housing Stabilization Services available in the service area.

VI. PARTICIPANT RIGHTS AND RESPONSIBILITIES

A. No participant will be evicted or otherwise penalized by the HA solely for terminating status as a recipient of services from the LMH Entity, provided they continue to fulfill residency requirements specified in the lease agreement.

B. A participant who begins to fail to meet residency requirements and who ceases receiving services from the LMH Entity will, to the extent possible, have the opportunity to re-establish the service relationship with the LMH Entity, or alternatively to make similar, equivalent arrangements with another agency chosen by the individual, which may assist in meeting residency requirements and working to maintain housing stability.

VII. IMPLEMENTATION AND EVALUATION

A. Describe issues related to implementation and evaluation such as:

1. How the agreement can be modified, amended or terminated;

a. This agreement can be modified, amended or terminated by written, signed agreement between the HA and the LMH Entity.

2. How problems in implementing the agreement will be resolved;

a. Any problems encountered in the implementation of the agreement will be resolved through discussion between the HA and the LMH staff who are involved with implementing the Cooperative Agreement. If conflict cannot be resolved, the executive directors of the HA and the LMH can be included in the discussions to resolve any issues.

3. How the Cooperative Agreement will be reviewed to determine if the policies and procedures are effective in helping individuals access and maintain housing in a manner that is satisfactory to participants, the LMH Entity, the HA, and housing owners and managers;

a. Review of individuals access and maintenance of housing will be completed at the quarterly meetings between the HA and the LMH Entity. Input from

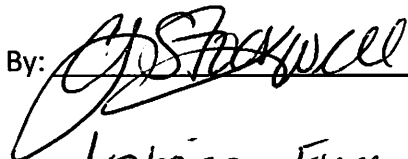
participants and housing owners and managers will be brought to this meeting by the HA and the LMH Entity. Poor outcomes will be evaluated to see if there are changes needed in the Cooperative Agreement that would lead to better outcomes going forward. When there are individual concerns, those will be address as needed and meetings between all parties may be scheduled.

B. Designate liaisons to oversee, facilitate, and periodically monitor and evaluate the Agreement;

- a. The Red Wing HRA's Section 8 Housing Specialist and the Goodhue County Health and Human Service's Social Services Supervisor will be responsible for overseeing, facilitating, and periodically monitoring and evaluating the Cooperative Agreement.

VIII. SIGNATURES

Red Wing Housing and Redevelopment Authority
HOUSING AGENCY

By: 

Its: Interim Executive Director

Executed on 6/7/2021

Goodhue County Health and Human Services
LOCAL MENTAL HEALTH ENTITY

By: _____

Its: _____

Executed on _____

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



REQUEST FOR BOARD ACTION

Requested Board Date:	June 15, 2021	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 May 2021 HHS Warrant Registers		

BACKGROUND:

This is a summary of Goodhue County Health and Human Services Warrant Registers for: May 2021.

	Date of Warrant		Check No.	Series	Total Batch
IFS	May 7, 2021	ACH	33354	33358	\$14,812.07
IFS	May 7, 2021		456357	456394	\$33,797.02
IFS	May 14, 2021	ACH	33381	33395	\$30,194.39
IFS	May 14, 2021		456467	456488	\$31,237.55
IFS	May 21, 2021	ACH	33427	33439	\$83,224.23
IFS	May 21, 2021		456593	456593	\$73,727.24
IFS	May 28, 2021	ACH	33496	33518	\$5,490.40
IFS	May 28, 2021		456683	456741	\$21,426.69
SSIS	May 28, 2021	ACH	33452	33457	\$58,328.43
SSIS	May 28, 2021		456633	456678	\$172,467.39
IFS	May 28, 2021	ACH	33468	33495	\$3,339.18
IFS	May 28, 2021		456679	4566682	\$1,222.10
				total	<u>\$529,266.69</u>

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:	June 15, 2021	Staff Lead:	Kris Johnson
Consent Agenda:	<input type="checkbox"/> Yes <input checked="" 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, 2021 to June 30, 2022.		

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 in Goodhue County. Each time when this contract is renewed, the contract is carefully reviewed, and updated as needed together by GCHHS and GCED to better meet the needs, and continually improve the collaborative work.

For many years, one important part of this collaboration has been the shared social work position to provide early childhood services to families in Goodhue County. This position has allowed GCHHS and GCED to collaborate to serve families when their children have a newly identified developmental concern when those issues are most responsive to intervention.

A new element of this collaboration this time is the addition of a school attendance specialist. Access to education is a clear social determinant of health, and truancy is a stepping stone to juvenile delinquency, increased risk of drug and alcohol abuse, and higher risk of unemployment. Since March, 2020, GCHHS responded to 160 reports of concern regarding school issues as the primary identified concern. We are looking forward to this new opportunity to collaborate and improve school attendance and success for many students.

There are no changes to the funding amounts of these contracts.

RECOMMENDATION: Goodhue County HHS Recommends Approval as Presented.

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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, 2021 to June 30, 2022.

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 Family Based 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>\$205,873.00</u>
2.	<u>Child Rule 79 Case Management - 490X</u>	<u>\$100,000.00</u>
3.	<u>Family Based Counseling—162X</u>	<u>\$60,000.00</u>
4.	<u>Family Group Decision Making—166X</u>	<u>\$10,000.00</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 with school attendance concerns. 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 WHEREEOF, 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, 2021** to **June 30, 2022**.

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.
- d. Agency will provide school social worker to serve as a Parent Support Specialist to receive and act on referrals of children and families from parents, school, and county staff. The Parent Support Specialist will be a GCED employee. The Parent Support Specialist will be located one day per week at the GCHHS building and will take work direction from the GCHHS Social Services Supervisor that may include, but is not limited to, administration of Family Support Grant and Rule 185 case management.

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:	June 15, 2021	Staff Lead:	Kris Johnson
Consent Agenda:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approve acceptance of Community Living Infrastructure (CLI) Grant and Contract		

BACKGROUND:

In 2017, the Minnesota Legislature passed a comprehensive housing package, adding language to the Minnesota Housing Support Act (Chapter 256I), to increase and improve opportunities for Minnesotans with disabling conditions to live in the community. The housing package included grant funding aimed at supporting counties and tribes to integrate housing resources into their human service delivery systems throughout the state.

Goodhue County Health and Human Services (GCHHS) seeks to improve outcomes and enhance responsiveness to individuals and families living in Goodhue County by providing a Housing Resource Specialist (HRS) as part of the Health and Human Services staff. The goal is for the Housing Resource Specialist to address the many gaps along the housing service continuum in Goodhue County. This grant allows GCHHS to create a specific focus on housing for the first time.

GCHHS received the Community Living Infrastructure (CLI) Minnesota Department of Human Services (DHS) grant of \$195,700.00 to hire a Housing Resource Specialist.

RECOMMENDATION: Goodhue County HHS Recommends Approval as Requested.



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Minnesota Department of Human Services County Grant Contract

This Grant Contract, and all amendments and supplements to the contract (“CONTRACT”), is between the State of Minnesota, acting through its Department of Human Services, Housing and Support Services Division (“STATE”) and **Goodhue County**, an independent grantee, not an employee of the State of Minnesota, located at 426 West Avenue, Red Wing, MN 55066 (“COUNTY”).

RECITALS

STATE, pursuant to Minnesota Statutes, section 256.01, subdivision 2(a)(6), has authority to enter into contracts for the following services: the Community Living Infrastructure Grant Program to provide support for people with disabilities and housing instability who want to live in the community. The legislation identifies the funding is for grants that may be used for: (1) outreach to locate and engage people who are homeless or residing in segregated settings to screen for basic needs and assist with referral to community living resources; (2) building capacity to provide technical assistance and consultation on housing and related support service resources for persons with both disabilities and low income; or (3) streamlining the administration and monitoring activities related to housing support funds.

STATE, in accordance with Minnesota Statutes, section 13.46, is permitted to share information with COUNTY.

COUNTY represents that it is duly qualified and willing to perform the services set forth in this CONTRACT to the satisfaction of STATE.

THEREFORE, the parties agree as follows:

CONTRACT

1. CONTRACT TERM AND SURVIVAL OF TERMS.

1.1. Effective date: This CONTRACT is effective on **July 1, 2021**, or the date that STATE obtains all required signatures under Minnesota Statutes, section 16B.98, subdivision 5, whichever is later.

1.2. Expiration date. This CONTRACT is valid through **June 30, 2023**, or until all obligations set forth in this CONTRACT have been satisfactorily fulfilled, whichever occurs first.

1.3. No performance before notification by STATE. COUNTY may not begin work under this CONTRACT, nor will any payments or reimbursements be made, until all required signatures have been

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obtained per Minn. Stat. § 16B.98, subd. 7, and COUNTY is notified to begin work by STATE's Authorized Representative.

1.4. Survival of terms. COUNTY shall have a continuing obligation after the expiration of CONTRACT to comply with the following provisions of CONTRACT: 9. Liability; 10. Information Privacy and Security; 11. Intellectual Property Rights; 13.1. State audit; and 14. Jurisdiction and Venue.

1.5. Time is of the essence. COUNTY will perform its duties within the time limits established in CONTRACT unless it receives written approval from STATE. In performance of CONTRACT, time is of the essence.

2. COUNTY'S DUTIES.

2.1 Duties. COUNTY shall perform duties in accordance with **Attachment A**, Budget, which is attached and incorporated into this CONTRACT. GRANTEE must:

- A. Increase and improve opportunities for Minnesotans with disabling conditions and housing instability to live successfully in the community, per Minnesota Statutes, section 256.01, subdivision 2 (a)(6).

- B. Advancing the grant program through the following activities:
 - a. Conducting Outreach
 - i. Outreach efforts must locate and build relationships with individuals who are homeless, unstably housed, or who want to relocate from hospitals, treatment centers, corrections, or other facilities into their own home in the community.
 - ii. GRANTEE must identify individuals in need and to assist with referral services to community living resources to meet an individual's needs and choices.
 - iii. GRANTEE may use funds for activities: that are outlined in Attachment A, the project budget, which is attached and incorporated into this contract; and are included in this list:
 - 1. Administrative costs directly associated with this activity;
 - 2. Staff Salaries;
 - 3. Work related travel for staff in state;
 - 4. Training costs which can include travel to trainings and necessary meetings;
 - 5. Transportation directly related to assisting individuals with attaining housing; and
 - 6. Application fees for rental housing applications.
 - b. Hiring Housing Resource Specialists;
 - i. GRANTEE must hire regional housing specialists and provide them with training to support individuals with disabilities, advocates, providers, and

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- government staff. Specifically, GRANTEE must hire and train housing resource specialists as stated in Attachment A.
- ii. Specialists will assist individuals with gathering necessary documentation together to access and connect to resources or benefits.
 - iii. GRANTEE may use funds for activities: that are outlined in Attachment A; and that are included in this list:
 - 1. Administrative costs directly associated with this activity;
 - 2. Staff Salaries;
 - 3. Work related travel for staff in state; and
 - 4. Training costs on program eligibility criteria for individuals and providers, housing-specific resources, including HUD, MN Housing, DHS, public housing authorities, and private-market resources available to individuals with disabilities and low-income.
- c. Administration and/or Monitoring of the DHS Housing Support Program
- i. GRANTEE must administer and monitor the Housing Support program as stated in Attachment A.
 - ii. GRANTEE may use funds for activities: that are outlined in Attachment A; and that are included in this list:
 - 1. Funding for Housing Support staff in administrative areas including but not limited to eligibility, contract management, financial, compliance monitoring and social services;
 - 2. Housing Support training costs including travel to trainings and necessary meetings; and
 - 3. Technical costs.
- C. Issue an annual report to the Department of Human Services each year, 30 days following the end of the fiscal year, including the following information:
- a. The number of individuals being served in the program;
 - b. The target population served by the program;
 - c. Progress on the project goals or objectives;
 - d. Results according to the methods outlined in the proposal's evaluation plan;
 - e. The funds expended for the project compared to the funds budgeted;
 - f. Recommendations and requests for additional services or training needed to address homelessness and housing needs in their community;
 - g. Other information as requested by the Department.

2.2 Accessibility. Any information systems, tools, content, and work products produced under this CONTRACT, including but not limited to software applications, web sites, video, learning modules, webinars, presentations, etc., whether commercial, off-the-shelf (COTS) or custom, purchased or developed, must comply with the [Minnesota IT \(MN.IT\) Accessibility Standards](#), as updated on June 14,

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2018. This standard requires, in part, compliance with the Web Content Accessibility Guidelines (WCAG) 2.0 (Level AA) and Section 508 Subparts A-D.

Information technology deliverables and services offered must comply with the MN.IT Services Accessibility Standards and any documents, reports, communications, etc. contained in an electronic format that COUNTY delivers to or disseminates for the STATE must be accessible. (The relevant requirements are contained under the “Standards” tab at the link above.) Information technology deliverables or services that do not meet the required number of standards or the specific standards required may be rejected and STATE may withhold payment pursuant to clause 3.2(a) of CONTRACT.

3. CONSIDERATION AND TERMS OF PAYMENT.

3.1 Consideration. STATE will pay for all services satisfactorily provided by COUNTY under this CONTRACT.

- a. Compensation.** COUNTY will be paid in accordance with **Attachment A**, Budget, which is attached and incorporated into this CONTRACT.
 1. COUNTY must obtain STATE written approval before changing any part of the budget. Notwithstanding Clause 16.1 of CONTRACT, shifting of funds between budget line items does not require an amendment, but does require written approval by the STATE.
 2. If COUNTY’s approved budget changes proceed without an amendment pursuant to this clause, COUNTY must record the budget change in EGMS or on a form provided by STATE.
- b. Travel and subsistence expenses.** Reimbursement for travel and subsistence expenses actually and necessarily incurred as a result of COUNTY's performance under this CONTRACT shall be no greater an amount than provided in the most current Commissioner’s Plan (which is incorporated by reference), promulgated by the Commissioner of Minnesota Management and Budget as specified in the [Commissioner’s Plan](#).¹ COUNTY shall not be reimbursed for travel and subsistence expenses incurred outside the geographical boundaries of Minnesota unless it has received prior written approval from STATE. Minnesota shall be considered the home state for determining whether travel is out of state.
- c. Total obligation.** The total obligation of STATE for all compensation and reimbursements to COUNTY shall not exceed **one hundred and ninety-five thousand and seven hundred dollars (\$195,700.00)**.
- d. Withholding.** For compensation payable under this CONTRACT, which is subject to withholding under state or federal law, appropriate amounts will be deducted and withheld by STATE as required.

3.2. Terms of payment

- a. Invoices.** Payments shall be made by STATE promptly after COUNTY submits an invoice for services performed and the services have been determined acceptable by STATE's authorized

¹ <https://mn.gov/mmb/employee-relations/labor-relations/labor/commissioners-plan.jsp>

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agent pursuant to Clause 4.1. Invoices shall be submitted in a form prescribed by STATE, and according to the following schedule: **quarterly reimbursements and progress reports due 30 days after the end of each quarter**. If STATE does not prescribe a form, COUNTY may submit invoices in a mutually agreed invoice format.

4. CONDITIONS OF PAYMENT.

4.1. Satisfaction of STATE. All services provided by COUNTY pursuant to this CONTRACT shall be performed to the satisfaction of STATE, as determined at the sole discretion of its authorized representative, and in accord with all applicable federal, state, and local laws, ordinances, rules and regulations. COUNTY shall not receive payment for work found by STATE to be unsatisfactory, or performed in violation of federal, state or local law, ordinance, rule or regulation.

4.2. Payments to subcontractors. (If applicable) As required by Minn. Stat. § 16A.1245, COUNTY must pay all subcontractors, within ten (10) calendar days of COUNTY's receipt of payment from STATE for undisputed services provided by the subcontractor(s) and must pay interest at the rate of 1-1/2 percent per month or any part of a month to the subcontractor(s) on any undisputed amount not paid on time to the subcontractor(s).

4.3. Administrative costs and reimbursable expenses. Pursuant to Minn. Stat. § 16B.98, subd. 1, COUNTY agrees to minimize administrative costs as a condition of this grant. COUNTY shall ensure that costs claimed for reimbursement shall be actual costs, to be determined in accordance with 2 C.F.R. § 200.0 et seq., COUNTY shall not invoice STATE for services that are reimbursable via a public or private health insurance plan. If COUNTY receives funds from a source other than STATE in exchange for services, then COUNTY may not receive payment from STATE for those same services. COUNTY shall seek reimbursement from all sources before seeking reimbursement pursuant to CONTRACT.

5. PAYMENT RECOUPMENT.

COUNTY must reimburse STATE upon demand or STATE may deduct from future payments under this CONTRACT or future CONTRACTS the following:

- a. Any amounts received by COUNTY from the STATE for contract services which have been inaccurately reported or are found to be unsubstantiated;
- b. Any amounts paid by COUNTY to a subcontractor not authorized in writing by STATE;
- c. Any amount paid by STATE for services which either duplicate services covered by other specific grants or contracts, or amounts determined by STATE as non-allowable under the line item budget, clause 2.1(a);
- d. Any amounts paid by STATE for which COUNTY'S books, records and other documents are not sufficient to clearly substantiate that those amounts were used by COUNTY to perform contract services, in accordance with clause 1, COUNTY'S Duties; and/or
- e. Any amount identified as a financial audit exception.

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6. CANCELLATION.

6.1. For cause or convenience. In accord with Minn. Stat. § 16B.04, subd. 2, the Commissioner of Administration has independent authority to cancel this CONTRACT. CONTRACT may be canceled by STATE or COUNTY at any time, with or without cause, upon thirty (30) days written notice to the other party. The thirty (30) day notice may be waived, in writing, by the party receiving notice. In the event of such a cancellation, COUNTY shall be entitled to payment, determined on a pro rata basis, for work or services satisfactorily performed. STATE has the right to suspend or terminate this CONTRACT immediately when STATE deems the health or welfare of the service recipients is endangered, when STATE has reasonable cause to believe that COUNTY has breached a material term of the CONTRACT, or when COUNTY's non-compliance with the terms of the CONTRACT may jeopardize federal financial participation.

6.2. Insufficient funds. STATE may immediately terminate this CONTRACT if it does not obtain funding from the Minnesota Legislature, or other funding source; or if funding cannot be continued at a level sufficient to allow for the payment of the services covered here. Termination will be by written notice to COUNTY. STATE is not obligated to pay for any services that are provided after the effective date of termination. COUNTY will be entitled to payment, determined on a pro rata basis, for services satisfactorily performed to the extent that funds are available. STATE will not be assessed any penalty if the CONTRACT is terminated because of the decision of the Minnesota Legislature, or other funding source, not to appropriate funds. STATE must provide COUNTY notice of the lack of funding within a reasonable time of STATE's receiving that notice.

6.3. Breach. Notwithstanding clause 6.1, upon STATE's knowledge of a curable material breach of the CONTRACT by COUNTY, STATE shall provide COUNTY written notice of the breach and ten (10) days to cure the breach. If COUNTY does not cure the breach within the time allowed, COUNTY will be in default of this CONTRACT and STATE may cancel the CONTRACT immediately thereafter. If COUNTY has breached a material term of this CONTRACT and cure is not possible, STATE may immediately terminate this CONTRACT.

7. AUTHORIZED REPRESENTATIVES, RESPONSIBLE AUTHORITY, and PROJECT MANAGER.

7.1. State. STATE's authorized representative for the purposes of administration of this CONTRACT is **Traci Vibo, Contract Manager** or her successor. Phone and email: 651-431-6068 and traci.vibo@state.mn.us. This representative shall have final authority for acceptance of COUNTY's services and if such services are accepted as satisfactory, shall so certify on each invoice submitted pursuant to Clause 3.2.

7.2. County. COUNTY's Authorized Representative is **Kristin Johnson, Deputy Director** or successor. Phone and email: **651-385-2022 and Kristin.johnson@co.goodhue.mn.us**. If COUNTY's Authorized Representative changes at any time during this CONTRACT, COUNTY must immediately notify STATE.

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7.3. Information Privacy and Security. (If applicable) COUNTY's responsible authority for the purposes of complying with data privacy and security for this CONTRACT is **Kristin Johnson, Deputy Director** or successor. Phone and email: **651-385-2022 and Kristin.johnson@co.goodhue.mn.us**.

7.4 Project Manager. The STATE'S project manager for this grant contract is **Mary Pederson Hogan, Humans Services Program Consultant**, phone and email: **651-431-3021** and mary.pedersonhogan@state.mn.us or her successor.

8. INSURANCE REQUIREMENTS.

8.1. Worker's Compensation. The COUNTY certifies that it is in compliance with Minn. Stat. § 176.181, subd. 2, pertaining to workers' compensation insurance coverage. The COUNTY'S employees and agents will not be considered employees of the STATE. Any claims that may arise under the Minnesota Workers' Compensation Act on behalf of these employees or agents and any claims made by any third party as a consequence of any act or omission on the part of these employees or agents are in no way the STATE'S obligation or responsibility.

9. LIABILITY.

To the extent provided for in Minn. Stat. §§ 466.01-466.15, the COUNTY agrees to be responsible for any and all claims or causes of action arising from the performance of this grant contract by COUNTY or COUNTY'S agents or employees. This clause shall not be construed to bar any legal remedies COUNTY may have for the STATE'S failure to fulfill its obligations pursuant to this grant.

10. INFORMATION PRIVACY AND SECURITY.

- a. It is expressly agreed that STATE will not be disclosing or providing information protected under the Minnesota Government Data Practices Act, Minnesota Statutes, Chapter 13 (the "Data Practices Act") as "not public data" on individuals to COUNTY under this Contract. "Not public data" means any data that is classified as confidential, private, nonpublic, or protected nonpublic by statute, federal law or temporary classification. Minn. Stat. § 13.02, subd. 8a.
- b. It is expressly agreed that COUNTY will not create, receive, maintain, or transmit "protected health information", as defined in the Health Insurance Portability Accountability Act ("HIPAA"), 45 C.F.R. § 160.103, on behalf of STATE for a function or activity regulated by 45 C.F.R. 160 or 164. Accordingly, COUNTY is not a "business associate" of STATE, as defined in HIPAA, 45 C.F.R. § 160.103 as a result of, or in connection with, this CONTRACT. Therefore, COUNTY is not required to comply with the privacy provisions of HIPAA as a result of, or for purposes of, performing under this CONTRACT. If COUNTY has responsibilities to comply with the Data Practices Act or HIPAA for reasons other than this CONTRACT, COUNTY will be responsible for its own compliance.

11. INTELLECTUAL PROPERTY RIGHTS.

11.1. Definitions. Works means all inventions, improvements, discoveries (whether or not patentable or copyrightable), databases, computer programs, reports, notes, studies, photographs,

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negatives, designs, drawings, specifications, materials, tapes, and disks conceived, reduced to practice, created or originated by COUNTY, its employees, agents, and subcontractors, either individually or jointly with others in the performance of the CONTRACT. Works includes "Documents." Documents are the originals of any data bases, computer programs, reports, notes, studies, photographs, negatives, designs, drawings, specifications, materials, tapes, disks, or other materials, whether in tangible or electronic forms, prepared by COUNTY, its employees, agents, or subcontractors, in the performance of this CONTRACT.

11.2. Ownership. STATE owns all rights, title, and interest in all of the intellectual property, including copyrights, patents, trade secrets, trademarks, and service marks in the Works and Documents created and paid for under this CONTRACT. The Works and Documents will be the exclusive property of STATE and all such Works and Documents must be immediately returned to STATE by COUNTY upon completion or cancellation of this CONTRACT. To the extent possible, those Works eligible for copyright protection under the United States Copyright Act will be deemed to be "works made for hire." If using STATE data, COUNTY must cite the data, or make clear by referencing that STATE is the source.

11.3. Responsibilities.

- a. Notification.** Whenever any Works or Documents (whether or not patentable) are made or conceived for the first time or actually or constructively reduced to practice by COUNTY, including its employees and subcontractors, and are created and paid for under this CONTRACT, COUNTY will immediately give STATE's Authorized Representative written notice thereof, and must promptly furnish the Authorized Representative with complete information and/or disclosure thereon. COUNTY will assign all right, title, and interest it may have in the Works and the Documents to STATE.
- b. Filing and recording of ownership interests.** COUNTY must, at the request of STATE, execute all papers and perform all other acts necessary to transfer or record STATE's ownership interest in the Works and Documents created and paid for under this CONTRACT. COUNTY must perform all acts, and take all steps necessary to ensure that all intellectual property rights in these Works and Documents are the sole property of STATE, and that neither COUNTY nor its employees, agents, or subcontractors retain any interest in and to these Works and Documents.
- c. Duty not to infringe on intellectual property rights of others.** COUNTY represents and warrants that the Works and Documents created and paid for under this CONTRACT do not and will not infringe upon any intellectual property rights of other persons or entities. Notwithstanding Clause 9, COUNTY will indemnify; defend, to the extent permitted by the Attorney General; and hold harmless STATE, at COUNTY's expense, from any action or claim brought against STATE to the extent that it is based on a claim that all or part of these Works or Documents infringe upon the intellectual property rights of others. COUNTY will be responsible for payment of any and all such claims, demands, obligations, liabilities, costs, and damages, including but not limited to, attorney's fees. If such a claim or action arises, or in COUNTY's or STATE's opinion is likely to arise, COUNTY must, at STATE's discretion, either procure for STATE the right or license to use the intellectual property rights at issue or replace or modify the allegedly infringing Works or Documents as necessary and appropriate to obviate the

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infringement claim. This remedy of STATE will be in addition to and not exclusive of other remedies provided by law.

- d. **Federal license granted.** If federal funds are used in the payment of this CONTRACT, pursuant to 45 C.F.R. § 75.322, the U.S. Department of Health and Human Services is granted a royalty-free, nonexclusive and irrevocable right to reproduce, publish, or otherwise use the work for Federal purposes, and to authorize others to do so.

12. OWNERSHIP OF EQUIPMENT. The STATE shall have the right to require transfer of all equipment purchased with grant funds (including title) to STATE or to an eligible non-STATE party named by the STATE. If federal funds are granted by the STATE, then disposition of all equipment purchased under this grant contract shall be in accordance with OMB Uniform Grant Guidance, 2 C.F.R. § 200.313. For all equipment having a current per unit fair market value of \$5,000 or more, STATE shall have the right to require transfer of the equipment (including title) to the Federal Government. These rights will normally be exercised by STATE only if the project or program for which the equipment was acquired is transferred from one grantee to another.

13. AUDIT REQUIREMENTS AND COUNTY DEBARMENT INFORMATION.

13.1. State audit.

Under Minn. Stat. § 16B.98, subd. 8, the books, records, documents, and accounting procedures and practices of the COUNTY or other party that are relevant to the CONTRACT are subject to examination by STATE and either the legislative auditor or the state auditor, as appropriate, for a minimum of six years from the CONTRACT end date, receipt and approval of all final reports, or the required period of time to satisfy all state and program retention requirements, whichever is later.

13.2. Independent audit. If COUNTY conducts or undergoes an independent audit during the term of this CONTRACT that is relevant to this CONTRACT, a copy of the relevant audit must be submitted to STATE within thirty (30) days of the audit's completion.

13.3. Federal audit requirements and COUNTY debarment information. COUNTY certifies it will comply with 2 C.F.R § 200.501 et seq., as applicable. To the extent federal funds are used for this CONTRACT, COUNTY acknowledges that COUNTY and STATE shall comply with the requirements of 2 C.F.R. § 200.331. Non-Federal entities receiving \$750,000 or more of federal funding in a fiscal year must obtain a single or program-specific audit conducted for that year in accordance with 2 C.F.R. § 200.501. Failure to comply with these requirements could result in forfeiture of federal funds.

13.4. Debarment by STATE, its departments, commissions, agencies or political subdivisions.

COUNTY certifies that neither it nor its principles are presently debarred or suspended by the State of Minnesota, or any of its departments, commissions, agencies, or political subdivisions. COUNTY's certification is a material representation upon which the CONTRACT award was based. COUNTY shall provide immediate written notice to STATE's authorized representative if at any time it learns that this

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certification was erroneous when submitted or becomes erroneous by reason of changed circumstances.

13.5. Certification regarding debarment, suspension, ineligibility, and voluntary exclusion – lower tier covered transactions.

COUNTY's certification is a material representation upon which CONTRACT award was based. Federal money will be used or may potentially be used to pay for all or part of the work under CONTRACT, therefore COUNTY must certify the following, as required by 2 C.F.R. § 180, or its regulatory equivalent.

a. Instructions for Certification

1. By signing and submitting this CONTRACT, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this CONTRACT is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverages sections of rules implementing Executive Order 12549. You may contact the person to which this CONTRACT is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this response that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 C.F.R. part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this CONTRACT that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 C.F.R. part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may

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decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 C.F.R. part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

b. Lower Tier Covered Transactions.

1. The prospective lower tier participant certifies, by submission of this CONTRACT, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this CONTRACT.

14. JURISDICTION AND VENUE.

This CONTRACT, and amendments and supplements, are governed by the laws of the State of Minnesota. Venue for all legal proceedings arising out of this CONTRACT, or breach of the CONTRACT, shall be in the state or federal court with competent jurisdiction in Ramsey County, Minnesota.

15. CLERICAL ERRORS AND NON-WAIVER.

15.1. Clerical error. Notwithstanding Clause 16.1, STATE reserves the right to unilaterally fix clerical errors contained in the CONTRACT without executing an amendment. COUNTY will be informed of errors that have been fixed pursuant to this paragraph.

15.2. Non-waiver. If STATE fails to enforce any provision of this CONTRACT, that failure does not waive the provision or STATE's right to enforce it.

16. AMENDMENT, ASSIGNMENT, SEVERABILITY, ENTIRE AGREEMENT, AND DRAFTING PARTY.

16.1. Amendments. Any amendments to this CONTRACT shall be in writing, and shall be executed by the same parties who executed the original CONTRACT, or their successors in office.

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16.2. Assignment. COUNTY shall neither assign nor transfer any rights or obligations under this CONTRACT without the prior written consent of STATE.

16.3. Entire Agreement.

- a. If any provision of this CONTRACT is held to be invalid or unenforceable in any respect, the validity and enforceability of the remaining terms and provisions of this CONTRACT shall not in any way be affected or impaired. The parties will attempt in good faith to agree upon a valid and enforceable provision that is a reasonable substitute, and will incorporate the substitute provision in this CONTRACT according to clause 16.1.
- b. This CONTRACT contains all negotiations and agreements between STATE and COUNTY. No other understanding regarding this CONTRACT, whether written or oral may be used to bind either party.

16.4. Drafting party. The parties agree that each party individually has had an opportunity to review with a legal representative, negotiate and draft this CONTRACT, and that, in the event of a dispute, the CONTRACT shall not be construed against either party.

17. PROCURING GOODS AND CONTRACTED SERVICES.

17.1. Contracting and bidding requirements. COUNTY certifies that it shall comply with Minn. Stat. § 471.345.

17.2. Prevailing wage. For projects that include construction work of \$25,000 or more, prevailing wage rules apply per Minn. Stat. §§ 177.41 through 177.44; consequently, the bid request must state the project is subject to *prevailing wage*. These rules require that the wages of laborers and workers should be comparable to wages paid for similar work in the community as a whole. Vendors should submit a prevailing wage form along with their bids.

17.3 Debarred vendors. In the provision of goods or services under this CONTRACT, COUNTY must not contract with vendors who are suspended or debarred in Minnesota or under federal law. Before entering into a subcontract, COUNTY must check if vendors are suspended or debarred by referencing the Minnesota Department of Administration's [Suspended/Debarred Vendor Report](#). A link to vendors debarred by Federal agencies is provided at the bottom of the web page.

18. SUBCONTRACTS.

COUNTY, as an awardee organization, is legally and financially responsible for all aspects of this award that are subcontracted, including funds provided to sub-recipients and subcontractors, in accordance with 45 C.F.R. §§ 75.351-75.352. COUNTY shall ensure that the material obligations, borne by the COUNTY in this CONTRACT, apply as between COUNTY and subrecipients, in all subcontracts, to the same extent that the material obligations apply as between the STATE and COUNTY.

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19. LEGAL COMPLIANCE.

19.1 General compliance. All performance under this CONTRACT must be in compliance with state and federal law and regulations, and local ordinances. Allegations that STATE deems reasonable, in its sole discretion, of violations of state or federal law or regulations, or of local ordinances, may result in CONTRACT cancellation or termination and/or reporting to local authorities by STATE.

19.2 Nondiscrimination. COUNTY will not discriminate against any person on the basis of the person's race, color, creed, religion, national origin, sex, marital status, gender identity, disability, public assistance status, sexual orientation, age, familial status, membership or activity in a local commission, or status as a member of the uniformed services. COUNTY must refrain from such discrimination as a matter of its contract with STATE. "Person" includes, without limitation, a STATE employee, COUNTY's employee, a program participant, and a member of the public. "Discriminate" means, without limitation, to: fail or refuse to hire, discharge, or otherwise discriminate against any person with respect to the compensation, terms, conditions, or privileges of employment, or; exclude from participation in, deny the benefits of, or subject to discrimination under any COUNTY program or activity.

COUNTY will ensure that all of its employees and agents comply with Minnesota Management and Budget Policy #[1329](#) (Sexual Harassment Prohibited) and #[1436](#) (Harassment and Discrimination Prohibited).

19.3 Grants management policies. COUNTY must comply with required [Grants Management Policies and procedures](#) as specified in Minn. Stat. § 16B.97, subd. 4(a)(1). Compliance under this paragraph includes, but is not limited to, participating in monitoring and financial reconciliation as required by Office of Grants Management (OGM) [Policy 08-10](#).

19.4 Conflict of interest. COUNTY certifies that it does not have any conflicts of interest related to this CONTRACT, as defined by OGM [Policy 08-01](#). COUNTY shall immediately notify STATE if a conflict of interest arises.

20. OTHER PROVISIONS

20.1. No Religious Based Counseling. COUNTY agrees that no religious based counseling shall take place under the auspices of this CONTRACT.

20.2. Contingency Planning. This section applies if COUNTY will be fulfilling Priority 1 or Priority 2 functions under this contract. A *Priority 1* function is a function that, for purposes of planning business continuity during an emergency or disaster, must continue 24 hours per day and 7 days per week, or be recovered within hours. A *Priority 2* function is a function that, for purposes of planning business continuity during an emergency or disaster, must be resumed within 25 hours to 5 days. Within 90 days of the execution of this CONTRACT, COUNTY and any subcontractor will have a contingency plan. The contingency plan shall:

- a. Ensure fulfillment of Priority 1 or Priority 2 obligations under this CONTRACT;
- b. Outline procedures for the activation of the contingency plan upon the occurrence of a governor or commissioner of the Minnesota Department of Health declared health emergency;

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- c.** Identify an individual as its Emergency Preparedness Response Coordinator (EPRC), the EPRC shall serve as the contact for STATE with regard to emergency preparedness and response issues, the EPRC shall provide updates to STATE as the health emergency unfolds;
- d.** Outline roles, command structure, decision making processes, and emergency action procedures that will be implemented upon the occurrence of a health emergency;
- e.** Provide alternative operating plans for Priority 1 or Priority 2 functions;
- f.** Include a procedure for returning to normal operations; and
- g.** Be available for inspection upon request.

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Signature Page Follows

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By signing below, the parties agree to the terms and conditions contained in this CONTRACT.

APPROVED:

1. STATE ENCUMBRANCE VERIFICATION

Individual certifies that funds have been encumbered as required by Minnesota Statutes, chapter 16A and section 16C.05.

By: _____

Date: _____

Contract No: 194695

2. COUNTY

Signatory certifies that County's articles of incorporation, by-laws, or corporate resolutions authorize Signatory both to sign on behalf of and bind the County to the terms of this Agreement. County and Signatory agree that the State Agency relies on the Signatory's certification herein.

By: _____

Title: _____

Date: _____

3. STATE AGENCY

By (with delegated authority): _____

Title: Assistant Commissioner

Date: _____

Distribution: (fully executed contract to each)

Contracting and Legal Compliance Division

County

State Authorized Representative

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ATTACHMENT

A

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Goodhue County

Fiscal Year 2022 – 2023 Budget

Category of Funding	Budget	What This Funds
Housing Resource Specialist	\$195,700	<ul style="list-style-type: none">• \$188,701: 1 FTE Housing Resource Specialist (salary and fringe)• \$5,134: 2% Supervisor of Program• \$1,865: Office Equipment
TOTAL	\$195,700	

Goodhue County award is **\$195,700** of funding for the Community Living Infrastructure grant program for fiscal years 2022 – 2023. This funding will cover initiatives in the Housing Resource Specialist category of funding for the Community Living Infrastructure grant program.

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



REQUEST FOR BOARD ACTION

Requested Board Date:	June 15, 2021	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:	<ul style="list-style-type: none"> • Approve School Attendance Specialist – 1 FTE New Request • Approve Housing Resource Specialist – 1 FTE New Request • Approve Waiver Case Manager – 1 FTE New Request • Approve Waiver Case Manager – 1 FTE Replacement Request 		

BACKGROUND:

The following requests will be brought forward for the Goodhue County Personnel Committee’s review on June 14, 2021 at 8:30 am.

- **New Request - School Attendance Specialist**
- **New Request - Housing Resource Specialist**
- **New Request - Waiver Case Manager**
- **Replacement Request – Waiver Case Manager**

Please see the attached Personnel Committee memos. The HHS Department staff will inform the HHS Board of the Personnel Committee’s actions at our June 15, 2021 Health and Human Services Board meeting.

RECOMMENDATION: GCHHS 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

DATE: June 7, 2021
TO: Goodhue County Personnel Committee
FROM: Nina Arneson, GCHHS Director
RE: Request to Hire 3 New, and 1 Replacement HHS Positions

BACKGROUND:

The COVID-19 pandemic has brought into sharp focus the basic health and safety needs of the most vulnerable citizens of Goodhue County. One of the GCHHS value statements is prevention, as we know that prevention is a cost-effective investment that impacts the health of individuals, families, and communities. We are also aware that the social determinants of health can have a major impact on people's health and well-being. Failing to address these basic needs can lead to a myriad of health concerns and social problems that can be quite costly for the individual and the community, and can lead to poor quality of life and adverse health outcomes that impact the entire community.

Our strong prevention focus is a sound economic investment, as well as a vital strategy to improve the lives of our community members, and it has led us to examine our current needs and consider new opportunities. Therefore, we bring forward four personnel requests funded by Federal, State, and County funds to address these basic needs and prevent poor health outcomes:

1. School Attendance Specialist – New 1 FTE position funded through contract with Goodhue County Education District

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 in Goodhue County. A new element of this collaboration is the addition of a School Attendance Specialist. Prior to the pandemic, truancy was already a serious concern. Access to education is a clear social determinant of health, and truancy is a proven stepping stone to juvenile delinquency, increased risk of drug and alcohol abuse, and higher risk of unemployment. School attendance and engagement have suffered throughout the pandemic, resulting in an increase in school attendance concerns and a lack of engagement in online learning.

Funding: The funding for this is already in place, no additional funds, or increases needed with current contracts with GCED. No County Levy.

2. Housing Resource Specialist – New 1 FTE grant funded provisional position

GCHHS has received the Community Living Infrastructure (CLI) Minnesota Department of Human Services (DHS) grant to permanently hire a Housing Resource Specialist. In 2017, the Minnesota Legislature passed a comprehensive housing package, adding language to the Minnesota Housing Support Act (Chapter 256I), to increase and improve

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



opportunities for Minnesotans with disabling conditions to live in the community. The Goodhue County Housing Resource Specialist, who will be hired as a Health Educator, will serve as a consultant, project manager, and community liaison for housing resources, and will work with community agencies to address the many gaps along the housing service continuum in Goodhue County.

Funding: Ongoing State funding secured from DHS. This is a new funding source for Goodhue County. No County Levy.

3. Waiver Case Manager - NEW 1 FTE permanent position

We are requesting an additional waiver case manager to provide adequate service to elderly and disabled clients in Goodhue County so they can live safely in the community by bringing the caseloads closer to state recommendations that can be managed with improved care, and . The caseload sizes on our waiver and South Country Health Alliance (SCHA) team have been steadily increasing over the past 5 years and are well above recommendations from DHS and SCHA. High caseloads have resulted in:

- Individuals requiring a more restrictive placement such as a nursing home or supportive living arrangement, or they may be at risk of hospitalization.
- Delays in moving to less restrictive options resulting in longer nursing home placements or hospitalizations
- Delays in safety modifications being implemented, such as ramps being installed in a home or arranging assistance with basic activities such as bathing

This new position will help us to avoid additional costs as when staff have more management caseload sizes which allows staff a more time and to efficiently respond to clients, their families and facilities by facilitating community living arrangements and avoiding costly hospitalizations and nursing home placements along with improved service to Goodhue County residents.

Funding: This new position will be funded with state and federal funds, and will require \$31,094 in county levy funds.

4. Waiver Case Manager – REPLACEMENT 1 FTE position for retiring worker

A waiver case manager is retiring in November, 2021. In order to provide waiver case management services, the individual must be a certified MNChoice assessor, which in most cases requires a year of experience, unless the person hired already comes in with this level of experience. In order to begin the training process and prevent further delays in service provision, we would like to hire the replacement for this retiree as soon as possible.

Funding: This position is already included in the HHS approved budget with State, Federal and county levy funding. We anticipate this overlap time cost about \$14,300, and overall initial costs saving will be about \$37,586.

RECOMMENDATION:

The HHS Department recommends approving as requested. Attached, please find four detailed personnel requests with recommendations.



Goodhue County
Health and Human Services

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

DATE: June 7, 2021
TO: Goodhue County Personnel Committee
FROM: Nina Arneson, GCHHS Director
RE: School Attendance Specialist - 1 FTE

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 in Goodhue County.

A new element of this collaboration is the addition of a School Attendance Specialist. Access to education is a clear social determinant of health, and truancy is a stepping stone to juvenile delinquency, increased risk of drug and alcohol abuse, and higher risk of unemployment. It has been estimated that an increase of only 5 percentage points in the national high school graduation rate for male students alone would save the US \$19.7 billion annually.

Goodhue County usually receives **40-60 truancy referrals per year** for students age 12 and above who meet the criteria of 7 unexcused absences. Many of these students have far more absences, and oftentimes these students have been disengaged from school for years. Families with students under the age of 11 are reported for educational neglect when the student has 7 or more unexcused absences. GCHHS completes 40-60 educational neglect assessments per year, and these families often are experiencing significant difficulties in maintaining stable housing and income. Many more students struggle with attendance and school engagement who are not referred for truancy intervention.

During the 2020-2021 academic year, the Minnesota Department of Education (MDE) and the Minnesota Department of Human Services (DHS) published guidance to address the challenges of school attendance and engagement during the pandemic. This guidance required school personnel to make face to face contact with the student's family to identify barriers to attendance, resolve any technical issues that impacted distance learning success, and to assist families with transportation, child care, or mental health referrals. The guidance required GCHHS to partner with the schools and families using voluntary programs like child welfare and parent support and outreach to increase school engagement and success. Since March, 2020, GCHHS responded to **160 reports** of concern regarding school issues as the primary identified concern. This does not include the number of child protection assessments and investigations that were completed to address other allegations of abuse and neglect. While this collaboration did not eliminate attendance concerns, it demonstrated the need for dedicated time and attention to students who are struggling to get to school daily. We have found that early intervention is critical.

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Impact of COVID-19 Pandemic:

COVID-19 has presented many unique challenges to the entire education system. School attendance and engagement have suffered throughout the pandemic, resulting in an increase in school attendance concerns and a troubling lack of engagement in online learning. There are grave concerns about the long-term consequences that this lack of school engagement will have on these students in all areas of their lives.

The School Attendance Specialist will allow close collaboration between GCHHS and all schools in Goodhue County. The position will be supervised by the GCHHS Social Services - Child and Family Services Supervisor, but will also be co-located in schools throughout the district. This person, in close collaboration with school administrators and community partners, will implement "[Check and Connect](#)", an evidence-based approach to improve school engagement and reduce school absences.

Funding:

This position will be funded by utilizing funds from the contract between GCHHS and GCED. In addition, this worker will be able to bill Child Welfare Targeted Case Management, and will participate in SSTS/LTSS time studies reimbursement, so the position will essentially be cost neutral.

	2021	2021
	Single Health	Family Health
	step 1	step 1
School Attendance Social Worker		
Rate	\$27.23	\$27.23
Gross	\$56,639.00	\$56,639.00
PERA/FICA/Medicare/Life	\$8,636.00	\$8,636.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$76,761.00	\$90,257.00
Total Benefits	\$20,122.00	\$33,618.00

Potential Funding Sources for School Attendance SW	10 CW-TCM per month
Highest Salary & Benefits with Family Health Insurance Step 1	\$90,257.00
SSTS/LTSS 2020 Ave Reimbursement on Cost Pool 17.34%	-\$15,650.56
CW-TCM Ave SFY 20 & SFY 21 \$670 or \$335 NET per TCM	-\$40,200.00
Cost of Truancy Social Worker After Reimbursements	\$34,406.44
Funding used from the GCED Contract	\$34,406.44
County Levy Spending	\$0.00

RECOMMENDATION:

The HHS Department recommends approving the following:

1. Move forward immediately to post for a County Agency Social Worker (1 FTE) utilizing the MN Merit system with hiring at step 1 or step 2. This posting would be for internal and external candidates. If an internal candidate is selected then move forward immediately to back fill that position until an external candidate has been hired to finish the process.
2. Hire after GCHHS Board's review and approval.



Goodhue County
Health and Human Services

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

DATE: June 7, 2021
TO: Goodhue County Personnel Committee
FROM: Nina Arneson, GCHHS Director
RE: Housing Resource Specialist - 1 FTE provisional position

BACKGROUND:

In 2017, the Minnesota Legislature passed a comprehensive housing package, adding language to the Minnesota Housing Support Act (Chapter 256I), to increase and improve opportunities for Minnesotans with disabling conditions to live in the community. The housing package included grant funding aimed at supporting counties and tribes to integrate housing resources into their human service delivery systems throughout the state. The grant funding enables Responders to apply for funding related to: 1) outreach; 2) housing resource specialists; and 3) funding for counties, tribes, and multi-county social service collaboratives to administer the Minnesota Housing Support program.

Goodhue County Health and Human Services (GCHHS) seeks to improve outcomes and enhance responsiveness to individuals and families living in Goodhue County by providing a Housing Resource Specialist (HRS) as part of the Health and Human Services staff. The goal is for the Housing Resource Specialist to address the many gaps along the housing service continuum in Goodhue County. This grant allows GCHHS to create a specific focus on housing for the first time.

GCHHS applied, and has received the Community Living Infrastructure (CLI) Minnesota Department of Human Services (DHS) grant to permanently hire a Housing Resource Specialist.

The **Housing Resource Specialist (HRS)** will serve as a consultant, project manager, and community liaison for housing resources. The HRS will be part of the Public Health division and will consult with adult mental health caseworkers, waived services staff, child protection case managers, as well as the entire HHS staff. In addition to expanding housing knowledge and capacity within the agency to consult, the HRS will also work to expand housing resources in the community. Case managers have noted that even when there are funding options, many landlords in Goodhue County are reluctant to rent to people with difficult rental histories. The HRS will work directly with local landlords to address barriers, and the HRS will develop and implement a Risk Mitigation program that will ideally incentivize landlords to rent to high risk renters. As part of this Risk Mitigation Program, the HRS will provide a platform for landlords to express and share their needs. The HRS will also work with local agencies to encourage and support agencies to become Housing Stabilization Services providers. And the HRS will be the local expert on the Housing Support program and consider ways to expand and maximize that program.

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The Housing Resource Specialist will be hired as a Public Health Educator and will be part of the Public Health - Healthy Communities Staff supervised by Ruth Greenslade.

Definitions:

Housing Resource Specialists in the county human service delivery system *provide technical assistance and consultation* for HHS case manager and community partners about housing and related support service resources for people with disabilities and low income, such as:

- **Housing Stabilization Services** is a new Minnesota Medical Assistance benefit to help people with disabilities, including mental illness and substance use disorder, and seniors *find and keep housing*.
- **Housing Support** (formerly known as Group Residential Housing (GRH) program provides *help for housing costs* for some people at risk of institutional placement or homelessness

	HHS Division	Purpose
Housing Resource Specialist	Public Health Division (Healthy Communities)	Provide technical assistance and consultation for HHS case managers and community partners
Housing Stabilization Services	Medical Assistance benefit, not offered by GCHHS	Help people with disabilities find and keep housing
Housing Support	Economic Assistance Division	Help with housing costs with existing state funding and program.

Funding: Ongoing State funding secured from DHS. This is a new funding source for Goodhue County. No County Levy.

	2021	2021
	Single Health	Family Health
Public Health Educator	step 1	step 1
Rate	\$27.50	\$27.50
Gross	\$57,200.00	\$57,200.00
PERA/FICA/Medicare/Life	\$8,721.00	\$8,721.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$77,407.00	\$90,903.00

RECOMMENDATION:

The HHS Department recommends approving the following:

1. Move forward immediately to post for a Health Educator (1 FTE) utilizing the MN Merit system with hiring at step 1 or step 2. This posting would be for internal and external candidates. If an internal candidate is selected then move forward immediately to back fill that position until an external candidate has been hired to finish the process.
2. Hire after GCHHS Board's review and approval.



Goodhue County
Health and Human Services

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

DATE: June 7, 2021
TO: Goodhue County Personnel Committee
FROM: Nina Arneson, GCHHS Director
RE: **New - Public Health Nurse (PHN)/Registered Nurse (RN)/Care Coordinator - 1 FTE**

BACKGROUND:

Goodhue County Health and Human Services is requesting to add a Public Health Nurse (PHN)/Registered Nurse (RN)/Care Coordinator position within our Public Health – Waiver and South Country Health Alliance Team. This position will be responsible for waiver case management.

A waiver case manager is a professional position requiring the worker to use problem solving, critical thinking, and comprehensive assessment skills. This position requires workers to have one year of home and community based service knowledge and experience to become a MNCHOICES certified assessor through the Department of Human Services. This position is responsible to assess for eligibility and service need and ensure the health and safety needs of individuals in our community are being met.

As a waiver case manager, staff are required to complete face-to-face visits with the people they serve to ensure health and safety needs are being met through the services they have put into place. During these visits, case managers are assessing current needs and offering additional resources when needed. Case managers arrange for services that may include (but not limited to) in-home nursing for medication management and complex health needs, Lifeline for emergency assistance, meals on wheels, and home remodels for disability accessibility. These services are cost effective to maintain people in the least restrictive environment while meeting their assessed needs. Without these supports, many individuals would require a more restrictive placement such as a nursing home or supportive living arrangement, or they may be at risk of hospitalization.

As a part of this position, the case manager has care coordination duties for people we serve that have South Country Health Alliance (SCHA) insurance. Some of the care coordination duties include assisting individuals with establishing a primary care doctor, finding a dentist, setting up transportation to medical appointment, and following up with members after hospitalizations.

Strong waiver case management and care coordination can mean the difference between living in the community versus living in the nursing home. Having our citizens living in the community with support and/or services offers a great cost reduction over hospitalizations and nursing home placements.

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Caseload sizes: The caseload sizes on our waiver and SCHA team have been steadily increasing over the past 5 years. The current caseload sizes are above recommendations from DHS and SCHA. SCHA has indicated they recommend a waiver caseload size of 50 and a care coordination caseload size of 100. The chart below shows the average caseload for Goodhue County in comparison with Region 10 counties. Region 10 counties include: Olmsted, Dodge, MNPrairie, Rice, Wabasha, Winona, Houston, Fillmore, Mower, and Freeborn.

	Goodhue County	Region 10 Average
Under 65 Waivers	71	54
Elderly Waiver	58	47
Care Coordination	166	88

There are many impacts to having high caseload numbers. People have long wait times for an initial assessment for services. Delays in assessment mean delays in services being started. The high caseload sizes also mean delays for current people we serve to get additional services, or to receive changes in services as their needs change. For example: if a person now needs an accessibility adaptation (such as a ramp to enter their home), it could mean waiting weeks to months to get through this process. For people waiting to get an assessment, this may mean remaining in the nursing home or a more restrictive and less cost effective environment for a longer period of time than needed. The impact of high caseloads is extended to the providers of services as well. Provider may need to wait longer to get service approvals from case managers, which affects their ability to be reimbursed in a timely manner.

We have collected data on the past 5 years for number of open clients, hours of case management services, and numbers of assessments. Our average number of new assessments has remained relatively flat, although there has been a sharp increase in the past month. However, the number of hours spent on assessments and case management, and the number of open cases had steadily increased prior to COVID-19, with a net increase of 138 cases in the past 5 years.

Open
Cases

2016	1223
2017	1313
2018	1316
2019	1353
2020	1361

Impact of COVID: During the COVID-19 pandemic, several waiver and SCHA staff have been needed on our vaccination and planning teams. Because face to face contact has not been allowed during the pandemic, the waiver team has been able to absorb this staffing shortage to some degree. Case load sizes continued to grow during the pandemic, and these caseload ratios listed above include the case managers who were involved in vaccination. Case managers are deeply concerned about how they will meet the needs of their clients when they need to resume face to face contact starting on 7-1-21.

There has been a substantial increase in new assessments in the past month. There were 95 requests in the month of April, 2021 when the average is approximately 50. Some clients have expressed a desire to avoid nursing home placement and live in the community, which often requires waiver services to provide health and safety support. Case managers have also noted an increase in waiver requests for clients with significant and complex mental health needs. Case managers suspect that the pandemic has at least partially driven these increases.

Billing: High caseload size also impacts the capacity for billing. When the case managers are unable to see their clients as often as necessary, they are also missing opportunities for billing and revenue. Adding an additional case manager will increase hours to be billed for case management and care coordination that were currently billed due to staff capacity. There are also cost avoidance 1) clients remaining in nursing homes longer than needed because of the delay in completing assessments, 2) clients going to the hospital due to service delays.

This position has funding from the Department of Human Services through waiver case management funding and SSTS/LTSS Time Studies. The request shows \$31,094 of levy dollars for the highest cost classification, but in 2020 additional staffing revenue (staff approved November 2017) generated \$944,287 over budget.

This position can be replaced with a Registered Nurse, Public Health Nurse, or Care Coordinator. South Country Health Alliance and Department of Human Services requires counties to have a multi-disciplinary team including nurses and Social Workers/Care Coordinators. Posting this replacement as a Registered Nurse, Public Health Nurse or Care Coordinator opens the prospective pool of candidates.

	2021	2021
	Single Health	Family Health
Public Health Nurse	step 1	step 1
Rate	\$27.50	\$27.50
Gross	\$57,200.00	\$57,200.00
PERA/FICA/Medicare/Life	\$8,721.00	\$8,721.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$77,407.00	\$90,903.00

	2021	2021
	Single Health	Family Health
Social Worker/Care Coordinator	step 1	step 1
Rate	\$27.23	\$27.23
Gross	\$56,639.00	\$56,639.00
PERA/FICA/Medicare/Life	\$8,636.00	\$8,636.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$76,761.00	\$90,257.00

	2021	2021
	Single Health	Family Health
Registered Nurse	step 1	step 1
Rate	\$26.22	\$26.22
Gross	\$54,538.00	\$54,538.00
PERA/FICA/Medicare/Life	\$8,317.00	\$8,317.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$74,341.00	\$87,837.00

Potential Funding Sources for Waiver Case Manager	25 CM per month
Highest Salary & Benefits with Family Health Insurance Step 1	\$90,903.00
SSTS/LTSS 2020 Ave Reimbursement on Cost Pool 17.34%	-\$15,762.58
Waiver Case Management 25 visits/month (1.5 hours each)	-\$44,046.00
Cost of Waiver Case Manager After Reimbursements	\$31,094.42
County Levy Spending	\$31,094.42

RECOMMENDATION:

The HHS Department recommends approving the following:

1. Move forward immediately to post for 1 Public Health Nurse (PHN)/Registered Nurse/Care Coordinator (1 FTE) utilizing the MN Merit system with hiring at step 1 or step 2. This posting would be for internal and external candidates. If an internal candidate is selected then move forward immediately to back fill that position until an external candidate has been hired to finish the process.
2. Hire after GCHHS Board's review and approval.



odhue County
Health and Human Services

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

DATE: June 4, 2021
TO: Goodhue County Personnel Committee
FROM: Nina Arneson, GCHHS Director
RE: **Replacement - Public Health Nurse (PHN)/Registered Nurse (RN)/Care Coordinator - 1 FTE**

BACKGROUND:

Goodhue County Health and Human Services is requesting to fill early a Public Health Nurse (PHN)/Registered Nurse (RN)/Care Coordinator position within our Public Health – Waiver and South Country Health Alliance Team.

On November 1, 2021, a Public Health Nurse will retire after 15 years of service with Goodhue County. This PHN is currently working at 1 FTE.

The position of PHN currently works with people who access the Elderly Waiver and Alternative Care Grant. This PHN also works with South Country Health Alliance (SCHA) members. This professional connects with people in our community who need services and supports to ensure their health and safety needs are being met in the least restrictive environment. This professional completes comprehensive assessments, develops care plans to address identified areas of need and coordinates with community providers to set-up services in their home. Some services include Lifeline, meals on wheels, home health aide for bathing, medication set-up by a nurse, or home modifications and adaptations. SCHA care coordination tasks include establishing a primary care doctor, finding a dentist and transportation to medical appointments. This professional follows up with members after hospitalizations to offer services that can keep members in their homes longer. Strong waiver case management and care coordination can mean the difference between living in the community versus living in the nursing home. Having our citizens living in the community with support and/or services offers a great cost reduction over hospitalizations and nursing home placements.

This position requires the professional to be a MNCHOICES certified assessor through the Department of Human Services. This certification requires one year of home and community based service experience and a 4 year degree in social work, nursing, or a related field.

During the COVID-19 pandemic, our agency has relied heavily on the Waiver and South Country Health Alliance team staff to assist with planning, contract tracing, and vaccine mass dispensing. This has placed a strain on this team's ability to manage the ongoing workload to ensure health and safety needs are met for our most vulnerable populations. One member of the Waiver and

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SCHA team is the back-up DP&C worker. With the recent retirement of the long-term DP&C worker, this nurse has been needed to cover also some of those duties.

Due to the staff shortage this department has experienced in the past year along with the time needed to be a MNCHOICES certified assessor, we request this position be replaced prior to the November 1, 2021 retirement.

This position can be replaced with a Registered Nurse, Public Health Nurse, or Care Coordinator. SCHA and Minnesota Department of Human Services requires counties to have a multi-disciplinary team including Nurses and Social Workers/Care Coordinators. Posting this replacement as a Registered Nurse, Public Health Nurse or Care Coordinator opens the prospective pool of candidates.

The current rate of pay for the PHN being replaced is \$45.57 per hour. The starting pay (step 1) for a PHN position is \$ 27.50 per hour. These costs have been figured in our 2021 budget. With an earlier hire there will not be a budget increase or levy increase as the current higher paid position was in the budget for 12 months and would cover the overlap period costs. This position is partially funded with Waiver Management Case work and Social Services Time Study (SSTS) work. The cost of the overlap time is estimated at \$14,300 and it can be managed within the existing approved budget.

	2021	2021
	Single Health	Family Health
Public Health Nurse	step 1	step 1
Rate	\$27.50	\$27.50
Gross	\$57,200.00	\$57,200.00
PERA/FICA/Medicare/Life	\$8,721.00	\$8,721.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$77,407.00	\$90,903.00

	2021	2021
	Single Health	Family Health
Social Worker/Care Coordinator	step 1	step 1
Rate	\$27.23	\$27.23
Gross	\$56,639.00	\$56,639.00
PERA/FICA/Medicare/Life	\$8,636.00	\$8,636.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$76,761.00	\$90,257.00

	2021	2021
	Single Health	Family Health
Registered Nurse	step 1	step 1
Rate	\$26.22	\$26.22
Gross	\$54,538.00	\$54,538.00
PERA/FICA/Medicare/Life	\$8,317.00	\$8,317.00
Health Coverage/H.S.A.	\$11,486.00	\$24,982.00
Total Cost	\$74,341.00	\$87,837.00

RECOMMENDATION:

The HHS Department recommends approving the following:

1. Move forward immediately to post for 1 Public Health Nurse (PHN)/Registered Nurse/Care Coordinator (1 FTE) prior to the person retiring utilizing the MN Merit system with hiring at step 1 or step 2. This posting would be for internal and external candidates. If an internal candidate is selected then move forward immediately to back fill that position until an external candidate has been hired to finish the process.
2. Hire after GCHHS Board’s review and approval.

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



REQUEST FOR BOARD ACTION

Requested Board Date:	June 15, 2021	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:	Approve Accounting Supervisor – 1 FTE Replacement Request		

BACKGROUND:

The following request will be brought forward for the Goodhue County Personnel Committee’s review on June 14, 2021 at 8:30 am.

- **Replacement Request – Fiscal Officer to Accounting Supervisor**

Please see the attached Personnel Committee memo. The HHS Department staff will inform the HHS Board of the Personnel Committee’s actions at our June 15, 2021 Health and Human Services Board meeting.

RECOMMENDATION: GCHHS 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

DATE: June 9, 2021
TO: Goodhue County Personnel Committee
FROM: Nina Arneson, GCHHS Director
RE: **Replacement – Fiscal Officer with Accounting Supervisor - 1 FTE**

BACKGROUND:

Goodhue County Health and Human Services is requesting to replace a Fiscal Officer within our agency. On September 1, 2021, our Fiscal Officer is retiring after 34 years of excellent public service to Goodhue County residents and Goodhue County Health and Human Services.

When Health & Human Services integrated together in 2011 the HHS Finance Division was made up of 1 FTE Fiscal Supervisor I; 1 FTE Fiscal Officer; 7.70 FTE Accounting Technicians. On December 13, 2011 the Fiscal Supervisor I resigned and as directed by the HHS Board the HHS Finance Division would be supervised by Mike Zorn, Deputy Director and the supervisor position would be filled with an accounting technician.

Currently the HHS Finance Division is made up of 1 FTE Fiscal Officer; 6.00 FTE Accounting Technicians and supervised by Mike Zorn Deputy Director.

Goodhue County HHS is a combined Health & Human Services agency with an \$18,294,386 budget for 2021. HHS generates 15.61% State revenue; 28.98% Federal revenue; 12.53% miscellaneous services & charges and receives 42.88% county property tax levy. The Finance Division operates in 4 fiscal years and does approximately 30 different reports due each quarter or annually to Minnesota Department of Human Services and Minnesota Department of Health who supervise the county agencies. HHS Finance works with approximately 39 different Federal grants and 28 different State grants.

As we continue to look at succession planning and organizational changes and that HHS finances are an extremely important area of our agency, we are looking at replacing this position with an Accounting Supervisor classification that would assist in continued succession planning and organizational changes related to future changes and retirements.

The current Fiscal Officer pay range is \$27.30-\$37.33. The new classification of Accounting Supervisor pay range is \$29.63-\$48.29

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RECOMMENDATION:

The HHS Department recommends approving the following:

1. Move forward immediately to post for 1 Accounting Supervisor position utilizing the MN Merit system with hiring at step 1 or step 2. This posting would be for internal and external candidates. If an internal candidate is selected then move forward immediately to back fill that position until an external candidate has been hired to finish the process.
2. Allow if deemed appropriate by the HHS Director, limited flexibility with the hiring range, up to step 6. This is due to a potentially limited workforce availability in this area.
3. Hire after GCHHS Board's review and approval.



Mental Health

DURING AND AFTER THE COVID-19 PANDEMIC

Overview

- County responsibility for provision of recovery services and overall mental health care
- Definitions
- Impact of COVID
- Continuum of care
 - Spotlights
- Where do we go from here?
 - Strong and focused presence on prevention, health promotion, protective factors, early intervention
 - Bolster our basic clinical services and community support
 - Ensure adequate crisis services

COUNTY RESPONSIBILITIES

Community recovery after disaster

- Collaboration to plan, advocate, facilitate, monitor, and implement the **restoration** of public health, health care, human services, mental/behavioral health, and environmental health sectors to at least a day-to-day level of functioning comparable to pre-incident levels and to improved levels, where possible.
- **Recovery strategies** beyond initial life-sustaining care:
 - Short- and long-term programs and services for disaster survivors, responders, and the public
 - Programs and interventions for managing stress, grief, fear, panic, anxiety, and other medical, human services, and mental/behavioral health issues for disaster survivors, responders, and the public

County Responsibility for Mental Health Service

MENTAL HEALTH AUTHORITY:

Minnesota's publicly provided mental health system, is supervised by the Department of Human Services (DHS) and publicly **administered by counties.**

MN Stat. 245.466 Subd.1

Development of Services. The county board in each county is responsible for using all available resources to develop and coordinate a system of locally available and affordable adult mental health services.

Minnesota Comprehensive Adult Mental Health Act

A unified, accountable, comprehensive adult mental health service system that:

- recognizes the right of adults with mental illness to control their own lives as fully as possible;
- promotes the independence and safety of adults with mental illness;
- reduces chronicity of mental illness;
- eliminates abuse of adults with mental illness;
- provides services designed to increase the level of functioning of adults with mental illness
- provides a quality of service that is effective, efficient, appropriate, and consistent with contemporary professional standards in the field of mental health.

Minnesota's Children's Mental Health Service System

A unified, accountable, comprehensive children's mental health service system that:

- **identifies** eligible children
- makes **preventive services** available to all children;
- assures access to a **continuum** of services
- includes **early screening** and prompt intervention to children and their families in the context in which the children live and go to school;
- addresses the unique problems of **paying** for mental health services for children, including:
- **includes the child** and the child's family in planning the child's program of mental health services, unless clinically inappropriate to the child's needs; and
- when necessary, assures a smooth **transition** from mental health services appropriate for a child to mental health services needed by a person who is at least 18 years of age.

DEFINITIONS

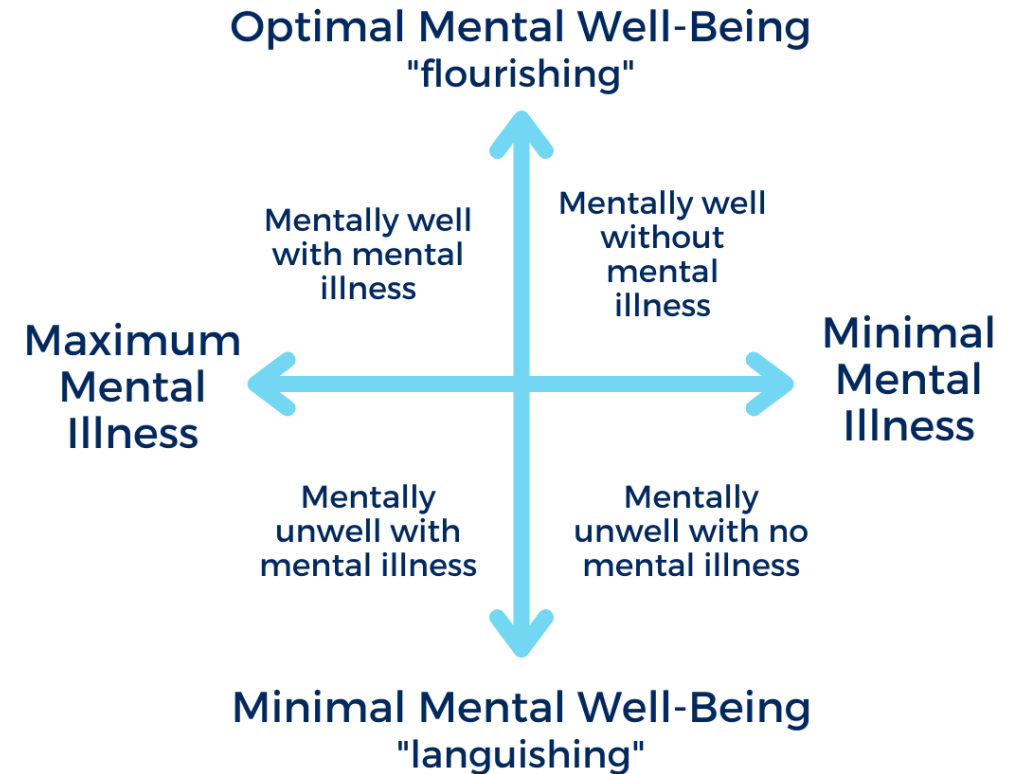
Definitions

- **Mental Health and Well-Being**

- Mental health is more than the absence of disease. Everyone has a state of mental health, and this can change across the lifespan. Not having a mental illness, does not guarantee good mental health. Similarly, having a mental illness, does not guarantee poor mental health.

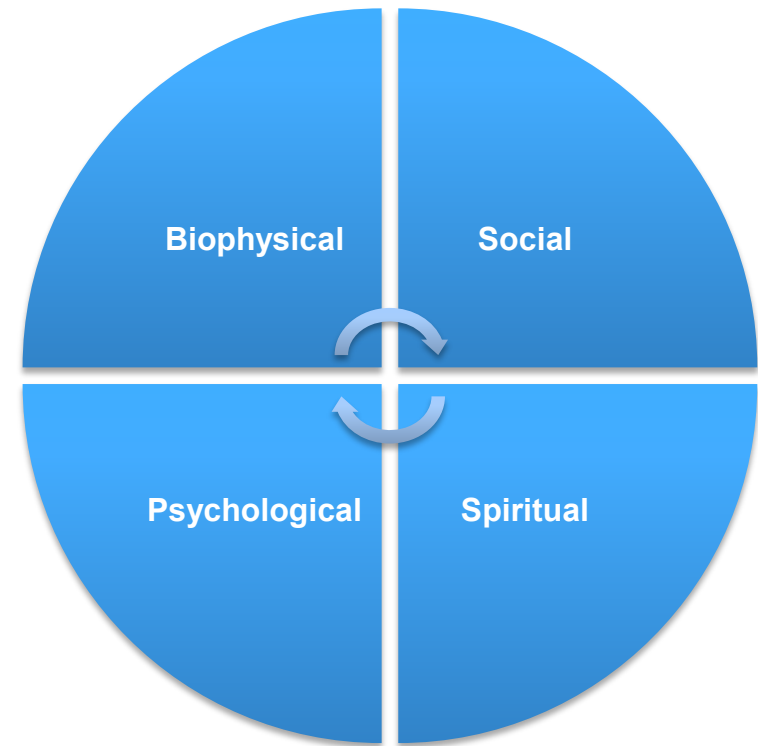
- **Mental Illness**

- Refers to a wide range of mental conditions — disorders that affect your mood, thinking and behavior.

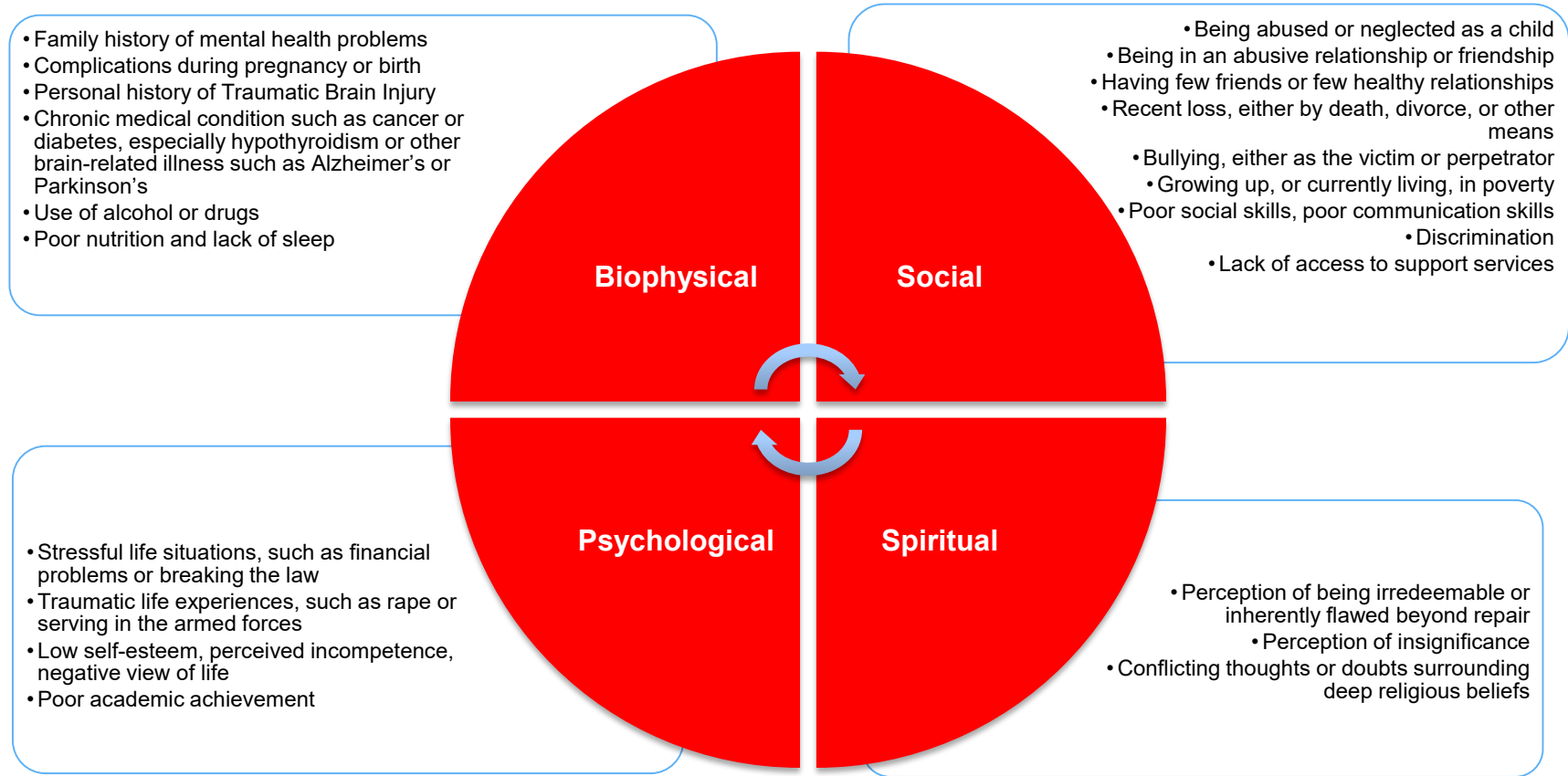


Risk and Protective Factors

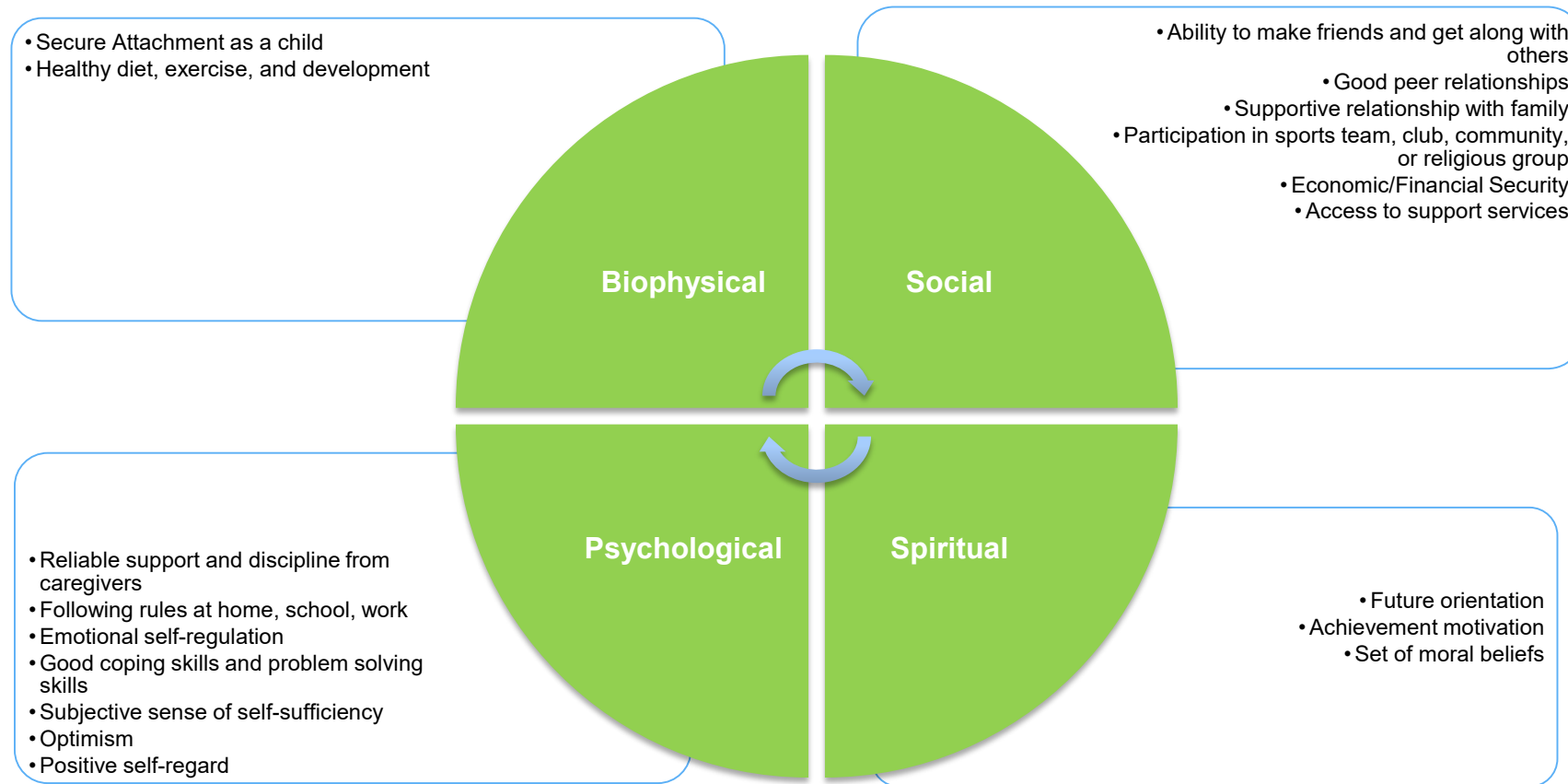
- A **risk** factor is something that helps to create problems.
- A **protective** factor is something that helps to prevent problems.
- Risk and Protective Factors Are **Correlated** and **Cumulative**



Risk Factors

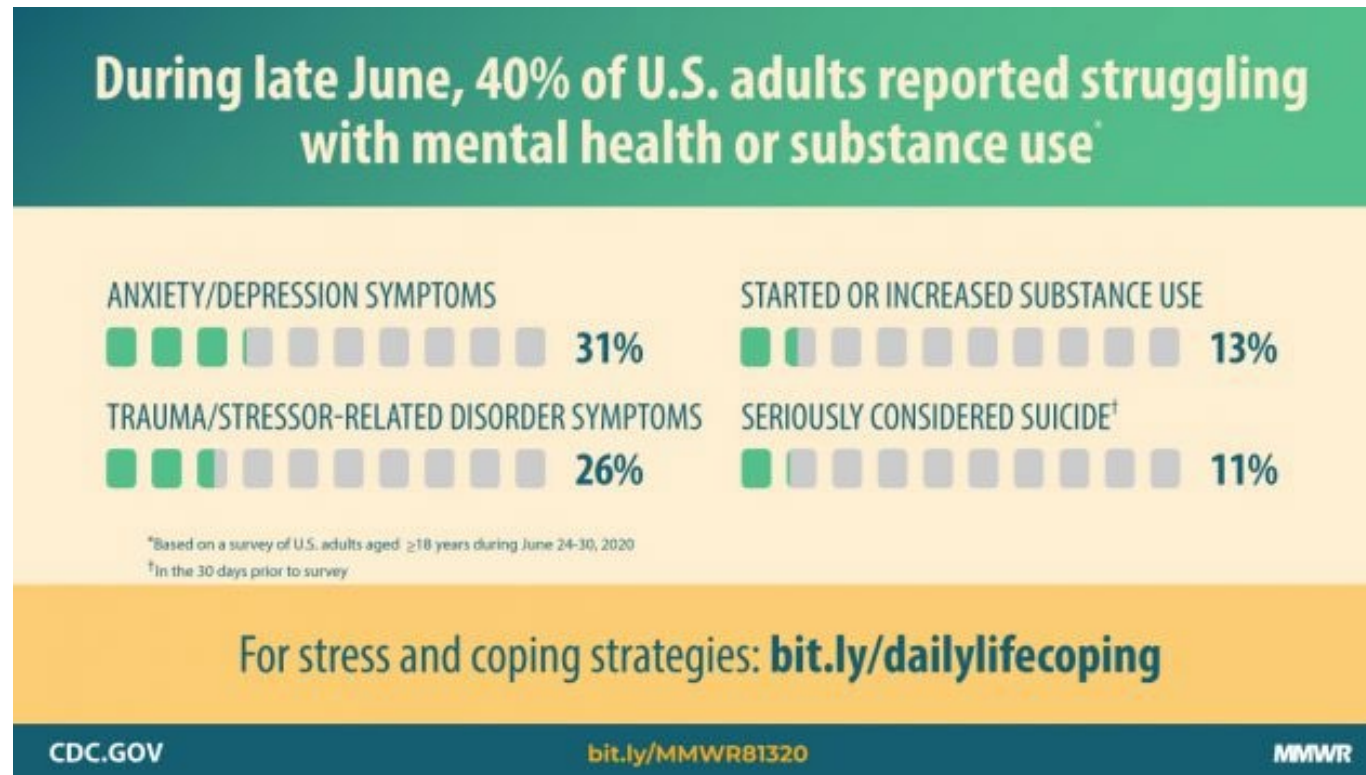


Protective Factors



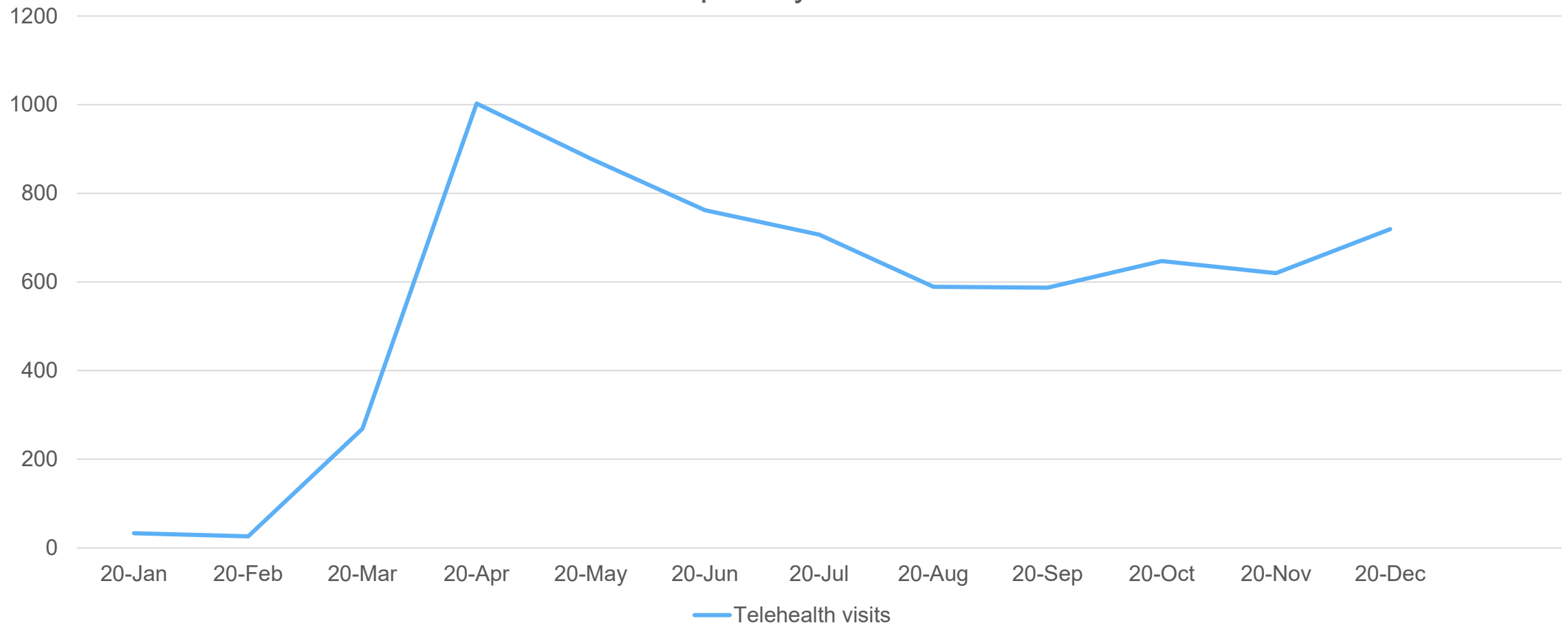
IMPACT OF COVID-19 ON MENTAL HEALTH

Increase in mental health concerns and substance use



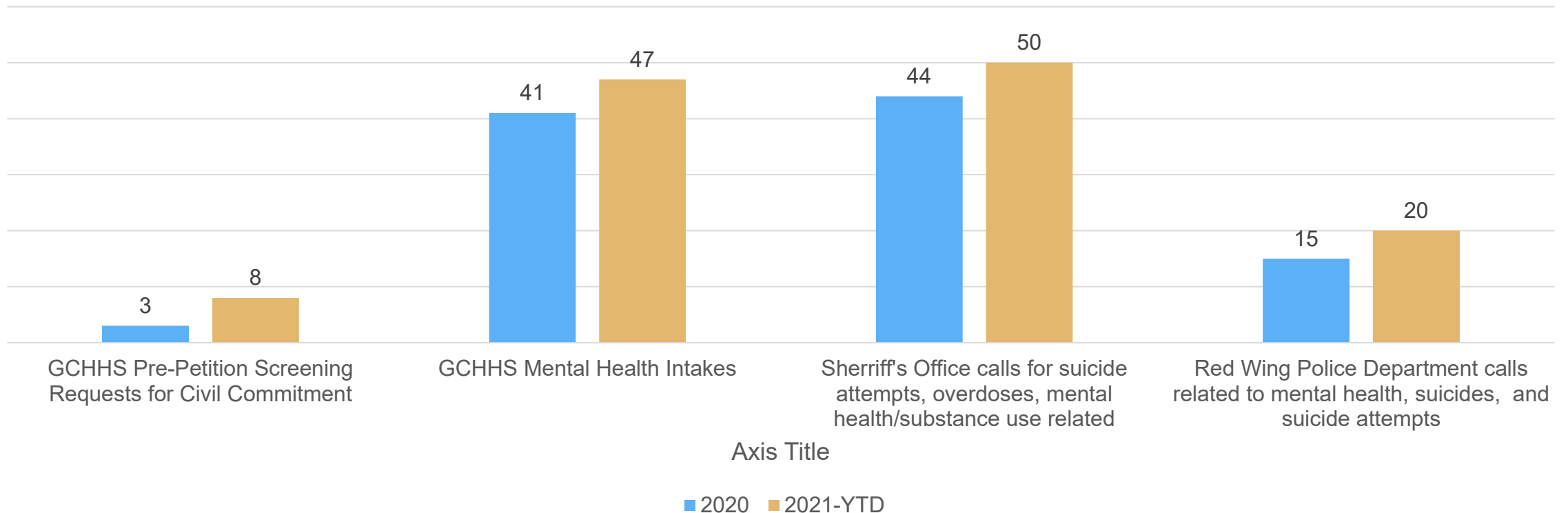
COVID-19 and Mental Health in Goodhue County

Telehealth claims paid by SCHA in 2020



COVID-19 and Mental Health in Goodhue County

Average Monthly Mental Health Service Requests



COVID-19 and Mental Health in Goodhue County

“Socialization was an impact. Not being able to have a connection with other people....I helped out my friends in the community—giving rides. A lot of friends don’t have a vehicle—they would take the bus (which wasn’t running). I took them to the grocery store, gas station. Otherwise they would have been more isolated....Transportation is a need area. Absolutely.”

-community member explaining impact of COVID for people with mental illness

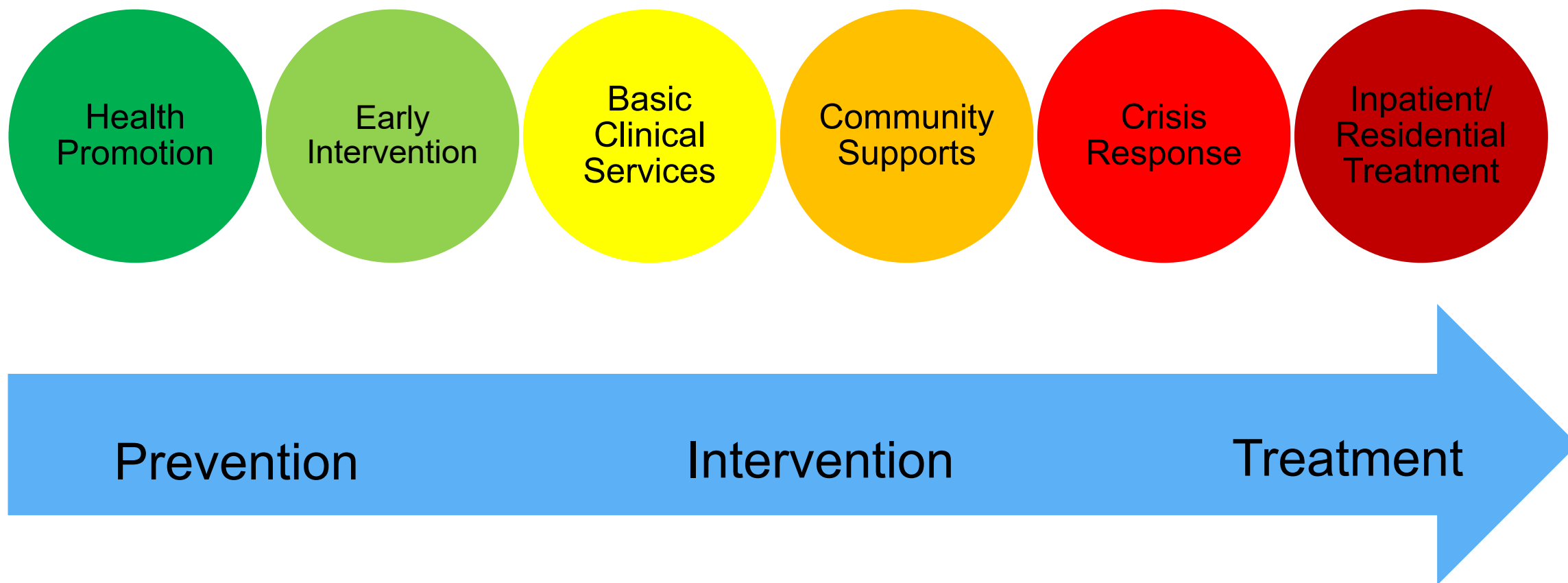
COVID-19 and Mental Health in Goodhue County

“The last year has been really hard. So many of my friends were isolated- they just stayed in their rooms and on social media all day. Online school was horrible for me and so many other kids. I lost all motivation to do anything.”

-adolescent community member explaining impact of COVID on youth

MENTAL HEALTH CONTINUUM

Mental Health Continuum of Care



Thinking Upstream



Health Promotion



- Examples in Goodhue County
 - Child & Family Collaborative
 - Live Well Goodhue County
 - Social Emotional Learning (SEL) in schools
 - Mental Health Coalition
- Where are the gaps? Needs? Wish list?
 - Programs are underfunded and rely heavily on grant availability

Spotlight—Live Well Goodhue County (SHIP)

Health
Promotion

- Partner with the community to improve the health of residents by making it easier to be active, eat nutritious foods, live tobacco-free, and have optimal well-being
- Focus on long-term sustainable changes, such as policy, systems, and environmental changes that make it easier to make healthy choices
- Funded calming rooms in Red Wing Public Schools. This is a therapeutic space designed to promote self-organization and positive change for the staff. The goal is to help staff reduce stress, anxiety and mental distress during the pandemic and future years.



Supported by the Statewide Health Improvement Partnership,
Minnesota Department of Health

Spotlight—Mental Health Coalition

- Formed in 2018 to create a strengthened and unified framework to improve mental health and reduce duplication in Goodhue County.
- Vision for a Goodhue County that has mentally healthy and thriving kids and adults.



The Mental Health Coalition
of Goodhue County

Service Array

- Working towards increasing the number of mental health providers in Goodhue County

Resource Guides

- Created mental health resource guides for the community, schools and caregivers

Civility

- Promoting civility in order to support healthy relationships and social connections

ACEs

- Educating and improving mental health in youth and families through educating about adversity and resilience.

Spotlight—Child & Family Collaborative

Health
Promotion

- Partnership of schools and family serving organizations that work together to build strong families and resilient children
- Strong focus on mental health, adverse childhood experiences, protective factors, and equity
- Grant system to help fund preventative efforts
 - Positive Behavior Interventions and Supports
 - Hispanic Family Therapy
 - Economic Bridging Program
 - Follow Along Program
 - Packing for the Weekend
 - Youth & Family Program



Goodhue County
Child & Family Collaborative
Strong Families. Resilient Children.

Early intervention



- Examples in Goodhue County

- **GCHHS**

- Family Home Visiting
 - Women, Infants, and Children (WIC)
 - Healthy Pathways for adults

- **Community:**

- Red Wing Youth Outreach
 - Parent Support Outreach Program (PSOP)
 - Early Head Start/Early Childhood Special Education

- Where are the gaps? Needs? Wish list?

- Truancy intervention
 - Intensive early childhood intervention for children with delays
 - Additional parenting education and support, such as Incredible Years Program
 - Additional capacity to intervene earlier with adults exhibiting high risk mental health issues

Spotlight—Families First Prevention Service Act



- Major change in federal reimbursement—will result in cost shift from residential care to prevention/early intervention
- Will reduce federal reimbursement for residential care, but will add/increase reimbursement for early intervention



Spotlight—Family Home Visiting

- Every \$1 invested in family home visiting offers a return on investment ranging from \$1.75 to \$5.70 due to reduced costs of child protection, K-12 special education and grade retention, and criminal justice expenses.
- Story from a GCHHS Home Visiting Nurse:
 - *A mom with mental health issues and a history of trauma was feeling overwhelmed with caring for her daughter and starting to have thoughts of harming her. This mom was able to confide in her home visiting nurse and the nurse connected her with resources to keep her daughter safe. Mom now receives weekly therapy, feels connected to her daughter, and have identified a strong support system.*



Spotlight—Healthy Pathways



- A unique program for SCHA members ages 17+ that helps prevent deterioration of an individual's mental health status through early intervention of services and assistance in accessing appropriate levels of mental health services
- Program Goals
 - Prevent mental health deterioration to members who have probable mental health diagnosis through early intervention and education
 - Transition service for those who have had other mental health services (e.g. MH-TCM) and now only require maintenance level of service
 - Provide mental health programming to members who qualify for MH-TCM but prefer a less formal service
 - Connect members to existing services and funding streams as they become available

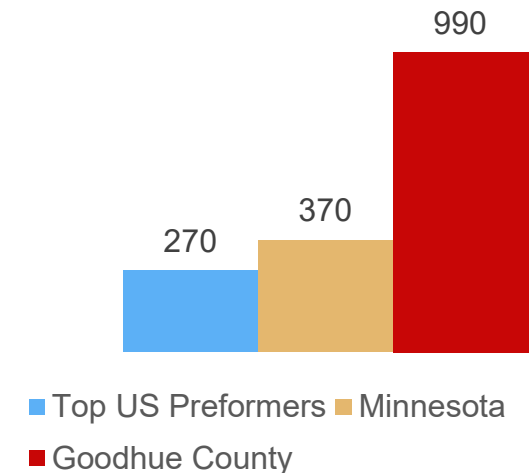


Basic Clinical Services



- Examples in Goodhue County
 - Hiawatha Valley Mental Health Center
 - Fernbrook Family Center
 - Mayo Clinic Health Systems
 - Nystrom and Associates
 - CARE clinic therapy program
 - Private providers
- Where are the gaps? Needs? Wish list?
 - Goodhue County is a mental health care provider desert. Telehealth has helped but doesn't replace in person therapy. Many providers have long waiting lists
 - Workforce shortage is a major barrier

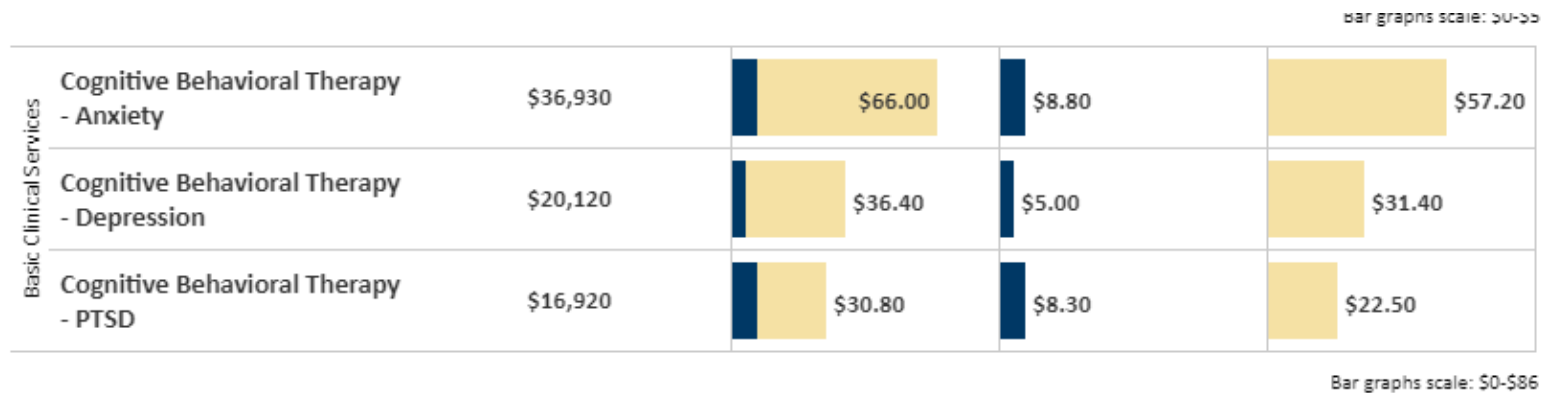
POPULATION TO EVERY 1
MH PROVIDER



Spotlight—Cognitive Behavioral Therapy



- Cognitive behavioral therapy (CBT) helps people learn to identify and change thought patterns that have a negative influence on behavior and emotions
- CBT is a “proven effective” evidence based strategy with a very high return on investment—for every \$1 invested on CBT there is \$8.80 in taxpayer benefits and \$57.20 in society benefits
- <https://mn.gov/mmb/results-first/adult-mental-health/>



Community Supports



- Examples in Goodhue County

- GCHHS***

- Substance Use Treatment Coordination
 - Case management
 - Treatment Court

- Community***

- Adult Rehabilitative Mental Health Services (ARMHS)
 - Children's Therapeutic Services and Supports (CTSS)
 - Other Behavioral Health Services

- Where are the gaps? Needs? Wish list?
 - Not enough supportive housing in Goodhue County
 - Need more in-home therapy options

Crisis Response



- Examples in Goodhue County
 - Mobile crisis
 - Southeast Regional Crisis Center (SERCC)
 - SERCC will help address a vital need in the community for crisis response for both adults and children.

- Informal supports are often utilized during a mental health crisis

- Where are the gaps?
 - Crisis intervention training can be helpful for first responders, law enforcement
 - No behavioral health beds in Goodhue County
 - Emergency rooms do not have in-person specialized behavioral health response

Inpatient/Residential Treatment



- Regional options
 - Anoka State Hospital--\$1375/day
 - Community Behavior Health Hospital-- \$1866/day
 - Residential treatment for children \$300-900+/day

- Where are the gaps?
 - Goodhue County does not have any local crisis placement option
 - There are long wait lists for state operated services. This results in people waiting in the ER for long periods of time

WHERE DO WE GO FROM HERE?

Expand capacity across the continuum



Have a strong and focused presence on prevention, health promotion, protective factors, early intervention



Bolster our basic clinical services and community support



Ensure adequate crisis services

Investing in Prevention



- Strong evidence that investing in prevention and early intervention can result in significant cost savings further down the continuum of care.
 - Potential for utilizing COVID funds for grants for community agencies by partnering with the Child & Family Collaborative
 - Continued robust promotion of Family Home Visiting and Parent Support Outreach Program.
 - Expand capacity to address mental health crises before they become emergencies.
 - Truancy outreach work
 - Increasing community engagement, collaboration to examine and address community mental health needs
 - Collaboration with Prairie Island for community art project
 - Expand social emotional learning opportunities through parenting education and early childhood services
 - Have sober activities and community support
 - Reduce barriers to services, such as child care, transportation

Bolster Clinical Services and Community Supports



- Expand Collaborative Intensive Bridging Services (CIBS)
- Examine housing needs in community and assist people in finding stable housing
- Support culturally specific mental health interventions
- Treatment coordination for substance use disorders
- Continue to seek community mental health providers
- Expand capacity for GCHHS case managers to provide earlier intervention

Ensure adequate crisis services

- Increase utilization of SERCC
- Expand collaboration between law enforcement and HHS
- Promote use of mobile crisis response



Emergency Preparedness Support for Recovery

- GCHHS has shifted our pandemic response to the long process of demobilization and recovery.
- GCHHS will utilize existing partnerships to work with the community to identify mental health needs and support the response to those needs.
 - Mental Health Coalition—network of community organizations and volunteers who partner to address MH needs of community
 - Child and Family Collaborative—leaders from schools and community organizations collaborate to address MH and developmental needs of children and families

Questions?

Goodhue County Health and Human Services Board 6-15-2021 COVID-19 Update

- **Introduction**, Nina Arneson, HHS Director
- **Case and Vaccine Data**, Maggie Cichosz, Child & Family Collaborative Coordinator / Assistant PIO
- **Demobilization**, Heather Arndt, HHS Emergency Preparedness Coordinator



<https://mn.gov/covid19/>

To find a local vaccine provider – pharmacy/hospital, please go to: [vaccine locator](#) . If you are looking for the state run community vaccination clinics, please go to: [COVID-19 Community Vaccination Program](#) . And, as always, if you would like to learn more about Covid-19 including vaccinations, our County website is a great starting point: <https://co.goodhue.mn.us/COVID-19> .

Information and Resources:

- <https://co.goodhue.mn.us/COVID-19>
- <https://www.facebook.com/gchhs>
- [Goodhue County Covid-19 Community Update – 5/13/2021](#)
- [Sign-up for Goodhue County Covid-19 Community Updates](#)

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



**Monthly Update
Child Protection Assessments/Investigations**

Month	2019	2020	2021
January	21	16	20
February	20	30	17
March	34	19	15
April	20	15	24
May	23	21	26
June	16	10	
July	16	12	
August	19	17	
September	25	18	
October	29	25	
November	24	21	
December	21	14	
Total	268	218	102

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

TO: Goodhue County Health and Human Services Board
FROM: Nina Arneson, GCHHS Director
DATE: June 15, 2021
RE: 2021 June Staffing Report

Following the updated Goodhue County hiring policy, below are GCHHS new hires for May/June 2021:

Outgoing Employee	Classification	New Employee	Hire Date
Cheryl Torbenson	Child Support Officer	Natalie Littfin	5-3-21
Mary E	Office Support Specialist	Zach Wegner	6-1-21

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