

# Notice & Agenda

## Swift County Board of Commissioners

Tuesday, July 16, 2019

9:00 AM

**LEC Meeting Room – 301 14<sup>th</sup> St N, Benson, MN**

If you need any type of accommodation to participate in this meeting, please contact the County Administrator at 320-314-8399 at least 48 hours prior to the meeting. Times are only estimates and items may be taken out of order.

<u>Time</u>	<u>Reference</u>	<u>Item</u>
9:00 a.m.		<b>Call to Order and Roll Call</b>
9:01 a.m.		<b>Approve Agenda</b>
9:02 a.m.		<b>Consent Agenda</b>
	1-2	(1) Minutes from the July 02, 2019 Regular Meeting
	3-19	(2) Consider approval of County Policies
	20-21	(3) Consider approving Resolution 19-07-32 for appointing Joseph Tschida to a 4-year term as County Assessor for the remainder of Wayne Knutson's term running until January 1, 2021
9:04 a.m.		<b>Consider Approval of Commissioner warrants and review Auditor warrants reviewed</b>
9:05 a.m.		<b>Commissioner and Board reports</b>
9:25 a.m.		<b>County Administrator report</b>
9:30 a.m.		<b>Citizens Comments</b>
9:45 a.m.		<b>Scott Collins, Environmental Services</b>
	22-24	Consider approval of a Conditional Use Permit #5621 requested by Robert and Pamela Finstrom (owner) and Tomas Zaldivar (Lessee) for Conditional use permit application for building a 24' x 24' butchering and processing shop for packaging and tagging beef, goat, sheep, lamb and deer.
10:00 a.m.		<b>Melissa Streich and Dawn Hegland, RDC Coordinators</b> RDC update
10:25 a.m.		<b>Bill McGeary, Emergency Management Director</b> FEMA update
10:30 a.m.	25-26	<b>Catie Lee, Human Services</b> Monthly update
10:45 a.m.		<b>Other Business</b>
	27-31	Consider approving K Madsen Consulting for all-staff professional development training
	32-38	Hospital Affiliation Discussion
	39	Discussion and Update on Grow Building
11:00 a.m.		<b>Adjournment</b>

## **SWIFT COUNTY BOARD MINUTES**

### **July 02, 2019**

Chairman Hendrickx called the meeting to order at 9:00 AM. with all members present with the exception of Commissioner Rudningen. Also present: County Administrator Kelsey Baker, County Attorney Danielle Olson, Terri Orr, other county employees and members of the public.

Chairman Hendrickx asked if there were any changes or additions to the agenda. Chair Hendrickx had one addition under Other Business, a Community Perspective discussion and update. There were no other changes.

**07-02-19-01** Commissioner Fox moved and Commissioner E. Pederson seconded to approve the agenda as amended. Motion carried unanimously.

**07-02-19-02** Commissioner E. Pederson moved and Commissioner Fox seconded to approve the Consent Agenda items: (1) Approval of Minutes from the June 18, 2019 Regular Meeting, (2) Approval of Minutes from the June 18, 2019 Board of Equalization meeting. Motion carried unanimously.

**07-02-19-03** Commissioner P. Peterson moved and Commissioner E. Pederson seconded to approve the Commissioner warrants as follows: County General Revenue, \$291,979.01; Solid Waste Fund, \$20,126.77; Road and Bridge, \$1,151,989.69; County Ditches Fund, \$13,477.36; which includes the following bills over \$2,000: 6W Department of Community Corrections, \$143,329.50; Anoka County Treasury Office, \$2000.00; Bolton & Menk, Inc., \$5,340.00; Barry Bouwman, \$7,000.00; Central Specialties Inc., \$1,060,105.15; Countryside Public Health, \$57,905.75; Dude's Tiling LLC, \$5,359.08; Duinick Inc., \$83,213.34; Geo Comm Inc., \$3,850.00; Geyer Recycling, \$6,099.33; Kandiyohi County Sheriffs Dept., \$12,515.08; Mike's Guns, \$5,034.58; Overholser Properties LLC, \$3,250.00; Swift County Fair Association, \$17,000.00; Swift County Historical Society, \$18,962.00; US Corrections LLC, \$5,515.00; Waste Management of Northern Minnesota, \$12,069.94. Motion carried unanimously.

Commissioner Rudningen joined the board meeting at 9:04 AM.

Board and Committee Reports were given as follows: Commissioner P. Peterson reported on HRA, 6W Corrections and Prairie Five Community Action Group. Commissioner E. Pederson reported on Computer Professionals Technology, Historical Society and DAC Committee. Chairman Hendrickx reported on AMC Board and cannabis work group meeting, RDC and 6W Corrections. Commissioner Fox reported on Chippewa River Watershed, Hospital Finance Committee and Hospital Board meeting. Commissioner Rudningen reported on Prairie Lakes Youth Programs.

Administrator Kelsey Baker reported on MCIT HR training, a possible Joint City/County, Grow Building, Prairie Five Community Action Group, Community Perspective Committee meeting, Facility Maintenance Position and 2020 Budget meetings.

Chairman Hendrickx asked for citizen's comments. There were none.

Vicki Syverson, HRA Executive Director requested approval of the Swift County HRA Board of Commissioners for a special consideration for spending up to \$7,500 towards a residential demolition.

**07-02-19-04** Commissioner Rudningen moved and Commissioner P. Peterson seconded to approve the Swift County HRA Board of Commissioners for a special consideration for spending up to \$7,500 towards a residential demolition. A lengthy discussion was held. Motion carried unanimously.

Jen Johnson, Safe Avenues Executive Director and Chrissy Thompson, Swift County Advocate updated the Board on Safe Avenues.

Human Services Director Catie Lee requested approval of two resolutions 19-07-31 and 19-07-32 for Families and Children Medicaid and MNCare and MSHO/MSC +PrimeWest Health Proposal for 2020.

**07-02-19-05** Commissioner Fox moved and Commissioner Rudningen seconded to approve two resolutions 19-07-31 and 19-07-32 for Families and Children Medicaid and MNCare and MSHO/MSC +PrimeWest Health Proposal for 2020. A brief discussion was held. Motion carried unanimously.

Community Perspective Committee updated the Swift County Board on their last four meetings.

**07-02-19-06** Commissioner P. Peterson moved and Commissioner Rudningen seconded to adjourn. Motion carried unanimously.

Meeting adjourned at 10:14 AM.

WITNESSED:

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Gary Hendrickx, Chair

ATTEST:

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Kelsey Baker, County Administrator



<b>Policy Name</b>	<b>Health and Safety</b>
<b>Policy Number</b>	<b>1.802</b>
<b>Origination Date</b>	<b>12-1-98</b>
<b>Board Approval Date</b>	<b>5-16-2017</b>
<b>Policy Owner</b>	<b>Director</b>
<b>Responsible Personnel</b>	Safety & Facility Committee
<b>Regulatory Requirement</b>	OSHA
<b>Cross References</b>	107 - Swift County Emergency Management Organization (SCHEMO) Policy 301 – Safety Policy
<b>Attachments</b>	

## Policy Purpose

### *100 General Health and Safety Policy*

- a. *The Department is concerned about the health and safety of each employee. On the job safety is, however, a shared responsibility of employees and the employer. The employer will make every reasonable effort to prevent injuries to employees and to teach them how to protect themselves from injury. The employer is obligated to develop reasonable and prudent health and safety rules. Employees are bound to follow these rules. Everyone is ultimately responsible for their own safety.*
- b. *This policy was initially developed collaboratively through the combined efforts of the Staff Advisory Team and the Director. It is currently reviewed by the department's Safety Committee. It represents a mutual commitment to make health and safety an important component of the work environment. All new employees are informed about the health and safety program at the time of an initial orientation. All employees receive annual refresher training.*

## Procedure

### **200 Roles and Responsibilities**

**201 Director** - The Director has the following responsibilities:

- Have a complete copy of the **Health and Safety Policy** available and be familiar with it,
- Review accident summary reports,
- Determine that office equipment is in good working condition,
- When new equipment is introduced into the Department, to be satisfied that necessary safety precautions have been exercised,
- Monitor implementation of the **Health and Safety Policy**,
- Instruct employees about the health and safety program and administrative procedures to be followed to insure safe working conditions,
- Make available necessary personal protective equipment, job safety materials, and first-aid materials,
- Arrange safety meetings, as necessary,

- Complete appropriate **Problem Log** entries and insure necessary actions are taken, and
- Cooperate with OSHA compliance officials.

**202 Supervisors** - Supervisors have the following responsibilities:

- Serve as back-up to the Director in that person’s absence.
- Take prompt and preventative actions when necessary.
- Make continuous inspections for unsafe practices and conditions and suggest corrective actions - to be proactive in prevention.
- Enforce health and safety rules and support training activities.
- Ensure injuries are reported, properly treated, and documented.
- **Instill** a “health and safety awareness” in employees.
- Take an active part in planning safety into new operations.
- Make sure that required safety equipment is on hand and is being used.
- Cooperate with OSHA compliance officials.

**203 Employees** - Employees have the following responsibilities:

- Cooperate with the health and safety program by following safety rules.
- Work according to good safety practices as posted, instructed, or discussed.
- Refrain from any act that might endanger the employee or fellow workers and make suggestions on how to improve safety.
- Report any unsafe condition or act to their Supervisor or Director.
- Report all injuries to their Supervisor or Director.
- Maintain a clean and safe work area.
- Actively participate in health and safety education events.
- Cooperate with OSHA compliance officials.

**204 Chain of Command** - For purposes of implementation and monitoring of health and safety in the Department, the following is the chain-of-command:

- 1<sup>st</sup>: Director
- 2<sup>nd</sup>: Adult Social Services Supervisor
- 3<sup>rd</sup>: Financial Services Supervisor
- 4<sup>th</sup>: Children Social Service Supervisor
- 5<sup>th</sup>: Fiscal Supervisor

**300 Employee Training, Education, and Personal Communication**

It is Department policy to provide training to all employees about individual health and safety responsibilities. This training is provided to ensure that all employees are able to recognize and deal with hazards in the work place.

**301 Orientation** - Each new employee receives training related to health and safety during the employee’s orientation to the Department. At a minimum, each employee should receive a copy of the **Health and Safety Policy**. The appropriate element of the Department’s **Orientation Checklist** will be used to ensure this.

**302 Annual** - All current employees should receive periodic training on health and safety topics. At least one annual health and safety-related training event will be provided to employees. The subject of this annual event will be coordinated with the Safety Committee. Topics to be considered include: first aid training, fire extinguisher operation, vehicle operation, ergonomics,

safety reporting, employee-right-to-know, infection control, emergency preparedness, and the like.

## 400 Postings

**401 OSHA** - The Department will maintain appropriate postings as required by OSHA. Among those include:

- **OSHA-300 Illnesses and Injuries Annual Report**
- **Job Safety and Health Protection**

**402 Signage** - The Department will maintain appropriate “exit” signage for the building.

## 500 Security and Emergency Action

**501 Security System Protocol** - There are three components to the security system for the agency:

System Account#	Phone	Security Code	Password
Intrusion	[REDACTED]	[REDACTED]	[REDACTED]
Panic	[REDACTED]	-	[REDACTED]
Fire	[REDACTED]	-	[REDACTED]

**501.1 Intrusion Alarm** - This integrated alarm (six motion detection sensors) is an “after-business-hours” security system designed for staff safety and security of the building and its contents. It is operational when activated by an employee or custodian and can also be deactivated by the same persons. The use of the intrusion alarm system is intended for after-business-hours and on weekends. The system is designed to operate with several basic premises:

- **All employees and custodial staff** should enter the building through the **employee entrance**.
- The **first employee** to enter the building during a normal business day is responsible to **deactivate** the system.
- The **last employee** to leave the building during a normal business day is responsible to **activate** the system.
- Any employee who enters or leaves the building during non-office hours is responsible to **deactivate** and **activate** the system.

### Access to Building

1. When an employee enters the building, that employee should first ascertain if the system is armed. If the system is armed there will be a red light on the panel labeled “armed” and the screen will display “System Armed Type code to disarm”. On a normal business day, the **first employee** to enter the building should go to the control panel and enter the four digit security code [REDACTED]. The system is then disarmed. If the system is disarmed there will be a green light labeled “ready” and the screen will display “System Ready Type code to arm”. If an employee should forget to do this, the employee has about a 20 second “grace period” during which the monitor will automatically “beep” to remind the employee that the employee forgot to deactivate the system.

2. The **last employee** to leave the building should go to the control panel and enter the four digit security code. The system is then active. On a normal business day, it will be the responsibility for each employee who leaves the building after 4:30 p.m. or thereabouts, to determine if any

other employees are still in the building. The **last employee** to leave the building has the responsibility to activate the system.

### **What To Do If Alarm Sounds**

1. In the event the alarm should go off, the employee should go to the control panel and enter the four digit security code.

2. Next, immediately call the monitoring company at [REDACTED] and inform them of the false alarm. They will require that the employee also give the three letter password - [REDACTED]. The employee has about 60 seconds to perform this process. If you do not perform these steps, local law enforcement will automatically be summoned by the monitoring company. Then call local dispatch to inform them of the false alarm **320-843-3133**.

3. Leave some kind of message (written, email, or voice mail) for the Director that the employee was involved with the false alarm.

4. When leaving the building, the employee should follow the same procedures as normal.

**501.2 Panic Alarm** - This alarm system is a daytime, normal-business-hours security system designed for use by interested employees. It is operational only when activated by an employee. Interviews with potentially threatening persons should be conducted in one of the interview rooms and a Supervisor or the front desk personnel should be alerted to the interview. **The appropriate time to use the panic alarm: when there is an IMMEDIATE threat of physical harm to self or other.** When the alarm system is activated, the following protocol should be followed:

1. The employee in imminent harm or someone viewing it should push the panic button. It is okay to push the alarm button more than once. The button should be held down for at least one second.

2. The monitoring company will receive the alarm and they in turn contact local law enforcement. This will take place automatically within about 60 seconds. The front desk will also be notified of the alarm via the control panel located by the front desk. **Unless you have notified the front desk of potential use of panic button, the staff at the front desk will not know which meeting room/office has the button that is setting off the alarm.** If the alarm responds to the panic button and no one was notified of a potentially dangerous situation, the Director needs to complete a building search to determine location of pushed panic button.

3. Front desk personnel should notify the Supervisor of the employee or the Director where the alarm exists. In the absence of these persons, front desk personnel should contact another Supervisor. Front desk personnel should then turn off the alarm by entering the four digit security code [REDACTED].

4. The first administrative person that front desk personnel contacts should go to the incident location to assess the situation.

5. If the Supervisor or Director determines that evacuation of the building is necessary, that person should **quietly** notify staff to immediately evacuate the building and have staff go to the staff parking lot via the closest exit.

6. If the building is to be evacuated, employees who are meeting with clients should instruct the clients to go to the public parking lot. **Do not** take clients to the employee parking lot because one of them *may be* assisting the perpetrator. The front desk personnel should quickly pick up one of the cell phones on the way out of the building, if available.

7. If the building is to be evacuated, front desk personnel should instruct any customers in the lobby area to evacuate the building and tell customers to go to the public parking lot.

8. The Supervisor or Director should check the public restrooms, conference room, and employee lunch room to alert employees of the emergency situation.

9. The Supervisor or Director should remain at a safe distance to monitor the incident until law enforcement arrives.

10. As soon as it determined that a **“false alarm”** situation exists, front desk personnel should call the monitoring company at [REDACTED] and report this. This person should be ready to provide the appropriate account # and password - “[REDACTED]”

Panic Button	Room #	Person in possession
7	[REDACTED]	[REDACTED]
8	[REDACTED]	[REDACTED]
9	[REDACTED]	[REDACTED]
10	[REDACTED]	[REDACTED]
11	[REDACTED]	[REDACTED]
12	[REDACTED]	[REDACTED]
13	[REDACTED]	[REDACTED]
14	[REDACTED]	[REDACTED]
15	[REDACTED]	[REDACTED]
16	[REDACTED]	[REDACTED]
17	[REDACTED]	[REDACTED]
18	[REDACTED]	[REDACTED]

11. Panic buttons are tested by front desk personnel on a quarterly basis.

**501.3 Fire Alarm** - The Department has an integrated fire security system throughout the building. The major components of this system are contained in Section #802. However, for purposes of security it is important to know that 24x7x365 monitoring is incorporated into our system. In the event of a fire or alarm situation, the monitoring company will automatically be notified. They in turn will notify local law enforcement of our location and that a fire situation exists.

**False Alarm** - In the event of a false alarm, front desk personnel should call the monitoring company at [REDACTED] and inform them of the false alarm. Front desk personnel should be ready to provide the appropriate Account # and password - “[REDACTED]” [Account #: Panic/Intrusion Alarm – account # [REDACTED] and the Fire Alarm - account # [REDACTED].

**502 Emergency Evacuation: Fire, Bomb Threat, and/or Toxic** (i.e., gas smell) - In any of these type events or any other circumstance in which the personal safety of employees dictates their immediate evacuation from the building, the following protocol should be followed:

1. The person who identifies an emergency situation should bring it to the immediate attention of a Supervisor or Director.
2. The Supervisor or Director should confirm that an emergency exists. An immediate determination should be made if a fire alarm should be issued or if a quieter means of informing employees and customers is warranted.
3. If the passive means is used, the Supervisor or Director should ensure – in the most efficient manner as possible - that all building occupants are notified immediately to evacuate the building using the closest exit, asking all employees to meet in the employee parking lot.
4. If the building is to be evacuated, employees who have clients in their offices should escort clients outside but instruct the clients to go to the public parking lot. **Do not** take clients to the employee parking lot. Close, but not lock, all doors as you leave the building. The main corridor doors will automatically close in a fire situation.
5. If the building is to be evacuated, front desk personnel should instruct any customers in the lobby area to evacuate the building and go to the public parking lot. The front desk personnel should pick up one of the cell phones on the way out of the building, if available.
6. The Supervisor or Director should check the public restrooms, conference room, and employee lunch room to alert employees of the emergency situation.
7. The Supervisor or Director should remain at a safe distance to monitor the incident until law enforcement arrives. This person should make a floor plan available to emergency personnel. This person should also be responsible for making a head count of employees.
8. Gas smell information from the CenterPoint website: “For your protection, we add an odorant to natural gas, so you can detect even the slightest amount in the air.”
9. In the case of a bomb threat, the employee receiving the threat should complete the **Bomb Threat Checklist (1-802b)** when time permits.

**503 Tornado Protocol** - There is a difference between a “**tornado watch**” and a “**tornado warning**.” A “watch” means that conditions are right for a tornado but no funnels have been sighted. A “warning” means that a tornado has been sighted or detected on radar.

**Watch** - in event of a “tornado watch” employees should continue to monitor weather forecasts.

**Warning** - in the event of a “tornado warning” employees should take immediate safety measures. All personnel should go to the interior of the office building, away from any windowed space. In the current building, the ideal place to be would be in the staff cafeteria space. Remain in the safe area until an all clear signal is given. An alternative location is to go to the lower level of the Countryside Apartment building immediately to the East of the building. Note: if the warning should occur close to the end of the work day, each employee will need to make a decision as to his or her best course of action.

**504 Emergency Phone Numbers** - In the event of an emergency, the emergency numbers to be called are:

Law Enforcement	9 911	Fire, Violence, Bomb Threat, etc.
Hospital	9 843-4232	Injury
Physician	9 843-2030	Injury
MSDS	9 1-800-451-8346	Hazardous Substances
Monitoring Company	9 1-800-858-7811	False alarm - panic or intrusion

### **600 Medical Emergency, AED, and First Aid**

In case of a medical emergency, attending employees should attempt to render appropriate first aid keeping in mind the “good Samaritan” principle. The employee’s immediate supervisor or Director should be notified as soon as is realistic. The Department has an **Automated Electronic Defibrillator** (AED) device in the building. It is located in the front lobby. Voluntary use of the AED may be made in the case of a cardiac arrest by any employee. Follow the automated voice directions for usage. An emergency **First Aid Kit** is maintained in the cafeteria and can be accessed as necessary. Time permitting and if need be, the immediate supervisor or Director can access the personal profile binder in the Director’s office to ascertain the name of the employee’s primary physician. Information in the personal profile binder also indicates any special medication or medical problems as reported by the employee. The binder is grey with a small white label stating “Personnel Private Profiles”.

### **700 Hazardous Substances**

**701 Hazardous Material** - There are some hazardous materials present in the building. Almost all such material is concentrated in “household” amounts. Most hazardous materials in the building are in the form of cleaning products such as cleansing agents, furniture polish, and the like. There are, however, several items that are in sufficient quantity as to constitute a potential hazard to employees: copier toner and white-out, to name a couple. Caution needs to be used in the handling of any hazardous products. Special care needs to be taken in storing, using, and discarding these items in accordance with the manufacturer’s suggestions.

**702 SDS - Safety Data Sheets** are documents that contain specific information about hazardous material: hazardous ingredients, physical data, fire and explosion hazard data, reactivity data, spill or leak procedures, special protection information, and special precautions. **SDS** documents are retained in the cafeteria by the First Aid Kit in a three-ring binder. Additionally SDS documents are located on the County website –

**703 Suspicious Envelope or Package Handling** - The following are basic guidelines to follow when employees encounter a suspicious appearing envelope or package. A more complete protocol on this subject has been developed and is referenced in the Appendix.

### **General Mail Handling**

- Be observant for suspicious envelopes or packages.
- Open all mail with a letter opener or method that is least likely to disturb contents. Do not use hands.
- Open packages/envelopes with a minimum amount of movement.
- Do not blow into envelopes.

- Do not shake or pour out contents.
- Keep hands away from nose and mouth while opening mail.
- Wash hands after handling mail.

### **Some items that can trigger suspicion**

- Discoloration, crystallization, strange odors or oily stains.
- Envelope with powder or powder-like residue.
- Protruding wires or aluminum foil.
- Excessive tape or string.
- Unusual size or weight given size.
- Lopsided or oddly shaped envelope.
- Postmark that does not match return address.
- Restrictive endorsements such as "Personal" or "Confidential".
- Excessive postage.
- Handwritten, block-printed, or poorly typed addresses.
- Incorrect titles.
- Title but no name.
- Misspellings of common words.
- No return address or strange return address.
- Addressed to individual no longer with organization.
- Marked with any threatening language.
- Excessive weight.
- Ticking sound.

## **800 Fire Protection**

**801 Smoke and Heat Detectors** - The building has 31 smoke and heat detectors throughout the building. Some are visible and some are located within the ductwork of the heating/cooling system.

**802 Fire Alarms** - The building has an integrated fire alarm system. There are four manual pull stations, one located at each exit of the building. These, together with the 31 smoke and heat detectors and the dual fire sprinkler elements, constitute the system. The entire system is tied in to a 24-hour a day electronic monitoring system. In case of an alarm, a local law enforcement immediate notification is made electronically.

**803 Fire Extinguishers** - There are several easy-to-access fire extinguishers on the building premises. Each Mechanical Room contains a fire extinguisher. The garage/storage space also contains a fire extinguisher. All fire extinguishers are checked professionally on an annual basis to insure that they work. The location of the principal extinguishers are as follows:

- Reception area - north wall
- Main corridor - south wall
- Income Maintenance Service space - west wall
- Social Service space - north wall

**804 Sprinkler System** - The Department has a two-tiered fire sprinkler system. The "wet" system is visible in the form of showerheads in the ceiling. The "dry" system is not visible insofar as it is in the building attic. Both are designed to become operational in the event of a fire in the building.

The system is tested annually in conformity with the manufacturer's suggested schedule of maintenance.

**805 Space Heaters - Fans** – The Department has a Heating-Ventilation-Air Conditioning (HVAC) system that is not comfortable for everyone. Additionally, people have a personal preference for temperature. To ensure that we can comfortably work in our environment, the Department has purchased space heaters with the grounded plug to be in compliance. **ALL SPACE HEATERS MUST BE UNPLUGGED WHEN NOT IN USE OR WHEN YOU LEAVE FOR THE DAY.** Unless it is absolutely necessary, space heaters are not be used because it influences temperature fluctuations in nearby rooms. Additionally, fans purchased to ensure air movement should not be used unless absolutely necessary.

## **900 Ergonomics**

The Department has an office environment containing many pieces of office equipment and most employees will in the course of their daily activities have a need to use this equipment. Much of our work is sedentary in nature - we do a lot of sitting. The combining the sedentary aspects of our work and our use of equipment, which entails keyboarding functions, pose unique exposure to what has been called “musculoskeletal disorders” or MSDs. Ergonomics, is the study of this phenomena. Prevention of such injuries is a high priority of the Department. The following are suggestions for employees to follow who are at-risk of MSDs – which is most of us.

**901 Back and Neck** - Use good posture. Don't round your shoulders or hold your head forward. Sit up straight but not too rigidly, evenly distributing the weight of your body. Give yourself frequent breaks by getting up from your chair, moving around to get your blood going, and perform some other essential function. If you sit for long periods of time, shift positions in order to take the strain off tired muscles. Adjust your chair height - when seated, your thigh should be horizontal with your feet flat on the floor.

Every hour or so, take a few seconds to: 1-Shrug your shoulders; 2-Shake your arms; 3-Stretch your legs and back; 4- Rotate your ankles and wrists; and 5- Close your eyes.

**902 Eyes** - Eye muscles can become fatigued. Give them a break from your monitor by closing your eyes and relaxing them periodically. Position your monitor so that the top of the screen is at or slightly below eye level. Avoid direct lighting on your screen if possible. If you need a monitor filter to reduce glare, request one. Keep any window at a right angle to your screen or monitor. Use blinds to reduce excessive light shining through any window.

**903 Hands** - Check your arm position. Your upper arm and forearm should form an approximate right angle with your wrist and hand roughly in a straight line. Elbows should be close to your body with forearms parallel to the floor. Periodically stretch your hands, wrists, and arms before, during, and after extended work on a keyboard. Avoid having your wrists or forearms rest on a hard edge or surface. Use cushioned wrist supports. Request them if you need them.

### **904 Equipment Specific:**

**Chairs** - Sit comfortably in chairs with your back firmly against the chair back. Chair height should be adjusted so your forearms and thighs are parallel to the floor. Your lower back should be fully supported (use a backrest, thin pillow, or rolled-up towel, if necessary). Armrests should only be used to help you get out of your chair, not to lean on while you're working. There should be at least one to two inches between the seat of the

chair and the back of your knees. Your feet should be resting comfortably on the floor or on a footrest (such as a phone book or, if you wear heels, a binder).

**Desktops** - Avoid continually resting your forearms on the edge of your desk; rest your elbow on the desktop while using the phone.

**Computers** - Keep your monitor adjusted to the appropriate height - while looking ahead, your eyes should be at the top of the screen or slightly below eye level. Bi-focals or tri-focals may require some adjustment. Keep monitor about an arm's length away. Position documents to avoid repetitive side to side or up and down movement of your head.

**Phones** - Request a shoulder rest if you are on the phone a lot and want one. Hands-free headsets can also be requested if they would help reduce MSD's.

**Lighting** – Glare reflecting off your computer screen can strain your eyes. If you use a task lamp, it should be aimed toward the document and away from the screen. Light from outside windows should be blocked by blinds, or the screen placed at a right angle to the window. The screen should be free of smudge and dust (clean the screen often).

## **1000 Annual Plan of Events**

**1001 Hazard Identification and Walk Through Inspections** - Survey inspections are an important part of the hazard identification process. Inspections are used to insure that the working conditions are safe for all Department employees and to provide an early warning system to alert administration to potential problems. The Director will use the **OSHA 300 Log, First Report of Injury** forms, and any Workmen's Compensation claims as part of the hazard identification program.

At least an annual walk-through inspection of the building is planned by the Director. A representative of the Union will be given the opportunity to participate in the inspection. To facilitate the inspection process, a **Walk-Through Inspection Checklist** will be used. Necessary corrective actions will be made at the time of the walk-through or as soon as is feasible after the inspection.

**1002 Health and Safety Annual Work Plan** - In conjunction with its normal business, the Safety Committee has responsibility for monitoring the implementation of the **Health and Safety Annual Work Plan**. Developed on an annual basis, the **Annual Plan** indicates health and safety tasks that should be performed on a month-to-month basis.

**1003 Evacuation Drill** - At least two evacuation drills a year should be conducted. The Director is responsible to conduct these unannounced events.

## **1100 Safety Problem Reporting and Accident Investigation**

**1101 Safety Problem Reporting** - All employees have a responsibility to maintain a safe and secure work environment. Having a proactive mind-set about safety and hazard prevention is expected. If an employee recognizes a situation or circumstance that might be potentially injurious to that employee or colleague, it should be brought to the attention of the person's immediate supervisor or the Director. Management has the overall responsibility for taking appropriate action in response to such alerts.

**1102 Accident Investigation** - All accidents and business interruptions that are the result of actions involving employees who require treatment, first aid care, doctor's care, restricted work

activity, incidents involving property or liability, lost time, and “near misses” should be investigated. These are also reviewed by the Swift County Safety Committee. Employees are not expected to complete written reports on “near miss” events. The Director or that person’s designee will investigate all such events. The investigation will be conducted in such a way as to determine what corrective actions should be made to prevent the reoccurrence of a similar episode. The investigation should commence as quickly as possible after the incident to prevent decline in the reliability of the information related to the incident.

### **1200 Record Keeping**

**1201 OSHA-300** - Upon receipt of an **Illnesses and Injuries Annual Report** from the County Auditor/Administrator, this document is routinely posted by the Director on the Employee Bulletin Board. Customarily, this report is received in February.

**1202 Problem Logs** - The Director is responsible for maintaining a **Problem Log** on complaints or reports made involving safety. The **Problem Log** details the date that the concern was identified, the nature of the concern, and what action was taken in response to the problem, if any, and the date of the same. **Problem Logs** are open for inspection at any time.

**1203 Maintenance Schedule** - A master schedule of maintenance that needs to be performed on all major equipment and appliances in the building is maintained by the Director. A review is made of the **Maintenance Schedule** and arrangements are made with various vendors to ensure that proper maintenance and repairs are made. The **Maintenance Schedule** is open for inspection at any time.

**1204 Emergency Evacuation Drills** - As a guide in the execution of an emergency drill, an **Emergency Evacuation Drill Checklist** is used. Upon completion of the drill, the completed document is maintained in the Facility Management Manual.

### **Violation of this Policy**

No or only partial adherence to this policy or procedure may result in noncompliance with current regulatory requirements and subsequent penalties to Swift County Human Services Remediation for violators will include, but not be limited to, disciplinary action up to and including termination depending on the circumstances of the situation at the time.

### **Signatures:**

\_\_\_\_\_  
Policy Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Catherine Lee, Director

\_\_\_\_\_  
Date

Board Approval: \_\_\_\_\_  
Gary Hendrickx, Board Chair

\_\_\_\_\_  
Date



<b>Policy Name</b>	<b>SSIS Activity Log</b>
<b>Policy Number</b>	<b>1.405</b>
<b>Origination Date</b>	<b>7/1/2019</b>
<b>Board Approval Date</b>	<b>7/16/2019</b>
<b>Policy Owner</b>	<b>Fiscal Supervisor</b>
<b>Responsible Personnel</b>	All staff members of the Social Services Unit
<b>Regulatory Requirement</b>	
<b>Cross References</b>	
<b>Attachments</b>	

### **Appendix Purpose**

*To outline required SSIS Activity Log procedures to be used by staff*

### **Procedure**

1. SSIS activity logs and corresponding case notes are to be completed **by Friday at 4:30 p.m. for the preceding work week.** Daily reporting is encouraged, but not required. Supervisors will assure time reporting compliance.
2. If an employee encounters unusual circumstances (ex: a significant spike in case load size, covering another worker's cases during a leave, an unexpected leave) which make it difficult to fulfill this requirement, the employee should discuss the situation with the Supervisor and together they will determine how to proceed.

### ***Why is Activity Log so important?***

Activity Log is the basis of client billing for Targeted Case Management and Waiver Case Management. If activity logs are not completed in an accurate and timely fashion, those case management hours and/or hits will be **lost revenue** to the agency.

- Staff Activity Reporting and Case notes are the basis for many **agency responsibility and liability issues.** Reasonable efforts, compliance with rule/statute, and completion of mandated timelines are all documented through accurate and up to date staff activity entry and case notes.
- When staff activity and case notes are not completed in a timely fashion, it makes it difficult for **co-workers providing coverage** to determine the best course of action should an emergency situation arise and the primary worker is not available to handle the situation.

## **REPORTING EXPECTATIONS:**

It is expected that employees will document 75% of work time as program/case related. For example:

- For someone who works a 40-hour work week, it is expected that 30 hours will be recorded as client related.
- For someone who uses accrued time for a day: the available time would be 40 hours minus the 8 hours of accrued time off. 75% of available time (32 hours) would be 24 hours that would be reported as client related.
- For someone who has a unit meeting lasting 2 hours and an all staff meeting lasting 2 hours during the same week, 75% of available time (36 hours) would be 27 hours that would be reported as client related time.

## **REPORTING PROCEDURES:**

When entering staff activity and case notes, employees should:

- include basic information such as who, what, when and where
- Enter clearly in your staff activity reporting and case note, your plan specific qualifying information.
- List the goal(s) and objective(s) you worked on from the client's case plan.
- Describe your interaction and the client's ability and willingness to participate and relate your activity to the goal
- Complete the Purpose Line with key words that will help you find the case note in the future.

### **For Mental Health Targeted Case Management Claims:**

- Be sure to use the required language including the following key words in both the body of your case note and the purpose line in SSIS Staff Activity Reporting: **Assess, Monitor, Refer, Coordinate, Evaluate, Advocate.**

### **For Waiver Case Management Claims:**

- **May Contain the Following Activities in the Purpose Line of your Staff Activity Entry:**
  - Annual Review of service plans
  - Assisting to identify providers
  - Assisting in accessing services
  - Coordination of service
  - Development of service plan
  - Evaluation & Monitoring of the services identified in the plan.

**Our Policy Goal:**

**Your time is valuable. Please help us claim the revenues you have earned to help serve our clients and provide the necessary resources staff need to perform their work.**

**Signatures:**

\_\_\_\_\_  
Catherine Lee, Director

\_\_\_\_\_  
Date

Board Approval: \_\_\_\_\_  
Gary Hendrickx, Board Chair

\_\_\_\_\_  
Date



<b>Policy Name</b>	<b>County Burial Allowance</b>
<b>Policy Number</b>	<b>2.701</b>
<b>Origination Date</b>	<b>1/1/1997</b>
<b>Board Approval Date</b>	<b>7/16/19</b>
<b>Policy Owner</b>	<b>Financial Services Supervisor – Julie Jahn</b>
<b>Responsible Personnel</b>	Financial Services Staff
<b>Regulatory Requirement</b>	M.S. 261.035
<b>Cross References</b>	
<b>Attachments</b>	<b>Application for County Burial Funds</b>

### **Appendix Purpose**

*To specify the terms of burials paid for at the Swift County Board expense.*

### **Procedure**

- A. In accordance with MN Statute 261.035, Swift County will provide direct cremation for residents of the county who are otherwise unable to pay the cost of for disposition of their remains. A county burial will not be paid if the spouse's assets exceed \$9,000.
  
- B. Under this policy Swift County will utilize cremation. If it is determined that cremation is not in accordance with the decedent's personal preferences or the known practices of the decedent's faith tradition or the personal preferences of the decedent's spouse or the decedent's next of kin, the County Board shall provide a burial and funeral. All exception requests must be made in writing and will be reviewed on a case-by-case basis and approved by the Agency Director or their designee.
  
- C. Application
  - a. The Department will require that a responsible family member complete an Application for County Burial Funds. If death occurs on a weekend and no one at the Department can be contacted, the mortician would proceed with the idea it might be a county paid burial. The family must contact the Department the first business day following the weekend. Authorization and approval of a county burial must be received prior to making funeral plans. The Eligibility Worker will make a timely determination of eligibility for the county funded burial and inform the funeral home of the determination. The funeral direct shall provide a copy of an itemized bill before payment will be made.
  
- D. The funeral home may charge miscellaneous expenses such as memorial cards, register books, acknowledgment cards, flowers, music, etc. to the deceased person's family. A county paid burial cannot exceed the amount adopted by the County Board nor can the Department contribute toward a more expensive burial.

E. Application of Assets

- a. Assets of the deceased person must be applied towards the funeral expense. Death benefits payable from Social Security, Veteran's allowance, insurance or any other source must be applied to the bill first. The funeral home will bill the balance to the Department. The Eligibility Worker will review the bill and forward to the Accounting Office for payment of the county burial.
- b. Any crowdfunding sources such as benefits, fundraisers, or online sources such as GoFundMe accounts, solicited to pay for burial expenses will be considered as available assets to offset the disposition costs. Any crowdfunding benefits raised to help pay for medical expenses of a deceased recipient of Medical Assistance will be considered as available if the Medical Assistance Program covered all medical expenses. Any outstanding medical bills of the deceased that are not covered by Medical Assistance may be paid by the crowdfunding source as an allowable expense; however, any remaining balance in the crowdfunding source will be considered an available asset to help offset the disposition costs. Any funds being raised via crowdfunding, benefits, or fundraisers may be subject to recovery for reimbursement of the county paid burial costs.

F. Infants

- a. Reimbursement for funeral expenses for stillborn children will be at costs and not to exceed 50% of the authorized amount for adults.

G. Allowances for cremation services shall be at the following rates:

- 1. Professional Services \$1000  
(cost of the service, initial transfer, facilities and equipment, visitations, etc.)
- 2. Merchandise  
Urn (item at lowest cost) \$125 (approx.)
- 3. Cast Advance Items
  - a. Outside container/vault (if required) \$95 (approx.)
  - b. Cemetery charges at cost \$150 (approx.)
  - c. Grave Opening/Closing at cost
  - d. Transportation – loaded miles \$1.50/mile
  - e. Crematory charges \$625 (approx.)
  - f. Other (city, fees, etc.) at cost

Swift County does not pay for cemetery markers/headstone.

Allowances for traditional burial services if cremation is against the family's beliefs shall be at the following rates:

- 1. Professional Services \$1400  
(cost of service, embalming, initial transfer, facilities and equipment, visitations, etc.)
- 2. Merchandise
  - a. Casket (item at lowest cost) \$595 (approx.)
- 3. Cash Advance Items
  - a. Outside container/vault at cost \$575 (approx.)

- |                                 |                 |
|---------------------------------|-----------------|
| b. Cemetery charges at cost     | \$500 (approx.) |
| c. Grave Opening/Closing        | at cost         |
| d. Transportation – loaded mile | \$1.50/mile     |
| e. Other (city, fees, etc.)     | at cost         |

Swift County does not pay for cemetery markers/headstones.

**Violation of this Policy**

No or only partial adherence to this policy or procedure may result in noncompliance with current regulatory requirements and subsequent penalties to Swift County Human Services. Remediation for violators will include, but not be limited to, disciplinary action up to and including termination depending on the circumstances of the situation at the time.

**Signatures:**

\_\_\_\_\_

Policy Owner

\_\_\_\_\_

Date

\_\_\_\_\_

Catherine Lee, Director

\_\_\_\_\_

Date

Board Approval: \_\_\_\_\_

Gary Hendrickx, Board Chair

\_\_\_\_\_

Date



# Request for Board Action

BOARD MEETING DATE:  
July 16, 2019

## Commissioner's Report

### Department Information

ORIGINATING DEPARTMENT: Administration	REQUESTOR: Kelsey Baker	REQUESTOR PHONE: 320-314-8399
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### Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Consider appointing Joseph Tschida to a 4-year term as County Assessor for the remainder of Wayne Knutson's term running until January 1, 2021	
AGENDA YOU ARE REQUESTING TIME ON: Consent Agenda	ARE YOU SEEKING APPROVAL OF A CONTRACT? No
IS THIS MANDATED? Yes	EXPLANATION OF MANDATE: MN Statute 273.061 requires the appointment of a County Assessor to a 4 year term
BACKGROUND/JUSTIFICATION: Joe Tschida was hired as the new County Assessor on June 17. Wayne Knutson is retiring, it is in our best interest to appoint Joe to fill the remainder of Wayne's appointed term through the end of 2020. This term shall be considered provisional as Joe is still in his probationary period.	
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED?	

### Budget Information

FUNDING: n/a
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### Review/Recommendation

COUNTY ATTORNEY: Danielle Olson	COUNTY ADMINISTRATOR: Kelsey Baker
RECOMMENDATIONS: N/A	RECOMMENDATIONS: Approve
COMMENTS: None	COMMENTS: None

**RESOLUTION 19-07-32**

**APPOINTING A COUNTY ASSESSOR TO A 4 YEAR TERM**

Motion by Commissioner \_\_\_\_\_ Seconded by Commissioner \_\_\_\_\_

**WHEREAS**, Minnesota Statue 273.061 requires counties to appoint a County Assessor every 4 years, and

**WHEREAS**, Swift County Assessor Wayne Knutson’s current term is set to expire on January 1, 2021, and

**WHEREAS**, the Swift County Board of Commissioners appoint Joseph Tschida for the remainder of Mr. Knutson’s term; and

**NOW, THEREFORE, BE IT RESOLVED**, that Joseph Tschida is appointed to serve the remainder term as the Swift County Assessor through January 1, 2021.

Adopted on a \_\_\_\_\_ vote by the Swift County Board of County Commissioners the 16th day of July 2019

Swift County Board of Commissioners

\_\_\_\_\_  
Gary Hendrickx, Chairman

ATTEST:

\_\_\_\_\_  
Kelsey Baker, County Administrator

Fox \_\_\_\_\_ Hendrickx \_\_\_\_\_ E. Pederson \_\_\_\_\_  
P. Peterson \_\_\_\_\_ Rudningen \_\_\_\_\_



# Request for Board Action

BOARD MEETING DATE:  
July 16, 2019

## Commissioner's Report

### Department Information

ORIGINATING DEPARTMENT: Environmental Services	REQUESTOR: Scott Collins	REQUESTOR PHONE: 320-843-2356
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### Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Consider approval of a Conditional Use Permit #5621 requested by Robert & Pamela Finstrom (Owner) & Tomas Zaldivar (Lessee) for Conditional use permit application for building a 24' x 24' butchering and processing shop for packaging and tagging beef, goat, sheep lamb and deer meat.	
AGENDA YOU ARE REQUESTING TIME ON: Click here to enter text.	ARE YOU SEEKING APPROVAL OF A CONTRACT? No
IS THIS MANDATED? No	EXPLANATION OF MANDATE: Click here to enter text.
BACKGROUND/JUSTIFICATION: Required Conditional Use Permit per subsection 3.3 Code of Ordinances, Agricultural District I. Allowable use with Conditional Use Permit.	
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED?	

### Budget Information

FUNDING:
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### Review/Recommendation

COUNTY ATTORNEY: Danielle Olson	COUNTY ADMINISTRATOR: Kelsey Baker
RECOMMENDATIONS: Click here to enter text.	RECOMMENDATIONS: Click here to enter text.
COMMENTS: Click here to enter text.	COMMENTS: Click here to enter text.

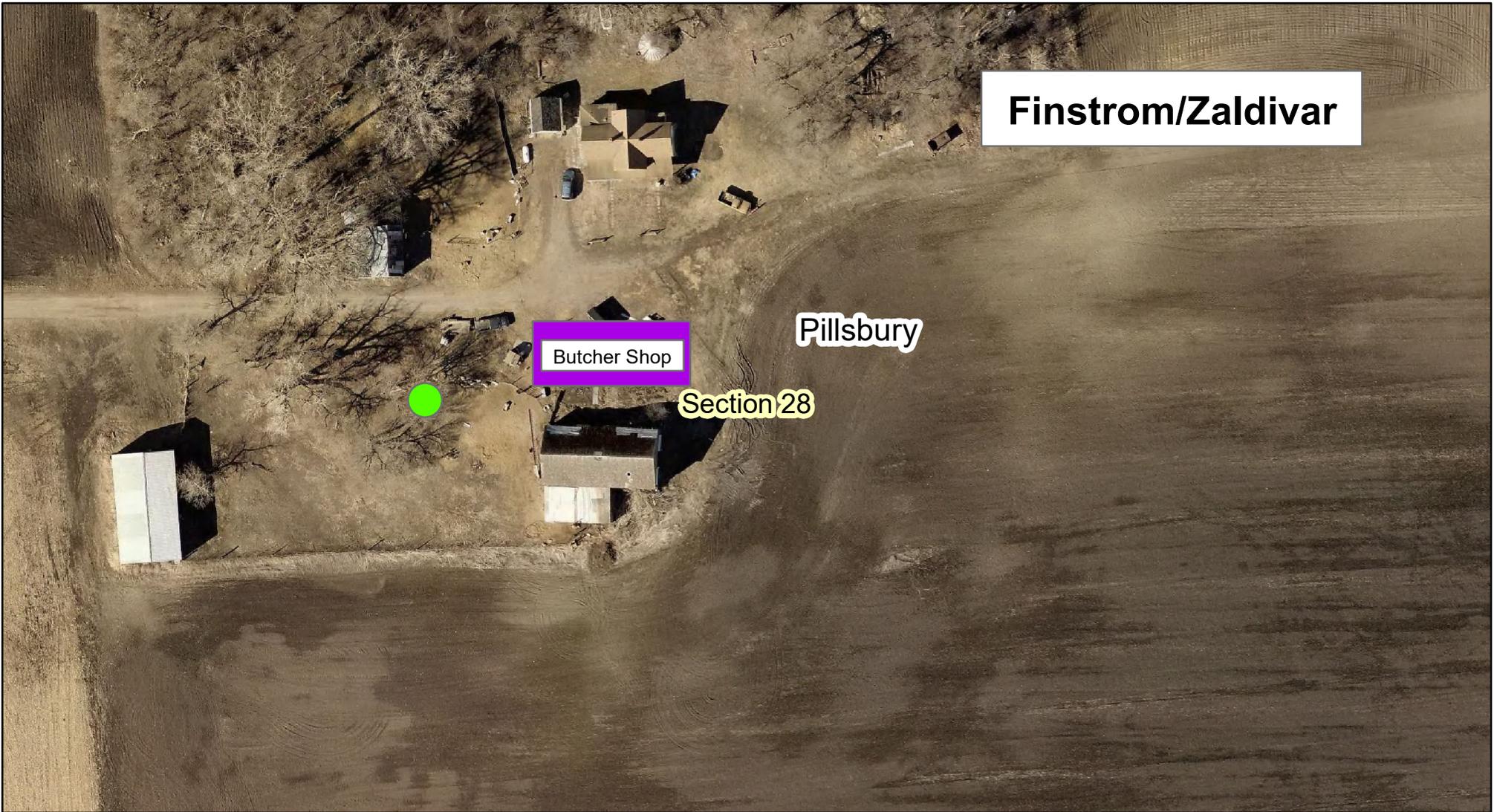
### Board Action

Motions ___ E. Rudnigen ___ G. Hendrickx ___ E. Pederson ___ J. Fox ___ P. Peterson	
Action	Vote

**Proposed Special Conditions**  
**Robert & Pamela Finstrom/Tomas Zaldivar**  
**Conditional Use Permit #5621**

1. The permit holder shall comply with all applicable governmental laws, rules and regulations as they may apply to the project.
2. All complaints, problems or concerns regarding public health, safety and welfare must be addressed by property owner within 30 days of presentations of the complaint. Copies of all complaints and responses addressed to him shall be submitted to Swift County Environmental Services.
3. Compliance with the preceding conditions shall be the responsibility of the property owner. Failure to comply with these conditions shall be cause for revoking this permit until conditions are corrected.
4. This Conditional Use Permit #5621 shall expire one year from the date of issuance if the permit is not utilized.
5. Granting of the conditional use permit shall be for the plans submitted with the initial application only.
6. The applicant will be responsible for signage and will follow Swift County rules and regulations
7. Violations of any of the above-stated conditions may result in revocation of the conditional use permit.

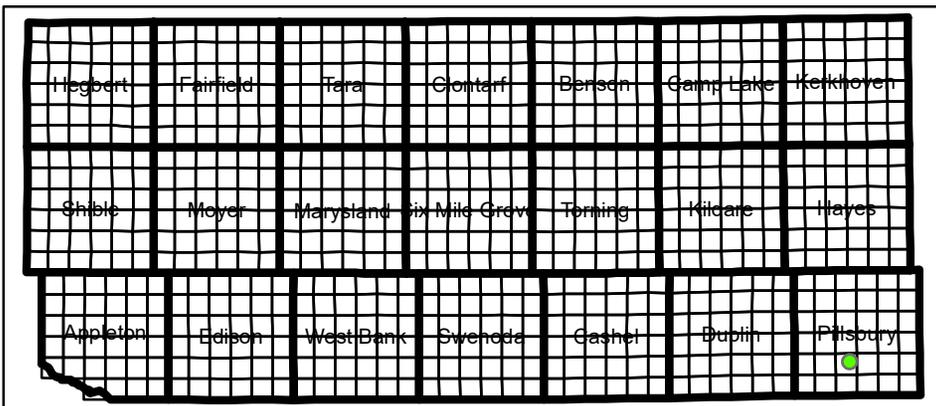
# Finstrom/Zaldivar



Pillsbury

Butcher Shop

Section 28



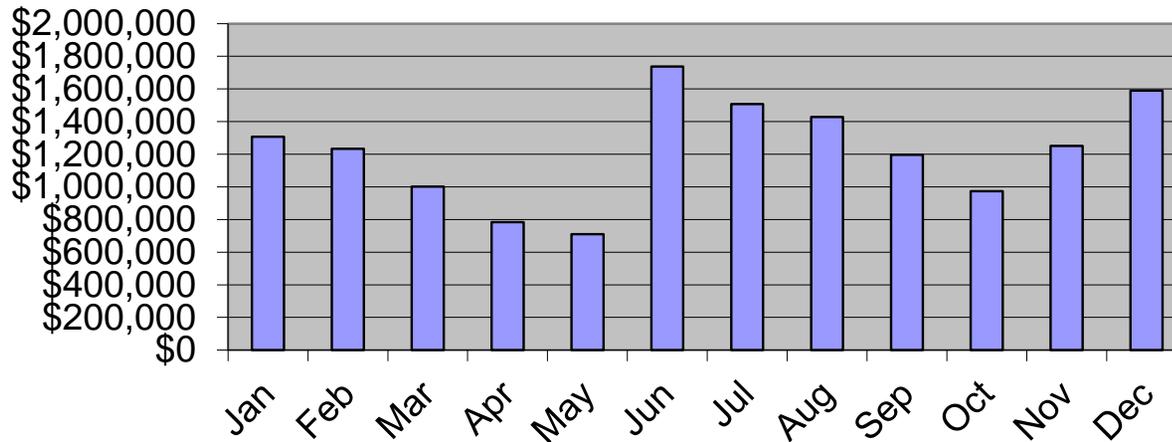
Project: Butcher Shop  
Owner: Pamela Finstrom/Tomas Zaldivar  
Legal: NE 1/4 of Section 28, Twp-120, R-37,  
Pillsbury Township, Swift County, MN.





Swift County Human Services											
Ending Monthly Cash & Investment Balances											
2010 - 2019											
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Average
Jan	\$ 1,116,112	\$ 1,027,808	\$ 977,091	\$ 909,780	\$ 846,281	\$ 983,278	\$ 933,563	\$ 1,668,733	\$ 2,045,847	\$ 2,559,803	\$1,306,830
Feb	\$ 1,069,918	\$ 1,004,522	\$ 829,326	\$ 788,543	\$ 739,793	\$ 882,373	\$ 886,577	\$ 1,562,756	\$ 1,967,692	\$ 2,603,360	\$1,233,486
Mar	\$ 810,381	\$ 848,432	\$ 551,477	\$ 576,608	\$ 601,437	\$ 593,206	\$ 636,635	\$ 1,278,985	\$ 1,706,416	\$ 2,416,328	\$1,001,991
Apr	\$ 732,868	\$ 820,387	\$ 328,272	\$ 451,920	\$ 446,379	\$ 168,803	\$ 352,306	\$ 1,085,797	\$ 1,415,224	\$ 2,030,159	\$783,212
May	\$ 576,849	\$ 669,878	\$ 329,407	\$ 300,099	\$ 269,118	\$ 187,841	\$ 289,965	\$ 804,645	\$ 1,279,329	\$ 2,385,140	\$709,227
Jun	\$ 1,244,642	\$ 1,460,435	\$ 1,218,863	\$ 1,145,907	\$ 1,361,018	\$ 1,187,485	\$ 1,476,200	\$ 2,165,333	\$ 2,745,303	\$ 3,377,899	\$1,738,309
Jul	\$ 1,349,636	\$ 1,142,375	\$ 1,113,725	\$ 1,094,712	\$ 1,165,952	\$ 1,217,022	\$ 1,483,669	\$ 2,160,790	\$ 2,842,236		\$1,507,791
Aug	\$ 1,237,374	\$ 1,228,978	\$ 894,462	\$ 982,736	\$ 1,199,826	\$ 1,126,524	\$ 1,532,984	\$ 1,995,009	\$ 2,661,662		\$1,428,839
Sep	\$ 1,085,187	\$ 1,079,263	\$ 804,086	\$ 714,174	\$ 921,407	\$ 877,167	\$ 1,220,833	\$ 1,650,293	\$ 2,409,864		\$1,195,808
Oct	\$ 878,408	\$ 773,615	\$ 538,645	\$ 627,339	\$ 667,331	\$ 646,265	\$ 1,028,981	\$ 1,459,114	\$ 2,139,152		\$973,206
Nov	\$ 826,623	\$ 741,489	\$ 483,013	\$ 377,803	\$ 477,198	\$ 513,740	\$ 2,056,684	\$ 2,511,571	\$ 3,278,552		\$1,251,853
Dec	\$ 1,279,178	\$ 1,242,733	\$ 1,094,736	\$ 1,057,825	\$ 1,180,113	\$ 1,187,268	\$ 1,888,413	\$ 2,296,240	\$ 3,077,192		\$1,589,300
<b>Average</b>	<b>\$ 1,017,265</b>	<b>\$ 1,003,326</b>	<b>\$ 763,592</b>	<b>\$ 752,287</b>	<b>\$ 822,988</b>	<b>\$ 797,581</b>	<b>\$ 1,148,901</b>	<b>\$ 1,719,939</b>	<b>\$ 2,297,372</b>	<b>\$ 2,562,115</b>	

**Average Monthly Cash & Investment Balance  
2010-2019**





# Request for Board Action

BOARD MEETING DATE:  
July 16, 2019

## Commissioner's Report

### Department Information

ORIGINATING DEPARTMENT: Administration	REQUESTOR: Kelsey Baker	REQUESTOR PHONE: 320-314-8399
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### Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Consider approving K Madsen Consulting for all-staff professional development training	
AGENDA YOU ARE REQUESTING TIME ON: Other Business	ARE YOU SEEKING APPROVAL OF A CONTRACT? No
IS THIS MANDATED? Click here to enter text.	EXPLANATION OF MANDATE: Click here to enter text.
BACKGROUND/JUSTIFICATION: I have been working on finding a trainer for all-staff on professional development. Through professional contacts, I was introduced to Kim Madsen, K Madsen Consulting. Kim is from Willmar and has worked with organizations in our region. She specializes in strength finders, strategic planning, coaching, and employee retention. Attached is the proposal Kim has provided. This would include her speaking with department heads/supervisors at the Swift County Summit and then doing three four-hour sessions for all-staff. There are also bonus options that we could do to have Kim continue working on strategies.	
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED?	

### Budget Information

FUNDING: Board Discretionary
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### Review/Recommendation

COUNTY ATTORNEY: Danielle Olson	COUNTY ADMINISTRATOR: Kelsey Baker
RECOMMENDATIONS: N/A	RECOMMENDATIONS: Approve
COMMENTS: None	COMMENTS: None



K. Madsen Consulting & Coaching

4971 NE 22<sup>nd</sup> St.

Willmar, MN 56201

July 8, 2019

Proposal –

Dear Kelsey

Thank you for the phone call today. It helped me gain a deeper understanding of what you are looking for. This proposal provides a simple overview of what training would look like for providing “Owning Your Strengths” package training. As I stated on the phone, I am a big believer in process and implementation.

I look forward to learning more about your staff, organizational processes, and the organization as a whole.

Here is my recommendation:

**Total investment \$5000**

I have it broken down below.

**Step 1: Investment \$1250**

Begin with your leadership group.

September – Swift Summit: “Owning Your Strengths” package.

**Includes:**

**Prior to training:**

- Everyone will receive a Clifton Strengths Assessment Code
- Everyone will receive the basic instructional video. This video includes instructions on how to use their Strengths online account, and how to utilize their Signature Theme report. There is pre-work with the Signature Theme that will need to be completed prior to coming to their in-person session.

**Day of training:**

- Strengths overview and handouts
- Individual work on strengths
- Activity discussion
- Small group report back to large group
- Wrap up and share homework/clarification and next steps

**After In-Person Session:**

The second video with instructions on how to utilize their individualized “personal insights” report that they will receive at their in-person session (This report is unique to K. Madsen Consulting services).

**This assignment will need to be completed within two weeks following the training. This is an important piece to begin to use the training and move forward with implementation.**

**I follow up once a week via email to the group for up to 2 weeks. I will communicate completion to Kelsey.**

**Step 2: Investment \$3500: to be scheduled in October and November 2019**

Offer 3 more “Owning Your Strength” Sessions: they will mirror the above process.

1- Full day that will be broken into a morning and afternoon session

1 – ½ day session either a morning or afternoon session

This gives three different choices for staff to attend.

**Step 3: Implementation Strategy Session via Zoom - \$250**

Kim works with Kelsey, (to be completed after all sessions have been completed), to develop a customized implementation strategy based off the sessions, and the information gathered.

The six-month strategy is developed to help leadership and staff continue to implement and grow their strengths, leadership, and team building skills.

**Bonus #1: (Added value \$720)**

The four “Owning Your Strengths” packages include a total of 60 assessment codes, however, as a bonus, I’m going to include all 120. (Added Value of \$720) that keeps your contract right at the \$5000 investment amount.

**Bonus #2: (Added value \$360)**

“Just what I need” calls available 1x a month for 6 months for Kelsey to ask questions, or seek guidance as needed, following the sessions.

My role is to walk alongside you and your organization building a culture from the basis of each person’s individual strengths in a positive forward motion.

**Training dates will be secured on the calendar once the contract is signed and received by K. Madsen Consulting.**

**Payment to be made in full with the signed contract, or as soon as it's feasible for your organization. No later than 30 days from the signing of the contract.**

Investment for the "Owning Your Strengths" package for 120 people is \$5000. The investment also includes all travel expenses.

Should you wish to touch base with a reference, I encourage you to reach out to one or both of the following references:

Dr. Ashley Kjos, CEO of Woodland Centers, her number is 320-235-4613 ext. 202.

Cathy Johnson, Executive Director of PFF, her number is 320-235-5897, ext. 111.

They are both more than happy to share about the work we have done and are currently doing.

I look forward to answering any questions you may have and walking alongside you and your team with this growth opportunity.

Sincerely,

*Kimberly C. Madsen*

K. Madsen Consulting & Gallup-Certified Strengths Coach

"Taking your team from good to great to excellence"



# Integration Discussions

7/10/19

# Integration

## Process:

Timeline and  
Deliverables

**DRAFT/Example**

Date	Action
June 2019	<ol style="list-style-type: none"><li>1. Establish Legal Counsel Representative</li><li>2. Negotiation Team Members (SCBHS and CCH/Carris)</li><li>3. Terms Sheet (Key Gives and Gets)</li></ol>
June - Dec	Due Diligence
July/Aug	Create Letter of Intent (LOI) or Memorandum of Understanding (MOU)
August/Sept December	Approval Body Review of LOI/MOU – Non-binding <ul style="list-style-type: none"><li>• City/County =</li><li>• County 1<sup>st</sup> and 3<sup>rd</sup> Tuesdays County</li><li>• City: 1st and 3<sup>rd</sup> Monday<ul style="list-style-type: none"><li>• August Informational Meeting</li><li>• Sept 9<sup>th</sup> to cast vote</li></ul></li><li>• Carris/CCH (Sept, Dec, March)<ul style="list-style-type: none"><li>• Finance Committee(s)</li><li>• Board(s)</li></ul></li></ul>
Oct- Dec 2019	Definitive Agreements Created (Transfer of Ownership Agreement)
TBD	Final Approval/ Signatures
TBD	Closing Documents Created
TBD	Closing (Execution of Transfer Agreement)
TBD	First Day of operating as a Carris/CCH organization
TBD	EPIC Fall 2020



# Comparing Model Options

Guidepost	Lease with Change in control of Operations	Full Affiliation – Transfer of Ownership
Day to Day Operating	Same	Same
Medical Campus (Fiduciary Responsibility)	City/County	CCH / Carris
Transfer of ownership	No	Yes
Max City Bond Rating	No	Likely Enhanced
Governance: Local Control (Influence)	Collaborative Operating Committee	Collaborative Operating Committee
Common Electronic Record	Yes Carris/CCH Cost Resp Liability remains on city /county books	Yes Carris/CCH Cost Resp
Healthcare Services to Community (Financial Viability)	Less Risk	Least Risk
PERA (Public Employee Retirement Association)	No	No
Physician / Hospital Alignment	More	Most

# Partnership Structure Continuum

← Less Integrated

Fully Integrated →

	Lease w/ Change in Control of Operations	Transfer of Ownership to CCH/Carris Health
Description	<ul style="list-style-type: none"> <li>» City/County leases SCBHS to CCH/Carris – long-term lease</li> <li>» CCH operates SCBHS as a part of Carris Health – Regional Health Organization</li> <li>» CCH/Carris becomes fiduciary board for SCBHS</li> </ul>	<ul style="list-style-type: none"> <li>» City / County transfers ownership of SCBHS to CCH/Carris Health</li> <li>» CCH operates SCBHS as a part of Carris Health – Regional Health Organization</li> <li>» CCH remains fiduciary board for SCBHS/Carris Health</li> <li>» Aligned employment model</li> </ul>
Benefits	<ul style="list-style-type: none"> <li>» Significant integration opportunities of SCBHS &amp; CCH/Carris (Economy of scale)</li> <li>» Streamlined governance structure – SCBHS, CCH, Carris Health</li> <li>» May relieve City/County of potential debt obligation to SCBHS for future capital for medical campus infrastructure / equipment etc.</li> </ul>	<ul style="list-style-type: none"> <li>» Full integration with large system in the region.</li> <li>» Alignment of resources to support care delivery</li> <li>» Less fragmentation of care</li> <li>» Likely relieves City/County of debt obligation of medical campus building project and future capital required to continue operations</li> </ul>
Drawbacks	<ul style="list-style-type: none"> <li>» City / County remains involved in ownership of hospital/medical campus</li> <li>» City/County Bond rating may be negatively affected with hospital on city books</li> <li>» Liability on city books of any capital improvements made by CCH/Carris</li> </ul>	

# Governance

Scenario	Local Operating Committee	Carris Health	CentraCare Health
Annual Budget	Review / Recommend	Approve	Approve
Medical Staff Privileges	Approve	Review	N/A
Medical Staff Credentialing	Supply Detail	Support/Process/Complete	Support/Process/Complete
Capital >\$500K <\$2M	Review / Approve	Review	N/A
Capital >\$2M	Review/Recommend	Review/Recommend	Approve
Board Membership	Nominate / Recommend	Review/Recommend	Approve
Hiring CEO (Joint Selection Committee)	Recommend	Approve	Approve
Quality, safety & Patient Experience	Responsible	Oversight	Oversight
Strategic Planning & Annual Workplan	Responsible	Responsible	Oversight
Community Health Needs Assessment	Responsible	Responsible	Oversight
Bylaws/Articles	Recommend	Review/ Recommend	Approve

# CARRIS HEALTH GOVERNANCE STRUCTURE

CentraCare Health Board

Membership:

- Physician Directors (4)
- Corporate Directors (8)
- Carris Health (2)
- SCH Board Chair
- Bishop or SOSB Prioress
- CCH President/CEO

Carris Health Board

Membership:

- Carris Clinic Members (4)
- Carris/Rice Hospital Member (4)
- CentraCare Health Members (2)
- Hospital Member (Proposed)

Hospital Member Operating Committee

Membership:

- Chief of Staff
- Hospital Administrator/CEO
- President – CentraCare Hospitals or Carris Board Representative
- Three to Five Community Members
- Medical Staff or CentraCare Representative

# Considerations

- CCH/Carris agnostic (unless ROI pro forma is unfavorable).
- ROI (in our out) (\$9M Debt with limited net margin)
- Under Lease, capital improvements made by CCH/Carris may have liability on city/county books. Detrimental to bond rating? TBD?

# PRAIRIE FIVE COMMUNITY ACTION COUNCIL, INC.

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**Branch Offices**  
Benson  
Canby  
Ortonville  
Madison



Mission Statement: Working together to strengthen the quality of life in our communities.

July 11, 2019

Kelsey Baker  
Swift County Administrator  
301 14<sup>th</sup> Street North  
Benson, MN 566215

Dear Ms. Baker,

Over the past 18 months Prairie Five has had discussions with you regarding the possibility of moving the Benson Prairie Five Office. Prairie Five appreciates everything that Swift County does for us, and more importantly, Swift County residents.

Prairie Five would be very supportive of a move for our office in Benson. The space that Angela Nissen and I have looked at with you, Jennifer Frost, and Commissioner Peter Peterson would be an ideal location with plenty of space and easy access for the Clothing Room, Food Shelf, and offices.

We appreciate that you have included us in this process and look forward to the possibilities that may be available for relocation of our Prairie Five Benson office.

Please contact Angela Nissen or I if you need anything from us to move this process forward.

Once again, thank you in advance for being a great supporter of Prairie Five services and Swift County residents.

Sincerely,

A handwritten signature in black ink that reads "Deb Larson". The signature is fluid and cursive, with the first name "Deb" being more prominent.

Deb Larson, Executive Director  
Prairie Five CAC, Inc.