

Notice & Agenda

Swift County Board of Commissioners

Tuesday, October 1, 2019

9:00 AM

LEC Meeting Room – 301 14th 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.		Call to Order and Roll Call
9:01 a.m.		Approve Agenda
9:02 a.m.		Consent Agenda
	1-2	(1) Minutes from the September 17, 2019 Regular Meeting
	3-4	(2) Consider approval of 2020 Ditch Assessments
	5-12	(3) Consider Review and Approval of Policy 3.303 MSHO Secure Blue
	13	(4) Consider approval of 1 daycare grant
	14-15	(5) Consider approval for the Swift County HRA to apply a special assessment to the property at 207 9 th St. N. Benson M 56215
9:04 a.m.		Consider Approval of Commissioner warrants and review Auditor warrants reviewed
9:05 a.m.		Commissioner and Board reports
9:25 a.m.		County Administrator report
9:30 a.m.		Citizens Comments
9:35 a.m.		Michael Johnson, Parks, Drainage & Wetlands Discussion on Lateral E of JD #19
10:20 a.m.		Andrew Sanders, County Engineer
	16-17	Consider approval on bid for Gravel Crushing
	18-19	Consider final approval for Resolution 19-10-40 for projects S.A.P. 076-625-014 and C.P. 018-001 to Duinick, Inc.
10:30 a.m.		Other Business
	20-23	Kerkhoven Swift Planning Grant
10:40 a.m.		Recess
11:00 a.m.		Human Services Work Session
3:00 p.m.		Adjournment

SWIFT COUNTY BOARD MINUTES

September 17, 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. Chairman Hendrickx had two additional changes under other business, consider approving Chief Deputy Recorder into the County Recorder and Registrar of Titles position and consider approving the new job description for Deputy Recorder. There were no other changes.

09-17-19-01 Commissioner Fox moved and Commissioner E. Pederson seconded to approve the agenda as amended. Motion carried unanimously.

09-17-19-02 Commissioner E. Pederson moved and Commissioner P. Peterson seconded to approve the Consent Agenda items: (1) Minutes from the September 3, 2019 Regular Meeting, (2) Approval of 2020 Ditch Special Assessments for approval on October 1, 2019, (3) Approval of County Wide Striping 2019, (4) Approval for the annual weed spraying of a portion of the roadside ditches, (5) Approval of two daycare grants. Motion carried unanimously.

09-17-19-03 Commissioner Fox moved and Commissioner E. Pederson seconded to approve the Commissioner warrants as follows: County General Revenue, \$49,902.87; Solid Waste Fund, \$47,769.38; Road and Bridge, \$131,215.26; Human Services, \$91.26; County Ditches Fund, \$1,923.48; County Health Insurance, \$35.00; which includes the following bills over \$2,000: Central Specialties Inc., \$111,002.89; CliftonLarsonAllen LLP, \$4,500.00; Contech Engineered Solutions LLC, \$10,238.50; Counties Providing Technology, \$6,321.00; DoMats Family Foods, \$2,622.78; Michael Jerve, \$10,000.00; Kandiyohi County Auditor Treasurer, \$11,315.46; Pflipsen Trucking LLC, \$17,288.82; Runnings Supply Inc., \$2,839.27; Southside Body Shop & Glass, \$3,962.16; Swift County Environmental Services, \$4,000.00; University Of Minnesota, \$5,305.23; Waste Management Of WI-MN, \$13,261.54. Motion carried unanimously.

Commissioner Rudningen joined the board meeting at 9:05 AM.

Board and Committee Reports were given as follows: Commissioner P. Peterson reported on the Joint Swift County Benson Hospital meeting and 6W Corrections. Commissioner E. Pederson reported on the Joint Swift County Benson Hospital meeting and Soil Water Conservation District. Chairman Hendrickx reported on the Senate Hearing on DHS regarding Primwest, Community Perspective Committee and AMC Fall Policy Conference. Commissioner Fox reported on the Joint Swift County Benson Hospital meeting, Restorative Practice, AMC Fall Policy Conference, Private Industry Council and CareerForce Open House. Commissioner Rudningen reported on Community Perspective Committee, the Joint Swift County Benson Hospital meeting, Enhancing the Organization Committee and meeting with Representative Dave Baker for Prairie Lakes Youth Programs.

Administrator Kelsey Baker reported on the Swift County Fair Volunteer Appreciation Supper, AMC Fall Policy Conference, Enhancing the Organization Committee, Jim Mulder Organizational Study and an employee job opening.

Chairman Hendrickx asked for citizen's comments. Mark Hughes has concerns on tipping fees, open meetings and the Hospital and Clinic lease.

Scott Collins, Environmental Services Director requested approval of a Conditional Use Permit #5645 requested by David & Dennis Holt, 410 150th Ave. NE, Murdock, MN 56271 (owner) for a conditional use permit for grading and filling. This permit is for the purpose of preventing erosion, which includes bank stabilization, control sediment and pollutants, and preserve existing vegetation.

09-17-19-04 Commissioner Rudningen moved and Commissioner P. Peterson seconded to approve a Conditional Use Permit #5645 requested by David & Dennis Holt, 410 150th Ave. NE, Murdock, MN 56271 (owner) for a conditional use permit for grading and filling. This permit is for the purpose of preventing erosion, which includes bank stabilization, control sediment and pollutants, and preserve existing vegetation. A brief discussion was held. Motion carried unanimously.

Scott Collins, Environmental Services Director requested approval for a Conditional Use Permit #5647 with the addition of special condition #5 the dual lighting system, requested by Jeffrey Mumm, 337 2nd Ave., Newport, MN 55055 (owner) & Verizon Wireless LLC, 1635 E. Ponto Lk., Rd. NW, Backus, MN 56435 (Lessee) for constructing a wireless communication facility, which includes a 199' self-support

lattice tower and associated ground equipment and fencing.

09-17-19-05 Commissioner Rudningen moved and Commissioner Fox seconded to approve a Conditional Use Permit #5647 with the addition of special condition #5 the dual lighting system, requested by Jeffrey Mumm, 337 2nd Ave., Newport, MN 55055 (owner) & Verizon Wireless LLC, 1635 E. Ponto Lk., Rd. NW, Backus, MN 56435 (Lessee) for constructing a wireless communication facility, which includes a 199’ self-support lattice tower and associated ground equipment and fencing. A brief discussion was held. Motion carried unanimously.

Human Services Director Catie Lee and Fiscal Supervisor Gary Jensen updated the board on the Financial Summary and Human Services update.

Administrator Kelsey Baker presented the 2020 Budget and requested approval of resolution 19-09-38 on the 2020 preliminary budget and levy for Swift County.

Commissioner Fox moved to increase the levy to 7%. The motion was called three times and without a second the motion will not be considered.

09-17-19-06 Commissioner Rudningen moved and Commissioner P. Peterson second to approve the 2020 preliminary budget and a 5% levy increase for Swift County. A lengthy discussion was held. Motion carried 4-1 with Commissioner Fox opposing.

Commissioner Fox and Commissioner E. Pederson moved to postpone the classification and compensation ongoing maintenance proposal with DDA Human Resources Inc.

Administrator Kelsey Baker requested approval for Chief Deputy Recorder into the County Recorder and Registrar of Titles position.

09-17-19-07 Commissioner Fox moved and Commissioner P. Peterson seconded to approve for Chief Deputy Recorder into the County Recorder and Registrar of Titles position. Motion carried unanimously.

Administrator Baker further requested approval for the new job description for Deputy Recorder.

09-17-19-08 Commissioner P. Peterson moved and Commissioner E. Pederson seconded to approve the new job description for Deputy Recorder. Motion carried unanimously.

09-17-19-9 Commissioner P. Peterson moved and Commissioner Rudningen seconded to adjourn. Motion carried unanimously.

Meeting adjourned at 10:51 AM.

WITNESSED:

Gary Hendrickx, Chair

ATTEST:

Kelsey Baker, County Administrator



Request for Board Action

BOARD MEETING DATE:
October 1, 2019

Commissioner's Report

Department Information

ORIGINATING DEPARTMENT: Auditor/Drainage	REQUESTOR: Kim Saterbak/Mike Johnson	REQUESTOR PHONE: 320-843-4069
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Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Consider approving the proposed 2020 ditch assessments.	
AGENDA YOU ARE REQUESTING TIME ON: Consent Agenda	ARE YOU SEEKING APPROVAL OF A CONTRACT? No
IS THIS MANDATED? No	EXPLANATION OF MANDATE: n/a
BACKGROUND/JUSTIFICATION: Attached are the proposed 2020 ditch assessments for approval. The amounts are the same as the amounts presented the September 17, 2019 board meeting.	
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED?	None

Budget Information

FUNDING: n/a

Review/Recommendation

COUNTY ATTORNEY: Danielle Olson	COUNTY ADMINISTRATOR: Kelsey Baker
RECOMMENDATIONS: Did not review	RECOMMENDATIONS: Review
COMMENTS: n/a	COMMENTS: None

2020

2020 Ditch Assessments

Name of Ditch	2020 Ditch Assessment
County Ditch #7	5,000
County Ditch #9	500
County Ditch #10	5,000
County Ditch #14	15,000
County Ditch #16	5,000
County Ditch #19	5,000
Lat. A of Judicial Ditch #8	5,000
Lat. A of County Ditch #62	1,000
County Ditch #52	10,000
County Ditch #55	10,000
County Ditch #59	2,000
County Ditch #60	10,000
County Ditch #61	10,000
County Ditch #83	15,000
Joint County Ditch #18-SCK	100,000
Joint County Ditch #19-	30,000
Judicial Ditch #5	100,000
Judicial Ditch #15	1,000
Judicial Ditch #7	5,000
Judicial Ditch #8	50,000
	384,500.00



Request for Board Action

BOARD MEETING DATE:
October 1, 2019

Commissioner's Report

Department Information

ORIGINATING DEPARTMENT: Human Services	REQUESTOR: Catie Lee	REQUESTOR PHONE: 320-843-6301
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Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Policy Review and Approval		
AGENDA YOU ARE REQUESTING TIME ON: Regular board	ARE YOU SEEKING APPROVAL OF A CONTRACT? No	
IS THIS MANDATED? Most are	EXPLANATION OF MANDATE: County Board action needs to be taken to review and approve Policies	
BACKGROUND/JUSTIFICATION:		
Human Services Policies		
Number and Name of Policy	Policy Purpose	Summary of Changes
3.303 MSHO Secure Blue	Defines the responsibilities of this agency and the case managers in executing their delegated duties to those enrolled in Minnesota Senior Health Options through Blue Cross Blue Shield of Minnesota.	Added transportation language for clarification of actual practice
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED? Click here to enter text.		

Budget Information

FUNDING: NA

Review/Recommendation

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



Policy Name	MSHO - Secure Blue
Policy Number	3.303
Origination Date	05/01/11
Board Approval Date	10/1/2019
Policy Owner	Social Services Supervisor – Linda Erhardt
Responsible Personnel	Home and Community Care Staff
Regulatory Requirement	MN Statute 256B
Cross References	(Includes but not limited to Department processes, workflows, guidelines or other policies etc...)
Attachments	

Policy Purpose

Pursuant to the above regulatory authorities. This policy defines the responsibilities of this agency and the case managers in executing their delegated duties to those enrolled in Minnesota Senior Health Options (MSHO) through Blue Cross Blue Shield of Minnesota.

Procedure

1. Autonomy of Members' Rights

- a. Care Coordinators will promote each client's autonomy and the decision making abilities of both the client and their family members. During the initial LTCC screening and during the six-month visit, the Care Coordinator will discuss an advanced health care directive product. The preferred tool will be that promoted by the Minnesota Board on Aging. Consumers will be encouraged to complete a directive and if assistance is needed, the Care Coordinator will assist in the process. Notary public services of SCHS will be provided, if needed, at no cost to the consumer.
- b. As appropriate, Care Coordinators will involve the client, caregiver and/or other interested persons, in the development of the comprehensive care plan and will ensure that the client is making informed choices.

2. Care Options Disagreement Resolution

- a. The Care Coordinator will be responsible for informing the Health Plan of a potential DTR. In addition, Care Coordinators will assist with grievances, either written or oral, when requested by client or on behalf of the client if the client requires assistance. The Delegate has also designated a contact person for grievances and when requested by Blue Plus, will provide any necessary information within two business days.

3. Care Coordination Staff Qualifications

- a. SCHS will only employ care coordinators who meet Minnesota Merit System criteria for the classification of Social Worker. Current Merit System

requirements call for a bachelor's degree in social work, sociology or psychology. Care coordinators who are employees of Countryside Public Health Service will be credentialed as either a RN or PHN.

4. Confidentiality/Records Retention

- a. All consumer records developed, maintained, disseminated and destroyed by SCHS will be in accordance with SCHS's Data Practices and Records Management Policy and the County General Records Retention Schedule. The Care Coordinator shall comply with any applicable Federal and State laws that pertain to member rights including HIPAA laws and the Minnesota Data Privacy Act. Client or patient records will be retained for 10 years after case closure.

5. Documentation Guidelines

- a. For the purpose of Care Coordination, SCHS and CPHS will follow the requirements outlined in the Care Coordination Delegation Guidelines and will utilize the standardized forms from Secure Blue.

6. Facilitation of Care Coordination Process

- a. SCHS will provide each Care Coordinator with the most current Care Coordination Delegation Guidelines from Secure Blue. Care Coordinators will comply with the required guidelines. In addition, Care Coordinators will be directed to utilize the website for most up-to-date versions of the required forms. Care Coordinators will also be given information regarding Performance Improvements Projects and chronic care management programs. Care Coordinators will be encouraged to attend trainings presented by the health care plan.
- b. Care Coordination will be provided by SCHS and CPHS only. This service will not be delegated nor subcontracted. Case management will involve the provision of professional services which include these basic functions:
 - i. Intake
 - ii. Needs Assessment
 - iii. Individualized Planning
 - iv. Coordination of Services
 - v. Monitoring of Services
 - vi. Advocacy
 - vii. On-Going Functions
- c. Care Coordinators shall document all activities in the member's case notes. Care Coordinators shall coordinate with local agency case managers, financial workers and other staff as necessary to meet the member's needs.

7. Grievance/Complaint Process

- a. Formal Intake and follow up of all oral and written grievances will be managed by Blue Plus. Care Coordinators will be responsible for assisting members with reporting oral and written grievance to Blue Plus. This policy will be consistent with the Care Coordination Guidelines.
- b. Care Coordinators will direct member to report all oral grievances to Blue Plus by calling member services, seven (7) days a week 8:00 a.m. to 8:00

pm CST. Care Coordinators may also call Blue Plus to report an oral grievance on behalf of the member if the member requires assistance.

- c. If a member requests the assistance of the Care Coordinator in filing a written grievance, the grievance should be transcribed in the member's words and faxed to Blue Plus Consumer Service Center within one business day of the receipt of the grievance. The information faxed to Blue Plus should include both the written grievance and all other pertinent information or documentation related to the grievance. The Blue Plus Grievance Form may be used to document the written grievance. A copy of written grievances, if submitted to the Agency, must be maintained in the member's file.
- d. The Adult Services' Supervisor will be the contact person to maintain a log of the written and/or oral grievances in which the member requested the assistance of their Care Coordinator to report to Blue Plus. Blue Plus Consumer Service Center may contact the Agency for additional information during the investigation of the grievance. The Supervisor will provide any additional information to Blue Plus within two days of the request.

8. Guidelines for Care Coordination Caseloads

- a. Per the Care Coordination Delegation Guidelines, SCHS acknowledges that the required caseload per worker is EW/CW mix= 40-70; Nursing facility only = 90-120; and Community Well only = 75-100.
- b. SCHS will ensure that these caseload numbers/ratios are consistently followed by reviewing caseload numbers at the monthly unit meeting. Cases may be transferred between Care Coordinators to assure equal balances and compliance with maximums and minimums requirements. Position descriptions for Care coordinators also include Alternative Care case management, Adult Protection, and Mnchoices

9. Health Plan Consultation

- a. Care Coordinators will consult with Secure Blue staff and physicians when appropriate. Swift County utilizes the health plan contact list provided by Secure Blue.

10. Enrollment Process

- a. The monthly new enrollment report (CAP and REIN) and the monthly full detail enrollment reports will be reviewed by the Supervisor within two business days of receipt of the reports via secure email. For the members in the community, the Supervisor will assign a care coordinator within two business days from the date of the review. The full detail report will be shared on a monthly basis with care coordinators for their review. Any discrepancies will be reported immediately to Blue Plus. Upon assignment of a new member, Care Coordinators will inform the member of the name, number and availability of the assigned Care Coordinator within 10 days from the date of the receipt of the new enrollment report.
- b. The SCHS Supervisor will review the monthly enrollment reports in regards to Rate Cell D members and will provide a list to Public Health on a monthly

basis via email. This updated list will be forwarded to CPHS within two days of receipt of the enrollment report from the Blues via secure email. For members in the Nursing Home, the NH Care Coordinator will inform the member of the name, number and availability of the assigned Care Coordinator within 10 days from the date of the receipt of the new enrollment report. Any discrepancies will be reported immediately to Blue Plus.

11. On-Site Care Coordination audits

- a. The Blue Plus contract with DHS and CMS requires the auditing of care coordination activities on an annual basis. On-site care coordination audits will not interfere with care coordination activities. Swift County and their Care Coordinators will make every effort to be available for the audits to address questions and concerns. In addition, Swift County will make available the requested audit information.

12. Paraprofessional Staff

- a. Swift County will utilize a paraprofessional for the purposing of entering LTC screening documents. In addition, the paraprofessional is responsible for billing activities. The paraprofessional is directly supervised by the Fiscal Supervisor, has a written job description and receives job performance evaluations on an annual basis. The paraprofessional will not make any clinical decisions. All care coordination activities, including assessments, reassessments and care plan development, will be performed by the assigned Care Coordinator.
- b. Paraprofessional staff, along with all Care Coordinators, is informed about the monthly capitation dates. A separate mailbox is designated solely for the purpose of LTC screening documents and service agreements. This mailbox is monitored daily by Paraprofessional Staff and Care Coordinators ensure paperwork is being entered on a timely basis. In addition, good communication between Paraprofessional staff and Care Coordinators is a high priority.

13. Safety of Care Coordinators

- a. SCHS has written policies to ensure the safety of their Care Coordinators. Please refer to SCHS policy 1.601 – Health & Safety.

14. Safety of Members

- a. SCHS has an obligation to protect the welfare and safety of MSHO clients. Care Coordinators are mandated reporters and have an understanding of the CEP reporting process. In addition, Care Coordinators are knowledgeable in the area of guardianship and conservatorship.
- b. Swift County Human Services does not allow agency staff to transport clients for MSHO/MSO+. This is a covered benefit for medical transport through Secure Blue and is the responsibility of the MCO.

15. Elderly Waiver Network Management

- a. Per the Care Coordination Delegation Guidelines, Blue Plus does not contract directly with EW service providers. Blue Plus utilizes vendors that are within the Delegate's County Network. There are options available listed

in the guidelines for one-time services agreements and the use of lead County Contract.

16. Denial, Termination and Reduction of Service Process

- a. Per the Care Coordination Delegation Guidelines, Blue Plus will review notifications of Denials, Terminations and Reduction of Services for State Plan and Elderly Waiver Services. The Care Coordinator is assigned the responsibility of faxing the Notification of Potential Denial Termination or Reduction of Services form to Blue Plus.

17. Fraud, Waste and Abuse

- a. On an annual basis, Care Coordinators and Administration shall complete Fraud, Waste and Abuse Training. The curriculum is provided by Blue Plus.

18. Coordination of Transitions Between Care Settings

- a. Per the Care Coordination delegation guidelines, the Care Coordinator shall provide transition of care services for members when they move from one care setting to another due to a change in health status. The goal of this process is to reduce incidents related to fragmented or unsafe care and to reduce readmissions for the same conditions. The Care Coordinator will document transition services on the Individual Care Transitions Log in compliance with the timelines stated in the delegation guidelines.
- b. Two individuals within SCHS (an Adult Service Worker and a Supervisor), have been designated to receive the secure emails regarding the inpatient notifications from the Blues. The Social Services Supervisor will be primarily responsible for accessing and distributing the inpatient notifications for both the social services agency and the public health agency. These reports are disbursed to the designated Care Coordinator immediately upon receipt of the secure email. The Care Coordinator will complete the required transitions activity within 1 business day of receipt of the notification by the Agency.
- c. In the event that that Supervisor is out of the office, the second individual (an Adult Service Worker) who has been authorized to receive the inpatient notification from the Blues via secure email, will access the reports and will distribute the reports to the designated Care Coordinator.
- d. When Care Coordinator received notification of Care transitions for individuals on their caseload from other sources such as the member, the family, the clinic, etc; the Care Coordinator will complete the required transition activities within 1 business day of receipt of notice.
- e. In the event that our agency receives notification of a transition and the assigned Care Coordinator is not available to complete the activities within 1 business day, the Social Services Supervisor will either complete the required activities for the worker or will assign the transition activities to another Care Coordinator depending upon availability of staff.

19. Communications with Member's Eligibility Worker

- a. Care Coordinators will complete DHS-5181 Lead Agency Case Manager/Worker Communication Form and provide a copy to the member's Eligibility Worker whenever there is a change in living arrangement and/or

address change. This form will be completed and provided to the Eligibility Worker within the next business day or sooner when possible.

20. Notification of Potential Denial/Termination/Reduction of Services Process

- a. If the Care Coordinator recommends a DTR of services, the Care Coordinator will complete the Notification of Potential Denial/Termination/Reduction of Services form (6.05) located on the Blues manual and reference guide website AND will fax the completed form to the Blues Plus within 24 hours of the determination. This activity will be documented in the client's file.

21. Pass Through Policy and Procedure

- a. Per DHS Bulletin 13-56-04, Swift County Human Services will maintain a Vendor Log for Blues EW claims submitted on behalf of non-enrolled providers for Tier 2 and/or Tier 3 services. SCHS will utilize the excel vendor log provided by DHS. In addition, the HCBS waiver/AC Service Purchase Agreement will be completed with each provider and documentation will be entered on the vendor log Per DHS e-docs 7004, all required specific record retention requirements will be followed.
- b. Care coordinators will be required to inform the Supervisor of new non-enrolled providers and will provide the necessary information for the vendor log. "Tier 2/3 non-enrolled providers" will be a standing agenda item on the monthly Aging Units meetings to ensure that all non-enrolled provider information is gathered and documented in a timely manner.

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 Inc. 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:

Linda Erhardt, Policy Owner

Date

Catherine Lee, Director

Date

Board Review Date: _____

Board Approval: _____
Gary Hendrickx, Board Chair



Request for Board Action

BOARD MEETING DATE:
October 1, 2019

Commissioner's Report

Department Information

ORIGINATING DEPARTMENT: Human Services	REQUESTOR: Catie Lee	REQUESTOR PHONE: 320-843-6301
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Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Consider approval of 1 daycare grant					
AGENDA YOU ARE REQUESTING TIME ON: Regular board			ARE YOU SEEKING APPROVAL OF A CONTRACT? No		
IS THIS MANDATED? No			EXPLANATION OF MANDATE: County Board action needs to be taken to review and approve the grant request		
BACKGROUND/JUSTIFICATION:					
Name	Address	#children in Daycare	Amount requested	Purpose	Committee Approval Date
Jennifer Koepf	224 E Ronning Ave. Appleton	15	\$2250	Replace Sewer	9/23/19
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED? Click here to enter text.					

Budget Information

FUNDING: Budget approval for these loans has been granted by the board.

Review/Recommendation

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



Request for Board Action

BOARD MEETING DATE:
October 1, 2019

Commissioner's Report

Department Information

ORIGINATING DEPARTMENT: Swift County HRA	REQUESTOR: Vicki Syverson	REQUESTOR PHONE: 320-843-4676
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Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Consider giving consent for the Swift County HRA to apply a special assessment to the property at 207 9th St No. Benson MN 56215	
AGENDA YOU ARE REQUESTING TIME ON: Consent Agenda	ARE YOU SEEKING APPROVAL OF A CONTRACT? no
IS THIS MANDATED? no	EXPLANATION OF MANDATE: NA
BACKGROUND/JUSTIFICATION: Swift County HRA is asking to apply a special assessment to the property at 207 9th St No, Benson, MN to replace a furnace.	
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED?	no

Budget Information

FUNDING: \$6,250.00 by Swift County HRA

Review/Recommendation

COUNTY ATTORNEY: Danielle Olson	COUNTY ADMINISTRATOR:
RECOMMENDATIONS: Was not submitted for review	RECOMMENDATIONS: Approve
COMMENTS: n/a	COMMENTS: n/a

RESOLUTION 19-10-40

**CONSENT FOR THE SWIFT COUNTY HRA TO APPLY A
SPECIAL ASSESSMENT ON CERTAIN PROPERTY**

Motion by Commissioner _____ Seconded by Commissioner _____

WHEREAS, the Swift County HRA desires to make a revolving loan to make repairs at 207 9th St No, Benson, MN and

WHEREAS, the property owner has not been able to obtain financing for the project from other possible lenders.

BE IT RESOLVED, that the Swift County Board of Commissioners consents to the Swift County HRA applying a \$6,250.00 special assessment to the property at 207 9th St No, Benson, MN with a parcel number 23-0016-000 in the name of Swift County.

Adopted on a _____ vote by the Swift County Board of County Commissioners
October 1, 2019.

Swift County Board of Commissioners

Gary Hendrickx, Chair

ATTEST:

Kelsey Baker - Clerk of the Board

Fox ___
P. Peterson ___

Hendrickx ___
Rudningen ___

E. Pederson ___



Request for Board Action

BOARD MEETING DATE:
October 1st, 2019

Commissioner's Report

Department Information

ORIGINATING DEPARTMENT: Highway	REQUESTOR: Andrew Sander	REQUESTOR PHONE: (320) 842-5251
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Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST: Gravel Crushing	
AGENDA YOU ARE REQUESTING TIME ON: October 1st, 2019	ARE YOU SEEKING APPROVAL OF A CONTRACT? yes
IS THIS MANDATED? no	EXPLANATION OF MANDATE:
BACKGROUND/JUSTIFICATION: Annual Gravel Crushing	
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED?	See above

Budget Information

FUNDING: County

Review/Recommendation

COUNTY ATTORNEY: Danielle Olson	COUNTY ADMINISTRATOR: Kelsey Baker
RECOMMENDATIONS: XXX	RECOMMENDATIONS: XXX
COMMENTS: XXX	COMMENTS: XXX

Board Action

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

Swift County Highway Department

BID TABULATIONS: County Wide Gravel Processing

September 25, 2019

CONTRACTOR	YARDS	COST	BID
Commerford Gravel, Inc.	45,000	\$6.45	\$290,250.00

Location



Request for Board Action

BOARD MEETING DATE:
October 1, 2019

Commissioner's Report

Department Information

ORIGINATING DEPARTMENT: Highway	REQUESTOR: Andrew Sander	REQUESTOR PHONE: (320) 842-5251
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Agenda Item Details

BRIEF DESCRIPTION OF YOUR REQUEST Final Approval for projects S.A.P 076-625-014 and C.P 018-001 to Duinick, Inc.	
AGENDA YOU ARE REQUESTING TIME ON: October 1 st , 2019	ARE YOU SEEKING APPROVAL OF A CONTRACT? no
IS THIS MANDATED? yes	EXPLANATION OF MANDATE: State Required Board Approval for Final payment.
BACKGROUND/JUSTIFICATION: Duinick, Inc. Completed the grading on S.A.P. 076-625-014 and C.P. 018-001	
PREVIOUS ACTION ON REQUEST / OTHER PARTIES INVOLVED?	none

Budget Information

FUNDING:	State & County
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Review/Recommendation

COUNTY ATTORNEY: Danielle Olson	COUNTY ADMINISTRATOR:
RECOMMENDATIONS: XXX	RECOMMENDATIONS: XXX
COMMENTS: XXX	COMMENTS: XXX

Board Action

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

**RESOLUTION 19-10-39 TO APPROVE FINAL PAYMENT
FOR SAP 076-625-014 & CP 018-001**

Motion by Commissioner _____ Seconded by Commissioner _____

WHEREAS, State Aid Project 076-625-014 & County Project 018-001 have in all things been completed and the County Board being fully advised in the premises.

NOW THEN BE IT RESOLVED, that the Board hereby accepts said completed projects for and in behalf of the County of Swift and authorizes final payment in the amount of \$44,684.25 to Duinick, Inc. for the final contract amount of \$917,597.26.

Dated at Benson, Minnesota this 1st day of October, 2019.

Swift County Board of Commissioners

Gary Hendrickx, Chairman

ATTEST:

Kelsey Baker - Clerk of the Board

Fox ___
P. Peterson ___

Hendrickx ___
Rudningen ___

E. Pederson ___

Swift Planning Grants

Swift County wants to help cities and townships in our County to complete local planning activities. Your success is our success. We know that communities have lots of needs but may have a hard time paying for them. We listened to you and created a new fund to help subsidize the cost of our services to assist you with your requests.

Eligibility

- Eligible entities for the Swift Planning Grant include all cities and townships in Swift County. \$25,000 has been earmarked for 2017 for the Swift Planning Grants.
 - An individual city or township can request up to \$10,000.
- Funds are available to complete comprehensive planning and strategic planning.
- Up to 50% of a project cost can be funded with a Swift Planning Grant.
 - Applicants can use and are encouraged to seek hedgehog grants from the Upper Minnesota Valley Regional Development Commission to help fund the local match.
- One grant per project.
- One grant per eligible entity per year.
- Swift Planning Grants are reviewed and subject to approved by the Swift County Board of Commissioners.
- The Swift County reserves the right to update the eligibility guidelines at any time.

Nature of Project

What type of project are you interested in?

X Comprehensive Planning _____ Strategic Planning

Contact Information

Community Name	City of Kerkhoven
Contact Person	Kim Harkema
Mailing Address	208 North 10 th St
City/State/Zip	Kerkhoven, MN 56252
Work Phone	320-264-2581
Alt. Phone	
E-Mail Address	clerk@kerkcity.com

Project Details

Please provide a brief description of the project you would like assistance with: The City of Kerkhoven will be starting a comprehensive planning process during the Fall of 2018. This plan will provide the city guidance on how to best utilize their resources while looking to the future years to come. Not only will this work allow city residents the ability to contribute and create a shared vision for the City of Kerkhoven, but also serve as guidance to the city council and other decision makers within their community.

Estimated Project Cost

Total Estimated Project Cost \$20,400

Requested Amount from Swift Planning Grant \$10,000

(Maximum request: eligible entities may apply for 50% of the total project cost up to \$10,000.)

Are the remaining project costs committed from the City or other entity? X Yes ____ No

(If Applicable) Please list any other partners in the project and their financial commitment:

Organization & Contact

Upper Minnesota Valley Regional Development Commission

Committed Amount

\$5,000 application to be reviewed by RDC Board of Commissioners on 6/26/18

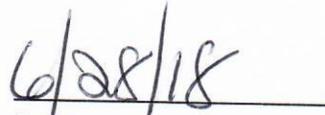
Laura Ostlie, Economic Development Specialist

320-289-1981 ext. 102, laura@umvrdc.org

Authorized Signature



Authorized Signature



Date

City Clerk - Treasurer

Authorized Signature Title



Upper Minnesota Valley
REGIONAL DEVELOPMENT COMMISSION
 Helping Communities Prosper

The UMRDC help cities in region. For us, simple as

323 W. Schlieman Ave. Appleton, MN 56208 320.289.1981 www.umvrdc.org

wants to our it is as

following our mission statement that directs us to "enable the region to thrive by assisting units of government". We know through our recent city survey that cities have lots of needs but are having a hard time paying for them. We listened to you and created a new fund to help subsidize the cost of our services to assist you with your requests.

Hedgehog Grant Application

Eligibility

- Eligible entities for the Hedgehog Grant include local units of government (cities, counties, townships, tribes and school districts) located in Big Stone, Chippewa, Lac qui Parle, Swift and Yellow Medicine Counties.
 - \$10,000 is earmarked for cities under 500 in population.
 - \$10,000 is available to all local units of government in our region.
- Funds are available for **RDC services** in the areas of comprehensive planning, strategic planning and grant writing.
- Eligible entities may apply for a 50% reduction in the costs for RDC services up to a maximum of \$5,000.
- One grant per project.
- One grant per eligible entity per year.
- Hedgehog grants are valid upon signed contract with the UMRDC for services and will be shown as a discount on the final billing for the work outlined in the contract.
- Funds will be made available annually at the discretion of the UMRDC.
- The UMRDC reserves to right to update the eligibility guidelines at any time.

Nature of Project

What type of project are you interested in?

Comprehensive Planning Strategic Planning Grant Writing

Contact Information

Community Name	Kerkhoven
Contact Person	Kim Harkema
Mailing Address	208 North 10 th St
City/ State/ZIP	Kerkhoven, MN 56252
Work Phone	320-264-2581
Alt. Phone	
E-Mail Address	clerk@kerkcity.com

Project Details

Please provide a brief description of the project you would like assistance with: **The City of Kerkhoven will be starting a comprehensive planning process to provide guidance on how to best use city resources while looking to the future. The plan will not only allow residents to contribute and create a shared vision for their community, but also serve as guidance to the city council and other decision makers within the city.**

Estimated Project Cost

Total Estimated Project Cost: 20,400

Requested Amount from Hedgehog Grant \$5,000

(Maximum request: eligible entities may apply for 50% of the total project cost up to \$5,000.)

Are the remaining project costs committed from the City or other entity? X Yes ___ No

(If Applicable) Please list any other partners in the project and their financial commitment:

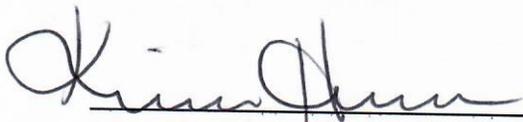
Organization & Contact

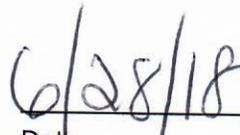
Committed Amount

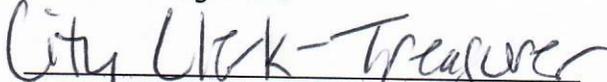
Swift County, Kelsey Baker

\$10,000 application to be reviewed at their upcoming commissioner meeting 6/19/18

Authorized Signature


Authorized Signature


Date


Authorized Signature Title

Thank you for completing this application and your interest in working with the UMRDC!



Upper Minnesota Valley
REGIONAL DEVELOPMENT COMMISSION
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