

TODD COUNTY BOARD OF COMMISSIONERS

Regular Board Meeting Agenda

Date: October 20, 2015

Time: 9:00 AM

Meeting to be held in the County Board Room, Historic Courthouse located at 215 1st Avenue South
Suite 300, Long Prairie, Minnesota 56347

Item #		Approx. Time
1	Call to Order and Roll Call	9:00
2	Pledge of Allegiance	9:01
3	Amendments to the Agenda	9:03
4	Potential Consent Items	9:05
4.1	Approve Meeting Minutes - October 6, 2015	
4.2	Approve Commissioner Warrants	
4.3	Gambling Permit - Browerville Sportsman Club	
4.4	Set Truth In Taxation Meeting Date	
4.5	City Prosecution Contracts	
5	University of MN Extension	9:10
5.1	SNAP - Ed Discussion	
6	Compliance Fund Committee & Auditor Treasurer	9:15
6.1	Request for Compliance Funds Expenditure	
7	Sheriff's Office	9:20
7.1	Federal Boating Safety Equipment Grant	
8	Health & Human Services	9:25
8.1	Appoint Family Services Unit Manager	
8.2	Request to Hire Social Worker	
8.3	Appoint Social Worker - AMH	
8.4	Appoint PT Homemaker	
8.5	Reclassify Child Support Worker to Support Enforcement Aide	
8.6	Request to Hire Support Enforcement Aide	
8.7	Appoint Seasonal Energy Assistance	
8.8	Approve MFIP Biennial Service Agreement	
8.9	Approve Title 3-B Grant Award	
	Standing Reports	
	Auditor - Treasurer Report	
	Commissioners' Report	
	Adjourn	

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-06	

Title (for publication with the Agenda): Approve October 6, 2015 Meeting Minutes	
Date of Meeting: October 20, 2015	Total time requested: 5 min
Department Requesting Action: Administration	
Presenting Board Action/Discussion at Meeting: Denise Gaida	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
October 6, 2015 Meeting Minutes attached	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
Approve Meeting Minutes from October 6, 2015 as read	
Financial Implications: \$	Comments
Funding Source:	
Budgeted: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures STATE OF MINNESOTA } COUNTY OF TODD } I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	Seal
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TODD COUNTY BOARD OF COMMISSIONERS

*Minutes of the Meeting of the Todd County Board of Commissioners held on
October 6, 2015*

Call to Order

The Todd County Board of Commissioners met in the Commissioner's Board Room in the City of Long Prairie, MN on the 6th day of October, 2015 at 9:00 AM. The meeting was called to order by Chairperson Kircher. The meeting was opened with the Pledge of Allegiance. All Commissioners present.

Approval of Agenda

On motion by Kneisl and second by Erickson, the following motion was introduced and adopted by unanimous vote. To approve the agenda as presented with the following changes:

1. Add – Battle Point Park Ramp Agreement with DNR

Routine Business

On motion by Becker and second by Neumann, the following motion was introduced and adopted by unanimous vote: To approve meeting minutes from September 15, 2015 with the correction of adding the name of "Hands of Hope" to the lease agreement at the Government Center and the approval of the September 24, 2015 meeting minutes as read.

On motion by Kneisl and second by Becker, the following motion was introduced and adopted by unanimous vote: To approve the Actions of the HHS Committee Meeting held September 22, 2015 in accordance with the minutes on file in the Todd County Administration Office.

On motion by Neumann and second by Kneisl, the following motion was introduced and adopted by unanimous vote: To approve the Commissioner Warrants number 41560 thru 41710 in the amount of \$133,642.94.

On motion by Erickson and second by Becker, the following motion was introduced and adopted by unanimous vote: To approve the Auditor Warrants number 225910 thru 226050 in the amount of \$409,552.53.

On motion by Becker and second by Neumann, the following resolution was introduced and adopted by unanimous vote:

NATIONAL 4-H Week

WHEREAS, 4-H youth across the nation are leading efforts to solve problems in their communities and make a difference for their futures;

WHEREAS, 4-H is one of the largest youth development organizations in Minnesota and the largest in the nation with six million young people.

WHEREAS, 4-H in Minnesota claims 65,000 youth members and 11,000 adult volunteers, while Todd County's 4-H program numbers more than 175 members and more than 35 volunteers.

WHEREAS, 4-H as part of Extension of the University of Minnesota is a program where youth learn through opportunities that provide them hands-on experiences in 4-H's mission mandates of science, engineering and technology; healthy living; and citizenship and leadership, healthy living and the science of agriculture.

WHEREAS, 4-H has connected youth and their communities with the innovative research and resources from our nation's 106 land-grant universities and colleges for more than 100 years;

TODD COUNTY BOARD OF COMMISSIONERS

NOW, THEREFORE, I, Dave Kircher, Chairman of the Todd County Board of Commissioners, do hereby proclaim October 4-10, 2015, as National 4-H Week in Todd County.

On motion by Neumann and second by Kneisl, the following motion was introduced and adopted by unanimous vote: To approve Great River Regional Library Agreement amendment that would eliminate the automatic 3% increase should a budget for the following year not be approved prior to August 1 of the current year.

On motion by Neumann and second by Erickson, the following motion was introduced and adopted by unanimous vote: To approve the Battle Point Ramp agreement between the State of MN Department of Natural Resources and Todd County.

Presentation of STS Award

Dave Kircher, Board Chair and Kathy Langer, Todd County Corrections Director presented Leland Miron, STS Crew Leader and his crew with a "Certificate of Appreciation" and medal from the United States Army Corps of Engineers for all the hard work with the Gull Lake summer storm clean up.

Hands of Hope

On motion by Kneisl and second by Erickson, the following resolution was introduced and adopted by unanimous vote:

2015 DOMESTIC VIOLENCE AWARENESS MONTH PROCLAMATION FOR TODD COUNTY

WHEREAS, our homes should be a place of warmth, love, safety, and security, and for most of us, home and family can indeed be counted among our greatest blessings;

WHEREAS, domestic violence is a serious crime that terrorizes one's home which affects people, regardless of race, age, religion, income level gender or occupation, and is happening in Todd County;

WHEREAS, the crime of domestic violence violates an individual's privacy, dignity, security, safety, and humanity, due to the systematic use of physical, emotional, sexual, psychological, and economic control and abuse;

WHEREAS, domestic violence costs the nation over 12.5 billion dollars annually in medical expenses, police and court costs, shelters and foster care, sick leave, absenteeism, and loss of productivity. In Todd County, Hands of Hope Resource Center has served over 275 men, women and children to date in 2015.

WHEREAS, a coordinated community effort is needed to address this crime; a coalition of organizations including law enforcement, victim services, health care providers, the clergy, social services and concerned citizens to address this recurring crisis;

NOW, THEREFORE BE IT RESOLVED, in recognition of the important work done by Hands of Hope Resource Center, we the commissioners of Todd County do hereby proclaim the month of October 2015 as Domestic Violence Awareness Month and urge all citizens to work with Hands of Hope Resource Center in eliminating domestic violence in our communities.

Public Works

On motion by Erickson and second by Becker, the following motion was introduced and adopted by unanimous vote: To approve engineering agreement with Widseth Smith Nolting regarding conducting a site assessment and cost feasibility report for the abandoned Long Prairie Armory in the amount of \$6,720.00.

TODD COUNTY BOARD OF COMMISSIONERS

Soil, Water & Conservation

On motion by Becker and second by Neumann, the following motion was introduced and adopted by unanimous vote: To authorize signing of NRBG grant agreement totaling \$100,178 to facilitate payment from the state of Minnesota to Todd County for programs administered using these funds for FY 16/17.

Sheriff's Office

On motion by Neumann and second Kneisl, the following motion was introduced and adopted by unanimous vote: To approve the hire of Alicia Bueckers as part-time Jailor/Dispatcher at a Grade 17, Step 1 with an effective date of October 6th, 2015.

On motion by Becker and second Erickson, the following motion was introduced and adopted by unanimous vote: To approve the hire of Dalton Reinkie as part-time Jailor/Dispatcher at a Grade 17, Step 1 with an effective date of October 6th, 2015.

On motion by Neumann and second Kneisl, the following motion was introduced and adopted by unanimous vote: To approve the hire of Brandon Spanswick as a part-time Jailor/Dispatcher at a Grade 17, Step 1 with an effective date of October 6th, 2015.

On motion by Becker and second Erickson, the following motion was introduced and adopted by unanimous vote: To accept the resignation of Charles Swiggum as PT Jailor/Dispatcher effective September 7, 2015.

Health & Human Services

On a motion by Erickson and second by Kneisl, the following motion was introduced and adopted by unanimous vote: To accept the resignation from Sue Moller as the Lead Eligibility Worker with an effective date of 09/29/2015.

On a motion by Kneisl and second by Becker, the following resolution was introduced and adopted by unanimous vote: To approve the request to recruit and hire a Lead Eligibility Worker, to fill the position left vacant by the resignation of Sue Moller.

On a motion by Kneisl and second by Erickson, the following motion was introduced and adopted by unanimous vote: To approve the hire of Laurie Eckel to fill the open part-time Home Health Aide position at Grade 14, Step 1.

On a motion by Becker and second by Neumann, the following motion was introduced and adopted by unanimous vote: To accept notice of resignation for Bonnie Pohl as HHA temp pool, effective 9/29/15.

On a motion by Kneisl and second by Becker, the following motion was introduced and adopted by majority vote with Neumann voting against: To approve the hire of Christina Cronk to be added to the pool of Emergency Temporary Home Health Aides at Grade 14 Step 1.

TODD COUNTY BOARD OF COMMISSIONERS

On a motion by Kneisl and second by Erickson, the following motion was introduced and adopted by unanimous vote: To accept the Live Well at Home grant and designate Jackie Och as authorized representative for the Live Well at Home grant.

On a motion by Neumann and second by Kneisl, the following motion was introduced and adopted by unanimous vote: To approve the Drug Free Communities Grant evaluation contract with Epiphany Community Services.

Auditor-Treasurer Report

Denise reported the lettering "In God We Trust" has been finished in the Board Room. Finance Committee needs to set the next meeting date.

Commissioners' Report

The Commissioners reported on the meetings they had attended. Kneisl reported South Country Health Alliance will continue as a plan choice in all counties with one other plan for the year 2016.

Commissioner Kircher recessed the meeting until October 20, 2015.

Commissioner Warrants

Vendor Name	Amount
BROWERVILLE TRUCKWASH/BIG BOYZ	3,224.28
CELLULAR CONCRETE INC.	6,579.50
CENTRACARE CLINIC-LONG PRAIRIE	3,364.10
CENTRAL APPLICATORS INC	12,762.14
COMMISSIONER OF TRANSPORTATION	2,166.20
IMPACT TECHNOLOGY	4,025.95
MORRISON CO PUBLIC HEALTH SERV	2,535.53
NORTHSIDE BODY SHOP INC	4,979.66
OTTERSEAL MINNESOTA	5,600.00
RELIANCE TELEPHONE INC	4,000.00
ROYAL TIRE	5,162.46
SHI CORP	5,044.00
TRUENORTH STEEL	22,244.92
TURNKEY/THREE SQUARE MARKET	4,006.90
ULTRA MAX	3,439.00
Payments Less than 2000	44,508.30
Final Total	133,642.94

Auditor Warrants

Vendor Name	Amount
AMERICAN HERITAGE BANK	47,915.98
AUTO LEASING SPECIALISTS LLC	30,738.75
COMPUTER PROFESSIONALS	4,377.88
GOULD/RHONDA M	2,285.00

TODD COUNTY BOARD OF COMMISSIONERS

MN DEPT OF FINANCE	7,013.00
PADDEN/GREG	4,163.79
PETERS & CHURCHWELL	2,858.05
Payments less than 2000	14,442.96
BAUER/PETE	5,345.20
BIG BIRCH LAKE ASSOCIATION	3,217.50
CARD SERVICES COBORNS	3,279.33
FLEET SERVICES/WEX BANK	5,383.26
GENE-O'S COUNTRYSIDE REST LLC	7,520.29
GREAT RIVER REGIONAL LIBRARY	82,449.25
LEVINE/CHRISTOPHER & REBECCA	3,133.13
LONG PRAIRIE SANITATION INC	2,183.25
MINNESOTA POWER & LIGHT	11,996.12
MORRISON COUNTY	54,635.10
NORTHERN STAR COOP	4,403.10
Prairie Lakes Municipal SW Auth	12,742.80
TODD COUNTY DAC	4,719.50
WATERGUARDS, LLC	13,256.00
Payments less than 2000	7,007.86
AMERICAN HERITAGE	7,374.15
MINNESOTA POWER & LIGHT	2,238.33
ZAYO ENTERPRISE NETWORKS	3,290.23
Payments less than 2000	12,773.09
BIG BIRCH LAKE ASSOCIATION	2,083.14
REGENTS OF THE UNIV OF MN	30,729.15
SANOFI PASTEUR INC	5,210.78
WOLTERS BODY SHOP	2,280.21
Payments less than 2000	8,506.35
Final Total	409,552.53

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-17	

Title (for publication with the Agenda): Approve Commissioner Warrants	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Auditor-Treasurer Office	
Presenting Board Action/Discussion at Meeting: Denise Gaida	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
Printout sent to Commissioners	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve the Commissioner Warrants number 41711 thru 41852 in the amount of \$205,905.33.	
Financial Implications: \$	Comments
Funding Source:	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

Vendor	Amount
BROWERVILLE TRUCKWASH/BIG BOYZ	3,255.39
CENTRACARE HEALTH SERVICES	2,307.43
CENTRAL LAKES RESTAURANT SUPPLY	14,050.00
CENTRAL MN COUNCIL ON AGING	8,334.06
CHAMBERLAIN OIL COMPANY	2,639.80
FRONTIER PRECISION INC	4,945.00
GIZA PLUMBING & HEATING INC	3,822.00
IMPACT TECHNOLOGY	5,300.00
INDEPENDENT EMERGENCY SERVICES	12,485.06
MCCC, MI33	5,600.00
MORRIS ELECTRONICS	2,317.36
MOTOROLA SOLUTIONS CREDIT CO LLC	57,330.30
RAINBOW RIDER	2,690.00
SCHOOL DISTRICT 2753	2,197.92
TRUENORTH STEEL	23,880.00
TURNKEY/THREE SQUARE MARKET	2,141.53
WADENA ASPHALT CO	4,106.00
WIDSETH SMITH NOLTING INC	8,850.60
Payments less than 2000	39,652.88
Total	205,905.33

HHS Warrants	
Vendor or #	Amount
# 1911	2,479.35
# 878	2,357.40
# 10746	2,554.77
# 14051	2,762.10
Payments less than 2000	20,343.57
Total	30,497.19

Todd County, MN Board Action Form



Action Requested	
<input type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-08	

Title (for publication with the Agenda): Gambling Permit-Browerville Sportsman Club	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Auditor-Treasurer	
Presenting Board Action/Discussion at Meeting: Denise	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
Application has been filed in the Auditor-Treasurer's Office	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
to approve a one day gambling permit for the Browerville Sportsman Club to hold a raffle at Clarissa Ballroom in Eagle Valley Township at the address 19281 Kotter Road, Clarissa, MN on March 6, 2016.	
Financial Implications: \$0	Comments
Funding Source:	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

TODD COUNTY BOARD OF COMMISSIONERS

GAMBLING PERMIT FOR BROWERVILLE SPORTSMAN CLUB

WHEREAS, the Todd County Board of Commissioners are establishing their approval for a Gambling Permit for the Browerville Sportsman Club through this resolution;

NOW, THEREFORE BE IT RESOLVED, that the Todd County Board of Commissioners approve a one day Gambling Permit for the Browerville Sportsman Club to hold a raffle at Clarissa Ballroom in Eagle Valley Township at the address 19281 Kotter Road, Clarissa, MN on March 6, 2016.

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-15	

Title (for publication with the Agenda): Establish a date for the Truth in Taxation hearing	
Date of Meeting: October 20, 2015	Total time requested: 2 min
Department Requesting Action: Auditor/Treasurer	
Presenting Board Action/Discussion at Meeting: Denise Gaida	
Background <input type="checkbox"/> Supporting Documentation enclosed	
The County Board shall set the Truth in Taxation hearing.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve setting the Truth in Taxation hearing for December 10, 2015 to start at 6:00 p.m. in the County Commissioners Board Room.	
Financial Implications: \$	Comments
Funding Source:	
Budgeted: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

Todd County, MN Board Action Form

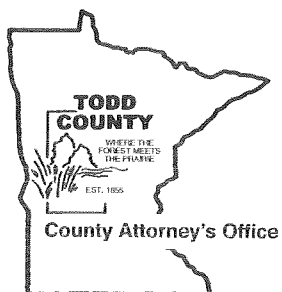


Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-09	

Title (for publication with the Agenda): 2016 City Prosecution Contracts	
Date of Meeting:10/20/2015	Total time requested:5 minutes
Department Requesting Action: Attorney	
Presenting Board Action/Discussion at Meeting: Auditor Treasurer	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion: Approval of the agreements for prosecution services between the Todd County Attorney and the Cities of Grey Eagle, Clarissa, Eagle Bend and Hewitt	
Financial Implications: \$	Comments
Funding Source:	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	



CHARLES G. RASMUSSEN
County Attorney

JANE M. GUSTAFSON
MICHAEL J.G. SCHNIDER
JOHN E. LINDEMANN
Assistant County Attorneys

221 1st Ave. S., Suite 400, Long Prairie, MN 56347 • Phone: 320-732-6039 • Fax: 320-732-4120

October 7, 2015

Denise Gaida
Todd County Auditor/Treasurer
Todd County Courthouse
Long Prairie, MN 56347

RE: City Prosecution Contracts 2016

Dear Denise:

Attached please find 2016 Contracts for City Prosecution for the cities of Grey Eagle, Clarissa, Eagle Bend, and Hewitt. Please present these contracts to the Chairman of the Board for signature.

Thank you.

Sincerely,

Charles G. Rasmussen
Todd County Attorney

/smp
Enclosures

CONTRACT TITLE

**2016 AGREEMENT BETWEEN TODD COUNTY AND THE CITY OF
CLARISSA FOR PROSECUTION SERVICES**

This Agreement is made and entered into by and between the County of Todd, a corporation existing under the laws of the State of Minnesota, hereinafter referred to as “County,” and the City of Clarissa, hereinafter referred to as “City.”

SECTION 1

SERVICES PROVIDED

The County, through its County Attorney’s Office, agrees to prosecute for the City those certain misdemeanors, gross misdemeanors, and City ordinance violations the City is statutorily obligated to prosecute. Prosecution services provided to the City by the County include, but are not limited to, reviewing reports, drafting complaints, correspondence, court time including first and second appearances, evidentiary hearings, trials, sentencings, and probation violation hearings. It also includes consulting with officers, victims, corrections agents, defense attorneys, and any research that needs to be done, as well as time spent on past years files if someone is picked up on a warrant, and general legal advice to officers unrelated to any open file.

SECTION 2

COMPENSATION

As consideration for the prosecution services set forth in Section 1, the City agrees to compensate the County the amount of \$975 for the year 2016. This amount is based upon the average number of cases prosecuted by the County for your City in the two years prior to the current budget year at an estimated rate of \$150 per case. The minimum amount of compensation to be paid by a City to the County for prosecution services will be \$500.

SECTION 3

CONTRACT RENEWAL

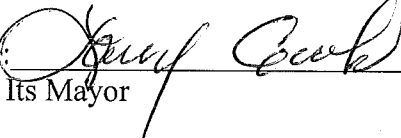
ACCOUNTING

Within the first six months of each following year, the County Attorney's Office will provide to the City a new proposed agreement, and a printout of the number of cases for the two averaged years used as the basis for the compensation set forth in Section 2. The County Attorney's Office will provide more detailed information on any or all of the cases considered upon request of the City. The City and the County are under no obligation to renew this agreement each year.

IN WITNESS WHEREOF, the County and City have caused this Agreement to be executed.

CITY OF CLARISSA

COUNTY OF TODD

BY: 
Its Mayor

BY: _____
Chair, County Board

DATED: _____

ATTEST:

BY: 
City Clerk

DATED: 8-18-15

CONTRACT TITLE

**2016 AGREEMENT BETWEEN TODD COUNTY AND THE CITY OF
HEWITT FOR PROSECUTION SERVICES**

This Agreement is made and entered into by and between the County of Todd, a corporation existing under the laws of the State of Minnesota, hereinafter referred to as “County,” and the City of Hewitt, hereinafter referred to as “City.”

SECTION 1

SERVICES PROVIDED

The County, through its County Attorney’s Office, agrees to prosecute for the City those certain misdemeanors, gross misdemeanors, and City ordinance violations the City is statutorily obligated to prosecute. Prosecution services provided to the City by the County include, but are not limited to, reviewing reports, drafting complaints, correspondence, court time including first and second appearances, evidentiary hearings, trials, sentencings, and probation violation hearings. It also includes consulting with officers, victims, corrections agents, defense attorneys, and any research that needs to be done, as well as time spent on past years files if someone is picked up on a warrant, and general legal advice to officers unrelated to any open file.

SECTION 2

COMPENSATION

As consideration for the prosecution services set forth in Section 1, the City agrees to compensate the County the amount of \$675 for the year 2016. This amount is based upon the average number of cases prosecuted by the County for your City in the two years prior to the current budget year at an estimated rate of \$150 per case. The minimum amount of compensation to be paid by a City to the County for prosecution services will be \$500.

SECTION 3

CONTRACT RENEWAL

ACCOUNTING

Within the first six months of each following year, the County Attorney's Office will provide to the City a new proposed agreement, and a printout of the number of cases for the two averaged years used as the basis for the compensation set forth in Section 2. The County Attorney's Office will provide more detailed information on any or all of the cases considered upon request of the City. The City and the County are under no obligation to renew this agreement each year.

IN WITNESS WHEREOF, the County and City have caused this Agreement to be executed.

CITY OF Hewitt
BY: *Juanita Mitchell*
Its Mayor

COUNTY OF TODD
BY: _____
Chair, County Board

DATED: _____

ATTEST:
BY: *Jana*
City Clerk

DATED: 8/11/15

CONTRACT TITLE

2016 AGREEMENT BETWEEN TODD COUNTY AND THE CITY OF GREY EAGLE FOR PROSECUTION SERVICES

This Agreement is made and entered into by and between the County of Todd, a corporation existing under the laws of the State of Minnesota, hereinafter referred to as “County,” and the City of Grey Eagle, hereinafter referred to as “City.”

SECTION 1

SERVICES PROVIDED

The County, through its County Attorney’s Office, agrees to prosecute for the City those certain misdemeanors, gross misdemeanors, and City ordinance violations the City is statutorily obligated to prosecute. Prosecution services provided to the City by the County include, but are not limited to, reviewing reports, drafting complaints, correspondence, court time including first and second appearances, evidentiary hearings, trials, sentencings, and probation violation hearings. It also includes consulting with officers, victims, corrections agents, defense attorneys, and any research that needs to be done, as well as time spent on past years files if someone is picked up on a warrant, and general legal advice to officers unrelated to any open file.

SECTION 2

COMPENSATION

As consideration for the prosecution services set forth in Section 1, the City agrees to compensate the County the amount of \$500 for the year 2016. This amount is based upon the average number of cases prosecuted by the County for your City in the two years prior to the current budget year at an estimated rate of \$150 per case. The minimum amount of compensation to be paid by a City to the County for prosecution services will be \$500.

SECTION 3

CONTRACT RENEWAL

ACCOUNTING

Within the first six months of each following year, the County Attorney's Office will provide to the City a new proposed agreement, and a printout of the number of cases for the two averaged years used as the basis for the compensation set forth in Section 2. The County Attorney's Office will provide more detailed information on any or all of the cases considered upon request of the City. The City and the County are under no obligation to renew this agreement each year.

IN WITNESS WHEREOF, the County and City have caused this Agreement to be executed.

CITY OF Gray Eagle

COUNTY OF TODD

X BY: James A. Goldman
Its Mayor

BY: _____
Chair, County Board

ATTEST:

DATED: _____

BY: Lori Heumann
City Clerk

DATED: 8 - 26 - 15

CONTRACT TITLE

**2016 AGREEMENT BETWEEN TODD COUNTY AND THE CITY OF
EAGLE BEND FOR PROSECUTION SERVICES**

This Agreement is made and entered into by and between the County of Todd, a corporation existing under the laws of the State of Minnesota, hereinafter referred to as “County,” and the City of Eagle Bend, hereinafter referred to as “City.”

SECTION 1

SERVICES PROVIDED

The County, through its County Attorney’s Office, agrees to prosecute for the City those certain misdemeanors, gross misdemeanors, and City ordinance violations the City is statutorily obligated to prosecute. Prosecution services provided to the City by the County include, but are not limited to, reviewing reports, drafting complaints, correspondence, court time including first and second appearances, evidentiary hearings, trials, sentencings, and probation violation hearings. It also includes consulting with officers, victims, corrections agents, defense attorneys, and any research that needs to be done, as well as time spent on past years files if someone is picked up on a warrant, and general legal advice to officers unrelated to any open file.

SECTION 2

COMPENSATION

As consideration for the prosecution services set forth in Section 1, the City agrees to compensate the County the amount of \$2,475 for the year 2016. This amount is based upon the average number of cases prosecuted by the County for your City in the two years prior to the current budget year at an estimated rate of \$150 per case. The minimum amount of compensation to be paid by a City to the County for prosecution services will be \$500.

SECTION 3

CONTRACT RENEWAL

ACCOUNTING

Within the first six months of each following year, the County Attorney's Office will provide to the City a new proposed agreement, and a printout of the number of cases for the two averaged years used as the basis for the compensation set forth in Section 2. The County Attorney's Office will provide more detailed information on any or all of the cases considered upon request of the City. The City and the County are under no obligation to renew this agreement each year.

IN WITNESS WHEREOF, the County and City have caused this Agreement to be executed.

CITY OF Eagle Bend

COUNTY OF TODD

BY: *Bradley J. J.*
Its Mayor

BY: _____
Chair, County Board

DATED: _____

ATTEST:

BY: *Keen Hayes*
City Clerk

DATED: 08-17-15

Todd County, MN Board Action Form



Action Requested	
<input type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input checked="" type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-16	

Title (for publication with the Agenda): SNAP Ed Educators	
Date of Meeting: October 20, 2015	Total time requested: 5 min
Department Requesting Action: Extension	
Presenting Board Action/Discussion at Meeting: Susanne Hinrichs & Stephanie Hakes	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
Introduction of the U of M Extension SNAP - Ed Educators	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
Financial Implications: \$	Comments
Funding Source:	
Budgeted: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures	
STATE OF MINNESOTA) COUNTY OF TODD)	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
	Seal

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-10	

Title (for publication with the Agenda): Request for Compliance Funds Expenditure (County's Tax package rewrite)	
Date of Meeting: 10-20-2015	Total time requested: 5 min
Department Requesting Action: Compliance Fund Committee & Auditor-Treasurer	
Presenting Board Action/Discussion at Meeting: Cheryl Perish & Denise Gaida	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
Computer Professional Unlimited Inc/CPUI (the county's tax package vendor) is rewriting the tax package software, creating a web interface. The project is expected to be completed in phases with the cost to be invoiced over a 5 year period. The Compliance Fund Committee supports this software upgrade expenditure from the compliance fund over the 5 year phase with the general fund being reimbursed for the 2015 (1 st phase payment).	
Options <input checked="" type="checkbox"/> Supporting Documentation enclosed	
1) Approve expenditure to be paid out of the Compliance Fund. 2) Deny expenditure to be paid out of the Compliance Fund, and be paid out of the AudTreas budget/General Fund.	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
Approve the payment of the tax package rewrite project by Computer Professionals Unlimited Inc (CPUI) Funding to be paid out of the Compliance Fund based on the yearly approval of the Auditor-Treasurer for invoice of \$10,000.00 a year - up to five years (starting with 2015) and that the general fund be reimbursed for the 2015 payment of \$10,000.00 which was already paid in March 2015.	
Financial Implications: \$10,000.00/yr for max of 5 years	Comments
Funding Source: Compliance Fund	
Budgeted: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
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Seal	

**Todd County
Compliance Committee/Technology Committee
Comment Sheet on Compliance Fund Expenditure**

Dated: 9-08-2015

Office Proposing Expenditure: Auditor-Treasurer (On behalf of the Land Services Division)

Purpose of expenditure: CPUI (Computer Professionals Unlimited Inc) the software vendor for the county's tax package is implementing a re-write of the software, providing a web-based interface. CPUI is phasing this update over a five (5) year period at \$10,000.00/year. This type of software re-write/update fits within the Compliance Fund expenditure parameters and therefore this request is for the Compliance Fund to cover the \$10,000.00 per year (**Not to exceed 5 years** or \$50,000.00). The rewrite of the software may take less than the projected 5 years.

The A/T 2015 budget was increased \$10,000.00 to cover phase one of this update and was paid out in March 2015. If the county board approves the Compliance Fund paying for the project, the 2015 (phase one) amount of \$10,000.00 could be paid back to the General Fund to cover that budget adjustment for this project. Future invoices, once approved by the A/T, would then be submitted to the Compliance Fund (Cheryl) for payment directly out of that fund.

Offices benefited: All county offices that utilize the tax system.

	Amount	Source
Amount requested from Compliance Fund:	<i>\$10,000.00/year</i>	<i>Up to five years (starting in 2015)</i>
Amount from other source:	<i>0</i>	
Amount from other source:	<i>0</i>	
Amount of Project:	<i>\$50,000.00</i>	<i>\$10,000.00 per year, maximum 5 years)</i>

The Compliance Committee comments:

The Compliance Committee approves of the expenditure of \$10,000.00 per year up to five years. And the 2015 payment of \$10,000.00 be deposited into the county's general fund to reimburse that fund for the 2015 payment (Phase 1) expenditure.

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-11	

Title (for publication with the Agenda): Accept 2015 Federal Boating Safety Equipment Grant.	
Date of Meeting: October 20th, 2015	Total time requested: 5 min
Department Requesting Action: Todd County Sheriff's Office	
Presenting Board Action/Discussion at Meeting: Sheriff Don Asmus	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
Sign three grant agreements to accept \$2,600.00 in grant funds to purchase 14 regulatory buoys, 1 ring buoy, and 4 rearm kits for inflatable life jackets.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve the 2015 Federal Boat and Water Safety Grant.	
Financial Implications: \$2,600.00	Comments
Funding Source: Grant	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

TODD COUNTY BOARD OF COMMISSIONERS

2015 FEDERAL BOATING SAFETY EQUIPMENT GRANT

WHEREAS, Todd County Sheriff Don Asmus has submitted the 2015 Federal Boating Safety Grant to the Todd County Board of Commissioners, and;

WHEREAS, in this Boat and Water Safety grant it awards the amount of \$2,600.00 to Todd County to purchase 14 regulatory buoys, 1 ring buoy, and 4 rearm kits for inflatable jackets.

NOW, THEREFORE BE IT RESOLVED, that the Todd County Board of Commissioners accept the 2015 Federal Boating Safety Equipment Grant and authorize Sheriff Don Asmus to carry out the conditions of the grant.

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-01	

Title (for publication with the Agenda): Appoint Family Services Unit Manager	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och	
Background <input type="checkbox"/> Supporting Documentation enclosed	
On 08/04/2015, the county board accepted Emily Steinert's retirement, effective 10/30/2015, and approved the recruitment and hiring of a new Family Services Unit Manager.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve the promotion of Todd Weyer to the position of Family Services Unit Manger at \$30.70/hour	
Financial Implications: \$30.700/hr	Comments
Grade 23 - Step 5	
Funding Source: 11-Social Services	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-13	

Title (for publication with the Agenda): Request to hire Social Worker	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och	
Background <input type="checkbox"/> Supporting Documentation enclosed	
Due to the promotion of Todd Weyer to Family Services Unit Manager, an opening exists for a Social Worker in the child protection services department.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
Approve HHS to recruit and hire one social worker in child protection services to fill the vacant position.	
Financial Implications: \$19.007 - \$29.376/hr - Grade 20	Comments
Funding Source: 11-Social Services	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-04	

Title (for publication with the Agenda): Appoint Social Worker - Adult Mental Health	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och/Michael Steinbeisser	
Background <input type="checkbox"/> Supporting Documentation enclosed	
An opening has existed in the adult mental health department of HHS since the resignation of Sarah Dineen-Munstermann on 5/15/2015. On May 5, 2015 the County board approved the request to hire a replacement.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve the hire of Richard Mettler to the position of Social Worker in Adult Mental Health at \$20.490/hour	
Financial Implications: \$20.490	Comments
Grade 20 - Step 2	
Funding Source: 11-Social Services	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-02	

Title (for publication with the Agenda): Appoint Part Time Homemaker	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och/Michael Steinbeisser	
Background <input type="checkbox"/> Supporting Documentation enclosed	
In an effort to reduce costs to the Home Care program, the request to hire two intermittent part-time Homemaker positions was approved by Board Action on April 28, 2015.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve the hire of Kayla Vejtasa to the position of Part Time Homemaker at \$10.08/hour	
Financial Implications: \$10.08/hr	Comments
Funding Source: 21-Public Health	
Budgeted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-12	

Title (for publication with the Agenda): Reclassify Child Support Office Support Specialist position to Support Enforcement Aide	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och/Lisa Chapin	
Background <input type="checkbox"/> Supporting Documentation enclosed	
<p>With the recent promotion of Neva Volkman to Eligibility Worker, and with the implementation of the Springsted Study coming, we took this opportunity to look at the current structure of the child support unit. Neva's current position within child support is Office Support Specialist. According to MN Merit System, the OSS position is limited in the duties it can perform for the unit. With this position currently vacant, we would like to reclassify this position to a Support Enforcement Aide. Reclassifying this position to an SEA would make this unit operate more efficiently and help maintain performance standards. An SEA can perform a wider variety of duties, making for a better distribution of duties, and back-up system in the event workers are out on leave. This would allow for better utilization of this person's skills and abilities, as they would be able to perform some actual case work. Having gone from four Child Support Officers to three, this would alleviate some of this loss, as we can redirect more duties to an SEA. There are minimal financial implications to reclassifying this position. The OSS is currently paid on grade 15, ranging from \$12,970 to \$19,831. The SEA position is paid on grade 17, ranging from \$14,529 to \$22,420. However, with the implementation of Springsted, these two positions will be on the same grade, and paid the same. Sixty six percent (66%) of the cost for these positions is reimbursed by the Federal government (FFP) via DHS.</p>	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
Approve to reclassify the Office Support Specialist position to Support Enforcement Aide in the Child Support unit.	
Financial Implications: \$611.00 for calendar year 2016; none if /when Springsted pay scale is implemented	Comments
Funding Source: 11-Social Services	
Budgeted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures
 STATE OF MINNESOTA }
 COUNTY OF TODD }
 I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings

of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:

Seal

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-14	

Title (for publication with the Agenda): Request to hire Support Enforcement Aide	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och/Lisa Chapin	
Background <input type="checkbox"/> Supporting Documentation enclosed	
Due to the promotion of Neva Volkman to an Eligibility Worker position, an opening has existed in the Child Support department. The County board has approved the reclassification of this open position from Office Support Specialist to Support Enforcement Aide.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
Approve HHS to recruit and hire one Support Enforcement Aide to fill the vacant position.	
Financial Implications: \$14.529 - \$22.420/hr - Grade 17	Comments
Funding Source: 11-Social Services	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-03	

Title (for publication with the Agenda): Appoint Seasonal Energy Assistance Program Worker	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och/Lisa Chapin	
Background <input type="checkbox"/> Supporting Documentation enclosed	
An opening has existed in the Energy Assistance Program since the resignation of Pat Falkowski on 9/15/2015. On September 15, 2015 the County board approved the request to hire a replacement.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve the hire of Carole Schoenrock to the position of Seasonal Energy Assistance Program worker at \$12.970/hour	
Financial Implications: \$12.970 Grade 15 - Step 1	Comments
Funding Source: 12-Energy Assistance	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl
Second:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
	Seal

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-05	

Title (for publication with the Agenda): MFIP Biennial Service Agreement	
Date of Meeting: 10/20/2015	Total time requested: 5 min
Department Requesting Action: Health and Human Services	
Presenting Board Action/Discussion at Meeting: Jackie Och/Lisa Chapin	
Background <input checked="" type="checkbox"/> Supporting Documentation enclosed	
Counties are required to have a Biennial Service Agreement approved by the Minnesota Department of Human Services to receive consolidated funds for the Minnesota Family Investment Program. The purpose of the Biennial Service Agreement is to provide DHS with information about services and strategies intended to meet program measures with the goal of increasing the economic stability of low income families using MFIP.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
Approve the 2016-2017 MFIP Biennial Service Agreement for program administration by Todd County.	
Financial Implications: \$0	Comments
Funding Source:	
Budgeted: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
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Seal	



2016-2017 County MFIP Biennial Service Agreement

January 1, 2016 - December 31, 2017

DHS-3863-ENG 8-15

Page 1 of 17

Enter the county's unique ID number

Contact Information

COUNTY/CONSORTIUM NAME

PLAN YEAR

CONTACT PERSON

TITLE

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

EMAIL ADDRESS (where correspondence related to this form will be sent)

CONFIRM EMAIL ADDRESS

Note: Please review the 2016-2017 MFIP Biennial Service Agreement Bulletin for more details before you complete this document.

A. Needs Statement

1. Besides funding, what is the single biggest challenge you are facing in financial assistance services?

Lack of higher wage employment that would allow participants to acheive self support.

7915 characters remaining

2. Besides funding, what is the single biggest challenge you are facing in employment services?

Lack of transportation and appropriate child care are the biggest challenges in providing employment services.

7896 characters remaining

County MFIP Biennial Service Agreement

Page 3 of 17

A. Needs Statement (continued)

3. What strengths and resources do you have available to address the needs of your participants?

Please **check all** the resources available to participants in your service area and check whether the resource is available within MFIP financial or employment services "in-house" or from a partner organization (county resources with developed connections to MFIP), and/or an external community resource or both. If you lack sufficient resources in your area, check the Resource Gaps column, even if there are some resource sources. Add any "other" resources that you consider necessary.

MFIP Resources	Partner Resources	Community Resources	Resource Gaps	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ABE/GED
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adult/elder services
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Career planning
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Childcare funds
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Chemical health services
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Computer lab access
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Credit counseling/financial literacy
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	English Language Learner (ELL)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food shelf
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Housing assistance
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job club
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job development
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job placement
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job retention
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job search workshops
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Mental health services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	On-the-job training program
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post-secondary education planning
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Short-term training
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supported work
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid work experience
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transportation assistance (gas cards, bus cards)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vehicle repair funds
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Volunteer opportunities
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Youth program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other

4. County Program Contact Information

Please name contacts for the following programs if different from the contact on the cover page. You only need to give a person's phone and email once.

MFIP STAFF CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
Darla Hoernberg	218-631-7665	darlah@rmcep.com
DWP STAFF CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
Darla Hoernberg	218-631-7665	darlah@rmcep.com
FINANCIAL ASSISTANCE SERVICES STAFF CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS

A. Needs Statement (continued)

Employment Services Provider(s) Information

Statute 256J.50, subdivision.8: Each county, or group of counties working cooperatively, shall make available to participants the choice of at least two employment and training service providers as defined under Minnesota Statutes, section 256J.49, subdivision 4, except in counties contracting with workforce centers that use multiple employment and training services or that offer multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs.

List your current employment services provider(s) and check the respective box to indicate which population served. If a Workforce Center is the only employment services provider, list the multiple employment and training services among which participants can choose. Section G of this form addresses provider choice.

NAME	ADDRESS	CONTACT PERSON	PHONE NUMBER
Rural Minnesota CEP, Inc	803 Roosevelt Ave., Detroit Lakes, MN	Vicki Leaderbrand	218-847-0718

Population Served
 MFIP ES
 DWP ES
 FSS
 Teen Parents
 200% FPG

County MFIP Biennial Service Agreement

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B. Service Models

Minnesota Family Investment Program (MFIP) and the Diversionary Work Program (DWP)

1. Do you have culturally specific employment services for different racial/ethnic groups?

No Yes Check all that apply.

- African American African immigrant Asian American Asian immigrant
 American Indian Hispanic/Latino Other

2. What strategies do you use for hard-to-engage participants? Check all that apply.

- Home visits Sanction outreach services Incentives
 Off-site meeting opportunities Other

3. What types of job development do you do? Check all that apply.

- Sector job development Individual job development Other

4. Do you have an ongoing job development partnership or sector based job development with community employers to help participants with employment?

No Yes Check all activities employers provide.

- Interview opportunities Job skills training Job placement Job shadowing On-site job training
 Work experience Helps plan training programs Other

5. Do you provide job retention services to employed participants while they are receiving MFIP?

No Yes Check all that apply.

- Available to assist with issues that develop on the job Financial planning Soft skills training
 Mentoring Transportation Personal contact with the employee HOW OFTEN? Minimum, every 30 days
 Other

How long do you provide job retention services?

- Less than 3 months 3-6 months 7-12 months More than one year

6. Do you provide job advancement services to employed participants?

No Yes Check all that apply.

- Career laddering Networking Coaching/mentoring Ongoing job search
 Education/training Other SPECIFY: assisting clients in moving from part time work to full time work

7. Do you utilize any career pathways programs or skill assessment and credentialing programs for your participants?

No Yes Check all that apply.

- FastTRAC Work Keys National Career Readiness Certificate (NCRC) Other

County MFIP Biennial Service Agreement

Page 6 of 17

B. Service Models (continued)

Family Stabilization Services (FSS)

1. Do you have professionals available to assist with FSS cases?

No Yes Check all that apply

- Adult Mental Health professional
- Public Health Nurse
- Children's Mental Health professional
- Psychologist
- Chemical Health professional
- Vocational Rehabilitation worker
- Adult Rehabilitation Mental Health Services (ARMHS) worker
- Social Worker
- Other

2. Do you make referrals for children of FSS participants?

No Yes Check all that apply

- Children's Mental Health Services
- Women, Infants and Children Program (WIC)
- Public Health Nurse home visiting services
- Other
- Child Wellness Check-ups

3. Are any of these services for children offered to non-FSS families?

No Yes

Services for families no longer on MFIP/DWP but under 200% of Federal Poverty Guideline

1. Do you provide services to families who are not receiving DWP or MFIP assistance but are under 200% of the Federal Poverty Guideline (FPG)?

No Yes Check all the services that apply

- ABE/ELL Classes
- Computer Lab Access
- Job postings
- Job retention services
- Support Services
- Other
- Child care
- GED
- Referral to other programs
- Training/Job Skills Classes

B. Service Models (continued)

Minnesota Family Investment Program (MFIP) Services for Teen Parents

1. Are there specialized workers who work primarily with teens (for example, child care worker provides child care resources to teens only)?

No Yes *Check all that apply for each age group*

- | Minors
(under age 18) | Age
18/19 | |
|-------------------------------------|-------------------------------------|---------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Financial worker |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Employment service worker |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Social worker (Social Services) |
| <input type="checkbox"/> | <input type="checkbox"/> | Public health nurse |
| <input type="checkbox"/> | <input type="checkbox"/> | Child care worker |
| <input type="checkbox"/> | <input type="checkbox"/> | Other job role |

2. Is there a single point of contact for teens, that is, one staff with primary responsibility for keeping in contact with the teen, working with the teen, and making connections to other services? Respond for each age group separately. If yes for an age group, check the one position that serves this function within that age group.

No Yes

- | Minors (under age 18) | Age 18/19 |
|--|--|
| <input type="radio"/> Financial worker | <input type="radio"/> Financial worker |
| <input type="radio"/> Employment service worker | <input checked="" type="radio"/> Employment service worker |
| <input checked="" type="radio"/> Social worker (Social Services) | <input type="radio"/> Social worker (Social Services) |
| <input type="radio"/> Public health nurse | <input type="radio"/> Public health nurse |
| <input type="radio"/> Child care worker | <input type="radio"/> Child care worker |
| <input type="radio"/> Other job role | <input type="radio"/> Other job role |

3. Does your county have an active partnership with the local public health agency to get teen parents enrolled and engaged in public health nurse home visiting services? *Check one for each age group.*

- | Minors (under age 18) | Age 18/19 |
|---|---|
| <input type="radio"/> Yes, mandatory | <input type="radio"/> Yes, mandatory |
| <input checked="" type="radio"/> Yes, voluntary | <input checked="" type="radio"/> Yes, voluntary |
| <input type="radio"/> No | <input type="radio"/> No |

C. Measures

Performance Measures

1. Performance-based funding is determined by a service area's annualized Self-Support Index value. Review the information and report links in this section to see the effect of performance on funding and reporting, based on Statute 256J.626, subdivision 7.

Starting for calendar year 2016, each service area funding allocation starts at 100 percent. Each year starting with the 2016 allocation, a bonus to a service area's Consolidated Fund allocation will be based on its performance on the Self-Support Index in the previous April to March year. While some service areas will get a bonus starting in 2016, there will be no performance-based decreases for the coming biennium.

The **three-year Self-Support Index (S-SI)**: This measure starts with all adults receiving MFIP or DWP cash assistance in a quarter and tracks what percentage of them, three years later, are no longer receiving family cash assistance or are working an average of 30 hours a week if still receiving cash assistance. Those who left MFIP after reaching 60 counted months and those who left due to 100 percent sanction are only counted as a success if they worked an average of 30 hours per week in their last month of eligibility or if they began receiving Supplemental Security Income (SSI) after family cash assistance ended. To provide fair comparisons across service areas, DHS calculates a "Range of Expected Performance" for the S-SI that is based on local caseload characteristics and economic conditions. The service area's Self-Support Index value is whether the service area was above, within, or below its expected Range.

The S-SI and Range are annualized for the four quarters in the April through March year ending in the reporting year before the funding year. See the MFIP Annualized S-SI and WPR report for 2015 on the MFIP Reports page on the DHS website. A service area with an annualized S-SI "above" its customized Range of Expected Performance for 2015 will receive a 2.5 percent bonus added to its Consolidated Fund allocation for calendar year 2016.

[MFIP Annualized S-SI and WPR report](#)

If your service area is receiving a bonus, congratulations! Please share a success strategy here:

N/A

799 characters remaining

In the future, if your service area has an annualized S-SI below its range for two consecutive years, you will have to **negotiate a multi-year improvement plan** with the commissioner. If no improvement is shown by the end of the second year of the multi-year plan, the next year's allocation must be decreased by 2.5 percent, to remain in effect until the service area performs within or above its Range of Expected Performance. For example, a service area scoring "below" for 2016 and 2017 would need to put in place a multi-year improvement plan. If continuing "below" for 2018 and 2019, there would be a 2.5 percent decrease for the 2020 Consolidated Fund allocation which would continue until an annualized S-SI above or within its Range. Then the service area would receive 100 percent of the allocation.

C. Measures (continued)

Racial/Ethnic Disparities

- 2. A racial/ethnic disparity for a service area is defined as a one-year Self-Support Index that is five or more percentage points lower for a non-white racial/ethnic group than for the white group of MFIP/DWP-eligible adults in that area. Access the report "Two-Year Performance Trends of Racial/Ethnic and Immigrant Group". This report lists (1) service areas that have any racial/ethnic disparities requiring action and (2) the table of differences for all service areas.

Note: The link to this report will be available in early September.

If your service area is in the disparity list, please answer the following question:

DHS will work with you to reduce these disparities.

What strategies and action steps for each of the groups with disparities do you plan for the coming biennium?

N/A

799 characters remaining

D. Program Monitoring/Compliance

1. What procedures do you have in place to ensure that program funds are being used appropriately as directed in law? *Check all that apply.*

- Budget control procedures for approving expenditures
 Cash management procedures for ensuring program income is used for permitted activities
 Internal policies around use of funds, i.e. participant support services
 Other

2. What procedures do you have in place to ensure program policies are followed and applied accurately? *Check all that apply.*

- Case consultation Sample case review by workers Sample case review by supervisors
 Other

If your service area has not made changes to your random drug testing policy since the last BSA, go to Section E.

3. What procedures/policies do you have in place for administering random drug tests of convicted drug felons on MFIP as required by Minnesota Statutes, section 256J.26, subdivision 1?

- Written policy within the MFIP unit Coordination with Corrections
 Currently establishing new policy/procedure(s) Other

If your random drug testing policy has changed since the last BSA, please submit a copy to Larry Hosch at Larry.Hosch@state.mn.us

E. Collaboration and Communication with Others

1. How many employment services front-line staff are employed in your county or consortium?

2

How many employment services front-line staff in your county or consortium have MAXIS access?

1

How many managers/supervisors have MAXIS access?

0

2. Describe the process your service area uses to identify and resolve discrepancies between MAXIS and WF1 data in areas such as Family Stabilization Services coding, employment/hours, sanction status, etc.

Job Counselor meets with Todd County financial workers every few weeks and the employment services provider supervisor, job counselor and county financial workers meet every other month. Cases and reviewed and any discrepancies between MAXIS and WF1 are resolved.

773 characters remaining

F. Emergency Services

1. Does your county provide emergency or crisis services from your Consolidated Fund?

No Yes

If yes, please submit your most up-to-date emergency/crisis services plan to tria.chang@state.mn.us

G. Other

Administrative Cap Waiver

Minnesota Family Investment Program (MFIP) allows counties to request a waiver of the MFIP administrative cap (currently at 7.5%) for providing supported employment, uncompensated work or community work experience program for a major segment of the county's MFIP population. Counties that are operating such a program may request up to 15% administrative costs.

If your county is interested in applying for the waiver for the coming biennium, please complete the following four questions. Email Brandon.Riley@state.mn.us if you need assistance with the waiver.

1. Describe the activity(s) you will provide.

400 characters remaining

2. Explain the reasons for the increased administrative cost.

400 characters remaining

3. Describe the target population and number of people expected to be served.

400 characters remaining

4. Describe how the unpaid work experience is designed to impart skills and what steps are taken to help participants move from unpaid work to paid work.

400 characters remaining

G. Other (continued)**Addendum for Unpaid Work Experience Activities**

If your county is providing unpaid work experience activities for MFIP participants and you don't already have an Injury Protection Plan (IPP) in place, please fill out the IPP form. Email the completed form to dhs.dwp-mfib@state.mn.us

Provider Choice

Does your county:

- Have at least two employment and training services providers. Go to Section H.
- Have a workforce center that provides multiple employment and training services, offers multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs. Go to Section H.
- Intend to submit a financial hardship request.

G. Other (continued)

Financial Hardship Request

FINANCIAL HARDSHIP - Exception to Choice of Employment Service Providers Requirement

MFIP provisions require counties to make a choice of at least two employment service providers available to participants unless a workforce center is being utilized (Minnesota Statutes, section 256J.50, subdivision 8). Counties may request an exception if meeting this requirement results in a financial hardship (Minnesota Statutes, section 256J.50, subdivision 9).

A financial hardship is defined as a county's inability to provide the minimum level of service for all programs if a disproportionate amount of the MFIP consolidated fund must be used to cover the costs of purchasing employment services from two providers or the cost of contracting with a workforce center.

To request approval of a financial hardship exception from the choice of provider requirement, please provide the following information.

1. If the county had a choice of providers in calendar year 2015, describe:
 - factors that have changed which indicate a financial hardship
 - why the hardship is expected to persist in the near future and
 - the magnitude of the hardship, which makes limiting delivery of employment services the best financial option for the county.

2000 characters remaining

2. Summarize options explored by the county, including use of other partners in a workforce center or other community agencies, such as a Community Action Program or a technical college. The summary should also include:
 - major factors which prevent the county from utilizing these options and include a cost analysis of each option considered; and
 - the process used to determine the cost of other options (RFP or other county process).

2000 characters remaining

3. If the county proposes to directly deliver MFIP employment services, provide a budget and staffing plan that clearly indicates consolidated funds will not be used to supplant county funds. The description should include information about what steps will be taken to ensure that county staff have the experience and skills to deliver employment services.

2000 characters remaining

The Department of Human Services (DHS) and the Department of Employment and Economic (DEED) will also review the amount budgeted by the county for employment and training during calendar year 2015 and use this amount as a guide to determine whether the amount budgeted by the county for calendar year 2016 is reasonable.

If a financial hardship is approved, DHS and DEED will closely monitor county programs to ensure outcomes are achieved and services are being delivered consistent with state law.

County MFIP Biennial Service Agreement

H. Budget

Click on the link below to review your service area's 2014 and 2015 MFIP allocations:

[MFIP Consolidated Fund Support Services \(PDF\)](#)

In the budget table, indicate the amount and percentage for each item listed for the budget line items for calendar years 2016-2017. Also note:

- Total percent must equal 100.
- MFIP administration is capped at 7.5 percent unless the county is applying for an administrative cap waiver. To apply for the administrative cap waiver, respond to the questions in Section G under Administrative Cap Waiver.
- If "other" is used, briefly describe the line item.

2016 Budget

Budgeted Amount	Percent	Line Items
43,141.00	15.11%	Employment Services (DWP)
136,352.00	47.75%	Employment Services (MFIP)
18,093.00	6.34%	Emergency Services/Crisis Fund
21,418.00	7.50%	Administration (cap at 7.5%)
66,565.00	23.31%	Income Maintenance Administration
	0.00%	Other 1 _____
	0.00%	Other 2 _____
\$285,569.00	100.00%	Total

2017 Budget

Budgeted Amount	Percent	Line Items
43,141.00	15.11%	Employment Services (DWP)
136,352.00	47.75%	Employment Services (MFIP)
18,093.00	6.34%	Emergency Services/Crisis Fund
21,418.00	7.50%	Administration (cap at 7.5%)
66,565.00	23.31%	Income Maintenance Administration
	0.00%	Other 1 _____
	0.00%	Other 2 _____
\$285,569.00	100.00%	Total

Certifications and Assurances

Public Input

Prior to submission, did the county solicit public input for at least 30 days on the contents of the agreement?

No Yes

Was public input received?

No Yes

If received but not used, please explain.

4000 characters remaining

Assurances

It is understood and agreed by the county board that funds granted pursuant to this service agreement will be expended for the purposes outlined in Minnesota Statutes, section 256J; that the commissioner of the Minnesota Department of Human Services (hereafter department) has the authority to review and monitor compliance with the service agreement, that documentation of compliance will be available for audit; that the county shall make reasonable efforts to comply with all MFIP requirements, including efforts to identify and apply for available state and federal funding for services within the limits of available funding; and that the county agrees to operate MFIP in accordance with state law and federal law and guidance from the department.

Federal Funding Sources

The catalog of Federal Domestic Assistance (CDFA) Number is 93.558 - Temporary Assistance for Needy Families (TANF)
The Award number for the period of January 1, 2016 - December 31, 2017 is 2014G996115.

Service Agreement Certification

Checking this box certifies that this 2016-2017 MFIP Biennial Service Agreement has been prepared as required and approved by the county board(s) under the provisions of Minnesota Statutes, section 256J. In the box below, state the name of the chair of the county board of commissioners or authorized designee, their mailing address and the name of the county.

DATE OF CERTIFICATION	NAME (CHAIR OR DESIGNEE)	COUNTY
	David Kircher	Todd

MAILING ADDRESS	CITY	STATE	ZIP CODE
212 2nd Ave S	Long Prairie	MN	56347

Save or Submit

To save your work, select the 'Save Form for Later' choice, then click the SUBMIT button. Your information will be saved, and you can come back to the form later.

To submit your information to DHS, select the 'Submit Final Form' choice, then click the SUBMIT button.

Save Form for Later

Submit Final Form

Todd County, MN Board Action Form



Action Requested	
<input checked="" type="checkbox"/> Action/Motion <input type="checkbox"/> Discussion <input type="checkbox"/> Information Item	<input type="checkbox"/> Report <input type="checkbox"/> Resolution <input type="checkbox"/> Other
Board Action Tracking Number (Admin use): 20151020-07	

Title (for publication with the Agenda): Approve Title 3-B grant award	
Date of Meeting: October 20, 2015	Total time requested: 5 min
Department Requesting Action: HHS	
Presenting Board Action/Discussion at Meeting: Katherine Mackedanz/Jackie Och	
Background <input type="checkbox"/> Supporting Documentation enclosed	
Todd County Health & Human Services has been awarded a Title 3 grant award by Central MN Council on Aging to provide assisted transportation for seniors in Todd County who have chronic conditions that result in significant transportation needs. Total grant award is \$11,939 for the 2016 calendar year.	
Options <input type="checkbox"/> Supporting Documentation enclosed	
Recommendation <input checked="" type="checkbox"/> The Todd County Board of Commissioners approves the following by Motion:	
To approve the Title 3 grant award.	
Financial Implications: \$11,939	Comments
Funding Source: CMCOA	
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Action	Voting in Favor	Voting Against
Motion:	<input type="checkbox"/> Kircher	<input type="checkbox"/> Kircher
Second:	<input type="checkbox"/> Becker	<input type="checkbox"/> Becker
<input type="checkbox"/> Passed	<input type="checkbox"/> Erickson	<input type="checkbox"/> Erickson
<input type="checkbox"/> Failed	<input type="checkbox"/> Neumann	<input type="checkbox"/> Neumann
<input type="checkbox"/> Tabled	<input type="checkbox"/> Kneisl	<input type="checkbox"/> Kneisl

Signatures	
STATE OF MINNESOTA } COUNTY OF TODD }	
I, Denise Gaida, County Auditor-Treasurer, Todd County, Minnesota hereby certify that I have compared the foregoing copy of the proceedings of the County Board of said County with the original record thereof on file in the Administration Office of Todd County in Long Prairie, Minnesota as stated in the minutes of the proceedings of said board and that the same is a true and correct copy of said original record and of the whole thereof, and that said motion was duly passed by said board at said meeting. Witness my hand and seal:	
Seal	