

WRIGHT COUNTY HUMAN SERVICES BOARD

MINUTES

February 24, 2014

1:30 P.M. PLEDGE OF ALLEGIANCE.

The regular meeting of the Wright County Human Services Board was called to order at 1:30 P.M., Monday, February 24, 2014, by Chairperson Sawatzke.

MINUTES: Approval of Minutes of February 10, 2014.

Action: The Minutes were moved for approval by Husom, seconded by Daleiden. Motion carries unanimously.

AGENDA:

Action: The Agenda was moved for approval by Potter, seconded by Husom. Motion carries unanimously.

ROLL CALL:

Members Present:

Christine Husom - District 1

Michael Potter – District 4

Pat Sawatzke – District 2

Charlie Borrell – District 5 (arrived 1:36 PM)

Mark Daleiden – District 3

Staff Present:

Jami Goodrum Schwartz, Director

Michelle Miller, Social Services Manager

Jill Marzean, Social Services Supervisor

Social Workers: Kris Carlson, Rebecca Domjahn

Carol Schefers, Public Health Director

Joel Torkelson, Health Promotion Coordinator

Mary Nesseth, Public Health Supervisor

Christine Partlow, Fiscal Manager

Aggie Gunnerson, Secretary

Others Present:

Tim Dahl, Risk Manager

CONSENT AGENDA

1. Social Services Payments Abstract – \$191,617.86
2. Grants:
 - a. United Way Grant – Family Financial Services Program
Purpose of Grant: to purchase personal hygiene items, diapers, etc. for clients
Grant Period: remainder of 2014
Amount of Grant: \$2,400.00
Application Due Date: 4/01/14

Action: Motion by Potter, seconded by Daleiden, to approve the Consent Agenda. Motion carries unanimously.

REGULAR AGENDA

ADMINISTRATIVE PAYMENTS: (Borrell arrived)

Action: Motion by Potter, seconded by Husom to approve the Administrative Payments, in the amount of \$44,887.09; 63 vendors, 213 transactions, subject to audit. Motion carries unanimously.

PERSONNEL:

1. Refer to Personnel Committee request to reclassify a Case Aide to a Social Worker in the Licensing and Resource Unit.

Action: Motion by Daleiden, seconded by Husom, to refer request to the Personnel Committee.
Motion carries unanimously.

SOCIAL SERVICES/PUBLIC HEALTH/FINANCIAL SERVICES:

1. Volunteer Driver Program. (attachments)

Schwartz said there are two revisions prepared by Tim Dahl in No. 5 of Volunteer Driver Requirements, and revision date will change to date of actual change (2/24/14). Tim Dahl said he contacted several insurance brokers to find out if there is a product that would go over and above ours; and none were willing to provide coverage for this risk. He prepared two draft versions to Policy – referred to as “Clarification” and “Insurance Requirement.” The Clarification version clarifies compliance with Minnesota law – MCIT provides coverage only for Wright County, but does not cover the volunteer driver over their personal auto insurance. The Insurance Requirement version would require volunteer drivers to carry \$ 1 million in coverage. This would lower our risk to become involved in a third party lawsuit and requires the volunteer driver to have adequate or better protection so their personal assets would not be jeopardized. Sawatzke asked what percentage of our current volunteer drivers has this coverage and what is the average insurance coverage. Dahl said there are no specific statistics; and maybe 10% carry \$1 million. Borrell said these people are volunteering – we have to do something to make this work for them. Dahl said the only solution he could come up with is the two revisions presented. If we wanted to provide extra dollars for people to purchase higher limits, you could increase the mileage rate. Or, designate a covered County vehicle that the driver would use. Schwartz said that, logistically, it doesn’t work for the driver to come here and take back out to another corner of the County. Borrell said it doesn’t need to be one or the other; we could have a car, on our policy, and/or increase mileage reimbursement. Schwartz asked if the County has any issues with licensed drivers driving a County car and insure that particular car. Dahl said as long as the County gives permission to someone to drive a County car, we will provide coverage. However, that opens other potential risks; e.g. valid driver’s license, poor driving record. We would need a well-written policy on who may use our vehicles. Sawatzke stated we all take risks almost everyday when we drive people, and maybe we are making too big a deal of this. Husom said it is a smart thing to carry \$1 million in coverage and not have the potential of losing personal property because of a lawsuit. Borrell said by adopting the clarification it wouldn’t change anything, and volunteers get the same money they are now. Schwartz said we would write a letter explaining that this does not change anything that has been in place and clarifies the County’s position. Borrell asked Dahl if MCIT comes up with something where we could do something at a later date. Borrell said when we talk to people and explain this to them; we could give Dahl’s extension or to contact their own insurance agent who may advise them to carry a higher limit. Dahl said in both versions, Wright County would be recommending the volunteer driver have a talk with their insurance agent to make sure what their insurance limits are.

Action: Motion by Borrell, seconded by Daleiden, to recommend we go with “Clarification” version (version without \$1 million coverage). Schwartz said the Agency will attempt to get Policy out and signed by March 31, 2014. Daleiden asked if we get copies of their driver’s license. Marzean said the Agency annually verifies the volunteer driver has a valid driver’s license. Schwartz said we annually check those, and will have everybody sign policy by April 1st and annually thereafter. Daleiden asked how many volunteer driver we have. Schwartz said 10-12, and we are always looking for drivers. Daleiden asked if we have non-owners policy that covers us. Dahl said we have a non-owners policy that covers us. Sawatzke said if something happens, a lot may depends on the circumstance, was driver knowingly negligent or doing their best. Motion carries unanimously.

2. Child Care presentation. (attachment)

Kris Carlson and Becky Domjahn, work in licensing, reviewed handout on what applicants do to become licensed child care providers and licensing correction orders/negative actions. Sawatzke asked what a physical exam consists of. Domjahn said it is a basic health examination, has no communicable disease,

and is in adequate health to care for children. If provider were to have a stroke, we would require another physical. We receive feedback from parents and providers. Ultimately, we are working for the parents looking for child care. When parents contact us, we ask they look at our website. Costs to become a provider are \$100 fee for a background study, plus \$50 fee for a home study for the initial license. Carlson said there may be a cost to provider for equipment needed, but this is considered a business expense and we encourage them to talk to their tax preparer. Providers are charged a \$200 renewal fee every two years. Daleiden asked if there are restrictions on the number of children a provider can take care of. Domjahn said a provider can only have up to 12 children in their home, within that there are limits on the number of toddlers and pre-school children. Once a child turns age 11, they are no longer considered a day care child. All licensed providers are listed on our website. We encourage parents to ask providers questions, and to contact us when a decision is made on provider they will use. Most information we have on a provider is public. Domjahn said the reasons to use a licensed provider are the entire household has had a background study, and home has passed an annual safety check. The Agency has a licensing investigator who handles complaint investigations; as is common in larger counties. Carlson said the Dept. of Human Services (DHS) requires a home visit be done every two years; we do yearly visits. On the relicensing visit, we look at paper compliance, house compliance, and offer support/encouragement to providers. Correction Orders are very common – most are a “fix-it” ticket for yearly fire extinguisher service, water temperature too hot, training not current, etc. Daleiden asked if the Correction Order is posted in visible place for two years. Carlson said it must be posted in a conspicuous place; the Order informs people the provider has made correction(s). If the provider doesn’t comply with rules/statutes, we consider taking a Negative Action, and consult with the County Attorney and DHS. A Conditional License means the provider has a large number of things they are not in compliance with. We make a recommendation for a Conditional License to DHS, and they order the Conditional License. When we cannot insure the health and safety of the children, we recommend a Temporary Immediate Suspension by DHS, and we shut down the provider immediately. Out of 400+ providers, we may have 5-7 of these per year. Domjahn said they usually go to revocation 75% of the time. Domjahn said generally through the appeal process, we get the provider back to providing care. In the event there was injury at the hands of the provider or something that cannot be fixed in 2-3 months (the time it takes to do an appeal), then the license ends up in revocation. Carlson said fines issued to the provider are ordered through and paid to DHS. If a revocation occurs when there are unusually significant concerns, the provider is no longer able to provide care in a healthy, safe manner. For all these, the provider is given written appeal rights to appeal any action taken on their license. Domjahn said the only time a provider cannot operate is when their license is under a Temporary Immediate Suspension. Husom asked if the home is immediately closed if there is a SIDS death, and until the investigation is completed. Domjahn said they are usually closed. Our last SIDS death occurred in 2004, and provider’s license was suspended. In any sleep space violation, we recommend a fine. Borrell asked if a provider is at capacity, can someone bring in an extra child and put them over the limit on a temporary basis. Domjahn said probably not. The provider can ask for a variance. If they are over capacity by preschoolers, it would be more feasible that we can do that vs. having more in total capacity. Carlson said when looking at variance requests we look at the safety of the children, and Agency and provider liability. Facilities such as New Horizons are licensed by DHS. Carlson said we support providers by providing them with legislative updates, we have an email base for them to go to, we are open to consultation with providers, we have a newsletter, and provide resources if problems occur. Schwartz mentioned a recent Star Tribune article on dramatically reduced deaths in licensed day cares. Borrell asked if any providers have video recording equipment in their homes in case something happens. Domjahn said no, and that many use baby monitors.

3. Letter of Support for Twin Cities Behavioral Health in Buffalo to include chemical dependency services. (attachment)

Schwartz said recommendation from the County Board is needed, and letter states the County Board, is acting as Human Services Board. Schwartz said there are four other agencies in the County providing services.

Action: Motion by Borrell, seconded by Husom, to approve Letter of Support as stated. Motion carries unanimously.

4. “Healthy Food in the Community” presentation – part of the SHIP-Live Wright Project.
Joel Torkelson presented item. Currently, Joel said he is working on the strategy, Healthy Foods in the Community. He is also working on Healthy School Foods and Active Living in the Community. We are in the 4th month of the grant period. We have contracted with Regeneration Partnership to help us. Ana Micka is the person we are working with. We will be working to form the Crow River Regional Food System Council. When we first had SHIP dollars, we created four community gardens in Buffalo and Monticello. We are looking at a more sustainable, long-term approach. How to impact our food system and make it last the long term; looking at people with greatest need and how to help them. We want to look at the issues of food access, food insecurity, and affordability. We want to form a council of 15-20 people; the agency we are working with is currently doing interviews. We hope to have a Town Hall forum in a couple of months to get the community involved (based on an effort done in Vermont). We allocated \$55,000 to this agency to cover their time over the next 22 months and will also cover materials for meetings. We will afford trainings to our partners and the community at large. Some potential areas of focus could be: working with farmers markets to allow people to use SNAP benefits; support from our community that 20% of food consumed is local foods by 2020; we will develop a strategic plan and guide for how to build a healthy, local food system; work with local restaurants to procure foods/goods from local growers and change menus to have healthier options; how to make it easier to access healthy food vs. junk foods. We also are involved with the Central MN Food network – started one year ago, meets quarterly, covers Wright County and 13 other Counties in the region. We are currently in the middle of what the State is working on, the MN Food Charter – sets the stage on how we can help local growers, insure people have access to healthy foods. Through a nine month process, they involved 2000 people in about 150 meetings; and that document will be available by the end of this October. There are no specific outcomes to date, but are on the right track.

5. The Need for Home Visiting presentation. (attachment)
Scheffers said, as a Health Board, we are making changes in Public Health to do more evidence based home visiting and do more work with primary prevention. We are adding another evidence based program that will be in the Family Health Unit. Mary Nesseth showed two videos – summarizing what is going on and why we need to address the issues because we are seeing societal problems. Statistics mentioned in the video: Out of 29 nations, our children’s well-being ranks 26 of 29 rich nations. Today, both parents need to work. Americans work more hours than every other rich nation; 1 in 4 of our children are born in poverty. 70% of children are growing up in families of working parents. Our policies don’t help families take care of their children well in their early formative months, or in their early years in getting them ready for school. The United States is the only country that fails to provide guaranteed paid maternal leave on the birth of a child; 40% of working mothers go back to work within 3 months of their baby’s birth. Our child care ranks 16th in affordability, 22nd in quality; and 31st on availability of child care. As a society, where do we see our role in policies? In 1970, the U.S. was #1 in the world in high school and college graduates rates; today, we have fallen to 15th in college graduates; and 21st in high school graduates. When we increase the time, income and resources for parents and caregivers of young children, we build a solid foundation for lifelong development, earning, learning, and physical and mental health.

A second video, on the ACE Study done in Minnesota, was shown on how we can make changes to help children in our communities. The number of adverse childhood experiences has a direct correlation in a person’s mental health and social determinate; and all factors in as to how healthy that person is as an adult. Nesseth said we are looking at improving child outcomes by building adult capabilities. Children need investment in healthy development and need to develop skills that start in infancy (ages 0-5). There is a need to focus on development of adults to be better/more effective parents, to be more employable, etc. Pre-school and child care providers need skill building; adults in the community need to help build and reinforce the capacity parents have. We need to examine our policies to improve health and reduce toxic stress in caregivers to provide what children need, the development of a healthy population, etc. that is critical to a healthy society, thriving business and successful environment relationships to raise children. At the next Board meeting, Nesseth will talk about Family Home Visiting programs.

6. Adult Services Training Day. (attachment)
Action: Motion by Husom, seconded by Borrell, to approve off-site Adult Services Training Day.
Motion passes 4-0. Daleiden absent.

ADMINISTRATION:

1. January 2014 Financial Statement. (attachment)
Partlow said Expenditures are at 7%, Revenues at 4%. One item stands out in Administration - \$140,000 paid for our liability insurance.
Action: Motion by Potter, seconded by Daleiden, to accept the January Financial Statement. Motion carries unanimously.
2. No Director Comments.

The next regular meeting will be held at 1:30 P.M., Monday, March 10, 2014, in the Commissioners Room, at the Wright County Government Center. Chairperson Sawatzke adjourned the meeting at 2:59 P.M.