



Kanabec County Board of Commissioners

Regular Meeting Agenda

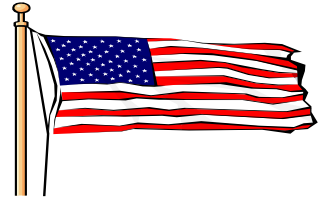
May 7, 2024 9:00AM

- The public may join the meeting via WebEx or in-person in the meeting room.
- If attending the meeting in-person, the total number of persons (including commissioners) may be limited and social distancing/safety protocol may be in effect.

WebEx telephone call or video meeting:

Telephone call-in number for public access: 1-408-418-9388

Access Code: 2499 630 6824



Video Meeting link:

<https://kanabeccounty.webex.com/kanabeccounty/j.php?MTID=m6c44e5bae52d73824dba1f4e3b9d63e3>

Meeting number: 2499 630 6824

Password: KBjwHHPG328 (52594474 from video systems)

To be held at: **Kanabec County Courthouse
Boardroom #164
317 Maple Avenue East
Mora, MN 55051**

Please use the Maple Ave entrance and parking lot.

The audience is invited to join the board in pledging allegiance:

I pledge allegiance to the flag of the United States of America, and to the Republic for which it stands: one nation under God, indivisible with Liberty and Justice for all

Scheduled Appointments: Times are approximate and time allotted to each subject will vary. Appointment times may be changed at the discretion of the Board.

- 9:00am a. Call to Order
 b. Pledge of Allegiance
 c. Agenda approval
- 9:02am **Public Comment** Telephone call-in number for public access: 1-408-418-9388
 Access Code: 2499 630 6824
- 9:20am Recess County Board to a time immediately following the CHB.
 Community Health Board
- 9:45am Kathy Burski, Community Health Director- Opioid Settlement Committee
 Recommendation for Funding Resolution
- 9:50am Kathy Burski, Community Health Director and Kris McNally, Coordinator- Request for
 authorization to send two new Community Health position descriptions to the pay
 consultant for scoring
- 9:55am Erica Bliss, Veterans Services Officer- Department update

10:05am Barb Barnes, Executive Director Kanabec History Center- Appropriation request and general update

10:20am Board Chair Mattson- Presentation of 25 Years of Service Award to Mark Dooley, Heavy Equipment Operator II

10:25am Denise Snyder, Auditor Treasurer- Request approval for snowmobile grant

10:30am Recess County Board to a time immediately following the Drainage Authority Board.
Drainage Authority Board

10:35am Chad Gramentz, Public Works

Other business to be conducted as time is available:

1. Minutes- April 16, 2024
2. Paid Bills
3. Regular Bills- Revenue Fund
4. Regular Bills- Road & Bridge Fund
5. SCORE Claims - March
6. Request approval of Resolution to Approve an Employment Termination
7. Request approval of Resolution to Temporarily Suspend New Tax Abatement Applications
8. Discuss stakeholder input on Kanabec County Economic Development Authority
9. Rescind Resolution #14 - 4/16/24 Approval to Hold a Fundraising Event & Create an Assigned Fund
10. Commissioner Reports
11. Future Agenda Items
12. Discuss any other matters that may come before the County Board
13. Adjourn

Kanabec County Community Health Board
AGENDA
Tuesday, May 7, 2024
9:20 a.m.

1. Call meeting to order
2. Agenda Approval page 1
3. Presentation: Immunization Program – Kirsten L., PHN page 2
-See attached Immunization Information
4. Director’s Report page 3
 - Staffing – Admin Assistant, HHA;
 - Home Care License Survey page 4-6
 - see attached Certification letters
 - Timber Trails New Bus Delivery/Removal of Unit #13 from MNDOT Fleet
 - Safe Drinking Water for Private Well Users Grant
 - Initiative Foundation Funding
5. Request to Apply for UCare Community Grant page 7
 - Action requested
 - See attached resolution
6. Request to Apply for CMCOA Grant funding page 8
 - Action requested
 - See attached resolution
7. Request to Apply for Congratulate and Educate DHS Funding page 9
 - Action requested
 - See attached resolution
8. 1st Quarter 2024 Report page 10-29
 - See attached report
9. Financial Reports page 30-32
 - see attached page 33-34
 - Trial Balance
 - March 2024 Financial Report (2)
10. Abstract Approval page 35-43
 - Action Requested
 - See attached Abstract and Vendor List
11. Other Business
12. Adjourn

Immunization Programs

The Minnesota Vaccines for Children (MnVFC) program is offered at Kanabec County and is Minnesota's version of the federal Vaccines for Children program that works to make all vaccines accessible and affordable for all children within their medical homes. The population served includes children ages 0-18 who are uninsured, American Indian/Alaskan Native, covered by a Minnesota Health Care Program, or underinsured. We also work to connect those eligible with medical assistance, should they qualify. Effort is also made to connect these families with a primary health care provider to ensure routine care is being provided and accessed.

In addition, Kanabec County offers vaccinations for adults that are underinsured or uninsured (UUAV) ages 19 and older. This program offers routine and booster vaccinations to those who qualify. We also work to connect those eligible with medical assistance, should they qualify. Effort is also made to connect these adults with a primary health care provider to ensure routine care is being provided and accessed.

Yearly, we offer influenza vaccinations for ages 6 months and up. We have vaccines for all insurance types, and again for those who are uninsured. We offer clinics as needed, offer to our home visiting and WIC families, and offer to our foot care, home care and case management clients. If there are home bound community members, we will provide in home influenza vaccines.

COVID vaccines are also offered to our MnVFC and UUAV population, and on an as needed basis for our home bound population to ensure equal access to the vaccine. We have partnered with Welia to distribute the vaccine, but now that it is a private vaccine, we purchase the vaccine ourselves, and have billing established to cover those costs, like with the influenza vaccine. For the MnVFC and UUAV programs, the State provides the vaccine. We do not pay for the vaccine and are able to charge an administration fee.

Within the last vaccine season, we administered one (1) adult routine vaccine in the UUAV program, 7 child routine vaccines in MnVFC program, 5 influenza vaccines in the MnVFC program, 8 COVID vaccines from our private stock, and 85 influenza vaccines to our private stock.

We have increased our outreach methods within the past year, which has increased the number of vaccines we have administered! We had a billboard promoting vaccination, more outreach to schools about our vaccine programs, a social media presence of our vaccine availability and dispersing information to all the populations we serve. We also partnered with the Minnesota Immunization Information Connection (MIIC) system to send texts to parents of children who are not up to date on their vaccines. These texts go out monthly and we usually see an uptick in vaccines given after.

Kanabec County Community Health/Timber Trails
Director's Report
May 2024

Staffing (Public Health):

Home Health Aide – a full-time position was offered and accepted. This will alleviate many of the issues we were having in providing an appropriate level of services to clients, but we will still be advertising for part-time intermittent workers.

Administrative Assistant – The new Administrative Assistant started on April 29, 2024.

Home Care Licensing Survey:

The Minnesota Department of Health conducted a survey for home care licensing April 8 – 10, 2024. A licensing survey for both the State of MN as well as our Federal CMS certification happens once every three years. The survey includes a review of charts, policies and procedures, and going on visits with staff. I am very happy to announce that we were found to be in substantial compliance and no deficiencies were cited. It is a rare occurrence to have zero items noted for improvement. This is a testament to the hard work and dedication of all the staff. Letters from MDH are attached.

Timber Trails New Bus Delivery/Removal of Unit #13 from MNDOT Fleet:

Timber Trails accepted delivery of the bus that was ordered in 2021 in April. The bus was lettered/wrapped and a radio installed and it has been put into service. We will be removing unit #13 from the MNDOT Fleet inventory. We are however going to keep the bus as a back-up. However, once it is removed from the MNDOT Fleet inventory, none of the costs associated with operating the bus can be charged back to MNDOT.

Safe Drinking Water for Private Well Users Grant:

We received notification that our grant application received the points needed to qualify for funding and has been approved to receive the total grant funding requested (\$100,000). The grant period is from July 1, 2024 – May 1, 2027. The goal is to test 200 wells and provide some funding to eligible households for mitigation of any issues found.

Initiative Foundation Funding:

In March, we submitted an application to the Initiative Foundation to help combat loneliness and isolation. We were awarded \$5,000 to support some activities for youth/adolescents as well as sponsoring a senior fair. We will be planning the youth/adolescent activities for this summer and are looking at holding a senior fair in April of 2025.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 247126	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 04/10/2024
NAME OF PROVIDER OR SUPPLIER KANABEC COUNTY COMMUNITY HEALTH			STREET ADDRESS, CITY, STATE, ZIP CODE 905 EAST FOREST AVENUE SUITE 127 , MORA, Minnesota, 55051	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
E0000	Initial Comments A survey for compliance with CMS Appendix Z Emergency Preparedness Requirements, was conducted on 4/8/24 to 4/10/24 during a recertification survey. The facility is in compliance with the Appendix Z Emergency Preparedness Requirements.	E0000		
G0000	INITIAL COMMENTS On 4/8/24 to 4/10/24 a recertification survey was conducted. This resulted in a standard survey at Kanabec County Community Home Care. The agency was found to have met the requirements at 42 CFR. Part 484 for Home Health Agencies. Unduplicated census previous 12 months: 89 Total home visits conducted: 3 List Parent Location visited, including the addresses as verified while on site: 905 Forest Ave E #127 Mora, MN 55051 List all other branch offices for this agency and identify which of these were visited during this survey and which you pulled records from no branches List Hours of Operation: 8:00 a.m. to 4:30 p.m. List total number of records reviewed: 7	G0000		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See reverse for further instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Protecting, Maintaining and Improving the Health of All Minnesotans

Electronically Delivered via Email

April 17, 2024

Administrator
KANABEC COUNTY COMMUNITY HEALTH
905 EAST FOREST AVENUE SUITE 127
MORA, MN 55051

RE: Event ID: 6277A-H1

Dear Administrator:

On April 10, 2024, a survey was completed at your facility by the Minnesota Department of Health to determine if your facility was in compliance with Federal certification regulations requirements. The survey revealed that your facility was in substantial compliance with participation requirements and no deficiencies were cited. The findings from this survey are documented on the electronically delivered form CMS 2567.

No additional action is required on the facility's part. Thank you for your cooperation.

Please feel free to call me with any questions.

Sincerely,

A handwritten signature in black ink that reads 'Kamala Fiske-Downing'.

Kamala Fiske-Downing
Minnesota Department of Health
Health Regulation Division
Telephone: (651) 201-4112
Email: Kamala.Fiske-Downing@state.mn.us



Protecting, Maintaining and Improving the Health of All Minnesotans

Electronically Delivered via Email

April 17, 2024

Administrator
KANABEC COUNTY COMMUNITY HEALTH
905 EAST FOREST AVENUE SUITE 127
MORA, MN 55051

Re: Event ID:6277A-H1

Dear Administrator:

A survey of the Home Care Provider named above was completed on **April 10, 2024**, for the purpose of assessing compliance with State licensing regulations. At the time of survey, the survey team from the Minnesota Department of Health, Health Regulation Division, noted no violations of the requirements under Minnesota Statutes Sections 144A.43 to 144A.482.

Attached is the Minnesota Department of Health order form stating that no violations were noted at the time of this survey. The Minnesota Department of Health is documenting the State Licensing Correction Orders using federal software. Please disregard the heading of the fourth column which states, "Provider's Plan of Correction." This applies to Federal deficiencies only. There is no requirement to submit a Plan of Correction.

Please feel free to call me with any questions.

Sincerely,

A handwritten signature in black ink that reads 'Kamala Fiske-Downing'.

Kamala Fiske-Downing
Minnesota Department of Health
Health Regulation Division
Telephone: (651) 201-4112
Email: Kamala.Fiske-Downing@state.mn.us

Resolution # KCCH – 5/7/2024
Request to Apply for UCare Community Grant Resolution

WHEREAS, Kanabec County Community Health has the opportunity to apply for a UCare Community grant to fund programs that address Dental Care Access in Greater Minnesota; and

WHEREAS, Kanabec County Community Health works with Children’s Dental Services (CDS) to provide access to dental services at the Public Services Building in Mora; and

WHEREAS, the funds would be used to continue CDS’s services.

THEREFORE, the Community Health Director is requesting permission to apply for the UCare Community Grant to continue dental services here in Mora through Children’s Dental Services.

THEREFORE BE IT RESOLVED, the Kanabec County Community Health Board approves the Community Health Director applying for the UCare Community grant, accepting the funds and signing an Agreement with UCare if they are approved for funding. The grant cycle for Dental Care Access in Greater Minnesota will begin September 1, 2024.

Resolution # KCCH – 5/7/24
Central Minnesota Council on Aging Grant Resolution

WHEREAS, Kanabec County Community Health has been a recipient of Title III grant funding from the Central Minnesota Council on Aging for the Public Health Nurse Clinic and Assisted Transportation for many years; and

WHEREAS, Kanabec County Community Health will be receiving the Request For Proposal from Central Minnesota Council on Aging for the continuation of the Title III grant and Assisted Transportation in the near future, and

WHEREAS, the Community Health Director recommends applying for the continuation grant for seniors to remain being served through these programs.

THEREFORE BE IT RESOLVED the Kanabec County Community Health Board approves the Community Health Director to apply for Title III funds to continue providing the Public Health Nurse Clinic and Assisted Transportation, from Central Minnesota Council on Aging and to accept the grant and sign the Agreement if it is awarded.

Resolution # KCCH – 5/7/24
Congratulate and Educate Compliance Checks Resolution

WHEREAS, the Better Together Coalition Coordinator would like to conduct Congratulate and Educate compliance checks of entities that are licensed to sell tobacco within Kanabec County, and

WHEREAS, the MN DHS through its Behavioral Health Division, in partnership with the Association for Non-smokers-MN (ANSR), is offering an educational tobacco compliance check opportunity called Congratulate and Educate, and

WHEREAS, the opportunity is to conduct one-on-one education on local, state, and federal youth access laws with tobacco retailers, with the goal being to educate retailers about the important role they play in keeping young people commercial tobacco-free, and

WHEREAS, DHS will pay \$50 per vendor/per educational compliance check and provide all educational materials for the vendors, as well as a certificate.

THEREFORE BE IT RESOLVED the Kanabec County Community Health Board approves the Community Health Director to apply for the Congratulate and Educate funds from DHS to complete tobacco compliance checks throughout the county, and to accept said funds and sign an Agreement with DHS upon approval of application.

Kanabec County Community Health (KCCH)
Timber Trails Public Transit (TTPT)
Report to County Board
January – March 2024

Major Highlight(s):

Passage of the cannabis public use ordinance at the March 19, 2024, Board Meeting was a major highlight. Work will continue with the cities within Kanabec County to do the same. It was decided to postpone the public hearing on the tobacco ordinance in order to be able to provide more information/education to the Board and community. The Director and other staff have spent a significant amount of time attending webinars and increasing knowledge around the legalization of cannabis while waiting for the Office of Cannabis Management to provide guidance. We are also still waiting for funds to be released to local public health to do more work to educate the public about the law, safe use, and harms of cannabis use. The legislature did allocate funding to MDH but did not provide any funds to do the work of getting those funds out such as contracts/disbursement/tracking etc.

Opioid Work: The Opioid Committee reviewed applications and funded two grants during the quarter. The Committee has decided not to conduct another round of requests for proposals but will consider requests for funding as they come in. The second wave of funding has not started to come in yet.

Foundational Public Health: Strategic planning for KCCH, facilitated by our Public Health System Consultant from the MN Department of Health, was started during the quarter. The group reviewed the Mission and Values and created a Vision for the future. We also began developing strategies to achieve the vision. An Organizational Assessment took place in the previous quarter. The group looked at strengths, accomplishments, opportunities, external factors that might impact programs/services/responsibilities, aspirations, and evaluation. These sessions informed the decision to create two new positions in Community Health that will help to build the foundational capabilities of the local public health department. The Director is working on writing the job descriptions to bring to the Board for permission to submit for pointing.

Staffing: During this quarter we had the WIC Nurse retire. The position was replaced with an internal candidate and interviews were held to backfill the vacated position due to the internal move. In March we held job interviews to replace the Health & Human Services Administrative Assistant position as the current employee will be retiring on May 3rd. The job was offered, accepted, and then declined so 2nd interviews were held and another offer extended.

We continue to struggle to fill part-time intermittent home health aide positions. The Board has requested that the Director bring information about a full-time option.

Audits/site visits completed:

- Public Health Emergency Preparedness – January 23, 2024 – included a review of grant duties and deliverables, discussion of challenges and successes, a review of the after-action report and improvement plan based on response to COVID 19. The reviewer was very complimentary of Kanabec County’s PHEP Coordinator and her work within the County as well as the Region.

Audits/site visits upcoming:

- Title V MCH Block Grant Connection Visit – June 7

Grant reporting/work during quarter:

Dental Grants	Continue to seek funding	Ongoing
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Central MN Council on Aging	Quarterly Report	January 10
Title V – Maternal Child Health	Annual statistical report and expense report	Due January 31
Opioid Settlement Fund	Spending Report	3/31/2024
MN Department of Health	End of Year – Financial, staffing and performance measure reporting	3/31/2024
SHIP	Carryover Budget Revision	February 28
MDH – Well Water Grant	Grant Application Completed	February 16
Initiative Foundation	Grant Application Completed	March 15
Report to Board	Program Report	Quarterly

Grant/other work upcoming:

Central MN Council on Aging	Quarterly Report	July 10
Foundational Public Health Responsibilities	Progress Report	May 17
MNDOT	Transit Service Design/Budget	June 2024
Department Budget	Health & Human Services Advisory	July 2, 2024
Department Budget	County Board	July 2024

Meetings/Trainings attended (not an all-inclusive list):

- Department Administrative meetings
- County Department Head Meeting
- Kanabec County Family Services Collaborative
- Health & Human Services Joint Administrative meeting
- Statewide Community Health Services Advisory Committee (SCHSAC) Quarterly Meeting
- Weekly check-in calls with Helen (Timber Trails)
- Local Public Health Association meeting
- Local Public Health Association Opioid Learning Sessions
- SCHA Directors Meetings
- Health and Human Services Advisory Committee
- Central Directors meetings (Public Health)
- Monthly Check-in with MDH Public Health System Consultant
- Local Opioid Committee Meeting
- Annual Opioid Public Meeting
- Cannabis Ordinance Public Hearing
- PHEP Oversight Committee (Statewide)
- Presented MN Student Survey Data to Mora Public School Board
- Better Together Coalition Meetings
- Various Cannabis Webinars
- All Staff Meeting
- SCHA withdrawal meeting
- Emergency Preparedness Advisory Committee
- Title III Provider meeting
- Hazard Mitigation Plan meeting
- KBK interview regarding new transportation service
- CMCOA – NAPIS Form Training
- Response Sustainability Grant rollout/workplan/budget training
- Foundational Public Health Responsibilities Grant rollout/workplan/budget training

- ATOD/Coalition – Wilder Survey planning
- Strategic Planning meeting
- Non-emergency medical transportation webinar
- Regional Transportation Coordinating Committee
- JUUL Settlement input meeting
- Public Health Law Center - Regulating Tobacco webinars

Other work:

- Budget work.
- Day to day management of workforce, grant compliance, reporting, monitoring, evaluation, planning
- Weekly fiscal duties – deposits
- Regular meetings with program staff regarding program areas
- Transit Operations discussions
 - Weekly connect with Transit Director
- Review and signing of invoices for month/quarter.
- Interview for vacant positions

Looking forward:

- There will continue to be a large amount of work to be done around education and messaging to youth about Cannabis use. Work will also continue with cities to pass public use ordinances for their jurisdiction. Public Health desires a strong ordinance around the Public Use of Cannabis that will help to reduce the normalization of product use, protect against secondhand smoke exposure, unintentional ingestion of cannabis in edible forms by children and youth and protect youth from exposure and access to products.
- In addition to cannabis, continued work is still needed around the harms of vaping and counter acting the marketing and targeting of information to youth that gets them hooked. Flavored tobacco/nicotine products continue to hook adolescents into a lifelong habit of use that leads to chronic disease and other health issues.
- Working with HR and the Board to fill positions to be funded with the new Foundational Public Health Responsibilities funding which must only be used to build capacity within the eight foundational areas.

The following pages provide more detail about the programs provided through Kanabec County Community Health.

Family Health

Reporter: Ashley Berg, Family Health Supervisor

Acronym definitions:

- WIC = Women, Infant and Children supplemental nutrition program
- TANF = Temporary Assistance for Needy Families Home Visiting Program
- MCH – Maternal Child Health Programs
- MESCH = Maternal Early Childhood Sustained Home-visiting (Evidence-Based)
- C&TC = Child & Teen Check-up
- CQI – Continuous Quality Improvement
- NFP = Nurse-Family Partnership (Evidence-Based)
- HFA – Health Families America (Evidence-Based)
- UBV – Universal Baby Visit

Major Highlights

WIC (Women, Infant and Children)/ Maternal-Child Health Programs:

- WIC participation enrollment has increased over the last quarter. January had 438 participants, February had 438 participants, and March had 439 participants. In the last three quarters our participation rates have maintained at 96% for participation and benefit use.
- In February, WIC continued to extend the increased cash value benefit for fruits and vegetables through the end of September 30th, 2024. This benefit has been in effect since October 2021. Families received \$24 per child, \$47 for pregnant and postpartum women (partially breastfeeding or non-breastfeeding), and \$52 for a postpartum woman (fully breastfeeding) each month.
- This quarter presented many changes within our WIC staff. Ellen White retired on 2/1/24, Kelly Zaiser briefly took on the role of WIC and breastfeeding coordinator, and in March Kirsten Lejonvarn began training for the WIC and breastfeeding coordinator.
- Kirsten Lejonvarn began seeing WIC clients at the end of March.
- East Central Breastfeeding Coalition (ECBC) met January 18th and March 21st. Topics discussed were to review the mission behind the ECBC and milk composition (foremilk and hindmilk)

Family Home Visiting Programs:

- Eight (8) new families enrolled in MECOSH. We were able to meet our caseload of 44 families enrolled throughout the quarter with 43 active and 1 inactive. We have met our target caseload of 40 families for the MECOSH program. There were 2 families that completed the program and 1 family that was closed due to no participation within the last nine months.
- 13 new TANF families enrolled for short term services and 6 families graduated from TANF and/or no longer receive services. Over the course of the quarter, 15 families received services through the TANF program.
- This quarter, 4 universal baby visits were conducted.

Immunizations/ Child & Teen Checkups Screens (C&TC) and Outreach/ Disease Prevention:

- We continue to be the safety net for children & adult vaccinations. Immunization appointments are available to the public. We provided three (3) MnVFC (MN vaccine for children program) vaccinations to children under the age of 18 and one (1) UUAV (Uninsured and underinsured adult vaccinations).
- Child-find and outreach efforts continue with families to provide education and direct services for blood lead screens. Nurses continue to complete referral and follow-up for children indicated as having a high lead level per MDH algorithm. Seventeen (17) lead screens were completed by staff during this quarter.
- C&TC outreach efforts are focused on locating and encouraging preventive care for children on MN Health Care Programs.
- 12 Car seats were provided to eligible families. Eligible families must have UCare MA, Blue Plus MA, or SCHA. We do have some grant car seats for 2024 that are used for straight MA or 185% of Poverty Level for Income.
- Our C&TC outreach display board provided information on Birth Defects, Children's Dental, and Poison Prevention. This board presents a variety of information for visitors to the Public Services Building.
- 3 adult flu vaccinations and 1 pediatric flu vaccination were provided to residents of Kanabec County
- 0 COVID vaccinations were provided to homebound patients within Kanabec County

SCHA Community Connector (Kanabec):

- The Community Connector continues to play a vital role in keeping the team updated on SCHA changes/initiatives and supports the connection of services to our families. Meetings continue to take place virtually to best support the structure of this role. The Community Connector role

continues to take on additional responsibilities that were previously set aside due to the pandemic.

Other Family Health Activities and Highlights:

- Our home visiting nurse, Autumn, and Mary Lagaard, continue to meet with Dr. Niskanen and two of the Welia nurses to establish better continuity of care for the Amish and working on affordable medical care.
- In addition, KCCH home visitor Autumn will complete UBV's and/or medical questions/requests to the Amish population.

Thinking Ahead

- Our family home visiting staff are utilizing the child and teen checkup outreach board to present information to the public. April will present information on 911 awareness and use, May-Bike Safety, June-Water safety.
- Continue to actively enroll more families in the Evidence Based Home Visiting Program (MESCH) to maintain at least 40 families.
- Continue outreach efforts with health care systems and other referral sources to identify and increase the ability/desire of families to access appropriate services.
- Continue dialogue during our quarterly Community Advisory Group meetings on how we ensure families are receiving appropriate services from providers and partners within the community; make effective and efficient use of all our community resources.

Concerns and Challenges

- None

Numbers Served

- Total families seen in Family Home Visiting programs during this quarter:
 - MECSH (Quarter 1 of 2024) = 44 families visited with 190 nursing assessments (1 was telehealth); Quarter 4 of 2023 was 40 families and 160 visits and in Quarter 1 of 2023 there were 23 families and 146 assessments.
 - TANF (Quarter 1 of 2024) = 15 families visited with 60 nursing assessments completed. In quarter 4 of 2023 19 families with 37 assessments were completed and quarter 1 of 2023 served 7 families with 22 assessments.
 - MCH **infants and children** (Quarter 1 of 2024) = 0 families visited with 0 assessments completed; this was the same for Quarter 4 of 2023 and Quarter 1 for 2023.
 - MCH **prenatal AND postnatal** (Quarter 4 of 2024) = 24 prenatal assessments and 2 postpartum assessments; this is up 10 for prenatal assessments and up 2 for postpartum assessments in Quarter 4 of 2023 and up 13 for prenatal assessments and down 1 postpartum assessment from the same time in 2023
 - MCH **Special Needs** (Quarter 4 of 2024) = 1 visits completed with 1 family: up from 1 visit with 0 family in Quarter 4 of 2023 and same number of families and visits for the same period in 2023
- 12 families provided with car seat education and car seat (down 5 from quarter 4 of 2023)
- 17 lead screens completed (down 2 from quarter 4 of 2023)
- 0 dental varnishes completed (down 6 from quarter 4 of 2023)
- 0 pregnancy tests were administered, and education provided (down 2 from quarter 4 of 2023)
- 0 CT&C examinations were performed during the quarter

Adult Health- Home Care, Case Management, and Public Health Nurse Clinic
Reporter: Farrah Gajewski, RN, Adult Health Supervisor

Program acronyms/definitions:

AbilityCare – a Medicare Advantage Special Needs Basic Care (SNBC) program for people with disabilities. AbilityCare is designed to help people with disabilities access the health care, medications, and support services they need. Must be certified disabled, between the ages of 18-64 at the time of enrolment, eligible for Medical Assistance and have Medicare Parts A and B.

SingleCare – is a Special Needs Basic Care (SNBC) program for people with disabilities. SingleCare is designed to help people with disabilities access the health care, medications, and support services they need. Must be certified disabled, between the ages of 18-64 at the time of enrolment and be eligible for Medical Assistance.

Nursing Home Care Coordination (NF) – provided to people needing assistance with coordination of care within a facility.

Alternative Care (AC)– A state-funded program that pays for home and community-based services for people aged 65 and older who require the level of care a nursing facility provides, and who, if they enter a nursing facility, will be eligible for Medical Assistance within 180 days of admission.

Community Access for Disability Inclusion (CADI) Waiver – A Medical Assistance program that funds home and community-based services for people under the age of 65 people with disabilities who require the level of care provided in a nursing facility and who choose to reside in the community.

Personal Care Assistant Services (PCA) – provide assistance and support for persons with disabilities, living independently in the community. This includes the elderly and others with special health care needs. *Public Health provides assessments to determine the level of eligible services people may receive.*

Elderly Waiver (EW) – A Medical Assistance program that funds home and community-based services for people aged 65 or older who require the level of care provided in a nursing facility, and who choose to reside in the community.

Care coordination (CC): A service for people enrolled in Minnesota Senior Health Options (MSHO) and/or Minnesota Senior Care Plus (MSC+). It provides assessment and coordination of the delivery of all health and long-term care services among different health and social service professionals and across settings of care. Care coordination also includes waiver case management.

Preadmission Screening (PAS) – a screening for anyone planning to be admitted into a nursing home. It is legally required to measure a person’s need for nursing home level of care and to connect them with supportive services.

Omnibus Budget Reconciliation Act (OBRA) – part of the preadmission screening (PAS) process used to determine if a person has a diagnosis or suspected diagnosis of developmental disabilities/related conditions or mental illness. It must happen before a person is admitted to a Medical Assistance (MA)-certified nursing facility (NF).

QAPI – Quality Assurance and Performance Improvement

Highlights:

Home Care

- 512 Home care visits were completed (Down 101 from last quarter)
 - 459 visits were made with a pay source of Medicaid, Veterans Affairs, Waivered Services, etc.
 - 51 were straight Medicare visits
 - 0 South Country Health Alliance Medication Reconciliation
 - 2 Private pay
- Throughout the quarter we served approximately 55-60 clients in their homes. This average is lower than it was last quarter.
- There was a total of 32 referrals (Up 2 from last quarter). Of the 32 referrals, we had 5 that did not open to home care for various reasons. The primary reasons for not opening for services are that the clients were not interested in home care and that the clients were not homebound. We had 27 that opened to home care (Up 2 from last quarter). We are currently at an 84% start of care rate.
- There were 536 Home Health Aide hours (Down 112 hours from last quarter and down 386 over the past two quarters). The decrease in home health aide hours is due to a lack of staff. We were very short home health aides during the first quarter of 2024.
- 113 hours were completed for homemaking (Down 40 hours from last quarter).
- 22 OT/OT Assistant visits (Up 12 from last quarter)
- 190 PT/PT Assistant visits (Up 79 from last quarter)

Public Health Nurse Clinic

165-foot care visits, 23 cancellations or no shows from the clients. Cancellations by the clients were down by 29 visits while foot clinic visits were down by 3 this quarter.

There were 74-medication set up visits and 2 cancellations. The total number of medication set up visits was up 3 from last quarter and the cancellations were the same.

Case Management

- Care coordination visits: 81.25 (Down 3 hours from last quarter)
- Nursing Home Care Coordination Hours: 21.25 hours (Up 2.25 hours from last quarter)
- Care Connector: 57 hours (Up 3 hours from last quarter)
- Case Aide: 112.75 hours spent on client specific billable hours (Up 6.75 hours from last quarter)
- Care Coordination Indirect, coordination time in the office-billable: 709 hours (Up 57 hours from last quarter)
- Care Transition, visits and time required in office for coordination: 2.5 (Down 9 hours from last quarter)
- PAS completed: 4 (The same as last quarter)
- Care Coordination Indirect, coordination time in the office-billable: 709 hours (Up 57 hours from last quarter) *The increase in Care Coordination Indirect hours is due to the MnChoice assessments, reassessments and documentation hours that have previously been reported separately.

Charts/Numbers Served:

Home Care:

We are currently serving an average of 55-60 home care clients per month. This is lower than last quarter. The payers of the home care clients include self-pay, medical assistance, Medicare, VA, Medicare Advantage Plans,

and some private insurance companies. We currently have contracts with the following companies: Blue Cross Blue Shield, Health Partners, Humana, Medica, VA, Preferred One, SCHAs, and UCare.

Public Health Nurse Clinic:

We are currently serving a total of 173 clients. This includes clients that we serve through medication set up and foot clinic. We have 159 clients we serve in foot clinic and 14 clients we serve in medication set up clinic.

Case Management:

Our case managers currently serve 293 clients which is down 3 from the previous quarter.

- Ability Care SCHAs: 24 – Down 1 from last quarter
- Single Care SCHAs: 75 – The same as last quarter
- SNBC UCare: 33 – Down 8 from last quarter (due to ineligibility)
- Nursing Home Clients: 28 – Down 4 from last quarter
- AC: 3 – Down 2 from previous quarter
- CADI: 44 – Down 3 from previous quarter
- CAC: 3 – New to KCCH in 1/2024
- EW SCHAs: 54 – The same as the previous quarter
- EW BluePlus: 13 – Up 5 from last quarter
- EW Non MCO: 16 – Up 5 from previous quarter

Trends/Updates:

Home care:

Preparations have continued for our state survey that was supposed to happen in December of 2023. We have worked on standardizing medication lists as part of a QAPI project and to be more streamlined when seeing clients for coworkers. We have also been working on other QAPI projects such as infection/fall discussions and infection documentation.

We have also continued to work on Electronic Visit Verification through HHAExchange. Home care agencies still have not heard an official “go live” date from DHS. Although EVV has proven to be a challenge, the home care staff have continued to work through the issues that arise.

We are very short on home health aides. We posted a full-time position in hopes of attracting a home health aide who can work a steady number of hours.

Case Management:

The new MnChoice Revision roll out has proven to be a continued challenge for our case managers. All new assessments are to be done in Revision which takes up to six hours longer than an assessment completed in Legacy (the old MnChoice system). This will become easier as we do more, and DHS works out the kinks in the new system.

Family Health was able to hire a nurse to replace a nurse who retired. The nurse plans to help with Elderly Waiver clients and this is helpful to Adult Health due to the increase in referrals we have received. As of the end of the first quarter, we have received a total of 10 new elderly waiver referrals. This is putting our part-time case managers at almost a full-time case manager case load.

Public Health Nurse Clinic

No significant trends to report from our public health nurse clinic.

Major Activities:

Home Care:

- Preparing for the home care audit
- EVV
- QAPI

Case Management:

- Health plan audits - SCHA
- Workflow changes with MNCHOICES assessments/intakes

Public Health Nurse Clinic:

- None

Success Stories:

Home Care:

We have a client on our caseload who is a veteran. This person lives in an area with no cell phone service. The home care nurse has been out to their home numerous times and has spent a lot of time coordinating medical appointments due to the client not having a way to call out to their providers. The home care nurse worked diligently with the VA, the client, and a phone company to install a land line. The client now has the ability to call their health care team, family, and friends.

Case Management:

One of our members who is case managed is currently weaning off of methadone. The client has previously had difficulties getting rides to the methadone clinic. The member's case manager has worked with the member and the insurance company to ensure the member is getting to and from their appointments as scheduled.

Public Health Nurse Clinic:

One of our new public health nurse clinic clients is new to the area. They were unsure of who the providers were in the area. The nurse gave resources to the client for providers at Welia in the Pine City location per the client's request. The client came back for their next appointment very appreciative of the resources and stated that they really enjoyed the provider they met. The client stated that they plan to establish care with that provider.

Partners in Healthy Living (PIHL)/Statewide Health Improvement Partnership (SHIP) Lori Swanson, Health Promotion Coordinator

PiHL is working with **68** partners in the four-county region: Kanabec, Pine, Mille Lacs, and Isanti.

Training/TA provided and number of participants:

- SHIP staff attended monthly “coffee chats” /virtual trainings with MDH on the four context areas of MN EATS, MN MOVES, MN Commercial Tobacco-Free, and MN Wellbeing. Additionally, Lori Swanson participates in monthly evaluation, TA/Training, Communications advisory committees facilitated by MDH.
- The Community Leadership Team (CLT) met on January 18th with 4 members and 4 SHIP coordinators. Agenda items included review of the 2023-24 budget, 2024 Community Partner Award Application (CPA), 2024 tobacco store audits in all four counties, and workplace wellness review.
- SHIP staff provided Farm to School training to 4 Food Service Directors on March 5, 2024.

Major Activities

- The draft of the updated Kanabec County Tobacco Ordinance was presented to the County Board on February 6, 2024. Additional community education around vaping will take place prior to the public hearing to adopt the new ordinance.
- The Mora Farmers Market is planning to apply for grant funds through First Citizens Charitable Foundation, Inc. to help fund Power of Produce (PoP) at the market this season. The Power of Produce (POP) Club provides a fun opportunity for children to engage in the local food system through conversations directly with farmers, educational games and demonstrations, and exposure to new fruits and vegetables. POP Club kids receive \$2 vouchers to spend at the market, allowing them to make their own shopping decisions at the market.
- Gedef Farm in Ogilvie is a new partner with us this year and has plans to sell her produce from her garden in the Ogilvie Community. She will also work toward accepting EBT/SNAP in the future.
- Portable walking pads for many of our workplace partners have become very popular. It gives employees additional access to physical activity.
- TEAMS Cambridge, a manufacturing partner, is creating an outdoor space for garden beds to grow vegetables and an area for employees to relax and destress outside.
- The Isanti Intermediate/C-I STEAM school is adding a gaga pit to students to be more active during recess time. Students will be taught how to play the game during physical education classes.
- Many of our partners continue to add water bottle/hydration stations to give employees access to fresh, clean water rather than sugary beverages.

Success Story

- We were awarded additional funding as part of the JUUL settlement to conduct tobacco store audits in all four of our counties. SHIP staff started conducting the audits in March and will finish in June 2024. Results will be shared as soon as they are available.

Better Together Coalition

Allison Krueger

Activities:

- Talk Early Talk Often Campaign
- Social media messaging
- Vaping Presentation at Ogilvie and Mora Schools
- Stall Talks

Success Stories:

- We have received praise from community members regarding the "Talk Early Talk Often" messaging campaign. This messaging not only provides crucial information about marijuana, vaping, and mental health but also offers valuable guidance on approaching difficult conversations with your youth. The campaign emphasizes the significance of meaningful dialogues with your children and offers practical

tips on how to engage them in these discussions. We have even developed conversation starters that have been distributed at various events and are also accessible on The Better Together website.

- Our social media outreach efforts have been getting more attention. We consistently share valuable content covering a spectrum of topics, including mental health, strategies for open communication with your youth, substance use, and updates on community events. Through regular posts on Facebook and Instagram, we have successfully expanded our reach to a wider audience. Based on traffic data from Facebook and Instagram, we have seen about a 67% increase of traffic from March 1st to April 24th on Facebook and on Instagram, we saw a decrease in traffic of about 3% from March 1st to April 24th. Each month can vary on the traffic data, but on average we tend to have a positive increase on both platforms.
- We created a vaping presentation to show and educate various people in the community. We went to Mora High school and presented the presentation to about 20 educators and staff. We then went to Ogilvie schools and presented it there to about 50 school staff and educators. Lastly, we presented the presentation to Mora Elementary teachers from grades 5 and 6. We received great feedback from those who attended the presentation. A lot of the educators did not know a whole lot about vaping and now they do! After each presentation we also gave vaping educational handouts.
- Since January, each month we have created a monthly Stall Talk. This is a flyer that highlights a different topic each month and it is hung in bathrooms around the county. Different topics we have done are Mental Health, Vaping, Safe Sex, and Alcohol Awareness. These flyers have been hung up in various restaurants around Mora, Mora and Ogilvie schools, and other businesses around the county. We have had a lot of positive feedback on this.

Challenges:

- With the legalization of recreational marijuana, we are still facing a lot of unknowns, regulations and rules which have made policy work difficult. It has also made more of a challenge to reach the community about the negative effects that marijuana has on your body.
- We are encountering a pressing issue with vaping in schools as the number of students engaging in vaping is rising, raising concerns for their health and well-being. Our focus is on educating the community about the adverse health effects of vaping. Vaping, particularly with flavored products, is highly addictive, making cessation challenging. There is also a lack of accessible resources to support quitting.

Data to note (repeated from previous quarters):

- We have received data from the Minnesota Student Survey that has guided us on what things we need to focus on in Kanabec County. The topics of data we have focused on are mental health and substance use. These facts have been a powerful tool in helping guide the coalition to what is most important. Below are some of the facts:
- 39% of Kanabec County 9th graders believe there is a moderate risk in harming themselves using e-cigarettes.
- Although 38% of Kanabec County 9th graders believe that their peers vape daily, a remarkable 93% of them have never tried vaping.
- 89% of Kanabec County students report that they have not vaped in the past 30 days.
- 65% of Minnesota 9th graders are unaware of the health risks of using e-cigarettes.
- 92% of Kanabec County 9th graders have never used marijuana.
- 72% of 9th Graders in Kanabec County have never had alcohol.
- 94% of Kanabec County 9th graders in Kanabec County have had no alcohol in the last 30 days.
- Kanabec County students over the past 2 weeks feeling nervous, anxious, or on edge: 9th grade female- 88% 9th grade males- 38%.
- Kanabec County students over the past 2 weeks being bothered by not being able to stop or control worrying: 9th grade females: 77% 9th grade males: 32%.

- Kanabec County students over the past 2 weeks being bothered by feeling down, depressed, or hopeless: 9th grade females:81% 9th grade males: 33%.
- Kanabec County students seriously considered attempting suicide: 9th grade females: 47% 9th grade males: 12%.
- Kanabec County students attempting suicide: 9th grade females: 21% 9th grade males: 6%.

Trainings Attended:

- Various Cannabis and Marijuana Prevention and Education webinars

Opioid Task Force:

- Taking part in Kanabec County Opioid Task Force group. We have had meetings to talk about how the county should use the opioid settlement funds.
- Review applications for the Opioid Settlement Funds.

East Central Regional Suicide Prevention

Brianne McClellan, Coordinator

Activities:

- Leadership role in PICK’M (Pine, Isanti, Chisago, Kanabec, & Mille Lacs Counties). Planning action items, community outreach, marketing material, and coalition capacity building.
 - Support the coalition efforts to connect with community members, businesses, and community partners in the PICK’M counties that would be beneficial to have part of the coalition.
 - TA with creation of social media pages and posts to create awareness of the coalition.
- Providing resources, information, and promotional items to regional partners and at community events - Pine City Public Schools, Ogilvie Public Schools Showcase, Chisago County Public Health

Success Stories:

- A new partnership connection was made with two local school districts and the local Adult Mental Health Initiative (AMHI)
- Received training to become a trainer for Changing the Narrative & 988 Community presentations.

Training/TA Provided:

- The PICK’M (Pine, Isanti, Chisago, Kanabec, & Mille Lacs Counties) Suicide Prevention Coalition has reached out for resources, information, and training opportunities during the past three months.
- Provided QPR training for East Central High School juniors, & school staff from Mora, Pine City, East Central, & Hinckley-Finlayson Public Schools at a multi-district staff development.
- Provided student mental health & suicide prevention awareness presentations for students at Princeton Public Schools, East Central Public Schools, Isle Public Schools, Chisago Lakes Public Schools
- Provided Changing the Narrative training for Cambridge-Isanti Public Schools staff.

Challenges:

- Creating working partnerships with community members outside of school districts has been slow the past three months.

Region 4 – Regional Prevention Coordination

Patti Miller, Coordinator

Regional Prevention Coordinator (RPC):

- Continued capacity building with other RPCs and partners throughout the state of MN.
- First Regional Prevention Collaborative Meeting with Prevention Professionals in East Central MN.

- Continuing to work with communities to better understand the recreational cannabis legislation and how they can protect their communities. The Regional Prevention Coordinators have hosted webinars in conjunction with the Public Health Law Center.

Success Stories:

- In February, the Regional ATOD Prevention Coordinator and the Regional Suicide Prevention Coordinator hosted a collaborative meeting. This was a chance for those working in prevention to come together, introduce themselves and begin the collaborative process. There were 52 participants at the first meeting!
- The Regional Prevention Coordinators held a two-day meeting to review our work. With the addition of new team members, it was a successful meeting that covered current initiatives, future initiatives, budgets, and ways to better work as a team across the state.

Challenges:

- Continuing to work with communities to better understand the recreational cannabis legislation and how they can protect their communities. The Regional Prevention Coordinators have hosted three webinars in conjunction with the Public Health Law Center that have been very well received and valuable to those working on cannabis policy.
- The Regional Prevention Coordinators have seen some turnover in the eight positions held across the state. Those that have left have been senior members of the team and picking up those pieces has been a struggle for those of us that are new and still trying to understand our roles and responsibilities.

Data:

- Presentation for Mora School Board regarding substance misuse and the positive pieces of the data that point to MOST students making good choices. There are some areas of concern, and we addressed those as well.

Conferences/Trainings Attended & Trainings provided:

Jan-24		
January 3, 2024	9a - 3p	RPC Orientation/Onboarding
January 17, 2024	10:00a - 12:00p	PCN 101
January 24, 2024	10:00a - 12:00p	PCN 102
January 31, 2024	10:00a - 12:00p	Rebecca Slaby - Intercultural Communication
Feb-24		
February 5- 9	12:00p - 1:00p	Montana Winter Institute
February 7 & 9	9a - 330p	RPC Quartelry
February 15 - 16	12p - 430p, 9a - 1230p	RPC Retreat/Meetings
February 26, 2024	12p - 1p	PHLC Webinar 4
February 20, 2024	2p - 4p	TMI Professional Development
Februray 29	10a - 12p	Rebecca Slaby

- Can Act Conference – Virtual.* Using the Public Health prevention framework and lens, prevention specialists, equity advocates, public health safety professionals, tobacco prevention professions, partners, and other advocates together to discuss new and changing legalized cannabis landscape in communities. The conference focus highlights policy, system, and environmental changes and youth prevention.
- Rebecca Slaby –* Statewide webinar that deepens the understanding of how culture influences different communication styles. RPC/MPRC Hosted
- Prevention Learning Collaborative* through Prevention Technology Transfer Center (PTTC) is providing a collaborative partnership for those interested in obtaining their certification in prevention. This collaborative

meets once a month with leaders from PTTC in the Great Lakes Region. (Meets Monthly w/required assignments to complete)

- *Vaping Presentation* – Ogilvie School Staff, Mora High School Staff w/Better Together Coordinator, Allison Krueger
- *Public Comment Meeting, Kanabec County Cannabis Use Ordinance* – Presentation preparation and Q & A discussion.

People/groups you’ve provided technical assistance too:

- Spent time working with the new *Better Together Coalition Coordinator*, Allison Krueger.
 - Creating Health & Wellness Survey for Mora, Braham, and Ogilvie through Wilder Research.
- *Kanabec County Family Health/Kanabec County Community Health*
 - Social Media
 - Website Updates

Programs: Public Health Emergency Preparedness (PHEP) and Radiation Emergency Preparedness (REP)
Coordinator: Kate Mestnik

Major Activities:

- Lead Regional Workgroup Meetings – take the initiative to host and facilitate meetings for regional coordinators to work collectively on projects and increase efficiency. Promotes strong relationships, resource sharing, and information exchange – particularly valuable for ideas related to new funding streams and development of workplans.
 - Mass Sheltering Sub-Regional Workgroup – evaluated sheltering plans from participants and found one that makes the most sense and will be evaluated against the federal Capabilities document.
 - Medical Countermeasures Sub-Regional Workgroup – evaluated MCM plans from participants and has been cross walked against federal Capabilities and making changes to meet identified priority resource elements.
- Annual MDH Site Visit Completed – Demonstration of required documents at grant supervision visit. Coordinator is regarded by MDH Preparedness Consultant as a leader within the region among the coordinators.
- RSG Workplan – Submitted plans for completing RSG grant duties and approved by MDH.
- EPAC Meeting – Over 20 community stakeholders and leaders joined together in February at the first meeting of 2024. Participants were assessed for their goals for the group and overwhelmingly the consensus was to provide more opportunities to practice responding together in exercises to be ready for real emergency incidents.
- HCC Meeting – The Health Care Coalition sponsored a COOP (Continuity of Operation Plan) Training and provided resources for developing a COOP Plan through a template and supplemental document.
- MRSE Exercise – Coordinated participation with Welia Health, and St. Clare Living Community to participate in a functional Medical Surge exercise that set up the Decontamination Tent at the hospital. The intent of the exercise: promote emergency operations coordination across partners (aside from partners in the room it involved notification to Emergency Management, Law Enforcement, Fire).
- End of Immunization Campaign – The paid timeframe for billboards posted along Highway 23 in Mora and Ogilvie promoting vaccinations and immunizations has ended. Vaccination rates have increased in routine vaccination rates.

Nuisance:

Reporter: Farah Gajewski, RN

Nuisance calls: In quarter 1, 2024, there were no nuisance calls to Kanabec County.

Timber Trails Public Transit

Ridership Report -year end with previous years for comparison:

	2024 1 st Quarter System Ridership	2023 System Ridership	2022 System Ridership	2021 System Ridership	2020 System Ridership	2019 System Ridership
Disabled	1,787	7,274	7,185	6,357	4,926	10,868
Senior Citizen	1,006	4,605	3,950	3,164	2,950	5,479
Adult	3,738	14,804	13,401	11,412	8,177	12,018
Youth/Student	148	562	518	478	311	466
Children	299	1,721	2,389	4,417	1,703	2,062
	6,978	28,966	27,443	25,828	18,067	30,893

Fleet Report – Vehicle Mileage

Public Transit Buses

Month Ending	Unit #13 2014	Unit #14 2018	Unit #15 2018	Unit #16 2018	Unit #17 2018	Unit #18 2018
VIN	B05565	B160129	170128	170127	170126	170129
December 31, 2023	201,750	151,380	113,452	120,553	86,416	99,626
March 31, 2024	206,020	155,655	118,053	124,141	91,476	103,781

Total 2023 Bus Fleet Mileage: 106,390 miles

County Owned Vans

Unit#	Year	Model	Quarter End Mileage
22	2022	Chrysler Pacifica	33,989
19	2019	Dodge Grand Caravan	98,336
15	2015	For Transit Connect	149,108
9	2009	Grand Caravan SE	254,552

Fleet Report/Road calls

Public Transit Buses – No roads calls.

County Owned Vans – No road calls.

On Time performance (Public Transit):

January 100%; February 100%; March 100%

*On-Time pick-up window is 15 minutes before/15 minutes after scheduled pick-up time

**Bus will wait three minutes and then needs to move on to the next pick-up

Major Initiatives

Statewide Transit Advisory Group Meeting (3/28/2024): The maximum increase in annual Public Transit Operating Budgets will be 5%. At some point we will be going back to the traditional 15% local match; but for 2024 our contracted local match is 5% for operating and 10% for capital purchases.

Timber Trails did not make the cut for a new bus purchase in 2024.

MnDOT Grant Application: The 2025 Operating Application opens on May 1st and the Application needs to be completed by June 28. MnDOT review should be complete by the end of September, with the contracts being sent for signature in October.

**The bus fleet is showing its age and we will be planning for higher than normal Maintenance and Repair costs in 2025.

Trip Type Report:

Trip Type	2024	2023	2022	2021	2020	2019
Adult Daycare	0	79	127	305	365	1048
Church	10	116	47	46	39	74
Education	412	1720	2187	3133	1904	2204
Medical	1899	7302	5855	5288	4248	6410
Other	240	1494	1508	1627	1004	1787
Public Health	12	76	68	138	39	101
Recreation	196	1528	1222	2066	171	720
Shopping	774	3695	4120	3281	2727	2498
Social Services	7	60	24	34	23	30
Social	523	1236	820	131	335	1048
Work	2905	11660	11465	9779	7212	13749
Totals	6978	28966	27443	25828	18067	29669

Accident/Incident Report Summary:

Public Transit - None
 County Owned Vans – None

Customer Service Comment Report Summary:

None Reportable

Title VI Complaints Report:

None

ADA/Reasonable Modification Requests/Complaints Report:

None

Financial Reports

See attached 1st Quarter Budget Report

Respectfully Submitted
 Kathy Burski, Director/CHS Administrator



REVENUES & EXPENDITURES BUDGET REPORT

Budget Name for Report: 2024 County Budget

Page Break Option: 1 1 - Page Break by FUND
2 - Page Break by DEPT

Include on the Report: 1 1 - All G/L Accounts
2 - Only G/L Accounts with Budget Amounts
3 - Only G/L Accounts without Budget Amounts

Report Basis: 1 1 - Cash
2 - Modified Accrual
3 - Full Accrual

Report Thru: 03/2024

Save Report: N

Comment: Transit Department First Quarter 2024

FUND Range From 1 Thru 1

DEPT Range From 140 Thru 140



1 FUND General Revenue Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
140 DEPT Public Transit					
----- REVENUES -----					
01-140-405-0000-5208	Petro Refunds MNDOT	1,093.26-	1,093.26-	4,208.00	-26-
01-140-405-0000-5313	Grants - Mndot	185,289.50-	185,289.50-	722,665.00-	26
01-140-405-0000-5501	Fees For Services	5,527.71-	5,527.71-	25,786.00-	21
01-140-405-0000-5515	Contracts	20,802.79-	20,802.79-	70,442.00-	30
----- EXPENDITURES -----					
01-140-405-0000-6103	Salaries - Regular	43,174.53	43,174.53	415,012.00	10
01-140-405-0000-6105	Salaries - Part Time	0.00	0.00	8,896.00	0
01-140-405-0000-6113	Flex Pay	962.52	962.52	0.00	0
01-140-405-0000-6130	VEBA - County Share	2,544.00	2,544.00	0.00	0
01-140-405-0000-6153	Health Insurance - County Share	21,729.12	21,729.12	98,579.00	22
01-140-405-0000-6158	Health Reserves - County Share	600.00	600.00	0.00	0
01-140-405-0000-6163	Pera - County Share	4,710.74	4,710.74	31,793.00	15
01-140-405-0000-6175	Fica - County Share	4,678.46	4,678.46	32,429.00	14
01-140-405-0000-6204	Cellular Phones (DOT 1180)	428.53	428.53	1,740.00	25
01-140-405-0000-6211	Services & Charges	2.78	2.78	0.00	0
01-140-405-0000-6240	Advertising/Website	2,046.75	2,046.75	7,295.00	28
01-140-405-0000-6245	Registration & Membership Dues	780.00	780.00	760.00	103
01-140-405-0000-6253	Electric - Water - Sewer	1,696.45	1,696.45	9,442.00	18
01-140-405-0000-6255	Gas Utilities	466.69	466.69	2,410.00	19
01-140-405-0000-6267	Screenings (DOT 1120/1190)	306.65	306.65	1,089.00	28
01-140-405-0000-6276	Drivers Physicals (DOT 1190)	170.00	170.00	425.00	40
01-140-405-0000-6289	Staff Development	0.00	0.00	2,680.00	0
01-140-405-0000-6301	Garage Rent (DOT 1350)	0.00	0.00	11,400.00	0
01-140-405-0000-6331	Mileage & Meals	171.52	171.52	1,065.00	16
01-140-405-0000-6340	Office Rent (DOT 1170)	0.00	0.00	9,000.00	0
01-140-405-0000-6341	Service Contracts (DOT 1190/1350)	3,025.00	3,025.00	25,974.00	12
01-140-405-0000-6356	Property & Casualty Insurance	6,431.00	6,431.00	7,029.00	91
01-140-405-0000-6357	Workers Compensation Insurance	8,660.00	8,660.00	6,939.00	125
01-140-405-0000-6405	Computers & Hardware	0.00	0.00	3,600.00	0
01-140-405-0000-6411	Supplies	1,215.80	1,215.80	750.00	162
01-140-405-0000-6412	Office Supplies	275.67	275.67	3,605.00	8
01-140-405-0000-6490	Other Vehicle Charges (DOT 1250)	2,206.99	2,206.99	3,276.00	67
01-140-405-0000-6560	Corrective Maint (DOT 1230)	74.50	74.50	0.00	0
01-140-405-0000-6567	Fuel (DOT 1210)	10,675.59	10,675.59	50,441.00	21



1 FUND General Revenue Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
01-140-405-0000-6568	Radio Repairs	141.00	141.00	0.00	0
01-140-405-0000-6571	Tires (DOT 1240)	1,229.58	1,229.58	5,100.00	24
01-140-405-0000-6575	Preventative Maint (DOT 1220)	3,448.22	3,448.22	19,853.00	17
01-140-405-0000-6820	Vehicle Licensing (DOT 1510)	121.50	121.50	120.00	101
01-140-405-0240-6103	Salaries - Transit Driver	35,156.98	35,156.98	0.00	0
01-140-405-0240-6163	Pera - County Share Transit Driver	1,754.98	1,754.98	0.00	0
01-140-405-0240-6175	Fica - County Share Transit Driver	1,726.63	1,726.63	0.00	0
01-140-405-0241-6103	Salaries - Transit Dispatch	12,955.80	12,955.80	0.00	0
01-140-405-0241-6163	Pera - County Share Transit Dispatch	616.01	616.01	0.00	0
01-140-405-0241-6175	Fica - County Share Transit Dispatch	609.62	609.62	0.00	0
01-140-405-0243-6103	Salaries - Transit Accounting	1,127.61	1,127.61	0.00	0
01-140-405-0243-6163	Pera - County Share Transit Accounting	48.69	48.69	0.00	0
01-140-405-0243-6175	Fica - County Share Transit Accounting	49.66	49.66	0.00	0
01-140-405-8250-6341	Lease Contracts	160.32	160.32	0.00	0
405 PROGRAM	Totals Transit MNDOT				
	Revenue	212,713.26-	212,713.26-	814,685.00-	26
	Expend.	176,179.89	176,179.89	760,702.00	23
	Net	36,533.37-	36,533.37-	53,983.00-	68
----- REVENUES -----					
01-140-454-0000-5501	Fees For Services	43,148.54-	43,148.54-	175,000.00-	25
01-140-454-0000-5515	Contracts	9,450.00-	9,450.00-	37,800.00-	25
----- EXPENDITURES -----					
01-140-454-0000-6103	Salaries - Regular	6,294.28	6,294.28	61,170.00	10
01-140-454-0000-6105	Salaries - Part Time	0.00	0.00	8,896.00	0
01-140-454-0000-6153	Health Insurance - County Share	0.00	0.00	5,553.00	0
01-140-454-0000-6163	Pera - County Share	472.09	472.09	5,255.00	9
01-140-454-0000-6175	Fica - County Share	455.93	455.93	5,360.00	9
01-140-454-0000-6205	Postage	0.00	0.00	50.00	0
01-140-454-0000-6211	Services & Charges	27.84	27.84	0.00	0
01-140-454-0000-6240	Advertising/Website	522.25	522.25	3,000.00	17
01-140-454-0000-6253	Electric - Water - Sewer	165.86	165.86	800.00	21
01-140-454-0000-6267	Screenings	27.50	27.50	0.00	0
01-140-454-0000-6331	Mileage & Meals	15,230.72	15,230.72	62,000.00	25
01-140-454-0000-6340	Office Rent	0.00	0.00	6,000.00	0
01-140-454-0000-6341	Software & Service Contracts	0.00	0.00	11,957.00	0
01-140-454-0000-6412	Office Supplies	161.54	161.54	0.00	0
01-140-454-0000-6567	Fuel	1,120.91	1,120.91	17,500.00	6
01-140-454-0000-6575	Misc Car Repairs	3,334.21	3,334.21	3,500.00	95



1 FUND General Revenue Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
01-140-454-0000-6665	Future Capital Improvements	0.00	0.00	75,742.00	0
01-140-454-0000-6820	Licensing Fees	81.00	81.00	0.00	0
01-140-454-0240-6103	Salaries - Transit Driver	2,093.98	2,093.98	0.00	0
01-140-454-0240-6163	Pera - County Share Transit Driver	79.99	79.99	0.00	0
01-140-454-0240-6175	Fica - County Share Transit Driver	76.20	76.20	0.00	0
01-140-454-0241-6103	Salaries - Transit Dispatch	3,854.72	3,854.72	0.00	0
01-140-454-0241-6163	Pera - County Share Transit Dispatch	189.05	189.05	0.00	0
01-140-454-0241-6175	Fica - County Share Transit Dispatch	189.88	189.88	0.00	0
01-140-454-0243-6103	Salaries - Transit Accounting	523.95	523.95	0.00	0
01-140-454-0243-6163	Pera - County Share Transit Accounting	17.09	17.09	0.00	0
01-140-454-0243-6175	Fica - County Share Transit Accounting	17.44	17.44	0.00	0
01-140-454-8250-6341	Lease Contracts	374.04	374.04	0.00	0
454 PROGRAM	Totals Transit Volunteer Program	Revenue 52,598.54-	52,598.54-	212,800.00-	25
		Expend. 35,310.47	35,310.47	266,783.00	13
		Net 17,288.07-	17,288.07-	0.00	0
140 DEPT	Totals Public Transit	Revenue 265,311.80-	265,311.80-	1,027,485.00-	26
		Expend. 211,490.36	211,490.36	1,027,485.00	21
		Net 53,821.44-	53,821.44-	0.00	0
1 FUND	Totals General Revenue Fund	Revenue 265,311.80-	265,311.80-	1,027,485.00-	26
		Expend. 211,490.36	211,490.36	1,027,485.00	21
		Net 53,821.44-	53,821.44-	0.00	0
FINAL TOTALS	77 Accounts	Revenue 265,311.80-	265,311.80-	1,027,485.00-	26
		Expend. 211,490.36	211,490.36	1,027,485.00	21
		Net 53,821.44-	53,821.44-	0.00	0

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*** Kanabec County ***



TRIAL BALANCE REPORT

As of Date: 03/2024
Report Basis: 2 1 - Cash
 2 - Modified Accrual
 3 - Full Accrual

Save Report: N

Comment:

FUND Range From 15 Thru 15

**** Kanabec County ****



Sheila
5/2/24 11:23AM

TRIAL BALANCE REPORT
As of 03/2024

Report Basis: Modified Accrual

15 Community Health Fund

Account		<u>Beginning Balance</u>	<u>Actual This-Month</u>	<u>Actual Year-To-Date</u>	<u>Current Balance</u>
-----Assets-----					
1001	Cash	705,816.15	14,147.27-	116,580.15	822,396.30
1003	Audit Adjustments To Cash	23,163.57	0.00	23,163.57-	0.00
1110	Taxes Receivable - Prior & Delinquent	12,088.09	0.00	12,088.09-	0.00
1201	Accounts Receivable (Acc)	150,778.56	4,332.73-	150,778.56-	0.00
1261	Due From Other Funds (Acc)	3,325.85	0.00	3,325.85-	0.00
1281	Due From Other Governments (Acc)	329,505.26	0.00	329,505.26-	0.00
	Total Assets	1,224,677.48	18,480.00-	402,281.18-	822,396.30
---Liabilities and Balance-----					
Liabilities					
2020	Accounts Payable	523.17-	0.00	0.00	523.17-
2021	Accounts Payable (Acc)	1,539.90-	0.00	1,539.90	0.00
2030	Salaries Payable	77,447.27-	0.00	77,447.27	0.00
2091	Due To Other Funds (Acc)	1,671.62-	0.00	1,671.62	0.00
2100	Due To Other Governments	5,081.53-	0.00	5,081.53	0.00
2230	Deferred Inflows	12,088.09-	0.00	12,088.09	0.00
	Total Liabilities	98,351.58-	0.00	97,828.41	523.17-
Fund Balance					
2881	Assigned Fund Balance	1,126,325.90-	0.00	0.00	1,126,325.90-
2910	Revenue Control	0.00	191,635.96-	314,785.62-	314,785.62-
2925	Expenditure Control	0.00	210,115.96	619,238.39	619,238.39
	Total Fund Balance	1,126,325.90-	18,480.00	304,452.77	821,873.13-
	Total Liabilities and Balance	1,224,677.48-	18,480.00	402,281.18	822,396.30-
488	Kanabec Pine Community Health (fka 59)				
-----Assets-----					
	Total Assets	0.00	0.00	0.00	0.00
---Liabilities and Balance-----					
Liabilities					
	Total Liabilities	0.00	0.00	0.00	0.00
	Total Liabilities and Balance	0.00	0.00	0.00	0.00
15	Community Health Fund	0.00	0.00	0.00	0.00

Sheila
5/2/24 11:23AM
15 Community Health Fund

*** Kanabec County ***

TRIAL BALANCE REPORT
As of 03/2024

Report Basis: Modified Accrual



<u>Account</u>	<u>Beginning Balance</u>	<u>Actual This-Month</u>	<u>Actual Year-To-Date</u>	<u>Current Balance</u>
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Kanabec County Community Health - Board Financial Report

15-484 cash basis

Department	Budget	Total year to date/ % of budget	Total	8.33% January	16.67% February	25.00% March	
Pilt-Housing Authority							<u>outstanding payments/payments not yet posted</u>
Rev	0		0.00	0.00	0.00	0.00	Workforce Dev.
Exp	0		0.00	0.00	0.00	0.00	CTC
Local Public Health Infrastructure							FAP
Rev	498,428.00	14.93%	74,437.83	23,163.57	12,901.34	38,372.92	LCTS 9,000.00
Exp	381,933.00	30.62%	116,965.13	24,767.41	68,543.85	23,653.87	LPHG
Prevent Infectious Disease							MCH 7,948.00
Rev	30,502.00	6.49%	1,978.71	916.87	399.80	662.04	SF/cap bldg
Exp	34,377.00	5.81%	1,996.37	749.19	831.71	415.47	RSG
Environmental Health							RPC
Rev	36.00	8.33%	3.00	3.00	0.00	0.00	SHIP
Exp	5,545.00	0.00%	0.00	0.00	0.00	0.00	TANF
Healthy Communities-Adult Health							WIC
Rev	176,781.00	49.35%	87,249.05	15,401.48	59,796.96	12,050.61	PHEP
Exp	173,472.00	36.22%	62,822.93	22,193.38	21,034.44	19,595.11	mental hlth 10,093.42
Healthy Communities-Health Improvement							Suicide Prev 8,536.95
Rev	632,346.00	34.08%	215,493.15	108,413.95	61,020.12	46,059.08	Covid Federal
Exp	598,642.00	23.38%	139,968.34	51,178.83	47,002.09	41,787.42	Home care <u>28,977.18</u> estimate only see note below
Healthy Communities-Family Health							64,555.55
Rev	653,351.00	30.20%	197,335.68	117,916.27	29,985.47	49,433.94	
Exp	600,263.00	20.07%	120,488.94	37,262.76	45,414.40	37,811.78	
Emergency Preparedness							
Rev	108,151.00	31.14%	33,679.10	8,528.10	25,151.00	0.00	
Exp	100,117.00	26.84%	26,868.11	8,926.08	9,478.31	8,463.72	
Assure Access-Case Management							
Rev	366,400.00	25.95%	95,077.03	29,111.75	41,229.27	24,736.01	SCHA Connector - We get reimbursed twice a year. Not included above.
Exp	354,443.00	22.08%	78,277.34	26,848.13	26,913.28	24,515.93	
Assure Access-Home Care							
Rev	551,500.00	21.09%	116,305.31	48,249.04	43,402.18	24,654.09	
Exp	768,703.00	20.50%	157,591.55	53,496.17	50,222.72	53,872.66	Home Care-This is the billed amount and we are paid a percentage of that and that percentage varies by paysource. Also, VA may pay up to two years after the date of service.
Agency Totals							
Rev	3,017,495.00	27.23%	821,558.86	351,704.03	273,886.14	195,968.69	
Exp	3,017,495.00	23.36%	704,978.71	225,421.95	269,440.80	210,115.96	

amount has changed

Kanabec County Community Health - Board Financial Report

15-484 modified accrual basis

Department	Budget	Total year to date/		8.33%	16.67%	25.00%			
		% of budget	Total	January	February	March			
Pilt-Housing Authority							<u>outstanding payments/payments not yet posted</u>		
Rev	0		0.00	0.00	0.00	0.00	Workforce Dev.		
Exp	0		0.00	0.00	0.00	0.00	CTC		
Local Public Health Infrastructure							FAP		
Rev	498,428.00	10.29%	51,274.26	0.00	12,901.34	38,372.92	LCTS	9,000.00	
Exp	381,933.00	30.41%	116,146.80	24,675.01	67,817.92	23,653.87	LPHG		
Prevent Infectious Disease							MCH 7,948.00		
Rev	30,502.00	0.62%	188.74	0.00	92.63	96.11	SF/cap bldg		
Exp	34,377.00	5.81%	1,996.37	749.19	831.71	415.47	RSG		
Environmental Health							RPC		
Rev	36.00	8.33%	3.00	3.00	0.00	0.00	SHIP		
Exp	5,545.00	0.00%	0.00	0.00	0.00	0.00	TANF		
Healthy Communities-Adult Health							WIC		
Rev	176,781.00	14.10%	24,917.74	801.00	12,066.13	12,050.61	PHEP		
Exp	173,472.00	36.14%	62,698.04	22,193.38	20,909.55	19,595.11	mental hlth	10,093.42	
Healthy Communities-Health Improvement							Suicide Prev 8,536.95		
Rev	632,346.00	9.98%	63,098.18	0.00	17,039.10	46,059.08	Covid Federal		
Exp	598,642.00	23.35%	139,805.77	51,016.26	47,002.09	41,787.42	Home care	<u>28,977.18</u> estimate only see note below	
Healthy Communities-Family Health							64,555.55		
Rev	653,351.00	9.51%	62,137.41	0.00	12,703.47	49,433.94			
Exp	600,263.00	19.91%	119,482.44	36,896.37	44,774.29	37,811.78			
Emergency Preparedness									
Rev	108,151.00	0.00%	0.00	0.00	0.00	0.00			
Exp	100,117.00	26.49%	26,516.88	8,574.85	9,478.31	8,463.72			
Assure Access-Case Management									
Rev	366,400.00	15.34%	56,196.44	2,945.00	29,097.04	24,154.40	SCHA Connector - We get reimbursed twice a year. Not included above.		
Exp	354,443.00	22.01%	78,029.28	26,779.50	26,733.85	24,515.93			
Assure Access-Home Care									
Rev	551,500.00	10.33%	56,969.85	0.00	35,500.95	21,468.90			
Exp	768,703.00	20.44%	157,091.61	52,997.49	50,221.46	53,872.66	Home Care-This is the billed amount and we are paid a percentage of that and that percentage varies by paysource. Also, VA may pay up to two years after the date of service.		
Agency Totals									
Rev	3,017,495.00	10.43%	314,785.62	3,749.00	119,400.66	191,635.96			
Exp	3,017,495.00	23.26%	701,767.19	223,882.05	267,769.18	210,115.96			

amount has changed

Board Meeting 05/07/2024

Abstract Totals for Commissioner Vouchers

Board Meeting 05/07/24	Amount	Vendors	Transactions
Abstract #1	\$47,858.78	46	95
Abstract #2			
Totals	\$47,858.78	46	95

Abstract Totals for Auditor Vouchers

Board Meeting 05/07/24	Amount	Vendors	Transactions
Abstract #1			
Abstract #2			
Abstract #3			
Abstract #4			
Abstract #5			
Totals			

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5/2/24 12:58PM

**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Print List in Order By: 1
1 - Fund (Page Break by Fund)
2 - Department (Totals by Dept)
3 - Vendor Number
4 - Vendor Name

Explode Dist. Formulas: Y

Paid on Behalf Of Name
on Audit List?: N

Type of Audit List: D
D - Detailed Audit List
S - Condensed Audit List

Save Report Options?: N

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 5/2/24 12:58PM
 15 Community Health Fund

**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Descripti On Behalf of Name	1099
95	219 Academy of Lactation Policy & Practice 15-484-487-8453-6289		102.00	recertification for CLC		Staff Development	N
	219 Academy of Lactation Policy & Practice		102.00	1 Transactions			
1	1619 Amazon Capital Services 15-484-487-8453-6411		427.35	227.43 incentives 199.92 suppl		Supplies	N
4	15-484-487-8453-6411		3.59-	discount		Supplies	N
3	15-484-487-8457-6412		12.09	6x9 envelopes		Office Supplies	N
2	15-484-496-8447-6412		18.80	home care pocket folders		Office Supplies	N
6	15-484-485-8480-6411		153.03	supplies	1RQ7-P947-NV3K	Program Supplies	N
7	15-484-485-8480-6411		4.15-	promos/discounts	1RQ7-P947-NV3K	Program Supplies	N
	1619 Amazon Capital Services		603.53	6 Transactions			
8	1418 Association Of Minnesota Counties 15-484-450-0000-6289		75.00	2024 LPHA Spring Retreat Reg		Staff Development	N
	1418 Association Of Minnesota Counties		75.00	1 Transactions			
82	185 Bergstadt/Jennifer 15-484-496-8449-6331		39.53	Mar/Apr HHA mileage		Mileage & Meals	N
	185 Bergstadt/Jennifer		39.53	1 Transactions			
83	1396 Beaver/Laurie 15-484-496-8449-6331		482.40	Mar/Apr HHA mileage		Mileage & Meals	N
	1396 Beaver/Laurie		482.40	1 Transactions			
92	1617 Boeck/Taylor 15-484-493-8452-6331		5.36	April mileage		Mileage & Meals	N
	1617 Boeck/Taylor		5.36	1 Transactions			
9	1643 Brink Collective 15-484-487-8463-6285		8,160.00	payment #1 marketing/outreach	00191062	Contracted Work	N
	1643 Brink Collective		8,160.00	1 Transactions			
68	3094 Burski/Kathy 15-484-450-0000-6331		101.17	April admin mileage		Mileage & Meals	N
69	15-484-481-8481-6411		36.16	March PHNC supplies		Supplies	N
	3094 Burski/Kathy		137.33	2 Transactions			
5	298 Childrens Dental Services 15-484-485-8475-6285		557.76	trasport equip/staff 02/23/24		Contracted Work	Y

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 15 Community Health Fund

**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Descripti On Behalf of Name	1099
10	15-484-485-8475-6285		557.76	transport equip/staff 3/29/24		Contracted Work	Y
	298 Childrens Dental Services		1,115.52	2 Transactions			
	1644 Eklund/Nicole						
70	15-484-487-8457-6331		16.08	April mileage		Mileage & Meals	N
71	15-484-493-8452-6331		10.50	April parking		Mileage & Meals	N
	1644 Eklund/Nicole		26.58	2 Transactions			
	1645 Hamilton/Stephanie						
84	15-484-496-8449-6331		92.91	April HHA mileage		Mileage & Meals	N
	1645 Hamilton/Stephanie		92.91	1 Transactions			
	1326 Hansen/Erika						
72	15-484-496-8447-6331		312.89	Mar/Apr home care mileage		Mileage & Meals	N
	1326 Hansen/Erika		312.89	1 Transactions			
	4184 Health Dimension Rehabilitation Inc						
38	15-484-496-8447-6211		2,093.52	PT services		Services & Charges	Y
39	15-484-496-8447-6211		50.25-	missed visit attempt		Services & Charges	Y
	4184 Health Dimension Rehabilitation Inc		2,043.27	2 Transactions			
	324 Healthcare First						
40	15-484-496-8447-6211		111.02	April HHCAHPS	5435947	Services & Charges	N
	324 Healthcare First		111.02	1 Transactions			
	1616 Holistic Homestead						
11	15-484-487-8453-6411		80.00	incentive for 2 families		Supplies	N
	1616 Holistic Homestead		80.00	1 Transactions			
	234 Holland/Jeff						
73	15-484-496-8447-6331		360.46	Mar/Apr home care mileage		Mileage & Meals	N
	234 Holland/Jeff		360.46	1 Transactions			
	4151 Innovative Office Solutions, LLC						
41	15-484-450-0000-6412		459.90	10 cases copy paper	4403654	Office Supplies	N
	4151 Innovative Office Solutions, LLC		459.90	1 Transactions			
	434 Inovalon Provider, Inc.						
14	15-484-487-8453-6211		187.31	April billing svc/eligibility	24M-0052629	Services & Charges	N
13	15-484-493-8452-6211		158.93	April billing svc/eligibility	24M-0052629	Services & Charges	N

**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name	Account/Formula	Rpt Accr	Amount	Warrant Description	Service Dates	Invoice #	Account/Formula Description	1099
							Paid On Bhf #	On Behalf of Name	
12		15-484-496-8447-6211		221.36	April billing svc/eligibility		24M-0052629	Services & Charges	N
	434	Inovalon Provider, Inc.		567.60		3 Transactions			
15	3095	Isanti County Public Health							
		15-484-485-8468-6880		488.71	March Eats strategy			Grant Admin- Pass thru	N
16		15-484-485-8468-6880		177.71	March Moves strategy			Grant Admin- Pass thru	N
17		15-484-485-8468-6880		2,447.40	March well-being strategy			Grant Admin- Pass thru	N
18		15-484-485-8468-6880		710.85	March tobacco strategy			Grant Admin- Pass thru	N
19		15-484-485-8468-6880		495.29	March JUUL Settlement			Grant Admin- Pass thru	N
	3095	Isanti County Public Health		4,319.96		5 Transactions			
85	1323	Johnstone/Kristi							
		15-484-496-8447-6331		272.69	Mar/Apr mileage			Mileage & Meals	N
	1323	Johnstone/Kristi		272.69		1 Transactions			
42	322	Kanabec County							
		15-484-450-0000-6205		88.82	Q1 postage		PH045	Postage	N
45		15-484-481-8481-6205		104.19	Q1 postage		PH045	Postage	N
46		15-484-487-8451-6205		27.74	Q1 postage		PH045	Postage	N
49		15-484-487-8453-6205		4.48	Q1 postage		PH045	Postage	N
43		15-484-487-8456-6205		108.56	Q1 postage		PH045	Postage	N
44		15-484-487-8457-6205		195.07	Q1 postage		PH045	Postage	N
47		15-484-487-8461-6205		351.46	Q1 postage		PH045	Postage	N
48		15-484-493-8452-6205		217.36	Q1 postage		PH045	Postage	N
	322	Kanabec County		1,097.68		8 Transactions			
74	1308	Lejonvarn/Kirsten							
		15-484-487-8450-6331		5.36	Mar/Apr TANF mileage			Mileage & Meals	N
75		15-484-487-8453-6331		31.49	April SF mileage			Mileage & Meals	N
76		15-484-487-8457-6331		12.06	April MCH mileage			Mileage & Meals	N
	1308	Lejonvarn/Kirsten		48.91		3 Transactions			
20	667	Lighthouse Child & Family Services LLC							
		15-484-487-8453-6211		300.00	2 hrs EBFHV 03/19/24		7314	Services & Charges	N
21		15-484-487-8453-6211		60.30	3/19/24 travel		7314	Services & Charges	N
	667	Lighthouse Child & Family Services LLC		360.30		2 Transactions			
22	377	Marco Inc							
		15-484-450-8250-6341		825.38	Sharp BP-70C55 copier agmt		36381860	Rental & Service Contracts	N

Sheila
5/2/24 12:58PM
15 Community Health Fund

**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name	Rpt	Amount	Warrant Description	Invoice #	Account/Formula	Description	1099
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name		
377	Marco Inc		825.38				1 Transactions	
23	14361 Marco Technologies LLC.		344.80	Sharp MX-3115N contract usage	118103351		Rental & Service Contracts	N
	14361 Marco Technologies LLC.		344.80				1 Transactions	
81	1604 McClellan/Brianne		78.39	April mileage			Mileage & Meals	N
	1604 McClellan/Brianne		78.39				1 Transactions	
24	1143 McKesson Medical-Surgical Govt Solutior		24.22	151896 towel, pro 2 ply/poly	20353163		Medical Supplies	N
25	15-484-496-8447-6432		34.80	glove, exam nitrile Lg	20353163		Medical Supplies	N
50	15-484-481-8481-6411		61.12	sanding discs	21946005		Supplies	N
51	15-484-481-8481-6411		37.17	paper, table smooth	21946261		Supplies	N
52	15-484-496-8447-6411		86.82	underpad, 3 ply tissue	21946261		Supplies	N
53	15-484-496-8447-6432		117.17	dressings, hydrocellular	21963864		Medical Supplies	N
	1143 McKesson Medical-Surgical Govt Solutior		361.30				6 Transactions	
26	198 Mille Lacs Co. Community & Veterans Ser		1,558.49	March Eats strategy			Grant Admin- Pass thru	N
27	15-484-485-8468-6880		1,558.49	March Tobacco strategy			Grant Admin- Pass thru	N
28	15-484-485-8468-6880		1,558.49	March Well-being strategy			Grant Admin- Pass thru	N
29	15-484-485-8468-6880		1,558.49	March Moves strategy			Grant Admin- Pass thru	N
	198 Mille Lacs Co. Community & Veterans Ser		6,233.96				4 Transactions	
93	8040 Miller, Patti		749.70	April mileage			Mileage & Meals	N
94	15-484-485-8480-6411		98.96	program supplies			Program Supplies	N
	8040 Miller, Patti		848.66				2 Transactions	
54	736 Naccho		270.00	annual membership fee	376182		Registration & Membership Dues	N
	15-484-450-0000-6245		270.00	07/01/2024 06/30/2025			1 Transactions	
	736 Naccho		270.00				1 Transactions	
77	52 Olson/Autumn		5.36	March TANF mileage			Mileage & Meals	N
80	15-484-487-8450-6331		58.96	Mar/Apr mileage			Mileage & Meals	N
78	15-484-487-8451-6331		166.16	Mar/Apr SF mileage			Mileage & Meals	N
	15-484-487-8453-6331							

Sheila
 5/2/24 12:58PM
 15 Community Health Fund

**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Descripti On Behalf of Name	1099
79	15-484-487-8457-6331		29.48	Mar/Apr MCH mileage		Mileage & Meals	N
	52 Olson/Autum		259.96	4 Transactions			
61	3333 Petersen/Renee 15-484-487-8453-6411		110.00	incentives		Supplies	N
	3333 Petersen/Renee		110.00	1 Transactions			
55	632 Pine County Health & Human Services 15-484-485-8468-6880		2,844.95	March Eats strategy		Grant Admin- Pass thru	N
56	15-484-485-8468-6880		1,331.08	March Tobacco strategy		Grant Admin- Pass thru	N
57	15-484-485-8468-6880		1,688.90	March Well-being strategy		Grant Admin- Pass thru	N
58	15-484-485-8468-6880		1,468.70	March Moves strategy		Grant Admin- Pass thru	N
	632 Pine County Health & Human Services		7,333.63	4 Transactions			
62	2712 Raudabaugh/Carey 15-484-493-8452-6331		101.17	Mar/Apr cm mileage		Mileage & Meals	N
	2712 Raudabaugh/Carey		101.17	1 Transactions			
86	3174 Rosburg/Diane 15-484-496-8447-6331		310.21	Mar/Apr mileage		Mileage & Meals	N
	3174 Rosburg/Diane		310.21	1 Transactions			
63	1452 Sandberg/Debbie 15-484-493-8452-6331		43.55	Mar/Apr cm mileage		Mileage & Meals	N
	1452 Sandberg/Debbie		43.55	1 Transactions			
59	3991 Sitecal Inc 15-484-469-8440-6411		448.00	standard calibration	25123	Program Supplies	N
60	15-484-469-8440-6411		175.00	travel	25123	Program Supplies	N
	3991 Sitecal Inc		623.00	2 Transactions			
30	105 St. Clare Living Community of Mora 15-484-496-8447-6211		1,445.00	March PT visits		Services & Charges	Y
31	15-484-496-8447-6211		765.00	March PT asst visits		Services & Charges	Y
32	15-484-496-8447-6211		85.00	March OT visits		Services & Charges	Y
33	15-484-496-8447-6211		15.00	March consult time		Services & Charges	Y
34	15-484-496-8447-6211		625.00	March drive time		Services & Charges	Y
35	15-484-496-8447-6211		296.14	mileage		Services & Charges	Y
	105 St. Clare Living Community of Mora		3,231.14	6 Transactions			

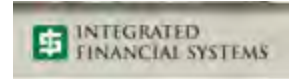
**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name	1099
64	1315 Sundsvold/Miranda 15-484-493-8452-6331		2.68	March cm mileage		Mileage & Meals	N
65	1315 Sundsvold/Miranda 15-484-493-8452-6331		15.41	April cm mileage		Mileage & Meals	N
	1315 Sundsvold/Miranda		18.09		2 Transactions		
91	1083 Swanson/Lori 15-484-485-8468-6331		92.46	Mar/Apr mileage		Mileage & Meals	N
	1083 Swanson/Lori		92.46		1 Transactions		
36	1893 Tamarac Medical,Inc 15-484-487-8451-6432		44.85	3 blood lead analysis test	122413	Medical Supplies	N
	1893 Tamarac Medical,Inc		44.85		1 Transactions		
87	167 Telander/Sarah 15-484-450-0000-6331		29.48	Mar/Apr mileage		Mileage & Meals	N
	167 Telander/Sarah		29.48		1 Transactions		
88	1333 Tomczak/Kailey 15-484-496-8449-6331		20.77	March mileage		Mileage & Meals	N
	1333 Tomczak/Kailey		20.77		1 Transactions		
90	1268 Tomczak/Kristi 15-484-496-8448-6331		56.28	Mar/Apr mileage		Mileage & Meals	N
89	1268 Tomczak/Kristi 15-484-496-8449-6331		273.36	Mar/Apr mileage		Mileage & Meals	N
	1268 Tomczak/Kristi		329.64		2 Transactions		
37	1638 Wildflower Media Ventures 15-484-487-8463-6285		5,440.00	payment #1 marketing/outreach	00191063	Contracted Work	N
	1638 Wildflower Media Ventures		5,440.00		1 Transactions		
66	452 Zaiser/Kelly 15-484-487-8450-6331		10.72	Mar/Apr TANF mileage		Mileage & Meals	N
67	452 Zaiser/Kelly 15-484-487-8453-6331		22.78	April SF mileage		Mileage & Meals	N
	452 Zaiser/Kelly		33.50		2 Transactions		
15 Fund Total:			47,858.78	Community Health Fund	46 Vendors	95 Transactions	
Final Total:			47,858.78	46 Vendors	95 Transactions		

**** Kanabec County ****



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Recap by Fund	<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>	
	15	47,858.78	Community Health Fund	
	All Funds	47,858.78	Total	Approved by,
			
			

9:45am Appointment

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Opioid Settlement Committee Recommendations	b. Origination: Opioid Settlement Committee
c. Estimated time: 5 minutes	d. Presenter(s): Kathy Burski

e. Board action requested:

To approve the Opioid Settlement Committee's recommendations for funding: Speaker to be brought in to provide education to Mora Public School Students on the harms of opioid use and opioid addiction. He would provide two sessions (grades 7-9, and grades 10-12). He would also provide handouts/talking points to parents as well as the students and staff.

Cost: \$1,200 plus travel expenses of about \$400

Request approval to reimburse Mora Schools for the actual cost of the speaker up to \$2,000 – with receipts.

f. Background:

Kanabec County expects to receive over one million dollars over the next 18 years from the Opioid Settlement Fund. To date, Kanabec County has received \$179,660.34 Expended/obligated so far is \$61,735.72 leaving a balance of \$117,924.62. The Opioid Settlement Committee reviewed the request from Mora Public Schools and approved the activity and request for funding.

Supporting Documents: None: Attached:

Date received in County Coordinators Office:

Coordinators Comments:

Resolution #__ – 5/7/24

Opioid Settlement Committee Recommendation for Funding Resolution

WHEREAS, the Opioid Settlement Committee is recommending to approve Mora Public Schools to provide a speaker to educate students on the harms of opioid abuse, and

WHEREAS, the speaker would provide two sessions, (grades 7-9 and grades 10-12) as well as handouts and talking points to parents and students, and

WHEREAS, the cost would be \$1,200.00 plus travel expenses of approximately \$400.00, and

THEREFORE BE IT RESOLVED the Kanabec County Board of Commissioners approves the Opioid Settlement Committee’s request to approve funding for Mora Schools to provide a speaker on the topic of opioid abuse not to exceed \$2,000.00 and to reimburse Mora Public Schools up to that amount.

9:50am Appointment

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Request for Authorization to Send Two New Positions to the Pay Consultant	b. Origination: Community Health Department
c. Estimated time: 10-15 minutes	d. Presenter(s): Kathy Burski, Community Health Director and Kris McNally, Coordinator

e. Board action requested:

Approve the following resolution:

Resolution #__ - 5/7/24

Authorization to Send Position(s) to the Pay Consultant

WHEREAS policy #P-106 states that job descriptions for new positions must be written, reviewed, and authorized by the appropriate Department Head with consultation from the Personnel Director; and

WHEREAS policy #P-106 further states that the descriptions must be submitted to the Board for review authorization to send to the pay consultant for scoring, or back to the Department Head for changes; and

WHEREAS the Community Health Director has prepared the job descriptions, physical analysis, and justification for adding the positions; and

WHEREAS the documents have been reviewed in consultation with Human Resources; and

WHEREAS the Board has examined and reviewed the documents;

BE IT RESOLVED the Kanabec County Board of Commissioners hereby approves sending the newly created job descriptions and physical analysis documents for the Public Health Supervisor and the Community Health Planner/Communications Coordinator to the pay consultant for review and scoring.

f. Background:

Supporting Documents: None: **Attached:**

Date received in County Coordinators Office:

Coordinators Comments: Policy P-102 Requires new positions to have the approval of the County Board prior to any recruitment or hiring.

Policy P-106 defines the process to score new positions for consideration.

Request for two positions: Public Health Supervisor and Public Health Planner/Communications Coordinator

Many governmental public health leaders have identified the need to strengthen the public health system and create a system for the 21st century – one that is equipped to work with communities and carry out foundational public health responsibilities effectively and efficiently.

About 8 years ago, the Minnesota Department of Health in partnership with the Statewide Community Health Services Advisory Committee and Local Public Health began the work on System Transformation. Built on the premise that where a person lives should not determine the level of public health protection available, the group worked on and adopted a framework that outlines the foundational responsibilities of the governmental public health system.

The framework outlines the foundational responsibilities of the governmental public health system. It defines what needs to be in place everywhere for Minnesota’s public health system to work anywhere, as we work toward a more seamless, responsible, and publicly supported public health system.

- It can help us explain the vital role of governmental public health in a thriving community.
- It helps us identify capacity gaps, ask for support, evaluate progress, and justify resource and funding needs.
- It also acknowledges that, in addition to a statewide foundation, health departments will provide additional services and may require more capacity in different areas to best serve their communities.

This framework does not convey roles and responsibilities (e.g., who carries out which activity), and does not discuss how much of each activity, capability, or area any specific jurisdiction “owns.”

In the 2023 legislative session, additional funding was allocated to public health to be used only for activities within the Foundational Capabilities. The eight Foundational Capabilities are: Assessment & Surveillance, Policy Development & Support, Community Partnership Development, Accountability & Performance Management, Equity, Emergency Preparedness & Response, Organizational Competencies, and Communications.

Current status of these areas is:

Assessment & Surveillance – done by Director with minimal support from staff as able but all other staff have dedicated funding for programs and that is where their work is prioritized. Currently not enough time is available to be able to do this process which includes community health assessment, community health improvement plan, monitoring the plans to make sure progress is being made, surveillance of the community and ability to gather data etc.

Policy Development & Support – done by Director with minimal support from staff as able but all other staff have dedicated funding for programs and that is where their work is prioritized. Currently not able to do a thorough job of policy development and support as it should be done.

Community Partnership Development – all staff work with community partners. This is probably one of the strengths of Kanabec County Community Health. However, partnerships across counties/regionally/statewide can be strengthened and leveraged to support the work.

Accountability & Performance Management – oversight by Director with assistance from supervisors/employees working in different areas. With over 20 program areas, there is a desire to have a more defined process/program with the ability to be more forward thinking.

Equity – not really addressed in a complete manner. Each program area works to address social and structural determinants of health. Agency would benefit from the ability to work collaboratively across all programs to address inequities to achieve better outcomes for community health and well-being.

Emergency Preparedness & Response – with the addition of the new State funding, the agency has a dedicated staff person in this area. However, many other staff need to be informed, trained, and be available to conduct/participate in exercises.

Organizational Competencies – done by Director with minimal support from Supervisory staff and Admin Assistant. Current supervisory staff have very limited time to engage to a greater extent.

Communications – we have no one dedicated to support the level of communications that is required or desired. Things are pieced together or put together at the last minute and are not as effective as they should be.

Kanabec County Community Health participated in strategic planning sessions setting the mission and vision for the future. The group brainstormed how to meet the vision for the future. Through those discussions, themes evolved, and this informed the positions/job descriptions that will help to move the strategic work forward. The group highlighted the importance of involving the community, promoting public health in the community and with decision-makers, building trust and creating a healthy and engaged workplace environment as priorities. These key areas depend on strong internal and external communication, development of tools that will help to educate, inform, and engage. It also requires continual surveillance and assessment of the health of the community, policy development and monitoring, monitoring of data, planning and implementation of strategies to address local needs.

Filling these positions will allow the Director/CHS Administrator to focus on things like: the day-to-day operations of the Agency, financial management/seek funding to address the priority areas, manage and develop a strong workforce, accountability and performance management.

How the positions will be paid for:

Cost will depend on where the positions are pointed, and decisions will be made once that is known as to whether the department can fund one or both:

Foundational Public Health Responsibilities Grant: \$188,716 ongoing

Anticipated Cannabis funding: amount not yet known – conservatively guessing \$50,000 ongoing.

CDC Infrastructure Grant – not ongoing but have \$100,519 to use by 11/30/2027. It is to be used to support efforts to recruit, retain, and train a skilled and diverse public health workforce, address longstanding public health infrastructure needs, and increase the size of the public health workforce.

Possible redistribution of Transit Director duties in 2025. Community Health Director could be partially funded via MNDot.

Foundational Public Health Responsibilities

NATIONAL HEADLINES, MINNESOTA ACTIVITIES

Background

Minnesota has adopted the [Public Health Accreditation Board \(PHAB\) National Framework for Foundational Public Health Services](#), which defines a minimum package of public health capabilities and programs that no jurisdiction can be without. Before the adoption of the national framework, Minnesota developed a similar foundational public health responsibilities (FPHR) framework that included a more robust set of activities to allow for the completion of a comprehensive cost and capacity assessment.

Purpose

This document aims to organize the previously developed Minnesota activities under the headlines of the national framework. This will help community health boards identify activities considered foundational and appropriate for the use of [FPHR grant funding](#) allocated to community health board during the 2023 legislative session.

This work is rapidly evolving, and this document provides only a small sample of allowable costs. Over the next several months, local public health and MDH will be working together to better define what activities are foundational for Minnesota’s state and local public health system. If you have questions about this document or FPHR, contact the MDH Center for Public Health Practice at health.ophp@state.mn.us or reach out to your public health system consultant: [Who is my public health system consultant? - MN Dept. of Health.](#)

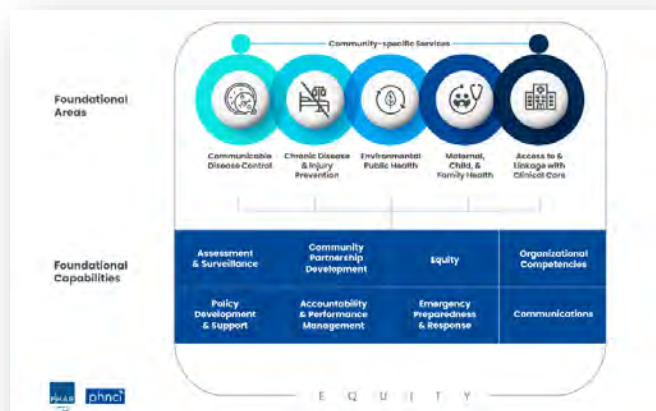
Foundational capabilities and areas in this document

Foundational capabilities

- [Assessment and Surveillance](#)
- [Community Partnership Development](#)
- [Equity](#)
- [Organizational Competencies](#)
- [Policy Development and Support](#)
- [Accountability and Performance Management](#)
- [Emergency Preparedness and Response](#)
- [Communication](#)

Foundational areas

- [Communicable Disease Control](#)
- [Environmental Public Health](#)
- [Chronic Disease and Injury Prevention](#)
- [Maternal, Child, and Family Health](#)
- [Access to and Linkage to Care](#)



Assessment and Surveillance

- A. Ability to collect timely and sufficient foundational data to guide public health planning and decision making at the state and local level, including the personnel and technology that enable collection.**
 - 1. Establish metrics and monitor public health issues and access to clinical care services
 - 2. Develop, implement, and maintain a data infrastructure
 - 3. Collect data to guide planning and decision-making
- B. Ability to collect, access, analyze, interpret, and use data from a variety of sources including granular data and data disaggregated by geography (e.g., census tract, zip code), sub-populations, race, ethnicity, and other variables that fully describe the health and well-being of a community and the factors that influence health.**
 - 1. Establish metrics and monitor data on public health issues, including root causes
 - 2. Provide or access epidemiological services
 - 3. Analyze data in collaboration with partners, communities, and individuals with lived experience
 - 4. Validate information, data, analysis, and findings
- C. Ability to assess and analyze disparities and inequities in the distribution of disease and social determinants of health, that contribute to higher health risks and poorer health outcomes.**
- D. Ability to prioritize and respond to data requests and translate data into information and reports that are valid, complete, statistically accurate, and accessible to the intended audiences.**
 - 1. Use epidemiological practices to explain the distribution of disease, death, health outcomes, health disparities and systemic inequities
 - 2. Assure the availability of data collected from the public
 - 3. Ensure data and outputs are communicated effectively
- E. Ability to conduct a collaborative community or statewide health assessment and identify health priorities arising from that assessment, including analysis of root causes of health disparities and inequities.**
 - 1. Convene public health partners to understand public health issues and the need for prevention activities, and to develop a health assessment
 - 2. Convene public health partners to develop improvement plan, assure alignment, strategize, and assess related external factors and conditions
 - 3. Establish metrics and monitor implementation of improvement plan, track responsibilities, and track implementation actions
- F. Ability to access 24/7 laboratory resources capable of providing rapid detection.**
 - 1. Provide or access laboratory services
 - 2. Ensure coordination and communication with public and private laboratories
 - 3. Assure availability of environmental, biological, and chemical laboratory testing, including for maternal and child, chronic disease, and injury issues
 - 4. (State only) Function as a Laboratory Response Network (LRN) Reference laboratory
- G. Ability to participate in or support surveillance systems to rapidly detect emerging health issues and threats.**

1. Identify and investigate emerging public health issues
 2. Provide surveillance of the population related to emerging health issues and threats
- H. Ability to work with community partners to collect, report and use public health data that is relevant to communities experiencing health inequities or ability to support community-led data processes.**
1. Validate information, data, analysis, and findings
 2. Convene cross sector partners to strategize
 3. Collaborate with other governmental, cross-sector partners, communities, and individuals

Community Partnership Development

- A. Ability to create, convene, support, and sustain strategic, non-program specific relationships with key community groups or organizations representing populations experiencing health disparities or inequities; private businesses and health care organizations; relevant federal, Tribal, state, and local government agencies; elected and non-elected officials.**
1. Dedicate resources to community partnership development and engagement, and understand how communities are organized
 2. Create and maintain organizational policies and practices that advance relationship building and authentic engagement, including ongoing communication with the community
 3. Identify strategic public health partnerships with other government sectors
- B. Ability to leverage and engage partnerships and community in equity solutions.**
1. Inform partners about Minnesota's Foundational Public Health Responsibilities
 2. Ensure community members, including those most affected by health inequities and those with lived experience, are engaged
- C. Ability to establish and maintain trust with and authentically engage community members and populations most impacted by inequities in key public health decision-making and use community-driven approaches.**
1. Participate in partnerships, as an invitee
 2. Establish a culture of introspection among members
 3. Facilitate gatherings that encourage community conversations, leverage evidence-based practices, assure efforts toward agreed upon responsibilities for partners, foster leadership opportunities, and promote information sharing
- D. Ability to convene across governmental agencies, such as departments of transportation, aging, substance abuse/mental health, education, planning and development, or others, to promote health, prevent disease, and protect community members of the health department's jurisdiction.**
- E. Ability to engage members of the community and multi-sector partners in a community health improvement process that draws from community health assessment data and establishes a plan for addressing priorities. The community health improvement plan can serve as the basis for coordination of effort and resources across partners.**
1. Coordinate policy agendas with partner organizations
 2. Support community member involvement in achieving health outcomes that are most important to them

Equity

- A. Ability to strategically address social and structural determinants of health through policy, programs, and services as a necessary pathway to achieve equity.**
 - 1. Organize support for public health statutes, regulations, rules, ordinances, and other policies
 - 2. Develop (including researching, analyzing, costing, and articulating the impact, as needed) health equity public health policy
- B. Ability to systematically integrate equity into each aspect of the FPHR, strategic priorities, and include equity-related accountability metrics into all programs and services.**
 - 1. Collaborate with partners, communities, and individuals disproportionately impacted by health inequity to co-create metrics and monitor health equity within the jurisdiction
- C. Ability to work collaboratively across the department and the community to build support for and foster a shared understanding of the critical importance of equity to achieve community health and well-being.**
 - 1. Convene cross-sector partners and public health partners to identify strategies or initiatives
 - 2. Collaborate with partners, communities, and individuals who are disproportionately affected by health inequities, to understand the impacts of public health risk/prevention and develop shared language and definitions
- D. Ability to develop and support staff to address equity.**
 - 1. Develop and maintain written training materials on health equity, and provide training to staff
 - 2. Build organizational and individual staff competency in recognizing unconscious bias
- E. Ability to create a shared understanding of what creates health including structural and systemic factors that produce and reproduce inequities.**
 - 1. Cultivate an organizational culture of health equity

Organizational Competencies

Leadership & Governance

- A. Ability to lead internal and external stakeholders to consensus, with movement to action, and to serve as the face of governmental public health in the department's jurisdiction.**
 - 1. Collaborate with partners, communities, and individuals including those disproportionately affected by public health issues, to understand the role of governmental public health
 - 2. Convene cross sector partners to understand the role of non-governmental partners
 - 3. Advocate and communicate about the value and role of public health in the community
- B. Ability to directly engage in health policy development, discussion, and adoption with local, state, and national policymakers, and to define a strategic direction for public health initiatives, including the advancement of equity.**
 - 1. Convene public health partners to identify strategies or initiatives
 - 2. Develop, implement, and maintain an agency strategic plan with metrics to monitor implementation
 - 3. Track actions taken by the agency in implementing the agency strategic plan to monitor and report on progress

4. Assess how external factors and conditions affect implementation of the agency strategic plan
- C. Ability to prioritize and implement diversity, equity, inclusion within the organization.**
- D. Ability to engage with appropriate governing entities about the department's public health legal authorities and what new laws and policies might be needed.**
1. Engage with and support the appropriate governing entity about the public health agency's role and legal authority around public health priorities and policies
 2. Promote and assist governing entities in examining, understanding, and modifying public health authorities; educate and support appropriate governing entities
 3. Develop, implement, and maintain a governance system and infrastructure for governmental public health, including organizational policies
 4. Maintain current operational definitions and statements of public health roles, responsibilities, and authorities
- E. Ability to ensure diverse representation on public health boards and councils.**

Information Technology Services, including Privacy & Security

- A. Ability to maintain and procure the hardware and software needed to access electronic health information to support the department's operations and analysis of health data.**
1. Develop, implement, and maintain systems and infrastructure for information technology and electronic information systems within the organization
 2. Implement prioritized strategies or initiatives identified to support optimization of technology, information systems, and data
- B. Ability to support, use, and maintain communication technologies and systems needed to interact with community members.**
1. Assure continuity of technical operations and connectivity to networks, in an emergency
- C. Ability to have the proper systems and controls in place to keep health and human resources data confidential and maintain security of IT systems.**
1. Develop, maintain, and share internal electronic information systems
 2. Develop, implement, and maintain written organizational policies
 3. Build organizational and individual staff competency around information systems

Workforce Development & Human Resources

- A. Ability to develop and maintain a diverse and inclusive workforce with the cross-cutting skills and competencies needed to implement the FPHS effectively and equitably.**
1. Cultivate an organizational culture of employee wellness
 2. Develop, implement, and maintain infrastructure and a written plan for workforce development
- B. Ability to manage human resource functions including recruitment, retention, and succession planning; training; and performance review and accountability.**
1. Develop, implement, and maintain systems and infrastructure for human resource management, recruitment, and employee retention
 2. Develop and maintain written training materials on pertinent topics, and provide staff training
 3. Develop, implement, and maintain a written succession plan(s) for the organization

Financial Management, Contract, & Procurement Services, including Facilities and Operations

- A. Ability to establish a budgeting, auditing, billing, and financial system and chart of expense and revenue accounts in compliance with federal, state, and local standards and policies.**
 - 1. Develop, implement, and maintain systems and infrastructure for financial management, oversight, and internal auditing of financial operations
 - 2. Develop, implement, and maintain systems for contracts and procurement
- B. Ability to secure grants or other funding (governmental and not) and demonstrate compliance with an audit required for the sources of funding utilized.**
 - 1. Advocate for, procure, maintain, and manage financial resources for organizational operations
 - 2. Procure, maintain, and manage necessary goods, services, and intangible assets
- C. Ability to procure, maintain, and manage safe facilities and efficient operations.**
 - 1. Maintain and, as necessary, replace long-term or capital assets for organizational operations
 - 2. Manage and operate facilities as safe and physically secure public-facing workplaces
- D. Ability to leverage funding and ensure resources are allocated to address equity and social determinants of health.**

Legal Services & Analysis

- A. Ability to access and appropriately use legal services in planning, implementing, and enforcing, public health initiatives, including relevant administrative rules and due process.**
 - 1. Build organizational and individual staff competency in understanding and interpreting statutes, regulations, rules, ordinances
 - 2. Develop, implement, and maintain systems and infrastructure for legal services and analysis

Policy Development and Support

- A. Ability to serve as a primary and expert resource for establishing, maintaining, and developing basic public health policy recommendations that are evidence-based and grounded in law. This includes researching, analyzing, costing out, and articulating the impact of such policies and rules where appropriate, as well as the ability to organize support for these policies and rules and place them before an entity with the legal authority to adopt them.**
 - 1. Analyze public health laws, policies, and ordinances in collaboration with partners
 - 2. Assess the need for new public health laws, policies, and ordinances in the community
 - 3. Organize support for public health policies and rules statutes, regulations, rules, ordinances, and other policies related to the population's health
 - 4. Engage with appropriate governing entities about the purpose, intent, and outcomes of public health laws, policies, and ordinances
 - 5. Develop and maintain written organizational policies to support staff in rapidly responding to emerging issues
 - 6. Monitor the impact of changing state and federal laws on public health

7. Effectively inform and influence policies, statutes, ordinances, rules, and regulations related to the quality, effectiveness, and cost-efficiency of clinical care services
- I. Ability to effectively inform and influence policies being considered by other governmental and non-governmental agencies that can improve the physical, environmental, social, and economic conditions affecting health but are beyond the immediate scope or authority of the governmental public health department.**
 1. Convene cross-sector partners to identify strategies or initiatives for non-governmental partners to implement Health in All Policies
 2. Effectively inform and influence policies being considered by other governmental and non-governmental organizations within the jurisdiction that might impact Health in All Policies
 - J. Ability to effectively advocate for policies that address social determinants of health, health disparities and equity.**
 1. Collaborate with partners, communities, and individuals, including those disproportionately affected by outdated laws, policies, and ordinances, to understand and update outdated laws and policies
 2. Collaborate with key partners and policy makers, including those disproportionately affected by health inequities, to enact new evidence-based, legally defensible policies
 3. Organize support for public health statutes, regulations, rules, ordinances, and other policies, including advocacy for fair reimbursement for clinical care services
 - K. Ability to issue, promote compliance with or, as mandated, enforce compliance with public health regulations.**
 1. Develop, implement, and maintain written organizational policies supported by statutes, regulations, rules, ordinances, and other policies
 2. Educate the community and key partners on the meaning, purpose, and benefits of public health laws
 3. Assure the consistent application of public health laws, policies, and ordinances
 4. Develop and maintain written training materials on public health laws, policies, and ordinances
 5. Conduct public health enforcement activities, including enforcing laws, rules, policies, and procedures related to prevention and control of infectious diseases
 6. Monitor and report public health violations and enforcement responses
 7. Provide education and technical assistance to regulated entities to support their compliance with statutes, regulations, rules, ordinances, and other policies
 8. Engage with the appropriate governing entity about the public health agency's role and legal authority around environmental health policy

Accountability and Performance Management

- A. Ability to perform according to accepted business standards in accordance with applicable federal, state, and local laws and policies and assure compliance with national and Public Health Accreditation Board Standards.**
- B. Ability to maintain a performance management system to monitor achievement of organizational objectives.**
 1. Develop, implement, and maintain systems and infrastructure for organizational performance management

- C. Ability to identify and use evidence-based or promising practices when implementing new or revised processes, programs and/or interventions.**
 - 1. Build organizational and staff competency in evaluation
- D. Ability to maintain an organization-wide culture of quality and to use quality improvement tools and methods.**
 - 1. Establish metrics and monitor quality of the governmental public health system
 - 2. Develop, implement, and maintain a written plan for organizational quality improvement, cultivating an organizational culture of quality improvement
- E. Ability to create accountability structures and internal and external equity-related metrics to measure the equity impact of a department's efforts and performance.**
 - 1. Establish a system for tracking efforts toward agreed upon responsibilities, and monitor actions taken by governmental public health, and partners
 - 2. Develop, implement, and maintain a system for collecting feedback from the community

Emergency Preparedness and Response

- A. Ability to develop, exercise, and maintain preparedness and response strategies and plans, in accordance with established guidelines, and to address a range of events including natural or other disasters, communicable disease outbreaks, environmental emergencies, or other events, which may be acute or occur over time.**
 - 1. Develop, implement, and maintain written policies and procedures (e.g., ESF-8) to activate and alert public health personnel and response partners during an emergency
 - 2. Develop, maintain, and update emergency preparedness and response plans based on identified risk preparedness and response competencies in collaboration with appropriate stakeholders
 - 3. Establish the response and recovery role of public health in other partners' plans for all types of disasters and emergencies
 - 4. Effectively inform staff and appropriate stakeholders on the capabilities and role of public health in the emergency preparedness and response plan
 - 5. Provide staff training on the preparedness and response plan with appropriate frequency
 - 6. Collaborate with community-based organizations and partners to provide training exercises
- B. Ability to integrate social determinants of health, and actions to address inequities, including ensuring the protection of high-risk populations, into all plans, programs, and services.**
 - 1. Build and maintain relationships with the public and partners to establish trust with governmental public health
 - 2. Convene cross-sector partners to identify strategies or initiatives for community-based organizations and governmental partners
- C. Ability to lead the Emergency Support Function 8 – Public Health & Medical for the county, region, jurisdiction, and state.**
 - 1. Ensure staff are adequately trained on emergency preparedness and response competencies, including interoperability within the National Incident Management System (NIMS) and Incident Command System (ICS) frameworks
 - 2. Assure leadership of governmental emergency health and medical operations
 - 3. Assess the scope and responsibility for public health response

- D. Ability to activate the emergency response personnel and communications systems in the event of a public health crisis; coordinate with federal, state, and local emergency managers and other first responders, and private sector and nonprofit partners; and operate within, and as necessary lead, the incident management system.**
1. Activate and alert public health response personnel and communication systems
 2. Operate within the established incident command system according to the role of public health
 3. Convene public health partners to identify strategies or initiatives for governmental public health response to incidents, and to assess the need for community incident response efforts
- E. Ability to maintain and execute a continuity of operations plan that includes a plan to access financial resources to execute an emergency and recovery response.**
1. Identify priority or essential public health functions and the people, resources, and facilities needed to provide these services during an emergency
 2. Engage with staff with roles or responsibilities in priority or essential public health functions
- F. Ability to establish and promote basic, ongoing community readiness, resilience, and preparedness by enabling the public to take necessary action before, during, or after a disaster, emergency, or public health event.**
1. Convene public health partners to identify strategies or initiatives
 2. Assess the need for incident recovery efforts in the community
 3. Implement prioritized strategies or initiatives to support recovery from incidents
 4. Evaluate the response of the governmental public health system and the health department to incidents, including through after-action reports (AARs)
- G. Ability to issue and enforce emergency health orders.**
1. Assess the legal and statutory process for issuing and enforcing state and local emergency health orders
 2. Issue and enforce emergency health orders, as necessary and appropriate, inclusive of prevention or control of infectious diseases and environmental health risks
- H. Ability to be notified of and respond to events on a 24/7 basis.**
1. Develop, implement, and maintain a situation and information sharing infrastructure that may receive notice of emergencies on a 24/7 basis
 2. Effectively inform community-based organizations, partners, governmental organizations, the media, and the public with unified, accurate, and geographically relevant information before, during, and after a public health emergency
- I. Ability to access and utilize a Laboratory Response Network (LRN) Reference laboratory for biological agents and an LRN chemical laboratory at a level designated by CDC.**

Communication

- A. Ability to maintain ongoing relations with local and statewide media including the ability to write a press release, conduct a press conference, and use electronic communication tools to interact with the media.**
1. Build and maintain relationships with broadcast and other media organizations
 2. Identify and critically evaluate media organizations
 3. Develop, implement, and maintain written organizational policies and templates

4. Ensure information and messages of public health importance are conveyed to the media
- B. Ability to effectively use social media to communicate directly with community members.**
- C. Ability to appropriately tailor communications and communications mechanisms for various audiences.**
1. Develop, implement, and maintain systems for communications with public health and cross-sector partners
 2. Ensure information and messages of public health importance are conveyed to the public
- D. Ability to write and implement a routine communications plan and develop routine public health communications including to reach communities not traditionally reached through public health channels.**
1. Develop, implement, and maintain a written routine communication plan
 2. Develop, implement, and maintain systems for communications with public health and cross-sector partners
 3. Collaborate with partners, communities, and individuals to co-create communications strategies
 4. Establish metrics and monitor quality of public health communications
- E. Ability to develop and implement a risk communication strategy for communicating with the public during a public health crisis or emergency. This includes the ability to provide accurate and timely information and to address misconceptions and misinformation, and to assure information is accessible to and appropriate for all audiences.**
1. Develop, implement, and maintain a written public health risk communication plan
 2. Assess the need for and priority of communications mediums and channels for public-facing risk communication for the community
 3. Collaborate with partners, communities, and individuals to co-create strategies for risk communication
 4. In the event of a public health crisis or event, lead and coordinate communication between public health, health organizations, national organizations and federal agencies, and state agencies
- F. Ability to transmit and receive routine communications to and from the public in an appropriate, timely, and accurate manner, on a 24/7 basis.**
1. Develop, implement, and maintain systems and infrastructure for public-facing communications
- G. Ability to develop and implement a proactive health education/health communication strategy (distinct from risk communication) that disseminates timely and accurate information to the public designed to encourage actions to promote health in culturally and linguistically appropriate formats for the various communities served, including using electronic communication tools.**
1. Assess the need for and priority of communications mediums and channels for public-facing communications for the community

Communicable Disease Control

A. Provide timely, statewide, and locally relevant and accurate information to the health care system and community on communicable diseases and their control.

1. Develop, maintain, and share internal electronic information systems and access external information systems for reporting and surveillance
2. Establish metrics and monitor quality of infectious disease prevention and control activities
3. Collect data per MN Admin Rules, and analyze data related to infectious diseases and control
4. Validate all information, data, analysis, and findings
5. Ensure that health care providers, pharmacists, school officials and the public are educated about the statewide immunization information system
6. Ensure that health care providers, pharmacists, long-term care facility staff, infection control specialists, school officials, the public and others are educated about vaccine-preventable diseases and immunizations

B. Identify statewide and local communicable disease control community partners and their capacities, develop, and implement a prioritized communicable disease control plan, and ability to seek and secure funding for high priority initiatives.

1. Collaborate with and educate partners, communities, and individuals, including those disproportionately affected by infectious diseases, to understand the prevention and control of infectious disease from the perspective of lived experience
2. Assess the need for and the factors and conditions that affect infectious disease prevention and control
3. Convene public health partners to identify strategies or initiatives for governmental public health to address infectious diseases in the jurisdiction
4. Convene cross-sector partners and public health partners to identify strategies or initiatives
5. Collaborate with partners, communities, and individuals to co-create strategies for prevention and control of infectious diseases
6. Develop, implement, and maintain written plans, systems, and infrastructure
7. Develop and maintain written training materials, provide training to relevant staff
8. Establish a system for tracking efforts toward agreed upon responsibilities for governmental public health, and partners, track these efforts
9. Implement prioritized strategies or initiatives
10. Assess how external factors and conditions affect implementation of infectious disease prevention and control plans
11. Build and maintain relationships with appropriate audiences

C. Receive laboratory reports and other relevant data; conduct disease investigations, including contact tracing and notification; and recognize, identify, and respond to communicable disease outbreaks for notifiable conditions in accordance with local, national, and state mandates and guidelines.

D. Assure the availability of partner notification services for newly diagnosed cases of communicable diseases according to Centers for Disease Control and Prevention (CDC) guidelines.

E. Assure the appropriate treatment of individuals who have reportable communicable diseases, such as TB, STIs, and HIV in accordance with local and state laws and CDC guidelines.

1. Assure provision of referrals

2. Assure access to treatment

F. Support the recognition of outbreaks and other events of public health significance by assuring capacity for the identification and characterization of the causative agents of disease and their origin, including those that are rare and unusual.

1. Assure provision of screening for individuals to detect infectious diseases
2. Monitor and report public health violations and enforcement responses
3. Conduct timely investigations for reportable infectious diseases
4. Identify and respond to emerging issues
5. Report presumed and diagnosed cases of reportable infectious diseases

G. Coordinate and integrate categorically funded communicable disease programs and services.

1. Develop, maintain, and share an immunization information system
2. Assure the safe and effective administration of necessary vaccinations for the public

Environmental Public Health

A. Provide timely, statewide, and locally relevant, complete, and accurate information to the state, health care system, and community on environmental public health threats and health impacts from common environmental or toxic exposures.

1. Collect, analyze, and interpret data and information related to environmental health
2. Validate information, data, analysis, and findings
3. Provide education and technical assistance to organizations

B. Identify statewide and local community environmental public health partners and their capacities, develop, and implement a prioritized plan, and ability to seek and secure action funding for high priority initiatives.

1. Collaborate with and educate partners, communities, and individuals
2. Assess the need for prevention or abatement activities
3. Convene cross-sector and public health partners to identify strategies or initiatives
4. Collaborate with partners, communities, and individuals to co-create strategies
5. Develop, implement, and maintain a written plan
6. Build and maintain relationships with appropriate audiences
7. Collaborate with partners, communities, and individuals to collect complaints and reports

C. Conduct mandated environmental public health laboratory testing, inspections, and oversight to protect food, recreation sites, and drinking water; manage liquid and solid waste streams safely; and identify other public health hazards related to environmental factors in accordance with federal, state, and local laws and regulations.

1. Develop, implement, and maintain systems and infrastructure
2. Develop and maintain written training materials, provide training to appropriate staff
3. Establish a system for tracking efforts toward agreed upon responsibilities, track these efforts
4. Implement prioritized strategies or initiatives, and assess how external factors and conditions affect implementation
5. Assure availability of environmental, biological, and chemical laboratory testing
6. Monitor and report public health violations and enforcement responses
7. Conduct timely investigations in response to environmental health risks

8. Identify and respond to emerging issues
 9. License, certify, or permit regulated parties or entities within the jurisdiction
 10. Inspect regulated parties or entities within the jurisdiction
 11. Investigate and document environmental health complaints
 12. Issue, enforce, and document corrective actions with respect to code violations
 13. Perform and document follow-up activities for remediation
- D. Protect workers and the public from chemical and radiation hazards in accordance with federal, state, and local laws and regulations.**
- E. Participate in broad land use planning and sustainable development to encourage decisions that promote positive public health outcomes and resilient communities (e.g., housing and urban development, recreational facilities, transportation systems and climate change).**
- F. Coordinate and integrate categorically funded environmental health programs and services.**

Chronic Disease & Injury Prevention

- A. Provide timely, statewide, and locally relevant, complete, and accurate information to the health care system and community on chronic disease and injury prevention and control.**
1. Develop, maintain, and share internal electronic information systems and access external information systems for prevention and population health—including systems for chronic disease, and injury
 2. Provide surveillance of the population with respect to chronic disease and injury prevention
 3. Establish metrics and monitor quality of prevention and population health improvement activities
 4. Collect and analyze data related to chronic disease and injury prevention
 5. Validate all information, data, analysis, and findings
 6. Provide education and technical assistance to organizations involved in preventing harm and improving health
- B. Identify statewide and local chronic disease and injury prevention community partners and their capacities, develop, and implement a prioritized prevention plan, and ability to seek and secure funding for high priority initiatives.**
1. Collaborate with and educate partners, communities, and individuals on chronic disease and injury prevention, and the factors that impact health
 2. Assess the need for, and the factors and conditions that affect, prevention and control of chronic disease and injury
 3. Convene cross-sector and public health partners to identify strategies or initiatives for non-governmental partners to implement to address chronic disease, and injury issues
 4. Collaborate with partners, communities, and individuals to co-create strategies for addressing gaps in availability and barriers to accessing chronic disease and injury services
 5. Develop, implement, and maintain written plan(s) for addressing threats to population health, including prevention and control of chronic disease and injury
 6. Assess how external factors and conditions affect implementation of prevention and population health improvement plans
 7. Build and maintain relationships with appropriate audiences

- C. Reduce statewide and community rates of tobacco use through a program that conforms to standards set by state or local laws and CDC’s Office on Smoking and Health, including activities to reduce youth initiation, increase cessation, and reduce secondhand exposure to harmful substances.**
- D. Work actively with statewide and community partners to increase statewide and community rates of healthy eating and active living through a prioritized approach focusing on best and promising practices aligned with national, state, and local guidelines for healthy eating and active living.**
 - 1. Develop, implement, and maintain systems and infrastructure
 - 2. Develop and maintain written training materials, provide training to appropriate staff
 - 3. Establish a system for tracking efforts toward agreed upon responsibilities for governmental public health, and partners, track these efforts
 - 4. Implement prioritized strategies or initiatives identified to address chronic disease and injury
- E. Coordinate and integrate categorically funded communicable disease programs and services.**

Maternal, Child, & Family Health

- A. Provide timely, statewide, and locally relevant, complete, and accurate information to the health care system and community on emerging and on-going maternal child health trends.**
 - 1. Develop, maintain, and share internal electronic information systems and access external information systems for prevention and population health—including systems for maternal and child health
 - 2. Provide surveillance of the population with respect to maternal and child health
 - 3. Establish metrics and monitor quality of prevention and population health improvement activities
 - 4. Collect and analyze data related to maternal and child health
 - 5. Validate all information, data, analysis, and findings
 - 6. Provide education and technical assistance to organizations involved in preventing harm and improving health
- B. Identify local maternal and child health community partners and their capacities; using life course expertise and an understanding of health disparities, develop a prioritized prevention plan; and ability to seek and secure funding for high priority initiatives.**
 - 1. Collaborate with and educate partners, communities, and individuals on maternal and child health and the factors that impact health
 - 2. Assess the need for, and the factors and conditions that affect, maternal and child health services
 - 3. Convene cross-sector and public health partners to identify strategies or initiatives for non-governmental partners to implement to address maternal and child issues
 - 4. Collaborate with partners, communities, and individuals to co-create strategies for addressing gaps in availability and barriers to accessing maternal and child services
 - 5. Develop, implement, and maintain written plan(s) for addressing threats to population health, including maternal and child health
 - 6. Assess how external factors and conditions affect implementation of prevention and population health improvement plans

7. Build and maintain relationships with appropriate audiences
- C. Identify, disseminate, and promote emerging and evidence-based early interventions in the prenatal and early childhood period that promote lifelong health and positive social-emotional development.**
1. Develop, implement, and maintain systems and infrastructure
 2. Develop and maintain written training material, provide training to appropriate staff
 3. Establish a system for tracking efforts toward agreed upon responsibilities for governmental public health, and partners, track these efforts
 4. Implement prioritized strategies or initiatives identified to address maternal and child health
- D. Assure newborn screening as mandated by a state or local governing body including wraparound services, reporting back, following up, and service engagement activities.**
1. Effectively inform and influence state policy related to the newborn screenings to be included in the state newborn screening, based on what governmental public health considers appropriate and scientifically necessary
 2. Establish and maintain systems for follow-up, reporting, and connection to clinical care and early intervention services for infants diagnosed with a newborn screening disorder
 3. Assess the availability, capacity, and distribution (or gaps therein) of clinical care services for newborn screening disorders and to children with newborn screening disorders in the population and specifically within the jurisdiction, including any barriers to accessing the services
 4. Ensure infants receive newborn screening as soon as possible after birth to identify cases of newborn screening disorders
 5. Identify infants with abnormal screening results
 6. Ensure infants with abnormal screening results have access to prompt diagnostic assessments
 7. Ensure a seamless and complete referral from state health department to local health department for follow-up, including an update back from the local health department to the state health department of any follow-up referrals made
 8. Ensure the families of infants diagnosed with a newborn screening disorder receive prompt follow-up that includes supplemental education and connection to other social and clinical services (e.g., home visit, audiologist appointment, etc.), as needed
 9. Monitor the effectiveness of the newborn screening program
- E. Coordinate and integrate categorically funded maternal, child and family health programs and services.**

Access to & Linkage to Care

- A. Provide timely, statewide, and locally relevant, complete, and accurate information to the health care system and community on access and linkage to clinical care (including behavioral health), healthcare system access, quality, and cost.**
1. Develop, maintain, and share internal electronic information systems and access external information systems
 2. Educate the partners, communities, and individuals on barriers in accessing clinical care in a timely and transparent manner
 3. Provide education and technical assistance to healthcare and clinical care providers
 4. Assess the impact of external factors and conditions that affect clinical care cost

5. Assess the quality and effectiveness of clinical care services to the population to guide public health planning and decision-making
6. Assess the impact of external factors and conditions that affect clinical care quality and effectiveness
7. Establish metrics and monitor clinical care quality, effectiveness, and outcomes

B. Inspect and license healthcare facilities, and license, monitor, and discipline healthcare providers, where applicable.

1. Monitor clinical care facilities and providers based on the laws and rules contained in Minnesota statutes and federal laws
2. Review clinical care providers' qualifications and issue credentials including licenses
3. Conduct physical plant plan reviews and onsite construction inspections
4. Conduct on-site health care surveys
5. Conduct billing audits for nursing homes
6. Investigate complaints
7. As necessary, take enforcement actions

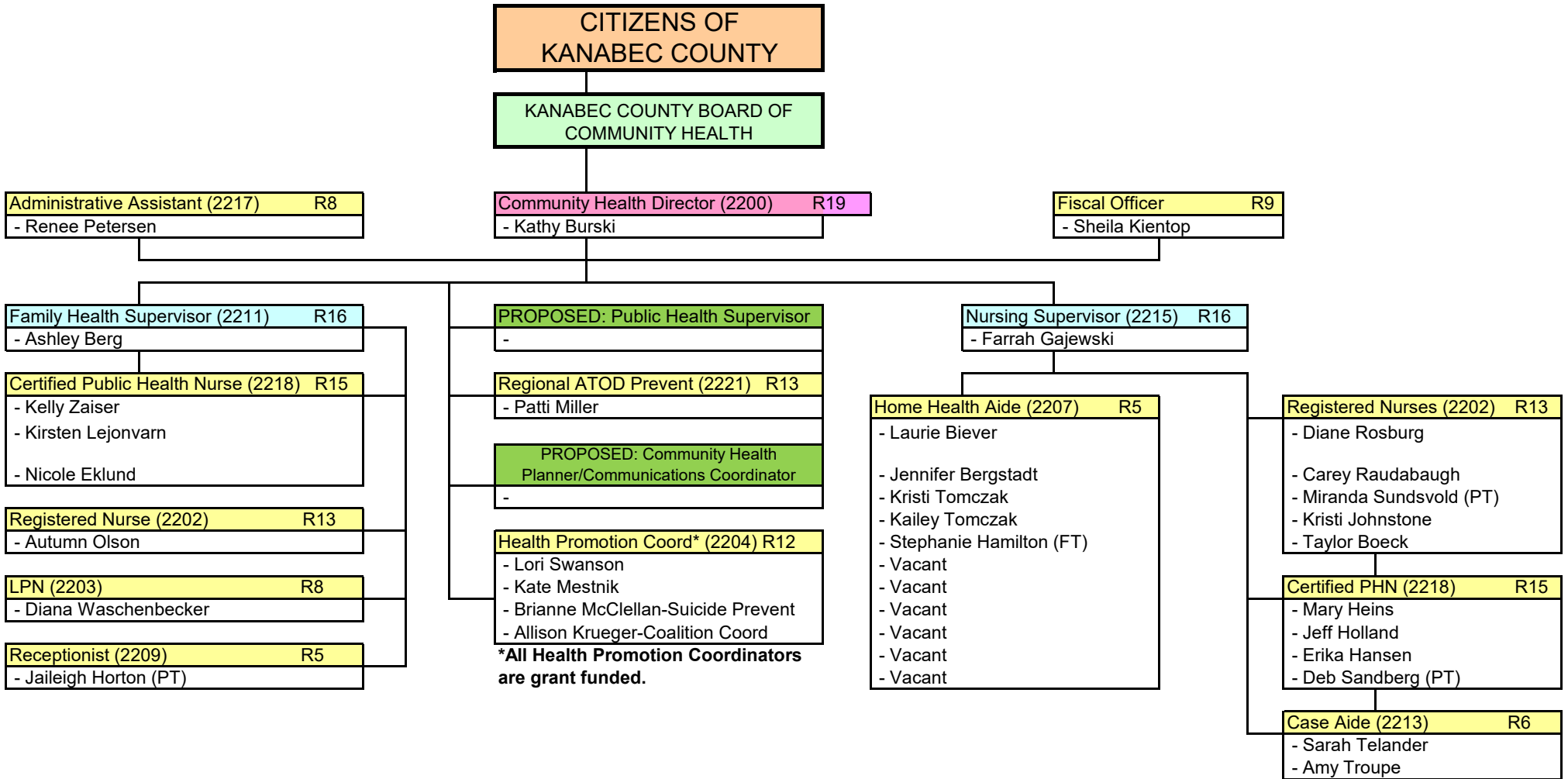
C. In concert with national and statewide groups and local providers of healthcare, identify healthcare partners and competencies, develop prioritized plans for increasing access to health homes and quality health care, and seek funding for high priority policy initiatives.

1. Monitor barriers in accessing clinical care for the population and within the jurisdiction
2. Collaborate with partners, communities, and individuals
3. Assess the need for, and the factors and conditions that affect, improved access to clinical care services in the community
4. Convene cross-sector and public health partners to identify strategies or initiatives for non-governmental and governmental partners
5. Collaborate with partners, communities, and individuals to co-create strategies for improving access to clinical care services
6. Develop, implement, and maintain a written plan
7. Build and maintain relationships with appropriate audiences
8. Convene cross-sector partners to identify strategies or initiatives for clinical care providers
9. Collaborate with partners, communities, and individuals to understand the quality and effectiveness of clinical care services
10. Collaborate with public health partners to understand the community context related to facilities being inspected/licensed
11. Convene public health partners, communities, and individuals, to improve a clinical care facility or providers quality of service

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12/27/23

Public Health



Kanabec County Position Description

Community Health Planner/Communications Coordinator

Exemption Status: Exempt **Department:** Community Health **Board Approval**

Job Specifications		
	FACTOR	LEVEL
Education & Experience qualifications are a job-related combination substantially equivalent to the levels shown at right.	Education/Experience:	A bachelor’s degree in public health, health education, planning, communications, journalism, public relations, or closely related field and five years related experience. Master’s degree preferred. Community Organizing experience a plus
	Other Requirements:	Two years of communications experience, preferably in public health, government, or nonprofit field. Must have demonstrated writing and research skills with a focus on detail-oriented work. Driver’s license or access to transportation
	Supervision given to:	None
	Supervision received from:	Department Director or designee

Job Summary

Under the supervision of the Director or his/her designee, this position will be responsible for providing health communications and outreach expertise. This position will be responsible for developing and distributing clearly written, well-designed health communications materials for public health in a variety of formats, including: web-based content, infographics, social media posts, print media, radio content, and professional communications such as educational materials. To provide assessment, planning and evaluation, grant development support around environmental health, clinical and health promotion programs; and coordinating programs with county and community resources. Build community support of the Public Health Agency and its strategies for improving health through engagement and outreach activities.

Some Examples of Essential Duties

50% Communications and Community Engagement

1. Engage the public health system and the community in identifying and addressing health problems through an ongoing, collaborative process.
2. Develop strategic outreach and communication plans to coordinate community engagement opportunities.
3. Provide professional communication, training, and technical support to Kanabec County Community Health.

4. Plan, develop, implement, and evaluate public health messages, communications strategies, and communication campaigns that align with core public health goals.
5. Provide outreach and communications expertise in the development and implementation of printed and online publications, websites, social media, presentations, and collateral materials (ex: brochures, pamphlets, posters, handouts, etc.).
6. Partners with organizations and online partners to develop effective and cost-efficient opportunities for message planning, research, message development and message delivery.
7. Assist in creating community-based coalitions and partnerships by engaging various sectors of the community and linking them with local public health efforts.
8. Identify potential new relationships that would grow the capacity of public health work in the community. Participate actively in community health coalitions.
9. Engage with community members to address public health issues and promote health.
10. Identify gaps in communications, develop/recommend strategies, implement solutions, and present results to administration.
11. Develops written reports, memos, newsletters, and presentations for the various programs/units.
12. Maintain and implement a risk communication plan for communicating with the public during a public health crisis or emergency.
13. Use health communication strategies to support prevention, health, and well-being.
14. Communicate what public health is, what the health department does, and why it matters.
15. Provide information on public health issues and public health functions through multiple methods to a variety of audiences.
16. Provides direct education and public speaking as appropriate.
17. Prepare for and respond to Public Health emergencies as directed.

50% Health Assessment/Planning/Grant Management

18. Conduct and disseminate assessments on population health status and public health issues facing the community.
19. Collect, analyze, and use public health data to develop recommendations regarding public health policy, processes, programs, and interventions.
20. Assist in collecting and sharing data that provide information on conditions of public health importance and on the health status of the population.
21. Contributes to and conducts stakeholder assessments to inform prevention work, including community assessments, focus groups, and key informant interviews.
22. Uses public health data to identify health problems and disparities in the community and to guide public health planning, policy, and decision-making.
23. Promote understanding of and support for policies and strategies that improve the public's health.
24. Assists in the development and implementation of the community health improvement plan, the agency strategic plan and quality improvement process consistent with the Minnesota Department of Health community assessment and planning process.
25. Research, write and submit grant applications.
26. Manages assigned Health Promotion grants and ensures that programs are coordinated within the department and with other community partners.
27. Ensures that assigned programs are operating within planned budgets.
28. Manages program records by maintaining accurate and complete documentation according to

- Standards of Practice and State/Federal/Grant rules, regulations, and guidelines.
29. Prepares reports and analyzes program efficiency and effectiveness.
 30. Research other programs and applies knowledge to health needs in Kanabec County.
 31. Utilize strategic prevention framework to develop and evaluate plans, organize, and implement programs and ensure programs meet or exceed Standards of Practice and State/Federal rules, regulations, and guidelines. Process includes developing logic models, action plans, measurable outcomes, and evaluation methods.
 32. Works in partnership with Health Educators to evaluate program needs and issues.
 33. Participates in risk management, evaluation, and other quality assurance activities as determined by Supervisor.
 34. Develop, gather, and assure agency documentation meets standards and measures of the Public Health Accreditation Board (if applying for accreditation).
 35. Attends meetings, seminars, and conferences to keep abreast of changes in policies, procedures, and trends of public health.
 36. Represents the agency in contacts with other agencies and the community.
 37. Understands and utilizes Public Health and the Public Health philosophy and knowledge.

Physical Demand Analysis Summary

In a typical 8-hour workday, this person sits 4 hours, stands 2 hours, and walks 2 hours. Notable physical demands include:

1. Occasional bending, crawling, climbing, crouching, kneeling, pushing, and pulling.
2. Occasional lifting and carrying of up to 50 pounds.
3. Continuous need for verbal conversation and hearing normal conversation. Frequent need for written communication ability.
4. Continuous need to see with near acuity, far acuity, full field of vision, with depth perception and distinguishing colors.
5. Occasional exposure to temperature changes and humidity is encountered by going indoors and outdoors.
6. Frequent use of hands at all heights from ankle to overhead height.
7. Considerable time using a computer for writing and research.

The duties listed above are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment of the position.

The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.

The County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, the County will provide reasonable accommodations to qualified individuals with disabilities and encourages both prospective and current employees to discuss potential accommodations with the employer.

Position: Community Health Planner/Communications Coordinator Department: Community Health

Supplement – Physical Effort & Working Conditions

INDICATE FREQUENCY (HOW OFTEN), WHAT THE REASON FOR THE ACTIVITY IS AND ANY LIMITATIONS ON FREQUENCY, WEIGHT, HEIGHT, ETC.

Frequency	Letter Code	Defined as
Never	N	
Seldom	S	Up to 1 hour per day
Occasionally	O	1 to 2 hours per day
Frequently	F	2 to 5 hours per day
Continuously	C	6 or more hours per day

PHYSICAL EFFORT FREQUENCY DESCRIPTION, REASON FOR, LIMITS

Stand	F	
Sit	F	
Walk	F	
Bend/Twist	O	
Push	O	
Pull	O	
Climb (stairs, ladders)	O	
Reach	F	
Lift	O	
Carry	O	Up to 50 lbs
Grasp/Grip	F	
Repetitive Motions	F	
Kneel/Crawl	O	
Run	S	
Jump	S	
Rapid work speed	O	
Filing	O	
Finger movement	F	
Keyboard use	F	
Close vision	C	
Color vision	C	

Depth perception	C	
Far vision	C	
Hear	C	
Talk	C	
Smell	F	
Touch	S	
Other:		

WORKING CONDITIONS/

EXPOSURES FREQUENCY DESCRIPTION, REASON FOR, LIMITS

Heat	O	
Cold	O	
Temperature changes	O	
Dampness	O	
Humidity	O	
Wet environment	O	
Work outdoors	O	
Noise	F	
Vibration	S	
Heights	S	
Confined spaces	O	
Moving objects	O	
Solvents	S	
Acids, corrosives	S	
Other chemicals	S	
Dust	O	
Dirt	O	
Fumes/Vapors/Mists	S	
Gases	S	
Office environment	C	
Travel	O	To meetings/trainings throughout community – weekly/several times a week, regionally – 2-4/year, state – 2-4/year
Work alone	O	

Work with co-workers	C	
Work with public	C	
Other:		

SAFETY EQUIPMENT

What safety equipment is required? Personal Protective Equipment as provided for situation (mask, gloves, other barrier protections)

Where and when must it be used? In response of a Public Health emergency

Kanabec County Position Description

Public Health Supervisor

Exemption Status: Exempt

Department: Community Health

Date:

Job Specifications		
	FACTOR	LEVEL
Education & Experience qualifications are a job-related combination substantially equivalent to the levels shown at right.	Education/Experience:	A bachelor’s degree in administration, public health, community health, communications, nursing, or a closely related field and two (2) years of professional level experience as a public health educator, public health nurse, county or city planning, or a closely related experience in public health or nursing. Master’s degree preferred.
	Other Requirements:	Valid driver’s license or access to transportation
	Supervision given to:	5.5 Direct FTE’s (6 people)
	Supervision received from:	Community Health Director

Job Summary

The Public Health Supervisor is responsible for assisting the Director/CHS Administrator with implementing the required Foundational Public Health Responsibilities that are organized according to the following areas: assessment and surveillance; community partnership development, equity, organizational competencies, policy development & support; accountability & performance management, emergency preparedness & response; and communications.

Protect and promote the health of Kanabec County residents by providing professional public health services, supervision of staff, and administrative oversight that promotes the health for all residents. Planning, developing, implementing, administering, and evaluating programs that promote population health; and coordinating programs with county and community resources.

Promotes individual and population health through the development, implementation and evaluation of health promotion and education initiatives and health behavior – change programs in a variety of settings for the population of Kanabec County.

Some Examples of Essential Duties

30% Supervisory and Professional Duties and Responsibilities

1. Provides leadership and guidance and serves as internal resource to staff ensuring adherence to approved personnel practices and policies and procedures.
2. Assists Director with interviews and hiring recommendations for new staff.
3. Provides orientation and mentoring to new staff.
4. Assists with development of staff training and development plans.
5. Promotes department goals and team building/development.
6. Leads program staff meetings.
7. Prepares for and responds to emergencies, events and incidents and assists communities in recovery.
8. Responds 24/7 as needed during a public health emergency. Assumes a leadership role in the Incident Command Structure for Public Health Emergency Preparedness and Response.
9. Assumes a leadership role in the absence of the Director.
10. Promotes a culture of and practice of Quality Improvement for the community health department.
11. Evaluates Team members annually; and provides ongoing supervision of staff through program review and observation.
12. Coordinates and provides input with other administrative staff regarding program coordination.
13. Meets with staff at least monthly to evaluate program needs.
14. Provides day-to-day direction to staff and issues and works to problem solve situations as they arise to assure appropriate response.
15. Identifies and makes recommendations regarding in-service/continuing education needs of staff.
16. Assists staff in problem solving, prioritization of work and overall job performance.
17. Ensures programs are operating within planned budgets and within contracts/guidelines.
18. Prepares reports and analyzes program efficiency and effectiveness.
19. Serves as a resource regarding population health and interprets agency programs and policies to the agency and other community groups.
20. Promotes staff well-being by providing opportunities for growth and creating a positive work culture.
21. Plans, organizes, implements, evaluates, and directs the activities of staff (Health Promotions and Planners) to ensure quality programs are provided to citizens of Kanabec County and programs meet or exceed Standards of Practice and State/Federal rules, regulations, and guideline.
22. Supports and advances organizational development efforts such as developing a high performing organization, employee engagement, workforce development, inclusion and equity, and performance measurement efforts.
23. Collaborate with local organizations, government agencies, and community leaders to assess evolving needs and create tailored strategies.
24. Performs public relations and customer relation activities in representing Public Health to the community, civic organizations, other governmental agencies, and other health professionals.
25. Provides input and assists in the evaluation of agency Programs and policies.
26. Contributes to the planning of agency goals.

27. Attends meetings, seminars, and conferences to keep abreast of changes in policies and procedures related to Program areas.

40% Assessment/Surveillance/Policy Work

28. Participate in or lead a collaborative process resulting in a comprehensive community health assessment and improvement plan.
29. Collect and share data that provide information on conditions of public health importance and on the health status of the population.
30. Analyze public health data, share findings, and use results to improve population health.
31. Use data to recommend and inform public health actions.
32. Address factors that contribute to specific populations' higher health risks and poorer health outcomes
33. Develop and implement a policy or procedure that demonstrates how health equity is incorporated as a goal into the development of programs that serve the community.
34. Assist the Director in conducting and implementing regular department-wide strategic planning.
35. Contributes to and conducts stakeholder assessments to inform prevention work, including community assessments, focus groups, and key informant interviews.
36. Uses public health data to identify health problems and disparities in the community and to guide public health planning, policy, and decision-making.
37. Provides technical assistance within the department to support the performance management system and a culture of continuous improvement.
38. Collaborate with Communications staff as a subject matter expert to develop content for health materials. This may include providing resources, giving feedback on draft content, or developing the initial content.
39. Stay informed about emerging trends, evidence-based practices, and policy changes in the prevention field.
40. Analyze and monitor community risk factors, providing regular reports based on program effectiveness and feedback to develop recommendations that enhance program outcomes and impacts.
41. Serve as a primary and expert resource for establishing and maintaining health policies and laws.
42. Collaborate in the development and implementation of the Kanabec County Community Health Communications plan to promote culturally appropriate evidence-based public health communication strategies across the department and in the community.

30% Grant Writing/Management

43. Assist the Director in applying for grants and contracts and for oversight.
44. Coordinates work with Director; identifies problems and initiates timely, sound responses.
45. Oversee the development and implementation of individual and programmatic work plans that support timely and impactful program outcomes.
46. Develop and manage program work plans, budgets, and reporting, ensuring fiscal monitoring and compliance with funding requirements.

Competencies Common to All County Positions

- Develops, maintains a thorough working knowledge of, and complies with all departmental and applicable County policies and procedures.
- Demonstrates regular and reliable attendance and punctuality.
- Demonstrates by personal example the qualities inherent in public service, excellence, and integrity expected from all staff.
- Develops respectful and cooperative working relationships with co-workers, including willing assistance to newer staff so job responsibilities can be performed with confidence as quickly as possible.
- Confers regularly with and keeps immediate supervisor informed of all important matters which pertain to the applicable job functions and responsibilities.
- Represents Kanabec County in a professional manner to the public, outside contacts, and constituencies.

The duties listed above are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment of the position.

The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.

The County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, the County will provide reasonable accommodations to qualified individuals with disabilities and encourages both prospective and current employees to discuss potential accommodations with the employer.

Position: Community Health Supervisor Department: Community Health

Supplement – Physical Effort & Working Conditions

INDICATE FREQUENCY (HOW OFTEN), WHAT THE REASON FOR THE ACTIVITY IS AND ANY LIMITATIONS ON FREQUENCY, WEIGHT, HEIGHT, ETC.

Frequency	Letter Code	Defined as
Never	N	
Seldom	S	Up to 1 hour per day
Occasionally	O	1 to 2 hours per day
Frequently	F	2 to 5 hours per day
Continuously	C	6 or more hours per day

PHYSICAL EFFORT FREQUENCY DESCRIPTION, REASON FOR, LIMITS

Stand	F	2 hours
Sit	F	4 hours
Walk	F	2 hours
Bend/Twist	O	
Push	O	
Pull	O	
Climb (stairs, ladders)	O	
Reach	F	
Lift	O	Up to 30 lbs
Carry	O	Up to 30 lbs
Grasp/Grip	F	
Repetitive Motions	F	
Kneel/Crawl	O	
Run	S	
Jump	S	
Rapid work speed	O	
Filing	O	
Finger movement	F	
Keyboard use	F	
Close vision	C	
Color vision	C	

Depth perception	C	
Far vision	C	
Hear	C	
Talk	C	
Smell	F	
Touch	S	
Other:	C	Frequent use of hands at all heights from ankle to overhead height

WORKING CONDITIONS/

EXPOSURES FREQUENCY DESCRIPTION, REASON FOR, LIMITS

Heat	O	
Cold	O	
Temperature changes	O	
Dampness	O	
Humidity	O	
Wet environment	O	
Work outdoors	O	
Noise	F	
Vibration	S	
Heights	S	
Confined spaces	O	
Moving objects	O	
Solvents	S	
Acids, corrosives	S	
Other chemicals	S	
Dust	O	
Dirt	O	
Fumes/Vapors/Mists	S	
Gases	S	
Office environment	C	
Travel	O	To meetings/trainings throughout community – weekly/several times a week, regionally – 2-4/year, state – 2-4/year
Work alone	O	

Work with co-workers	C	
Work with public	C	
Other:		

SAFETY EQUIPMENT

What safety equipment is required? Personal Protective Equipment as provided for situation (mask, gloves, other barrier protections)

Where and when must it be used? In response of a Public Health emergency

Foundational Public Health Responsibilities

NATIONAL HEADLINES, MINNESOTA ACTIVITIES

Background

Minnesota has adopted the [Public Health Accreditation Board \(PHAB\) National Framework for Foundational Public Health Services](#), which defines a minimum package of public health capabilities and programs that no jurisdiction can be without. Before the adoption of the national framework, Minnesota developed a similar foundational public health responsibilities (FPHR) framework that included a more robust set of activities to allow for the completion of a comprehensive cost and capacity assessment.

Purpose

This document aims to organize the previously developed Minnesota activities under the headlines of the national framework. This will help community health boards identify activities considered foundational and appropriate for the use of [FPHR grant funding](#) allocated to community health board during the 2023 legislative session.

This work is rapidly evolving, and this document provides only a small sample of allowable costs. Over the next several months, local public health and MDH will be working together to better define what activities are foundational for Minnesota’s state and local public health system. If you have questions about this document or FPHR, contact the MDH Center for Public Health Practice at health.ophp@state.mn.us or reach out to your public health system consultant: [Who is my public health system consultant? - MN Dept. of Health.](#)

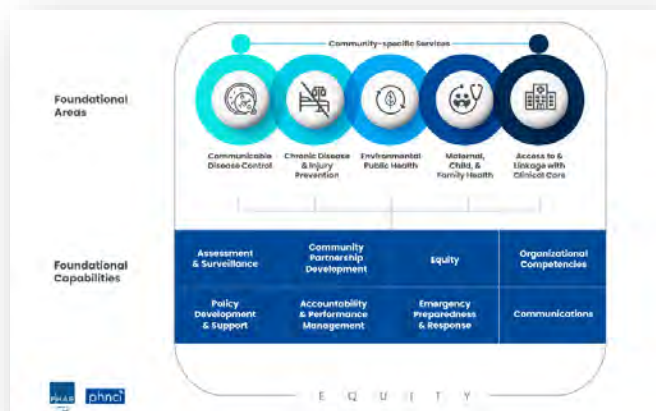
Foundational capabilities and areas in this document

Foundational capabilities

- [Assessment and Surveillance](#)
- [Community Partnership Development](#)
- [Equity](#)
- [Organizational Competencies](#)
- [Policy Development and Support](#)
- [Accountability and Performance Management](#)
- [Emergency Preparedness and Response](#)
- [Communication](#)

Foundational areas

- [Communicable Disease Control](#)
- [Environmental Public Health](#)
- [Chronic Disease and Injury Prevention](#)
- [Maternal, Child, and Family Health](#)
- [Access to and Linkage to Care](#)



Assessment and Surveillance

- A. Ability to collect timely and sufficient foundational data to guide public health planning and decision making at the state and local level, including the personnel and technology that enable collection.**
 - 1. Establish metrics and monitor public health issues and access to clinical care services
 - 2. Develop, implement, and maintain a data infrastructure
 - 3. Collect data to guide planning and decision-making
- B. Ability to collect, access, analyze, interpret, and use data from a variety of sources including granular data and data disaggregated by geography (e.g., census tract, zip code), sub-populations, race, ethnicity, and other variables that fully describe the health and well-being of a community and the factors that influence health.**
 - 1. Establish metrics and monitor data on public health issues, including root causes
 - 2. Provide or access epidemiological services
 - 3. Analyze data in collaboration with partners, communities, and individuals with lived experience
 - 4. Validate information, data, analysis, and findings
- C. Ability to assess and analyze disparities and inequities in the distribution of disease and social determinants of health, that contribute to higher health risks and poorer health outcomes.**
- D. Ability to prioritize and respond to data requests and translate data into information and reports that are valid, complete, statistically accurate, and accessible to the intended audiences.**
 - 1. Use epidemiological practices to explain the distribution of disease, death, health outcomes, health disparities and systemic inequities
 - 2. Assure the availability of data collected from the public
 - 3. Ensure data and outputs are communicated effectively
- E. Ability to conduct a collaborative community or statewide health assessment and identify health priorities arising from that assessment, including analysis of root causes of health disparities and inequities.**
 - 1. Convene public health partners to understand public health issues and the need for prevention activities, and to develop a health assessment
 - 2. Convene public health partners to develop improvement plan, assure alignment, strategize, and assess related external factors and conditions
 - 3. Establish metrics and monitor implementation of improvement plan, track responsibilities, and track implementation actions
- F. Ability to access 24/7 laboratory resources capable of providing rapid detection.**
 - 1. Provide or access laboratory services
 - 2. Ensure coordination and communication with public and private laboratories
 - 3. Assure availability of environmental, biological, and chemical laboratory testing, including for maternal and child, chronic disease, and injury issues
 - 4. (State only) Function as a Laboratory Response Network (LRN) Reference laboratory
- G. Ability to participate in or support surveillance systems to rapidly detect emerging health issues and threats.**

1. Identify and investigate emerging public health issues
 2. Provide surveillance of the population related to emerging health issues and threats
- H. Ability to work with community partners to collect, report and use public health data that is relevant to communities experiencing health inequities or ability to support community-led data processes.**
1. Validate information, data, analysis, and findings
 2. Convene cross sector partners to strategize
 3. Collaborate with other governmental, cross-sector partners, communities, and individuals

Community Partnership Development

- A. Ability to create, convene, support, and sustain strategic, non-program specific relationships with key community groups or organizations representing populations experiencing health disparities or inequities; private businesses and health care organizations; relevant federal, Tribal, state, and local government agencies; elected and non-elected officials.**
1. Dedicate resources to community partnership development and engagement, and understand how communities are organized
 2. Create and maintain organizational policies and practices that advance relationship building and authentic engagement, including ongoing communication with the community
 3. Identify strategic public health partnerships with other government sectors
- B. Ability to leverage and engage partnerships and community in equity solutions.**
1. Inform partners about Minnesota's Foundational Public Health Responsibilities
 2. Ensure community members, including those most affected by health inequities and those with lived experience, are engaged
- C. Ability to establish and maintain trust with and authentically engage community members and populations most impacted by inequities in key public health decision-making and use community-driven approaches.**
1. Participate in partnerships, as an invitee
 2. Establish a culture of introspection among members
 3. Facilitate gatherings that encourage community conversations, leverage evidence-based practices, assure efforts toward agreed upon responsibilities for partners, foster leadership opportunities, and promote information sharing
- D. Ability to convene across governmental agencies, such as departments of transportation, aging, substance abuse/mental health, education, planning and development, or others, to promote health, prevent disease, and protect community members of the health department's jurisdiction.**
- E. Ability to engage members of the community and multi-sector partners in a community health improvement process that draws from community health assessment data and establishes a plan for addressing priorities. The community health improvement plan can serve as the basis for coordination of effort and resources across partners.**
1. Coordinate policy agendas with partner organizations
 2. Support community member involvement in achieving health outcomes that are most important to them

Equity

- A. Ability to strategically address social and structural determinants of health through policy, programs, and services as a necessary pathway to achieve equity.**
 - 1. Organize support for public health statutes, regulations, rules, ordinances, and other policies
 - 2. Develop (including researching, analyzing, costing, and articulating the impact, as needed) health equity public health policy
- B. Ability to systematically integrate equity into each aspect of the FPHR, strategic priorities, and include equity-related accountability metrics into all programs and services.**
 - 1. Collaborate with partners, communities, and individuals disproportionately impacted by health inequity to co-create metrics and monitor health equity within the jurisdiction
- C. Ability to work collaboratively across the department and the community to build support for and foster a shared understanding of the critical importance of equity to achieve community health and well-being.**
 - 1. Convene cross-sector partners and public health partners to identify strategies or initiatives
 - 2. Collaborate with partners, communities, and individuals who are disproportionately affected by health inequities, to understand the impacts of public health risk/prevention and develop shared language and definitions
- D. Ability to develop and support staff to address equity.**
 - 1. Develop and maintain written training materials on health equity, and provide training to staff
 - 2. Build organizational and individual staff competency in recognizing unconscious bias
- E. Ability to create a shared understanding of what creates health including structural and systemic factors that produce and reproduce inequities.**
 - 1. Cultivate an organizational culture of health equity

Organizational Competencies

Leadership & Governance

- A. Ability to lead internal and external stakeholders to consensus, with movement to action, and to serve as the face of governmental public health in the department's jurisdiction.**
 - 1. Collaborate with partners, communities, and individuals including those disproportionately affected by public health issues, to understand the role of governmental public health
 - 2. Convene cross sector partners to understand the role of non-governmental partners
 - 3. Advocate and communicate about the value and role of public health in the community
- B. Ability to directly engage in health policy development, discussion, and adoption with local, state, and national policymakers, and to define a strategic direction for public health initiatives, including the advancement of equity.**
 - 1. Convene public health partners to identify strategies or initiatives
 - 2. Develop, implement, and maintain an agency strategic plan with metrics to monitor implementation
 - 3. Track actions taken by the agency in implementing the agency strategic plan to monitor and report on progress

4. Assess how external factors and conditions affect implementation of the agency strategic plan
- C. Ability to prioritize and implement diversity, equity, inclusion within the organization.**
- D. Ability to engage with appropriate governing entities about the department's public health legal authorities and what new laws and policies might be needed.**
1. Engage with and support the appropriate governing entity about the public health agency's role and legal authority around public health priorities and policies
 2. Promote and assist governing entities in examining, understanding, and modifying public health authorities; educate and support appropriate governing entities
 3. Develop, implement, and maintain a governance system and infrastructure for governmental public health, including organizational policies
 4. Maintain current operational definitions and statements of public health roles, responsibilities, and authorities
- E. Ability to ensure diverse representation on public health boards and councils.**

Information Technology Services, including Privacy & Security

- A. Ability to maintain and procure the hardware and software needed to access electronic health information to support the department's operations and analysis of health data.**
1. Develop, implement, and maintain systems and infrastructure for information technology and electronic information systems within the organization
 2. Implement prioritized strategies or initiatives identified to support optimization of technology, information systems, and data
- B. Ability to support, use, and maintain communication technologies and systems needed to interact with community members.**
1. Assure continuity of technical operations and connectivity to networks, in an emergency
- C. Ability to have the proper systems and controls in place to keep health and human resources data confidential and maintain security of IT systems.**
1. Develop, maintain, and share internal electronic information systems
 2. Develop, implement, and maintain written organizational policies
 3. Build organizational and individual staff competency around information systems

Workforce Development & Human Resources

- A. Ability to develop and maintain a diverse and inclusive workforce with the cross-cutting skills and competencies needed to implement the FPHS effectively and equitably.**
1. Cultivate an organizational culture of employee wellness
 2. Develop, implement, and maintain infrastructure and a written plan for workforce development
- B. Ability to manage human resource functions including recruitment, retention, and succession planning; training; and performance review and accountability.**
1. Develop, implement, and maintain systems and infrastructure for human resource management, recruitment, and employee retention
 2. Develop and maintain written training materials on pertinent topics, and provide staff training
 3. Develop, implement, and maintain a written succession plan(s) for the organization

Financial Management, Contract, & Procurement Services, including Facilities and Operations

- A. Ability to establish a budgeting, auditing, billing, and financial system and chart of expense and revenue accounts in compliance with federal, state, and local standards and policies.**
 - 1. Develop, implement, and maintain systems and infrastructure for financial management, oversight, and internal auditing of financial operations
 - 2. Develop, implement, and maintain systems for contracts and procurement
- B. Ability to secure grants or other funding (governmental and not) and demonstrate compliance with an audit required for the sources of funding utilized.**
 - 1. Advocate for, procure, maintain, and manage financial resources for organizational operations
 - 2. Procure, maintain, and manage necessary goods, services, and intangible assets
- C. Ability to procure, maintain, and manage safe facilities and efficient operations.**
 - 1. Maintain and, as necessary, replace long-term or capital assets for organizational operations
 - 2. Manage and operate facilities as safe and physically secure public-facing workplaces
- D. Ability to leverage funding and ensure resources are allocated to address equity and social determinants of health.**

Legal Services & Analysis

- A. Ability to access and appropriately use legal services in planning, implementing, and enforcing, public health initiatives, including relevant administrative rules and due process.**
 - 1. Build organizational and individual staff competency in understanding and interpreting statutes, regulations, rules, ordinances
 - 2. Develop, implement, and maintain systems and infrastructure for legal services and analysis

Policy Development and Support

- A. Ability to serve as a primary and expert resource for establishing, maintaining, and developing basic public health policy recommendations that are evidence-based and grounded in law. This includes researching, analyzing, costing out, and articulating the impact of such policies and rules where appropriate, as well as the ability to organize support for these policies and rules and place them before an entity with the legal authority to adopt them.**
 - 1. Analyze public health laws, policies, and ordinances in collaboration with partners
 - 2. Assess the need for new public health laws, policies, and ordinances in the community
 - 3. Organize support for public health policies and rules statutes, regulations, rules, ordinances, and other policies related to the population's health
 - 4. Engage with appropriate governing entities about the purpose, intent, and outcomes of public health laws, policies, and ordinances
 - 5. Develop and maintain written organizational policies to support staff in rapidly responding to emerging issues
 - 6. Monitor the impact of changing state and federal laws on public health

7. Effectively inform and influence policies, statutes, ordinances, rules, and regulations related to the quality, effectiveness, and cost-efficiency of clinical care services
- I. Ability to effectively inform and influence policies being considered by other governmental and non-governmental agencies that can improve the physical, environmental, social, and economic conditions affecting health but are beyond the immediate scope or authority of the governmental public health department.**
 1. Convene cross-sector partners to identify strategies or initiatives for non-governmental partners to implement Health in All Policies
 2. Effectively inform and influence policies being considered by other governmental and non-governmental organizations within the jurisdiction that might impact Health in All Policies
 - J. Ability to effectively advocate for policies that address social determinants of health, health disparities and equity.**
 1. Collaborate with partners, communities, and individuals, including those disproportionately affected by outdated laws, policies, and ordinances, to understand and update outdated laws and policies
 2. Collaborate with key partners and policy makers, including those disproportionately affected by health inequities, to enact new evidence-based, legally defensible policies
 3. Organize support for public health statutes, regulations, rules, ordinances, and other policies, including advocacy for fair reimbursement for clinical care services
 - K. Ability to issue, promote compliance with or, as mandated, enforce compliance with public health regulations.**
 1. Develop, implement, and maintain written organizational policies supported by statutes, regulations, rules, ordinances, and other policies
 2. Educate the community and key partners on the meaning, purpose, and benefits of public health laws
 3. Assure the consistent application of public health laws, policies, and ordinances
 4. Develop and maintain written training materials on public health laws, policies, and ordinances
 5. Conduct public health enforcement activities, including enforcing laws, rules, policies, and procedures related to prevention and control of infectious diseases
 6. Monitor and report public health violations and enforcement responses
 7. Provide education and technical assistance to regulated entities to support their compliance with statutes, regulations, rules, ordinances, and other policies
 8. Engage with the appropriate governing entity about the public health agency's role and legal authority around environmental health policy

Accountability and Performance Management

- A. Ability to perform according to accepted business standards in accordance with applicable federal, state, and local laws and policies and assure compliance with national and Public Health Accreditation Board Standards.**
- B. Ability to maintain a performance management system to monitor achievement of organizational objectives.**
 1. Develop, implement, and maintain systems and infrastructure for organizational performance management

- C. Ability to identify and use evidence-based or promising practices when implementing new or revised processes, programs and/or interventions.**
 - 1. Build organizational and staff competency in evaluation
- D. Ability to maintain an organization-wide culture of quality and to use quality improvement tools and methods.**
 - 1. Establish metrics and monitor quality of the governmental public health system
 - 2. Develop, implement, and maintain a written plan for organizational quality improvement, cultivating an organizational culture of quality improvement
- E. Ability to create accountability structures and internal and external equity-related metrics to measure the equity impact of a department's efforts and performance.**
 - 1. Establish a system for tracking efforts toward agreed upon responsibilities, and monitor actions taken by governmental public health, and partners
 - 2. Develop, implement, and maintain a system for collecting feedback from the community

Emergency Preparedness and Response

- A. Ability to develop, exercise, and maintain preparedness and response strategies and plans, in accordance with established guidelines, and to address a range of events including natural or other disasters, communicable disease outbreaks, environmental emergencies, or other events, which may be acute or occur over time.**
 - 1. Develop, implement, and maintain written policies and procedures (e.g., ESF-8) to activate and alert public health personnel and response partners during an emergency
 - 2. Develop, maintain, and update emergency preparedness and response plans based on identified risk preparedness and response competencies in collaboration with appropriate stakeholders
 - 3. Establish the response and recovery role of public health in other partners' plans for all types of disasters and emergencies
 - 4. Effectively inform staff and appropriate stakeholders on the capabilities and role of public health in the emergency preparedness and response plan
 - 5. Provide staff training on the preparedness and response plan with appropriate frequency
 - 6. Collaborate with community-based organizations and partners to provide training exercises
- B. Ability to integrate social determinants of health, and actions to address inequities, including ensuring the protection of high-risk populations, into all plans, programs, and services.**
 - 1. Build and maintain relationships with the public and partners to establish trust with governmental public health
 - 2. Convene cross-sector partners to identify strategies or initiatives for community-based organizations and governmental partners
- C. Ability to lead the Emergency Support Function 8 – Public Health & Medical for the county, region, jurisdiction, and state.**
 - 1. Ensure staff are adequately trained on emergency preparedness and response competencies, including interoperability within the National Incident Management System (NIMS) and Incident Command System (ICS) frameworks
 - 2. Assure leadership of governmental emergency health and medical operations
 - 3. Assess the scope and responsibility for public health response

- D. Ability to activate the emergency response personnel and communications systems in the event of a public health crisis; coordinate with federal, state, and local emergency managers and other first responders, and private sector and nonprofit partners; and operate within, and as necessary lead, the incident management system.**
1. Activate and alert public health response personnel and communication systems
 2. Operate within the established incident command system according to the role of public health
 3. Convene public health partners to identify strategies or initiatives for governmental public health response to incidents, and to assess the need for community incident response efforts
- E. Ability to maintain and execute a continuity of operations plan that includes a plan to access financial resources to execute an emergency and recovery response.**
1. Identify priority or essential public health functions and the people, resources, and facilities needed to provide these services during an emergency
 2. Engage with staff with roles or responsibilities in priority or essential public health functions
- F. Ability to establish and promote basic, ongoing community readiness, resilience, and preparedness by enabling the public to take necessary action before, during, or after a disaster, emergency, or public health event.**
1. Convene public health partners to identify strategies or initiatives
 2. Assess the need for incident recovery efforts in the community
 3. Implement prioritized strategies or initiatives to support recovery from incidents
 4. Evaluate the response of the governmental public health system and the health department to incidents, including through after-action reports (AARs)
- G. Ability to issue and enforce emergency health orders.**
1. Assess the legal and statutory process for issuing and enforcing state and local emergency health orders
 2. Issue and enforce emergency health orders, as necessary and appropriate, inclusive of prevention or control of infectious diseases and environmental health risks
- H. Ability to be notified of and respond to events on a 24/7 basis.**
1. Develop, implement, and maintain a situation and information sharing infrastructure that may receive notice of emergencies on a 24/7 basis
 2. Effectively inform community-based organizations, partners, governmental organizations, the media, and the public with unified, accurate, and geographically relevant information before, during, and after a public health emergency
- I. Ability to access and utilize a Laboratory Response Network (LRN) Reference laboratory for biological agents and an LRN chemical laboratory at a level designated by CDC.**

Communication

- A. Ability to maintain ongoing relations with local and statewide media including the ability to write a press release, conduct a press conference, and use electronic communication tools to interact with the media.**
1. Build and maintain relationships with broadcast and other media organizations
 2. Identify and critically evaluate media organizations
 3. Develop, implement, and maintain written organizational policies and templates

4. Ensure information and messages of public health importance are conveyed to the media
- B. Ability to effectively use social media to communicate directly with community members.**
- C. Ability to appropriately tailor communications and communications mechanisms for various audiences.**
1. Develop, implement, and maintain systems for communications with public health and cross-sector partners
 2. Ensure information and messages of public health importance are conveyed to the public
- D. Ability to write and implement a routine communications plan and develop routine public health communications including to reach communities not traditionally reached through public health channels.**
1. Develop, implement, and maintain a written routine communication plan
 2. Develop, implement, and maintain systems for communications with public health and cross-sector partners
 3. Collaborate with partners, communities, and individuals to co-create communications strategies
 4. Establish metrics and monitor quality of public health communications
- E. Ability to develop and implement a risk communication strategy for communicating with the public during a public health crisis or emergency. This includes the ability to provide accurate and timely information and to address misconceptions and misinformation, and to assure information is accessible to and appropriate for all audiences.**
1. Develop, implement, and maintain a written public health risk communication plan
 2. Assess the need for and priority of communications mediums and channels for public-facing risk communication for the community
 3. Collaborate with partners, communities, and individuals to co-create strategies for risk communication
 4. In the event of a public health crisis or event, lead and coordinate communication between public health, health organizations, national organizations and federal agencies, and state agencies
- F. Ability to transmit and receive routine communications to and from the public in an appropriate, timely, and accurate manner, on a 24/7 basis.**
1. Develop, implement, and maintain systems and infrastructure for public-facing communications
- G. Ability to develop and implement a proactive health education/health communication strategy (distinct from risk communication) that disseminates timely and accurate information to the public designed to encourage actions to promote health in culturally and linguistically appropriate formats for the various communities served, including using electronic communication tools.**
1. Assess the need for and priority of communications mediums and channels for public-facing communications for the community

Communicable Disease Control

A. Provide timely, statewide, and locally relevant and accurate information to the health care system and community on communicable diseases and their control.

1. Develop, maintain, and share internal electronic information systems and access external information systems for reporting and surveillance
2. Establish metrics and monitor quality of infectious disease prevention and control activities
3. Collect data per MN Admin Rules, and analyze data related to infectious diseases and control
4. Validate all information, data, analysis, and findings
5. Ensure that health care providers, pharmacists, school officials and the public are educated about the statewide immunization information system
6. Ensure that health care providers, pharmacists, long-term care facility staff, infection control specialists, school officials, the public and others are educated about vaccine-preventable diseases and immunizations

B. Identify statewide and local communicable disease control community partners and their capacities, develop, and implement a prioritized communicable disease control plan, and ability to seek and secure funding for high priority initiatives.

1. Collaborate with and educate partners, communities, and individuals, including those disproportionately affected by infectious diseases, to understand the prevention and control of infectious disease from the perspective of lived experience
2. Assess the need for and the factors and conditions that affect infectious disease prevention and control
3. Convene public health partners to identify strategies or initiatives for governmental public health to address infectious diseases in the jurisdiction
4. Convene cross-sector partners and public health partners to identify strategies or initiatives
5. Collaborate with partners, communities, and individuals to co-create strategies for prevention and control of infectious diseases
6. Develop, implement, and maintain written plans, systems, and infrastructure
7. Develop and maintain written training materials, provide training to relevant staff
8. Establish a system for tracking efforts toward agreed upon responsibilities for governmental public health, and partners, track these efforts
9. Implement prioritized strategies or initiatives
10. Assess how external factors and conditions affect implementation of infectious disease prevention and control plans
11. Build and maintain relationships with appropriate audiences

C. Receive laboratory reports and other relevant data; conduct disease investigations, including contact tracing and notification; and recognize, identify, and respond to communicable disease outbreaks for notifiable conditions in accordance with local, national, and state mandates and guidelines.

D. Assure the availability of partner notification services for newly diagnosed cases of communicable diseases according to Centers for Disease Control and Prevention (CDC) guidelines.

E. Assure the appropriate treatment of individuals who have reportable communicable diseases, such as TB, STIs, and HIV in accordance with local and state laws and CDC guidelines.

1. Assure provision of referrals

2. Assure access to treatment

F. Support the recognition of outbreaks and other events of public health significance by assuring capacity for the identification and characterization of the causative agents of disease and their origin, including those that are rare and unusual.

1. Assure provision of screening for individuals to detect infectious diseases
2. Monitor and report public health violations and enforcement responses
3. Conduct timely investigations for reportable infectious diseases
4. Identify and respond to emerging issues
5. Report presumed and diagnosed cases of reportable infectious diseases

G. Coordinate and integrate categorically funded communicable disease programs and services.

1. Develop, maintain, and share an immunization information system
2. Assure the safe and effective administration of necessary vaccinations for the public

Environmental Public Health

A. Provide timely, statewide, and locally relevant, complete, and accurate information to the state, health care system, and community on environmental public health threats and health impacts from common environmental or toxic exposures.

1. Collect, analyze, and interpret data and information related to environmental health
2. Validate information, data, analysis, and findings
3. Provide education and technical assistance to organizations

B. Identify statewide and local community environmental public health partners and their capacities, develop, and implement a prioritized plan, and ability to seek and secure action funding for high priority initiatives.

1. Collaborate with and educate partners, communities, and individuals
2. Assess the need for prevention or abatement activities
3. Convene cross-sector and public health partners to identify strategies or initiatives
4. Collaborate with partners, communities, and individuals to co-create strategies
5. Develop, implement, and maintain a written plan
6. Build and maintain relationships with appropriate audiences
7. Collaborate with partners, communities, and individuals to collect complaints and reports

C. Conduct mandated environmental public health laboratory testing, inspections, and oversight to protect food, recreation sites, and drinking water; manage liquid and solid waste streams safely; and identify other public health hazards related to environmental factors in accordance with federal, state, and local laws and regulations.

1. Develop, implement, and maintain systems and infrastructure
2. Develop and maintain written training materials, provide training to appropriate staff
3. Establish a system for tracking efforts toward agreed upon responsibilities, track these efforts
4. Implement prioritized strategies or initiatives, and assess how external factors and conditions affect implementation
5. Assure availability of environmental, biological, and chemical laboratory testing
6. Monitor and report public health violations and enforcement responses
7. Conduct timely investigations in response to environmental health risks

8. Identify and respond to emerging issues
 9. License, certify, or permit regulated parties or entities within the jurisdiction
 10. Inspect regulated parties or entities within the jurisdiction
 11. Investigate and document environmental health complaints
 12. Issue, enforce, and document corrective actions with respect to code violations
 13. Perform and document follow-up activities for remediation
- D. Protect workers and the public from chemical and radiation hazards in accordance with federal, state, and local laws and regulations.**
- E. Participate in broad land use planning and sustainable development to encourage decisions that promote positive public health outcomes and resilient communities (e.g., housing and urban development, recreational facilities, transportation systems and climate change).**
- F. Coordinate and integrate categorically funded environmental health programs and services.**

Chronic Disease & Injury Prevention

- A. Provide timely, statewide, and locally relevant, complete, and accurate information to the health care system and community on chronic disease and injury prevention and control.**
1. Develop, maintain, and share internal electronic information systems and access external information systems for prevention and population health—including systems for chronic disease, and injury
 2. Provide surveillance of the population with respect to chronic disease and injury prevention
 3. Establish metrics and monitor quality of prevention and population health improvement activities
 4. Collect and analyze data related to chronic disease and injury prevention
 5. Validate all information, data, analysis, and findings
 6. Provide education and technical assistance to organizations involved in preventing harm and improving health
- B. Identify statewide and local chronic disease and injury prevention community partners and their capacities, develop, and implement a prioritized prevention plan, and ability to seek and secure funding for high priority initiatives.**
1. Collaborate with and educate partners, communities, and individuals on chronic disease and injury prevention, and the factors that impact health
 2. Assess the need for, and the factors and conditions that affect, prevention and control of chronic disease and injury
 3. Convene cross-sector and public health partners to identify strategies or initiatives for non-governmental partners to implement to address chronic disease, and injury issues
 4. Collaborate with partners, communities, and individuals to co-create strategies for addressing gaps in availability and barriers to accessing chronic disease and injury services
 5. Develop, implement, and maintain written plan(s) for addressing threats to population health, including prevention and control of chronic disease and injury
 6. Assess how external factors and conditions affect implementation of prevention and population health improvement plans
 7. Build and maintain relationships with appropriate audiences

- C. Reduce statewide and community rates of tobacco use through a program that conforms to standards set by state or local laws and CDC’s Office on Smoking and Health, including activities to reduce youth initiation, increase cessation, and reduce secondhand exposure to harmful substances.**
- D. Work actively with statewide and community partners to increase statewide and community rates of healthy eating and active living through a prioritized approach focusing on best and promising practices aligned with national, state, and local guidelines for healthy eating and active living.**
 - 1. Develop, implement, and maintain systems and infrastructure
 - 2. Develop and maintain written training materials, provide training to appropriate staff
 - 3. Establish a system for tracking efforts toward agreed upon responsibilities for governmental public health, and partners, track these efforts
 - 4. Implement prioritized strategies or initiatives identified to address chronic disease and injury
- E. Coordinate and integrate categorically funded communicable disease programs and services.**

Maternal, Child, & Family Health

- A. Provide timely, statewide, and locally relevant, complete, and accurate information to the health care system and community on emerging and on-going maternal child health trends.**
 - 1. Develop, maintain, and share internal electronic information systems and access external information systems for prevention and population health—including systems for maternal and child health
 - 2. Provide surveillance of the population with respect to maternal and child health
 - 3. Establish metrics and monitor quality of prevention and population health improvement activities
 - 4. Collect and analyze data related to maternal and child health
 - 5. Validate all information, data, analysis, and findings
 - 6. Provide education and technical assistance to organizations involved in preventing harm and improving health
- B. Identify local maternal and child health community partners and their capacities; using life course expertise and an understanding of health disparities, develop a prioritized prevention plan; and ability to seek and secure funding for high priority initiatives.**
 - 1. Collaborate with and educate partners, communities, and individuals on maternal and child health and the factors that impact health
 - 2. Assess the need for, and the factors and conditions that affect, maternal and child health services
 - 3. Convene cross-sector and public health partners to identify strategies or initiatives for non-governmental partners to implement to address maternal and child issues
 - 4. Collaborate with partners, communities, and individuals to co-create strategies for addressing gaps in availability and barriers to accessing maternal and child services
 - 5. Develop, implement, and maintain written plan(s) for addressing threats to population health, including maternal and child health
 - 6. Assess how external factors and conditions affect implementation of prevention and population health improvement plans

7. Build and maintain relationships with appropriate audiences
- C. Identify, disseminate, and promote emerging and evidence-based early interventions in the prenatal and early childhood period that promote lifelong health and positive social-emotional development.**
1. Develop, implement, and maintain systems and infrastructure
 2. Develop and maintain written training material, provide training to appropriate staff
 3. Establish a system for tracking efforts toward agreed upon responsibilities for governmental public health, and partners, track these efforts
 4. Implement prioritized strategies or initiatives identified to address maternal and child health
- D. Assure newborn screening as mandated by a state or local governing body including wraparound services, reporting back, following up, and service engagement activities.**
1. Effectively inform and influence state policy related to the newborn screenings to be included in the state newborn screening, based on what governmental public health considers appropriate and scientifically necessary
 2. Establish and maintain systems for follow-up, reporting, and connection to clinical care and early intervention services for infants diagnosed with a newborn screening disorder
 3. Assess the availability, capacity, and distribution (or gaps therein) of clinical care services for newborn screening disorders and to children with newborn screening disorders in the population and specifically within the jurisdiction, including any barriers to accessing the services
 4. Ensure infants receive newborn screening as soon as possible after birth to identify cases of newborn screening disorders
 5. Identify infants with abnormal screening results
 6. Ensure infants with abnormal screening results have access to prompt diagnostic assessments
 7. Ensure a seamless and complete referral from state health department to local health department for follow-up, including an update back from the local health department to the state health department of any follow-up referrals made
 8. Ensure the families of infants diagnosed with a newborn screening disorder receive prompt follow-up that includes supplemental education and connection to other social and clinical services (e.g., home visit, audiologist appointment, etc.), as needed
 9. Monitor the effectiveness of the newborn screening program
- E. Coordinate and integrate categorically funded maternal, child and family health programs and services.**

Access to & Linkage to Care

- A. Provide timely, statewide, and locally relevant, complete, and accurate information to the health care system and community on access and linkage to clinical care (including behavioral health), healthcare system access, quality, and cost.**
1. Develop, maintain, and share internal electronic information systems and access external information systems
 2. Educate the partners, communities, and individuals on barriers in accessing clinical care in a timely and transparent manner
 3. Provide education and technical assistance to healthcare and clinical care providers
 4. Assess the impact of external factors and conditions that affect clinical care cost

5. Assess the quality and effectiveness of clinical care services to the population to guide public health planning and decision-making
6. Assess the impact of external factors and conditions that affect clinical care quality and effectiveness
7. Establish metrics and monitor clinical care quality, effectiveness, and outcomes

B. Inspect and license healthcare facilities, and license, monitor, and discipline healthcare providers, where applicable.

1. Monitor clinical care facilities and providers based on the laws and rules contained in Minnesota statutes and federal laws
2. Review clinical care providers' qualifications and issue credentials including licenses
3. Conduct physical plant plan reviews and onsite construction inspections
4. Conduct on-site health care surveys
5. Conduct billing audits for nursing homes
6. Investigate complaints
7. As necessary, take enforcement actions

C. In concert with national and statewide groups and local providers of healthcare, identify healthcare partners and competencies, develop prioritized plans for increasing access to health homes and quality health care, and seek funding for high priority policy initiatives.

1. Monitor barriers in accessing clinical care for the population and within the jurisdiction
2. Collaborate with partners, communities, and individuals
3. Assess the need for, and the factors and conditions that affect, improved access to clinical care services in the community
4. Convene cross-sector and public health partners to identify strategies or initiatives for non-governmental and governmental partners
5. Collaborate with partners, communities, and individuals to co-create strategies for improving access to clinical care services
6. Develop, implement, and maintain a written plan
7. Build and maintain relationships with appropriate audiences
8. Convene cross-sector partners to identify strategies or initiatives for clinical care providers
9. Collaborate with partners, communities, and individuals to understand the quality and effectiveness of clinical care services
10. Collaborate with public health partners to understand the community context related to facilities being inspected/licensed
11. Convene public health partners, communities, and individuals, to improve a clinical care facility or providers quality of service

Minnesota Department of Health
 Center for Public Health Practice
 625 Robert Street North
 PO Box 64975
 St. Paul, MN 55164-0975
health.php@state.mn.us
www.health.state.mn.us

12/27/23

9:55am Appointment

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Veterans Services Office Update	b. Origination: Board of Commissioners
c. Estimated time: 10-15 minutes	d. Presenter(s): Erica Bliss, VSO

e. Board action requested:

Information only.

f. Background:

Supporting Documents: None Attached:

Date received in County Coordinators Office:

Coordinators Comments:

KANABEC COUNTY Veteran Population: FY23 FDX

Currently unavailable

CVSO Enhancement Grant Funding (\$10,000 dependent on veteran population within County)

CVSO Enhancement grant ends June 30, 2024. Erica will close-out upon return from National Association of County Veteran Service Officer Conference.

Office Contacts: January 2024-April 2024

782 Phone, Email, Mail, In-Person

We average at least 1 contact per hour. Some contacts last a few minutes, some a few hours over the course of a few days-weeks.

Wellness Grant (Began January 2024) Two year grant cycle

7 participants Yoga

7 participants QiGong

A number of participants find the sessions beneficial and have continued with self-pay

Kanabec County Veteran Emergency Fund

\$753.91 FY2024 Energy Assistance

Outreach

Next Event: Veterans Day at Fair

Monthly Coffee Talk

Transportation

In February 2019 we received a Ford Focus from the VA Healthcare system. The vehicle was purchased by the DAV transportation program and donated to the VA for use. We have a handful of volunteers who provide transportation to VA medical appointments.

MACVSO (MN Association of County Veteran Service Officers)

Erica was appointed the MACVSO secretary in September 2022.

Kanabec County Veterans Memorial

CVSO previously reported her opinion on move to Memorial site

Future GOALS (2023-24):

Veteran & Family support group

Veteran Whole Health workshops

Challenges

VA



REVENUES & EXPENDITURES BUDGET REPORT

Page Break Option: 2 1 - Page Break by FUND
 2 - Page Break by DEPT
 3 - Page Break by PROGRAM

Specific G/L Months: From: 01/2024 Thru: 04/2024

Revenue Sort Option: 1 1 - List as appears in G/L Chart of Accounts

Expend Sort Option: 1 2 - List by OBJECT within FUND
 3 - List by OBJECT within DEPT
 4 - List by OBJECT within PROGRAM

Revenue Range Subtotal: 1 1 - None

Expend Range Subtotal: 1 2 - Detail and Subtotals by OBJECT Range
 3 - Subtotals only by OBJECT Range
 4 - DEPT Totals and Subtotals by DEPT Range
 5 - Subtotals only by DEPT Range

Report Basis: Modified Accrual

Subtotal for Services N

Subtotal for Programs N

Subtotal For Objects: N

FUND Range From 1 Thru 1

DEPT Range From 120 Thru 120

Budget for Report 2024 County Budget

Include on Report 1 1 - All G/L Accounts
 2 - Only G/L Accounts with Budget Amounts
 3 - Only G/L Accounts without Budget Amounts

Print on Report 1 1 - Monthly Tot. "thru" G/L Month
 2 - Variance Amt. (Budget - Ytd Amt.)
 3 - Current/Prior Yr. Budget, % Change
 4 - Current/Prior Yr. Budget, \$ Change

Include Zero DollarsN

Save Options: N

Comment:



REVENUES & EXPENDITURES BUDGET REPORT

Report Basis: Modified Accrual

From: 01/2024 Thru: 04/2024

Percent of Year: 33%

01 Fund
General Revenue Fund
120 Dept
Veterans' Services

<u>Account Numbe</u>	<u>Description</u>	<u>Status</u>	<u>04/2024 Amount</u>	<u>Selected Months</u>	<u>2024 Budget</u>	<u>% Of Budget</u>
--- Revenues ---						
01-120-000-0000-5751	Donations		.00	50.00 -	0.00	0
--- Expenditures ---						
01-120-000-0000-6103	Salaries - Regular		8,561.61	29,404.87	113,634.00	26
01-120-000-0000-6113	Flex Pay		83.54	334.16	0.00	0
01-120-000-0000-6130	VEBA - County Share		212.00	848.00	0.00	0
01-120-000-0000-6153	Health Insurance - County Share		1,417.78	5,671.12	20,690.00	27
01-120-000-0000-6163	Pera - County Share		642.12	2,247.42	8,523.00	26
01-120-000-0000-6175	Fica - County Share		629.90	2,511.63	8,693.00	29
01-120-000-0000-6204	Cellular Phones		51.24	153.72	800.00	19
01-120-000-0000-6205	Postage		.00	161.12	400.00	40
01-120-000-0000-6211	Services & Charges		.00	0.00	1,000.00	0
01-120-000-0000-6411	Supplies		2,156.08	2,156.08	0.00	0
01-120-000-8240-6411	Supplies - Designated Donations		.00	32.06	0.00	0
--- Revenues ---						
01-120-000-8501-5340	VA Grant-Operational Enhancement		.00	0.00	10,000.00 -	0
--- Expenditures ---						
01-120-000-8501-6211	Services & Charges		.00	1,396.46	2,200.00	63
01-120-000-8501-6289	Grant Staff Development		.00	846.90	3,000.00	28
01-120-000-8501-6405	Grant Computers & Hardware		964.87	1,044.89	3,800.00	27
01-120-000-8501-6411	Grant Supplies		61.58	392.14	1,000.00	39
--- Revenues ---						
01-120-000-8502-5751	Donations - Local EM VA Program		.00	550.00 -	3,000.00 -	18
--- Expenditures ---						
01-120-000-8502-6880	Local EM VA Grant Expenditures		499.04	753.91	2,000.00	38
--- Revenues ---						
01-120-000-8505-5301	MDVA CVSO State Grant 2023		.00	0.00	10,000.00 -	0
--- Expenditures ---						
01-120-000-8505-6211	CVSO Grant Services & Charges		.00	0.00	10,000.00	0
01-120-000-8507-6240	Advertising - Veterans Wellness Grant		155.93	623.36	0.00	0
01-120-000-8507-6289	Staff Development - Veterans Wellness		250.00	1,110.00	0.00	0
01-120-000-8507-6411	Supplies - Veterans Wellness Grant		409.62 -	409.62	0.00	0
120 Dept	TOTALS Veterans' Services	Revenue	.00	600.00 -	23,000.00 -	3
		Expend.	15,276.07	50,097.46	175,740.00	29
		Net	15,276.07	49,497.46	152,740.00	32

**** Kanabec County ****



REVENUES & EXPENDITURES BUDGET REPORT

Report Basis: Modified Accrual

From: 01/2024 Thru: 04/2024

Percent of Year: 33%

01 Fund
General Revenue Fund
120 Dept
Veterans' Services

<u>Account Numbe</u>	<u>Description</u>	<u>Status</u>	<u>04/2024 Amount</u>	<u>Selected Months</u>	<u>2024 Budget</u>	<u>% Of Budget</u>
01 Fund	TOTALS General Revenue Fund	Revenue	.00	600.00 -	23,000.00 -	3
		Expend.	15,276.07	50,097.46	175,740.00	29
		Net	15,276.07	49,497.46	152,740.00	32
FINAL TOTALS:	24 Accounts	Revenue	.00	600.00 -	23,000.00 -	3
		Expend.	15,276.07	50,097.46	175,740.00	29
		Net	15,276.07	49,497.46	152,740.00	32

10:05am Appointment

May 7, 2023

REQUEST FOR BOARD ACTION

a. Subject: Appropriation Request and General Update	b. Origination: Kanabec History Center
c. Estimated time: 15-20 minutes	d. Presenter(s): Barb Barnes, Executive Director

e. Board action requested:

Information only at this time. The request is for consideration during the budgeting process for 2025.

f. Background:

Supporting Documents: None: Attached:

Date received in County Coordinators Office:

Coordinators Comments:



Kanabec County
Board of Commissioners
18 North Vine St. Mora, MN

May 7, 2024

Re: Appropriation of funds for Kanabec County Historical Society

Dear Kanabec County Commissioners,

The Kanabec County Historical Society would like to thank you for your past financial support of \$5,000 annually. Your support enables us to continue to preserve our Kanabec County's history today, and for future generations.

As a 501(c)3 non-profit, we rely heavily on local funding/appropriations, donations, fundraisers, and volunteers. We are not affiliated with a government agency, and do not receive State or Federal funding. We serve our Public, Schools, Day Cares, Visitors, and Residents by providing historical records, birth and death records; providing research materials through old newspapers, maps, government records, cemetery records, family information, photos, and exhibits; we preserve artifacts, and accessions; and are working on the restoration of some of the local historic buildings from Kanabec County. We provide information ranging from the History of Myron Kent (Mora's founder) to the ownership of many of our businesses throughout the years, to our area's first industry – logging, to our first inhabitants - the Native Americans, etc.

In recent years, we have made severe cuts just to keep our doors open. Our monthly expenditures have been reduced to \$3,500 per month. We continue to employ one part-time Director (\$17K yr.) and have two volunteers in three days per week. Payroll is any businesses largest expense - it is difficult to hire adequate staff without the funds. Our Budgeted Expenses for this year were \$53,100; our Budgeted Income for this year was \$60,430.

The 2022 Tax Levy failed by 124 votes... but it did send a strong message from our residents that we are an important part of the community. The Board has decided at the cost of \$10,000 or more in preparation costs for another election, we will not be pursuing a levy during the 2024 elections. We felt the public is not doing well with the tax increases by the City, Schools, and County at this time.

The upkeep on our main Museum, and the outdoor exhibits is very costly to maintain. The historic Coin school is in dire need of repairs...the beams under the building have broken, and the floors are caving in. We have been working with the Mn Historical Society and the State Historic Preservation Office to get the Coin School on the National Registry of Historic Places list. Once we obtain the recommendation to nominate the School for the Registry, it will enable us to apply for grant funding to advance to the rehabilitation. Through very generous private donations, we hope to now take those steps. The project will take approximately 2-3 years. While Grant funding and the rehabilitation project are fantastic opportunities, we still need to have operating funds by means of appropriations, donations, and contributions in order to sustain our budget over that time period.

Throughout the year, our guest sign-in shows that 80% of our guests are from out of this area. This tells us we are a destination/tourist point in the area. This in turn helps our other local businesses such as gas stations, grocery stores, restaurants, etc. KHC is a part of the draw and tourism for this area. We have trails on our property and see many persons using the bike and walking trails daily. Since the storm last August, we are expanding on new trails through the damaged wooded areas. KHC is providing recreational opportunities to our county's residents, and tourism to our local businesses via our visiting guests. (We are often asked if there are additional places to see or visit while here, where should they go to eat, where is the nearest gas station, which route they should take as they travel, etc.)

We are currently working on an event during the period of the Voyagers and Native Americans. The Schools from Mora, Ogilvie, Pine City, and Braham will be invited to tour and learn about this period in our County. We also continue to hold Old Tyme Country School each year, and the attendance numbers continue to grow. We are an important part of history/education programs also. When you look at the larger picture, the History Center is more than just a museum...it is an economic asset to the economy in Kanabec County.

From time to time, we host and welcome our local Townships within the County. Most of the time they need our help to research old records, plat drawings/older maps, etc. We also act as a storage facility for some of our Townships' by storing their records. We have a Volunteer Researcher who aids in helping them out vs. coming to the Recorder's Office to learn a much more complex search system.

In 2023, we received an appropriation from Kanabec County in the amount of \$5,000. With rising costs, we are hoping you will consider raising your contribution this year. With these funds, we would be able to continue and better preserve our history and better serve the residents of Kanabec County. Your appropriation would help us to meet the higher operating costs, higher inflation costs, and promote a better understanding of who we are and where we came from to our current and future generations.

We thank you again for your time and consideration and appreciate your help.

Barb Barnes
Executive Director
Kanabec County Historical Society



**Annual Budget Report - Approved
Fiscal Year 2023-2024
Prepared September 31, 2023**

		Approved 2022-2023	Actual 2022-2023	Proposed 2023-2024	
<u>Income:</u>					
Bank Interest		<u>\$5.00</u>	\$30.00	\$30.00	
Gift Shop		<u>\$1,000</u>	\$1,098.00	\$1,100.00	
Museum Admissions		<u>\$250.00</u>	\$634.00	\$400.00	
Appropriations/Contracts		\$14,475.00	\$14,700.00	\$14,700.00	
	Townships	\$9,475.00	\$9,475.00		
	Cities	\$0.00			
	County	\$5,000.00			
Memberships		<u>\$5,000.00</u>	\$5,460.00	\$5,500.00	
Facility Rental		<u>\$3,400.00</u>	\$4,627.00	\$4,000.00	Raise \$10
Donations		<u>\$23,000.00</u>	\$36,597.00	\$25,000.00	
	McVay	\$15,000.00			
	Grants/Other				
Office & Research		<u>\$80.00</u>	\$208.00	\$300.00	

Event Income		<u>\$12,400.00</u>	\$9,989.00	\$9,400.00	
	OTCSchool	\$3,400.00	\$2,409.00	\$2,500.00	Raise
	Bake Sale		\$1,800.00	\$1,800.00	\$10
	Rock A Thon	\$3,000.00	\$3,780.00	\$3,500.00	
	GiveMN		\$2,000.00	\$1,600.00	
Misc.	MCIT Ins Claim		\$5,648.57	\$0.00	
	Total Revenue	\$59,610.00	\$78,991.00	\$60,430.00	

Expenses

Utilities				<u>\$5,300.00</u>	\$6,000.00	\$6,500.00
Audit/990/Bookkeeping				<u>\$1,000.00</u>	\$750.00	\$1,000.00
	Year End, Quarterly's, Misc.			-		
Buildings/Grounds/Ins	Ground/Ins			<u>\$6,000.00</u>	\$555.00	\$4,000.00
	Trees, School Vents			-		
Insurance MCIT				<u>\$5,000.00</u>	\$5,500.00	\$5,000.00
Office Expense				<u>\$2,755.00</u>	\$3,000.00	\$3,500.00
Printing Expense				<u>\$1,500.00</u>	\$1,200.00	\$1,500
Administrative/Payroll				-		
	Director Salary	\$17,400.00		-	\$17,400.00	\$21,000.00
Office Assistant		\$0.00		<u>\$15,000.00</u>	\$2,100.00	\$2,400.00
	2 Volunteers, 1 Cleaner,		1 Cleaner,	-		
	+ lunches			-		
Payroll, State, Fed 1/4ly's				<u>\$2,700.00</u>	\$2,700	\$3,500.00
Advertising				<u>\$1,500.00</u>	\$3,000.00	\$3,000.00

Events Expense			\$1,300.00		
	OTC School	\$500.00	-	\$200.00	\$400.00
	Museum Day	\$400.00		\$200.00	\$500.00
	Parade	\$380.00		\$380.00	\$400.00
IT Services			\$0	Bartered	\$500.00
	Total Expenses		59,155.00	\$42, 985.00	\$53,100.00
Expense		\$53,100.00			\$53,100.00
Income		\$60,430.00			
NET		\$7,330.00			

What Projects Do We want to get done?

Projects:	Coin School on National Registry of Historic Places - Grant MnHS	
	Coin School Ventilation	?
	Clean Up Day - May	?
	Signage throughout City Streets	?
	KHC, Mora signs re-painted	?
2024		
Events?	April - Bridal Tea?	(\$500)
	May 4th - City Wide Garage Sales \$15 per space in lot	\$600
	May 25th - Museum Day Free Admission to Museum & Grounds	\$0.00
	July 8th - 26th - OTCS	
	July 27th Parade Float	(\$300.00)
	October 1st - Close Outdoor Buildings	0
	October 5th - Fundraiser Dinner? Freddie's?	?
	October 31st Trunk n Treat	(\$100)
	November - Give MN & Member/Corporate Fundraiser	?
	December 6,7 & 13,14 Christmas Cookie Bake	
	February 24th - Rock A Thon	

10:20am Appointment

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Employee Service Recognition	b. Origination: Coordinator's Office
c. Estimated time: 5 minutes	d. Presenter(s): Rick Mattson, Board Chair

e. Board action requested:

Recognition of 25 Years of Employee Service – Mark Dooley, Heavy Equipment Operator

f. Background:

Supporting Documents: None Attached:

Date received in County Coordinators Office:

Coordinators Comments:

10:25am Appointment

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: DNR Snowmobile Grant for EC Riders	b. Origination: Auditor/Treasurer's Office
c. Estimated time: 5 minutes	d. Presenter(s): Denise Snyder

e. Board action requested:

Resolution #__ - 5/7/24

WHEREAS the Minnesota Snowmobile Trails Assistance Program provides grants to local units of government for the maintenance of recreational trails pursuant to Minnesota Statutes Chapter 84.83, and

WHEREAS the County is the sponsor for such grant funds and the work performed by the trail club, and

BE IT RESOLVED to approve a "Minnesota Snowmobile Trails Assistance Program Snowmobile FY 2025 Maintenance and grooming Grant Agreement."

f. Background: Grant application and related attachments to be provided at meeting.

Supporting Documents: None Attached:

Date received in County Coordinators Office:

Coordinators Comments:



KANABEC COUNTY PUBLIC WORKS DEPARTMENT

Chad T. Gramentz, PE, Public Works Director

903 Forest Avenue East, Mora, MN 55051

320-679-6300

Kanabec County Drainage Authority Board

To Be Held At:

Kanabec County Courthouse

Board Room

317 Maple Ave East, Mora, MN 55051

Date and Time:

May 7, 2024 10:30 AM

AGENDA:

1. Call Meeting to Order
2. Establishment Resolution for Judicial Ditch No.1 (Kanabec/Isanti)
3. Adjourn

RESOLUTION TO CONFIRM AND RATIFY ISANTI AND KANABEC JOINT COUNTY DRAINAGE AUTHORITY FOR JD 1, CONFIRMING SELECTION OF MEMBERS TO JOINT COUNTY DRAINAGE AUTHORITY BOARD, DETERMINING SELECTION OF MEMBERS TO FILL VACANCIES, AND DESIGNATING MAJORITY COUNTY

WHEREAS, pursuant to Minnesota Statutes, section 103E.235, subdivision 2, a public drainage system established or benefitting land in two or more counties requires the formation of a joint county drainage authority board consisting of five members, with at least one member from each county board of commissioners; and

WHEREAS, Isanti and Kanabec Counties Judicial Ditch 1 (“JD 1”) is an established public drainage system that benefits lands in Isanti and Kanabec Counties; and

WHEREAS, the Joint County Drainage Authority of Isanti and Kanabec Counties for JD 1 (“Isanti and Kanabec JDA”) must be established to serve as the public drainage authority over Kanabec County property benefited by JD 1 and the Isanti and Kanabec JDA for JD 1 must include at least one member from Kanabec County; and

WHEREAS, a vacancy in the membership of the joint county drainage authority must be filled by joint action of the boards.

NOW, THEREFORE, BE IT RESOLVED by this Board of Commissioners as follows:

1. The Boards of Commissioners of Isanti and Kanabec Counties are taking joint and concurrent action through identical resolutions to each select members from their respective boards of commissioners for appointment to the Isanti and Kanabec JDA for JD 1 and to proscribe the process for filling future vacancies in membership of the Isanti and Kanabec JDA.
2. That the Kanabec County Board of Commissioners appoints the following initial members from Kanabec County as members for appointment to the Isanti and Kanabec JDA for JD 1:

Peter Ripka (District 1)
Tom Roeschlein (District 5)

3. That the Kanabec County Board of Commissioners confirms the concurrent appointment by the Isanti County Board of Commissioners the following initial members from Isanti County as members for appointment to the Isanti and Kanabec JDA for JD 1:

Bill Berg (District 2)
Steve Westerberg (District 3)
Mike Warring (District 4)

4. Future vacancies on the Isanti and Kanabec JDA for JD 1 from Kanabec County shall be filled by the successor Commissioner from the District indicated herein.
5. That since a majority of land benefited by JD 1 is located within Isanti County, Isanti County shall be the “majority” county under Minnesota Statutes, chapter 103E.
6. That this Resolution, upon being adopted by all counties constituting members of the Isanti and Kanabec JDA for JD 1, constitutes the joint meeting directed under Minnesota Statutes, section 103E.235, subdivision 2, and that said Resolutions by other member counties are cross-ratified by this Board for the formation of the Isanti and Kanabec Joint County Drainage Authority for JD 1 and for fulfilling all future vacancies by and through the process described herein.
7. That the Isanti and Kanabec JDA for JD 1 established herein shall be perpetual until either dissolved or modified by future action of the Isanti and Kanabec County Boards of Commissioners, seated jointly or through joint action.

After discussion, the Board Chair called the question. The question was on the adoption of the foregoing resolution and there were _____ yeas, _____ nays, _____ absent, and _____ abstentions as follows:

	Yea	Nay	Absent	Abstain
RIPKA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HOLLAND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CASWELL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MATTSON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ROESCHLEIN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Upon vote, the Chair declared the motion passed and the Findings and Order adopted.

Rickey Mattson, Chairman

Dated: _____

* * * * *

I, Denise Snyder, Kanabec County Auditor/Treasurer, do hereby certify that I have compared the above Resolution with the original thereof as the same appears of record and on file with the Kanabec County Board of Commissioners and find the same to be a true and correct transcript thereof. The above order was filed with me, Kanabec County Auditor/Treasurer, on _____.

IN TESTIMONY WHEREOF, I hereunto set my hand this ____ day of _____, 2024.

Denise Snyder, Kanabec County Auditor/Treasurer

May 7, 2024
10:35am Appointment Agenda
of Chad T. Gramentz, PE
Public Works Director

- | | |
|---------------------------------------|--------------------------|
| 1. Concrete Bids for Fuel Tank Slab | Resolution #1 (05-07-24) |
| 2. Electric Bids for Fuel Tank | Resolution #2 (05-07-24) |
| 3. Courthouse Boiler Replacement Bids | Resolution #3 (05-07-24) |

Resolution #1 (5-7-24)
Concrete Slab for Fuel Tanks

WHEREAS the following quotes were received to construct a 15.5' x 44' concrete slab at the highway building for above ground fuel tanks:

NRC Construction	\$12,425.00
Premier Asphalt	\$9,290.00
Knife Lake Concrete	\$8,797.80

THEREFORE, BE IT RESOLVED, to accept the quote of \$8,797.80 by Knife Lake Concrete Inc. for the construction of concrete slab at the Highway Building.

Resolution #2 (5-7-24)
Electric for Fuel Tanks

WHEREAS the following quotes were received for extending electric circuits to fuel island location at the highway building:

Alpine Electric:	\$7,900.00
Mattson Electric:	\$11,725.00

THEREFORE BE IT RESOLVED to accept the quote of \$7,900.00 by Alpine Electric for extending electrical circuits to fuel island at the Highway Building.

Resolution #3 (5-7-24)
Bids for Courthouse Boiler Replacement

WHEREAS the following bids were received for replacement of the Courthouse boiler system project:

RJ Mechanical:	\$373,500.00
Advantage Mechanical, LLC	\$385,005.00

THEREFORE BE IT RESOLVED to accept the bid of \$373,500.00 by RJ Mechanical for the Courthouse Boiler Replacement project and authorize the Coordinator and Board Chair to sign the contract.

KNIFE LAKE CONCRETE, INC.

2026 Rowland Road
Mora, MN 55051

Phone: 320-679-4141; Fax: 320-679-3927
knifelakeconcrete@gmail.com

DATE: April 15, 2024
TO: Dave Mulvaney
Dave.Mulvaney@co.kanabec.mn.us
RE: Above Ground Fuel Tanks
FROM: Rodney Toenies
Cell #612-669-9353

****REVISED****

Description	Quantity	Unit Price	Amount
6" Thick Slab With Thickened Edge Reinforced #4 Rebar 16" on Center	682 SF	\$12.90	\$8,797.80
BOLLARDS PROVIDED & INSTALLED BY OTHERS			
TOTAL			\$8,797.80

Tax and Bond Included
 No Traffic Control
 Adjust Catch Basins Included - Must Be Within 3 Rings of Adjustment or We Will Charge \$25.00/Ring for Adjustment
 No Grouting Inside of Structures
 No Granular or Class V Under Concrete Items
 Granular or Class V for Concrete Items Must be Within +- .10'
 Will Provide Road Grader for Final Curb Cut
 On-Site Concrete Testing by Others
 Surveying by Others
 Cold Weather Charges Not Included

ESTIMATE

Prepared For

Kanabec Courthouse

Premier Asphalt

217 Main St S
Pine City, MN 55063
Phone: (320) 384-8657

Estimate # 13082

Date 04/12/2024

Description	Total
--------------------	--------------

Concrete	\$9,290.00
Pour 15x44 pad 6" thick with 8" thickened edge and rebar grid	

Subtotal	\$9,290.00
-----------------	------------

Total	\$9,290.00
--------------	-------------------

Kanabec Courthouse

NRC Construction,

3668 Olympic Street
Isle, MN 56342

Estimate

Date	Estimate #
4/24/2024	605

Project Information
Kanabec County * Full Storage Pad

Project

Description	Qty	Rate	Total
Fill Bollard With Concrete	34	100.00	3,400.00
6" Concrete Pad w/#4 16" on/center (15.5' x 44' thickened edge)	1	8,525.00	8,525.00
Conveyor Truck	1	500.00	500.00
<p>*Grade-- + or - 1", Concrete testing not included*, Surveying by others, Cold weather charges not included. Not responsible for granular materials under concrete. Adjust frame and ring labor only and includes 2 rings/each additional ring is \$30. NRC Construction's season is from May 1- November 1. *Blacktop removal, setting of bollards and rough grade for pad +/- 1" by others*</p>			
If you have any questions, please contact Nate at 612-390-7633 Thank you.		Total	\$12,425.00

Phone #
612-390-7633

E-mail
nrcconstruction000@gmail.com

Alpine Electric LLC

2412 200th Ave

Mora MN 55051

320-496-0552

alpineelectric1989@gmail.com

Bill To:

kanabec Hwy Dept

Estimate

Number: **E1690**

Date: **April 30, 2024**

Ship To:

Project

FUEL PUMPS

Description

Amount

add 4 outside 20 amp outlets/circuits

add sub panel on east side of garage

3 pump circuits from sub panel

wire 2 diesel pumps and 1 gas pump

E-stop control

2 flood lights

TOTAL

7,900.00

Total

\$7,900.00

6

Electrical Wiring Proposal

Mattson Electric of Mora, LLC
201 Mattson Road
Mora, MN 55051
320-679-2552

Date 4-12-24
Customer Kanabec Cty
Address 903 Forest Ave East
Job Location Highway Dept

Specifications of Job

Price to include labor, materials, and inspection fees to

- Install 4 GFI outdoor receptacles by the existing fuel pumps on separate 20 amp ckts
- Install a subpanel on the East side of building as discussed
- Run 3 pump ckts and 120 volt ckt for Tecaletit Superbox from subpanel to the new pump locations (owner to saw cut asphalt and patch)
- Hook 2 diesel pumps and one gas pump
- Superbox located closer to Diesel tanks (keep further away from the classified area)
- Provide E-stop control on the South side of the building
- Provide and install 2 new LED flood lights on 2" rigid conduit on the South side of the building

\$11,725.00

We hereby offer to furnish all labor and materials necessary to complete the above-described electrical wiring installations in a good and workmanlike manner for the sum of \$ (11,725.00) or on a time and materials basis, if no sum indicated.

Payable as follows: upon completion

The materials and workmanship furnished under this proposal shall comply with the rules and regulations set forth in the National Electrical Code and all state and local regulations governing such work. The price quoted includes required insurance, and permit and inspection fees. Any changes in the above specifications shall be made in writing, and as evidence of agreement, shall be signed by both parties. The contractor shall not be held responsible or liable for any loss, damage or delay due to causes beyond his control. If the purchaser disposes of the property by sale or otherwise before this contract has been fulfilled, the full unpaid amount of the contract shall become due and payable at once. All equipment and devices installed, as a part of this proposal shall be guaranteed for a period of one year from date of completion except as otherwise noted, or in accordance with the manufacturer's warranty. Contractor's liability shall be limited to the replacement of defective parts.

This proposal may be withdrawn by us if not accepted within 15 days from above date. Work to start _____

We may, if the contract sum remains unpaid in 45 days, file a lien against property where work has been performed.

Respectfully submitted

ACCEPTANCE:

The above proposal and terms of payment are hereby accepted and you are authorized to the work as specified.

Contractor Mattson Electric of Mora, LLC

Customer's Signature _____

By _____

Date Signed _____

Kanabec County Courthouse Boiler Replacement (#9060231)

Owner: Kanabec County, MN

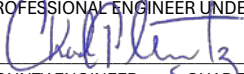
Solicitor: Kanabec County, MN

04/30/2024 10:00 AM CDT

SECTION A - KANABEC COUNTY COURTHOUSE BOILER SYSTEM REPLACEMENT

						Engineer Estimate		RJ Mechanical		Advantage Mechanical LLC	
Section Title	Line Item	Item Code	Item Description	UofM	Quantity	Unit Price	Extension	Unit Price	Extension	Unit Price	Extension
	1	1	BOILER SYSTEM REPLACEMENT	LS	1	\$377,400.00	\$377,400.00	\$373,500.00	\$373,500.00	\$385,005.00	\$385,005.00
Base Bid Total:							\$377,400.00		\$373,500.00		\$385,005.00

I HEREBY CERTIFY THAT THIS PLAN, SPECIFICATION, OR REPORT WAS PREPARED BY ME OR UNDER MY DIRECT SUPERVISION AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MINNESOTA.

SIGNATURE:  DATE: 5/2/24
COUNTY ENGINEER CHAD T. GRAMENTZ REG. NO: 47090

Agenda Item #1

PROCEEDINGS OF THE COUNTY BOARD

State of Minnesota
County of Kanabec
Office of the County Coordinator

UNAPPROVED MINUTES

April 16, 2024

The Kanabec County Board of Commissioners met at 9:00am on Tuesday, April 16, 2024 pursuant to adjournment with the following Board Members present: Rick Mattson, Tom Roeschlein, Wendy Caswell, Alison Holland and Peter Ripka. Absent: None. Others Present: Board Clerk Kris McNally, County Attorney Barbara McFadden (via WebEx), and Recording Secretary Kelsey Schiferli.

The meeting was held in the County Board Room and via WebEx for anyone wishing to attend virtually.

The Chairperson called the meeting to order at 9:00am and led the assembly in the Pledge of Allegiance.

Action #1 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to approve the agenda as presented.

Action #2 – It was moved by Wendy Caswell, seconded by Peter Ripka and carried unanimously to approve the April 2, 2024 minutes as presented.

Action #3 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to approve the following paid claims:

<u>Vendor</u>	<u>Amount</u>
AT&T Mobility	178.78
Blaze Credit Union	9,010.47
City of Mora	15,483.21
Consolidated Communications	1,141.86
East Central Energy	634.01
Kanabec County Auditor HRA	9,225.77
Kwik Trip Inc	13,820.81

Marco	3,335.71
Midcontinent Communications	462.32
Minnesota Department of Finance	4,836.50
Minnesota Department of Finance	28.5
Minnesota Department of Finance	974.8
Minnesota Department of Health	510
Quadient Finance USA, Inc.	5,000.00
Quality Disposal	1,083.49
VC3, Inc.	8,027.00
Verizon Wireless Aircards	2,490.24
Verizon Wireless Cell Phones	3,647.25

18 Claims Totaling: \$79,890.72

9:03am – The Chairperson called for public comment. Those that responded included the following:

Derek Carlson	Comments regarding Northwoods Haven Treatment Center and barriers regarding zoning per the County’s Shoreland Ordinance.
Juley Speed	Comments regarding appreciation for staff and board bringing timely attention to concerns regarding vacation rental zoning, and how the vacation rental industry has changed since 2019.
Dave Halvorson	Comments regarding the allocation of excess funds from snow plowing, suggestion to consider an ordinance against assault rifles, and concerns regarding a fundraiser poster at McBee’s picturing a K9 deputy and beer logos.

9:13am – The Chairperson closed public comment.

Action #4 – It was moved by Peter Ripka, seconded by Wendy Caswell and carried unanimously to approve the following claims on the Revenue Fund:

<u>Vendor</u>	<u>Amount</u>
24Restore	586.80
A and E Cleaning Services	630.00
Ace Hardware	85.85
Amazon Capital Services	420.74

Amazon Capital Services	7.98
American DataBank	631.85
Anne M. Carlson Law Office, PLLC	3,050.00
Anne M. Carlson Law Office, PLLC	140.00
Anne M. Carlson Law Office, PLLC	500.00
Anoka County Sheriff's Office - Civil Unit	80.00
Anoka County Sheriff's Office - Civil Unit	80.00
Asolare Yoga & Wellness	100.00
Barlow, Jeffery	824.10
BlueStar Graphics	982.50
Bluum	22,336.20
Bob Barker	972.19
Curtis, Michael	180.90
East Central Regional Juvenile Center	4,957.00
East Central Solid Waste Commission	20.00
East Central Solid Waste Commission	32.39
Environmental Systems Research Institute	6,277.00
FBG Service Corporation	4,829.00
FBG Service Corporation	2,543.00
FBG Service Corporation	672.00
Fourness, Chris	10.50
Frontier Precision, Inc.	11,801.99
Glen's Tire	840.08
Glen's Tire	47.00
Granite City Jobbing Co	495.94
Granite City Jobbing Co	495.94
Gratitude Farms	500.00
Hennepin County Sheriff's Office	80.00
Hoefert, Robert	598.98
Horizon Towing	797.94
Innovative Office Solutions, LLC	17.98
IT SAVVY LLC	2,775.64
Johnson's Hardware & Rental	80.36
Kanabec County Community Health	285.50
Kanabec County Community Health	3,316.30
Kanabec County Community Health	2,351.02
Kanabec County Community Health	1,870.54
Kanabec County Highway Department	751.61

Kanabec Publications	717.34
Kanabec Publications	721.00
Kanabec Publications	2,898.13
Kelly, John	36.55
Martin, Eric	175.00
MCIS	21,416.00
MCIS	540.00
MCIS	5,633.00
MCIS	6,290.00
Methven Funeral and Cremation Services	400.00
Michael K. Pepin Law Offices	646.00
Minnesota Association of County Officers	75.00
Minnesota Monitoring, Inc.	352.00
MN Dept of Public Safety	50.00
Mora Psychological Services, PLLC	2,900.00
Morris Electronics	1,235.00
Motorola Solutions	5,790.40
Motorola Solutions	2,115.00
Motorola Solutions	16,919.81
Newton, Deb	150.00
North Central Bus & Equipment	287.23
North Central Bus & Equipment	125,379.00
Northland Trust Services Inc	40,912.50
Oak Gallery	20.02
PDQ.com	1,275.00
Premium Waters, Inc.	75.70
Regents of the University of MN	20,162.00
RELX Inc. DBA LexisNexis	238.70
Rick's Home Furnishings	59.99
River Valley Forensic Services, P.A.	500.00
RT Vision	562.50
RT Vision	562.50
Smith, Trenton	1,272.99
State of Minnesota - BCA	980.00
Stellar Services	28.86
Stellar Services	31.94
Summit Food Service Management	3,880.74
Summit Food Service Management	3,881.82

Tinker & Larson Inc	1,632.61
Tinker & Larson Inc	214.95
Trimin Systems, Inc.	4,000.00
Van Alst, Lillian	875.02
WEX Health, Inc	434.50

85 Claims Totaling: \$ 354,385.62

Action #5 – It was moved by Peter Ripka, seconded by Alison Holland and carried unanimously to approve the following claims on the Road & Bridge Fund:

<u>Vendor</u>	<u>Amount</u>
A & E Cleaning	1,260.00
Ace	57.91
Aramark	694.31
Aspen Equipment	1,880.22
Auto Value	3,604.11
B & F Fastener Supply	92.57
Central McGowan	205.98
Central Pension Fund	626.40
Diesel Laptops	2,700.00
Federated Co-ops	109.74
Fluegge's AG	75.00
Gopher State One-Call	22.95
Havisto, Alice	1,885.00
Hutchinson, Sheldon and Janet	2,070.40
Johnson Hardware	359.19
Kanabec County Highway Dept	84.35
Kanabec County Coordinator	277.13
Kanabec Publications	106.59
Koch's Hardware Hank	29.99
Kwik Trip	111.13
LHB, Inc	220.95
Marco	352.17
Midwest Machinery	270.80
MN Dept of Transportation	1,642.10
MN Equipment	299.54
Newman Traffic Signs	23,155.44

Olson Power & Equipment	39,073.92
Power Plan	449.76
RTVision	1,125.00
Safety-Kleen Systems	431.63
Towmaster	794.78
USIC	80.00
VanVleet, Randy and Charrie	948.14
Wiarcom	675.30
34 Claims Totaling:	<u><u>\$85,772.50</u></u>

Action #6 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to approve the following resolution:

Resolution #6 – 4/16/24
Resolution Proclaiming May 10 as Child Care Provider
Appreciation Day in Kanabec County

WHEREAS, Child Care Aware of America and other organizations nationwide are recognizing Child Care Providers on this day; and

WHEREAS, Child Care provides a safe, nurturing place for the enrichment and development of millions of children nationwide, and is vital force in our economy; and

WHEREAS, the pandemic illuminated how indispensable child care providers are for the well-being and economic security of Kanabec County’s young children, families, and communities.

WHEREAS, child care programs, which are mostly small businesses, run and staffed predominated by women, are still recovering from health and financial hardships stemming from the pandemic while they have continued to meet the needs of families; and

WHEREAS, Kanabec County recognizes that child care has been a lifeline for families, communities, and the economy and as such, has provided much-needed support to providers to help sustain the viability of child care by including child care growth opportunities as a strategic priority for the Kanabec County EDA. The Kanabec County EDA supports a Child Care Capacity Committee which has led the region in child care capacity research, supply planning, and supporting growth and sustainability.

WHEREAS, our future depends on the quality of the early childhood experiences provided to young children today; support for high-quality child care represents a worthy commitment to our children's future.

NOW, THEREFORE, BE IT RESOLVED, that Kanabec County Board of Commissioners, hereby proclaim May 10, 2024, as Provider Appreciation Day in Kanabec County and urge all residents to recognize Child Care Providers for their important work.

Action #7 – It was moved by Tom Roeschlein, seconded by Wendy Caswell and carried unanimously to recess the meeting at 9:16am to a time immediately following the Family Services Board.

The Kanabec County Family Services Board met at 9:16am on Tuesday, April 16, 2024 pursuant to adjournment with the following Board Members present: Tom Roeschlein, Rick Mattson, Wendy Caswell, Alison Holland and Peter Ripka. Family Services Director Chuck Hurd presented the Family Services Board Agenda.

Action #FS8 – It was moved by Alison Holland, seconded by Tom Roeschlein and carried unanimously to approve the Family Services Board Agenda as presented.

Family Services Director Chuck Hurd gave the Director's report.

Action #FS9 – It was moved by Tom Roeschlein, seconded by Peter Ripka and carried unanimously to approve the recommendation of Blue Plus and UCare for Kanabec County Family Services Minnesota Healthcare plans, to recommend Blue Plus as the single default option, and to approve Family Services Director Chuck Hurd to complete the necessary form(s) with these recommendations and submit to the Minnesota Department of Human Services.

Action #FS10 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to approve the payment of 51 claims totaling \$172,955.67 on Family Services Funds.

Action #FS11 – It was moved by Peter Ripka, seconded by Tom Roeschlein and carried unanimously to adjourn Family Services Board at 9:31am. The Family Services Board will meet again on Tuesday, May 21, 2024 at 9:20am.

The Board of Commissioners reconvened.

Regional Director Tony Hansen and 4-H Educator Nikki Priebe met with the Board to discuss matters concerning the Extension Office.

Action #12 – It was moved by Tom Roeschlein, seconded by Peter Ripka and carried unanimously to approve the following resolution:

Resolution #12 – 4/16/24

WHEREAS the county has employed a 4-H Summer Assistant in past years, and

WHEREAS the board did budget for this position in 2024, and

WHEREAS the board desires to fill this position;

BE IT RESOLVED that the County Board authorizes the County Personnel Director to hire a 4-H Summer Assistant to refill the vacant position at \$15.00 per hour, or \$15.30 per hour if the person has prior experience as a Kanabec County 4-H Summer Assistant, and

BE IT FURTHER RESOLVED that the hours of work for this position be limited to those budgeted.

4-H Educator Nikki Priebe gave an update regarding 4-H in Kanabec County. Information only, no action was taken.

Regional Director Tony Hansen gave an update regarding the Kanabec County Extension Committee. Information only, no action was taken.

County Coordinator Kris McNally led a discussion regarding East Central Energy's Border to Border Grant Applications – Round 10.

Action #13 – It was moved by Tom Roeschlein, seconded by Wendy Caswell and carried unanimously to approve a consent agenda including all of the following actions:

Resolution #13a – 4/16/24

RESOLUTION IN SUPPORT OF EAST CENTRAL ENERGY'S BROADBAND PROJECT IN KANABEC COUNTY

WHEREAS, East Central Energy is working to provide efficient and affordable fiber broadband internet to its service area; and

WHEREAS, the mission is to provide high-speed internet to every home and business, fostering community vitality, affordable and quality health care, equitable education, a strong economy, and efficient government; and

WHEREAS, East Central Energy is applying for the Minnesota Border-to-Border Round 10 Broadband Development Grant Program. The Border-to-Border Broadband Round 10 Development Grant Program funds the expansion of broadband service to areas of Minnesota that are unserved or underserved; now therefore, be it

RESOLVED, that the Kanabec County Board of Commissioners, State of Minnesota, hereby endorses East Central Energy's Broadband Project to provide to fiber broadband internet to its Mille Lacs Central service area; and be it further

RESOLVED, that Kanabec County commits \$900 for the matching portion of the 2024 Minnesota Border-to-Border Round 10 Broadband Development Grant Program grants received in support of East Central Energy's Broadband Mille Lacs Central Project; and be it further

RESOLVED, that the Kanabec County Board of Commissioners does adopt this resolution and authorizes the Board Chair to sign said resolution.

Resolution #13b – 4/16/24

RESOLUTION IN SUPPORT OF EAST CENTRAL ENERGY'S BROADBAND PROJECT IN KANABEC COUNTY

WHEREAS, East Central Energy is working to provide efficient and affordable fiber broadband internet to its service area; and

WHEREAS, the mission is to provide high-speed internet to every home and business, fostering community vitality, affordable and quality health care, equitable education, a strong economy, and efficient government; and

WHEREAS, East Central Energy is applying for the Minnesota Border-to-Border Round 10 Broadband Development Grant Program. The Border-to-Border Broadband Round 10 Development Grant Program funds the expansion of broadband service to areas of Minnesota that are unserved or underserved; now therefore, be it

RESOLVED, that the Kanabec County Board of Commissioners, State of Minnesota, hereby endorses East Central Energy's Broadband Project to provide to fiber broadband internet to its Pine West service area; and be it further

RESOLVED, that Kanabec County commits \$420 for the matching portion of the 2024 Minnesota Border-to-Border Round 10 Broadband Development Grant Program grants received in support of East Central Energy's Broadband Pine West Project; and be it further

RESOLVED, that the Kanabec County Board of Commissioners does adopt this resolution and authorizes the Board Chair to sign said resolution.

Chief Deputy Kevin Braiedy met with the Board to request to hold a Shield 616 event and create an assigned fund.

Action #14 – It was moved by Tom Roeschlein, seconded by Wendy Caswell and carried unanimously to approve the following resolution:

Resolution #14 - 4/16/24

Approval to Hold a Fundraising Event & Create an Assigned Fund

WHEREAS the Kanabec County Law Enforcement Division desires to upgrade their protective equipment to provide a higher level of safety for the licensed peace officers; and

WHEREAS upgrading body armor is expensive and will pose an additional burden to Kanabec County taxpayers if funded through the levy process; and

WHEREAS the Law Enforcement Division has an opportunity to hold a fundraising event through Shield 616 to selectively raise funds for enhanced body armor; and

THEREFORE BE IT RESOLVED the Kanabec County Board of Commissioners hereby approves the request to coordinate and host this event to raise funds for enhanced body armor;

BE IT FURTHER RESOLVED that Sheriff Smith is authorized to sign agreements related to said event;

BE IT FURTHER RESOLVED that the Kanabec County Board of Commissioners hereby approves the creation of an assigned fund for the Sheriff's Office protective equipment;

BE IT FURTHER RESOLVED that the account number will be 01-201-201-8252.

County Coordinator Kris McNally led a discussion regarding filling the vacancy of EDA Director. The Board expressed consensus to delay filling the vacancy of EDA Director pending conversations with the City of Mora as well as the townships.

Environmental Services Supervisor Ryan Carda met with the Board to discuss County Ordinance #5, vacation rental issue. Juley Speed (VRBO owner) and Public Works Director Chad Gramentz also spoke. Information only, no action was taken.

County Coordinator Kris McNally notified the Board about the Local 107's filing of their Desire to Negotiate and led a discussion regarding which Commissioners will serve on the committee for the Local 107 CBA negotiation process. The Board expressed consensus for Rick Mattson and Alison Holland to serve on the committee for the Local 107 CBA negotiation process.

Action #15 – It was moved by Tom Roeschlein, seconded by Peter Ripka and carried unanimously to adjourn the meeting at 10:14am to a time immediately following the Drainage Authority Board.

The Kanabec County Drainage Authority Board met at 10:14am on Tuesday, April 16, 2024 pursuant to adjournment with the following Board Members present: Rick Mattson, Tom Roeschlein, Wendy Caswell, Alison Holland and Peter Ripka. Public Works Director/Ditch Inspector Chad Gramentz presented the Drainage Authority Board Agenda.

Action #16 – It was moved by Peter Ripka, seconded by Tom Roeschlein and carried unanimously to approve the Drainage Authority Board Agenda as presented.

Ditch Inspector Chad Gramentz led a discussion regarding Judicial Ditch 1, Judicial Ditch 6, and the formation of a Joint Drainage Authority with Isanti County.

Action #17 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to appoint Peter Ripka and Tom Roeschlein to serve on the Judicial Ditch 1 Joint board with Isanti County.

Action #18 – It was moved by Wendy Caswell, seconded by Alison Holland and carried unanimously appoint Peter Ripka as the primary representative and Tom Roeschlein secondary representative to serve on the Judicial Ditch 6 joint board with Isanti county.

10:22am – The Chairperson called for public comment. Those that responded included the following:

Kevin Belkholm	Comments regarding a petition submitted for ditch alignment for a portion of CD 2.
Loren Barnick	Comments regarding matters concerning CD 2.

Action #19 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to adjourn the Drainage Authority Board at 10:37am.

The Board of Commissioners reconvened.

Public Works Director Chad Gramentz met with the Board to discuss matters concerning his department.

Action #20 – It was moved by Peter Ripka, seconded by Alison Holland and carried unanimously to approve the following resolution:

Resolution #20 – 4/16/24
Removal of Underground Fuel Tanks at Highway Building

WHEREAS the following quotes were received for removal of the underground fuel tanks and associated fuel system at the County Highway building:

Hjort Excavating:	\$49,638
Landwehr	\$49,854

THEREFORE, BE IT RESOLVED, to accept the quote of \$49,638 by Hjort Excavating for the removal of the underground fuel tanks and associated fuel system.

Action #21 – It was moved by Tom Roeschlein, seconded by Peter Ripka and carried unanimously to approve the following resolution:

Resolution #21 – 4/16/24
Purchase Plow Truck Chassis

WHEREAS the following quote was received for a 2025 Western Star 47X plow truck chassis:

Boyer Trucks St. Michael:	\$151,045
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WHEREAS said quote is based on state contract pricing, and

WHEREAS vehicle specifications presented before the Board, and

THEREFORE BE IT RESOLVED to accept the quote of \$151,045 by Boyer Trucks St. Michael for a 2025 Western Star 47X plow truck chassis and approve the purchase thereof.

Action #22 – It was moved by Peter Ripka, seconded by Alison Holland and carried unanimously to approve the following resolution:

Resolution #22 – 4/16/24
Purchase Plow Truck Body

WHEREAS the following quote was received for a dump body and plow equipment to be outfitted on a 2025 Western Star 47X plow truck chassis:

Towmaster: \$170,651

WHEREAS said quote is based on state contract pricing, and

WHEREAS a detailed quotation was presented before the Board, and

THEREFORE BE IT RESOLVED to accept the quote of \$170,651 by Towmaster Truck Equipment for a dump body and plow equipment to be outfitted on a 2025 Western Star 47X plow truck chassis and approve the purchase thereof.

Action #23 – Wendy Caswell introduced the following resolution and moved its adoption:

Resolution #23 – 4/16/24
Equipment Rental and Service Quotes

WHEREAS, annual quotes were received for equipment rental rates and services, and

WHEREAS, Kanabec County may require various equipment and services throughout the year;

WHEREAS an abstract of quotes was presented before the Board, and

THEREFORE, BE IT RESOLVED to accept all quotes as submitted, and

BE IT FURTHER RESOLVED, that the Public Works Director is directed to utilize the quotes as necessary based on the availability of the lowest responsible price.

The motion for the adoption of the foregoing Resolution was duly seconded by Peter Ripka and upon a vote being taken thereon, the following voted:

IN FAVOR THEREOF: Peter Ripka, Alison Holland, Wendy Caswell, Rick Mattson

OPPOSED: None

ABSTAIN: Tom Roeschlein

Whereupon the resolution was declared duly passed and adopted.

Action #24 – It was moved by Tom Roeschlein, seconded by Wendy Caswell and carried

unanimously to approve the following resolution:

Resolution #24 – 4/16/24
Culvert Lining Quotes

WHEREAS the following quotes were received an ultra-violet cured in place pipe lining for a 42” concrete arch pipe on CSAH 2:

Subsurface Inc.	\$51,940
Hydro-Klean, LLC	\$114,335

THEREFORE, BE IT RESOLVED, to accept the quote of \$51,940 by Subsurface Inc. for an ultraviolet cured in place pipe lining for a 42” concrete arch pipe on CSAH 2.

Action #25 – It was moved by Tom Roeschlein, seconded by Peter Ripka and carried unanimously to approve the following resolution:

Resolution #25 – 4/16/24
Highway Accountant Position

WHEREAS there is a vacancy in the position of full-time Accountant in the Public Works Department, and

WHEREAS the Board desires to refill this vacant position;

BE IT RESOLVED that the County Board authorizes the Public Works Director and County Personnel Director to fill this full-time Accountant position at Grade 10 of the pay plan which starts at \$23.24 per hour, or the rate set by internal promotion;

BE IT FURTHER RESOLVED that the hours of work for this position be limited to those budgeted; and

BE IT FURTHER RESOLVED to authorize the County Personnel Director to refill any subsequent vacancies that may occur due to internal promotion.

Action #26 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to recess the meeting at 11:00am to a time immediately following the Community Health Board.

The Kanabec County Community Health Board met at 11:00am on Tuesday, April 16, 2024 pursuant to adjournment with the following Board Members present: Tom Roeschlein, Rick Mattson, Wendy Caswell, Alison Holland and Peter Ripka. Community Health Director Kathy Burski presented the Community Health Board Agenda.

Action #CH27 – It was moved by Peter Ripka, seconded by Alison Holland and carried unanimously to approve the Community Health Board agenda as presented.

Action #CH28 – It was moved by Tom Roeschlein, seconded by Wendy Caswell and carried unanimously to approve the following resolution:

Resolution #CH28 - 4/16/24
Full Time Home Health Aide Resolution

WHEREAS, Kanabec County Community Health (KCCH) has had several Home Health Aides resign in the past year, and

WHEREAS, the Community Health Director had a discussion with this Board at the April 2, 2024 Community Health Board meeting regarding the Home Health Aide situation, and

WHEREAS, this Board approved the posting of a full time HHA position, and

WHEREAS, a newly hired HHA has applied to take the full time HHA position that was posted, and

WHEREAS, per this Board's direction the Community Health Director is returning to request approval to hire this HHA for the full time Home Health Aide position.

THEREFORE, BE IT RESOLVED the Kanabec County Community Health Board approves the Community Health Director and HR Director hiring Stephanie Hamilton as the full time Home Health Aide at Grade 5 Range A, which is \$17.37 per hour, her current wage.

Action #CH29 – It was moved by Tom Roeschlein, seconded by Alison Holland and carried unanimously to adjourn Community Health Board at 11:02am. The Community Health Board will meet again on Tuesday, May 7, 2024 at 9:20am.

The Board of Commissioners reconvened.

11:02am – The Board of Commissioners took a ten minute break.

11:12am – The Board of Commissioners reconvened.

County Auditor Treasurer Denise Snyder met with the Board to discuss matters concerning her department.

Action #30 – It was moved by Tom Roeschlein, seconded by Peter Ripka and carried unanimously to approve the following resolution:

Resolution #30 - 4/16/24

DELEGATION OF AUTHORITY TO MAKE ELECTRONIC FUNDS TRANSFERS TO THE COUNTY AUDITOR-TREASURER OR THEIR DESIGNEE

WHEREAS, an electronic funds transfer is defined in Minnesota Statutes 471.38 as a process of value exchange via mechanical means without the use of checks, drafts, or similar negotiable instruments; and

WHEREAS, a local government is authorized to make electronic funds transfers if it meets the eligibility requirements in state law; and

WHEREAS, it is required for the governing body to annually delegate the authority to make electronic funds transfers to a designated chief financial officer or the officers designee; and

WHEREAS, it is required that the disbursing bank keep a certified copy of adopted delegation of authority; and

WHEREAS, it is required that the delegated authority present a list of initiators and transfer frequency annually to the board; and

WHEREAS, the county desires to utilize electronic funds transfers as authorized by statute.

THEREFORE, BE IT RESOLVED, that the Kanabec County Board of Commissioners delegates the authority to make electronic funds transfers to the County Auditor-Treasurer, or her designee, under Minnesota Statutes 471.38.

Action #31 – It was moved by Alison Holland, seconded by Tom Roeschlein and carried unanimously to approve the following resolution:

Resolution #31 – 4/16/24

2023 Donations, Change Funds, Routine EFTs

WHEREAS certain county departments received donations in 2023, and

WHEREAS the County Auditor/Treasurer has monitored and tabulated all donations received;

BE IT RESOLVED to accept the following donations for the calendar year 2023:

**KANABEC COUNTY DONATIONS
2023**

SHERIFF	General	\$25.00	
	Badges Program	\$1,605.97	
	Reserves	\$9,500.00	
	Project Lifesaver		
	K-9 Unit	\$2,962.00	
	Total Sheriff Donations	\$14,092.97	\$14,092.97
VETERANS	General	\$4,160.00	
	Designated incl Coffee Talk (8240)	\$4,000.00	
	EM Vets (8502)	\$1,000.00	
	DAV Vets (8501)	\$0.00	
	Total Veterans Donations	\$9,160.00	\$9,160.00
EXTENSION	Education Expo	\$314.00	
	Total Extension Donations	\$314.00	\$314.00
Total Donations to County in 2023			<u><u>\$23,566.97</u></u>

Change Funds 2023

Auditor-Treasurer	Cash drawer	\$500.00
Drivers-License	Cash drawer	\$100.00
Highway	Cash drawer	\$150.00
Recorder	Cash drawer	\$300.00

\$1,050.00

**KANABEC COUNTY - ROUTINE EFTS
2023**

<u>County</u>			
Wex	Disb	Medical Reimbursement & HRA account claims	daily
County	Disb	Direct deposit payroll	bi-weekly
MNDOR	Disb	State PR WH, Hwy Sales Tax, State General Tax	bi-weekly, monthly
EFTPS	Disb	Federal payroll taxes	bi-weekly
MNDPC/Roth	Disb	State Deferred Compensation plan	bi-weekly
HCSP	Disb	SO Union Benefits	bi-weekly
NACO/ Roth	Disb	Deferred Compensation	monthly
PERA	Disb	Retirement benefits	bi-weekly
Enterprise Fleet	Disb	Vehicle Lease pymts	monthly
IRS	Rcpt	Recorders fees	anytime
USDA	Rcpt	Recorders fees	anytime
State of MN	Rcpt	Medicare payment CH	daily
Dept of Justice	Rcpt	Federal grant payments	anytime
MNDOR	Rcpt	Revenue recapture - SO, Probation, FS	anytime
Medicare	Rcpt	FS & CH patient claims	anytime
US Treasury	Rcpt	FS & CH federal program pymts	anytime
Simplifile	Rcpt	Recorders fees	anytime
Wells Fargo	Rcpt	Property taxes mass escrow	anytime
CoreLogic	Rcpt	Property taxes mass escrow	anytime
Landshark	Rcpt	Recorders fees	anytime
Carlton County	Rept	CH Reimbursement	monthly

Action #32 – It was moved by Alison Holland, seconded by Wendy Caswell and carried unanimously to approve the following resolution:

Resolution #32 – 4/16/24

Restricted and Assigned Funds

WHEREAS the county maintains funds dedicated for specific public purposes, and

WHEREAS the Auditor/Treasurer prepared a report for the board showing the fund balances;

BE IT RESOLVED to accept the following report of Kanabec County Restricted and assigned Fund Balances as of December 31, 2023:

KANABEC COUNTY		
<u>RESTRICTED & ASSIGNED FUNDS 2023</u>		
	RESTRICTED FUNDS	12/31/23
R	911 EMERGENCY	181,922
R	CWP SEPTIC LOANS	250,160
R	GRAVEL TAX - RECLAMATION	117,541
R	FORFEITURE FUNDS - ATTORNEY	36,699
R	FORFEITURE FUNDS - SHERIFF	150,706
R	LAND OFFICE TECH EQUIPMENT	73,245
R	LAW LIBRARY	36,449
R	PROBATION CORRECTIONAL FEES	0
R	RECORDER'S EQUIPMENT	48,460
R	RURAL ADDRESSING	421
R	SCORE	121,735
R	SHORELAND GRANT	11,168
R	SW SURCHARGES	1,075,883
R	TRANSIT MNDOT FARES	213,236
R	WATER PLAN GRANT	41,150
R	WETLAND GRANT	68,540
UNRESTRICTED - ASSIGNED FUNDS		
A	EXTENSION EDUCATION EXPO	1,245
A	FUTURE CAPITAL EQUIPMENT	530,198
A	FUTURE CAPITAL IMPROVEMENTS	518,083
A	KNIFE LAKE IMPROVEMENT DIST	25,000
A	LEGAL FEE FUND ORD 27	166
A	RETIREE ACCRUED SICK PAY	162,903
A	SHERIFFS COMMUNITY PROGRAMS	14,284
A	SHERIFFS RESERVE UNIT	42,614
A	TRANSIT	618,368
A	UNEMPLOYMENT	53,058
A	VEHICLE POOL	121,112
A	VETERANS PROGRAMS	23,176
	TOTAL	4,537,522

County Coordinator Kris McNally led a discussion regarding a quote obtained by staff for professional photos of the County Commissioners. The Board expressed consensus to move forward with scheduling photos to be taken with the photographer used in 2022 at a cost of \$150.

County Coordinator Kris McNally led a discussion regarding a request to lease a new copier for the Coordinator's Office.

Action #33 – It was moved by Alison Holland, seconded by Tom Roeschlein and carried unanimously to approve the following resolution:

Resolution #33 - 4/16/24

Marco Copier Lease Agreement Resolution

WHEREAS, the Kanabec County Coordinator's Office has a lease agreement for a copier/printer/scanner/fax machine, and

WHEREAS, the current lease agreement has expired and the I.S. Director has recommended a replacement lease agreement with a higher number of copies included, and

WHEREAS, staff is requesting approval of the lease agreement for a new machine through a managed account program at a cost of \$533.13 per month (not including overages);

THEREFORE, BE IT RESOLVED the Kanabec County Board of Commissioners hereby approves the Coordinator to enter into said lease agreement for a new copier/printer/scanner/fax machine managed account program through Marco and to execute all necessary documents related to said lease.

Future Agenda Items: Statewide Affordable Housing Aid, EDA vacancy, Drainage Authority, VRBO/Shoreland zoning issues to the Planning Commission.

Action #34 – It was moved by Peter Ripka, seconded by Tom Roeschlein and carried unanimously to adjourn the meeting at 11:44am and to meet again in regular session on Tuesday, May 7, 2024 at 9:00am.

Signed

Chairperson of the Kanabec County Board of Commissioners,
Kanabec County, Minnesota

Attest: _____
Board Clerk

DRAFT

Agenda Item #2 Paid Bills

<u>Vendor</u>	<u>Amount</u>	<u>Purpose</u>	<u>Dept</u>
Kanabec County Auditor-Treas	15,669.86	Vehicle Leases & Maintenance	Various
Kanabec County AT ACH_VISA	266.69	Gekko Inc - Photo Elect Sensors - Courthouse	Building Maintenance
Marco Inc	159.00	Printer Contract	Assessor
Marco Inc	178.12	Printer Contract	Transit
Office of MN.IT Sercices	1,338.65	WAN	IS
Kanabec County AT ACH_VISA	102.15	MnDOT - Bituminous Class	Highway
Card Services (Coborn's)	7.58	Cleaning Supplies	Community Health
Card Services (Coborn's)	106.45	Wellness Supplies	Employee Wellness
Minnesota Energy Resources Corp	8,580.87	Gas Utilities	Various
Minnesota Unemployment Insurance	2,945.81	1Q24 Unemployment Benefits	HR
East Central Energy	1,840.13	Intersection Lighting	Highway
MN County Engineers Assn	625.00	2024 NACE/MCEA Dues	Highway
Hewitt, Robert (Hewitt Family Trust)	600.00	Driveway Permit Refund	Highway
Cigna Health & Life Insurance Company	774.46	May Accident, Group Hospital, Critical Illness Insurance Premiums	Employee Benefits
Dearborn National Life Insurance Co	437.88	May Short Term Disability Premiums	Employee Benefits
MetLife	6,606.35	May Dental Insurance Premiums	Employee Benefits
The Hartford Priority Accounts	6,638.70	May Life & Long Term Disabilty Premiums	Employee Benefits
VSP Insurance Co	599.80	May Vision Insurance Premiums	Employee Benefits
Blaze Credit Union	4,099.95	See Below	
City of Mora	16,744.33	Utilities	Various
E C Riders	8,327.70	2024 BM3 Snake River Trail	Unallocated
Marco Inc	3,335.71	Phone Lease	IS
Quadient Finance USA, Inc.	2,000.00	Courthouse Postage	Unallocated
VC3, Inc.	7,929.00	Monthly Services & Labor	Various
Zak, Arnold	75.00	Refund Mail Box	Highway
Schultz, Michael & Naomi	264,937.37	Purchase, Closing Costs, Housing Diff for ROW 033.605.023	Highway

Powell, Thomas	500.00	Driveway Deposit Refund	Highway
27 Claims Totaling:	<u>\$ 355,426.56</u>		
Blaze Credit Union	1,275.00	PDQ - Yrly Renewal - Credit Coming	IS
	156.00	Realtor Assn - MLS Qrtly Svc	Assessor
	199.00	MN State Colleges - Class Reg, TS	Assessor
	(155.93)	4Imprint - Credit	Veteran Services
	44.00	MN DHS - Background Study, CF	Transit
	(225.00)	MN State Colleges Credit, JK	Sheriff
	(225.00)	MN State Colleges Credit, CB	Sheriff
	2,168.92	Brownells - Remington Metal Jack	Sheriff
	34.92	Amazon - Office Supplies	Sheriff
	112.60	Chewy - Dog Food, K9 Supplies	Sheriff
	28.03	Vitality - Alcohol Wipes, Med Cup	Jail
	106.28	Hotel Stay NLC Conf, KS	E911
	25.00	Amazon - Apple Card, Monthly Storage	Highway
	25.60	Availity Subscription	Community Health
	102.00	ALPP - Lactation Recert, KZ	Community Health
	40.00	Little North Playland EBFHV IN	Community Health
	22.40	Availity Subscription	Community Health
	44.00	MN DHS - Background Study, NE	Community Health
	32.00	Availity Subscription	Community Health
	44.00	MN DHS - Background Study, SH	Community Health
	187.58	Amazon - Wellness Snacks Supplies	Employee Wellness
	25.90	Amazon - Wellness Snacks Supplies	Employee Wellness
	32.65	Amazon - Wellness Snacks Supplies	Employee Wellness
23 Claims Totaling:	<u>\$ 4,099.95</u>		

Agenda Item #3

Regular Bills - Revenue Fund

Bills to be approved: 5/7/24

Department Name	Vendor	Amount	Purpose
ASSESSOR	1st Choice Document Destruction	6.00	Shredding
ASSESSOR	Amazon Capital Services	23.74	Logitech Webcam
ASSESSOR	Amazon Capital Services	97.33	Office Supplies
ASSESSOR	Amazon Capital Services	21.88	Logitech headset, SR
		148.95	
AUDITOR	1st Choice Document Destruction	274.80	Shredding
AUDITOR	Amazon Capital Services	259.36	Monitors (2), Headset Teams Mtgs DS
AUDITOR	Cragun's Resort & Conference Center	271.73	Summer MACATFO Conference Lodging & Meals 6/24-6/25, DS
AUDITOR	MACO	35.00	2024 Summer Conference, Craguns 6/24-6/25, DS
AUDITOR	MCCC, Mi33	394.75	2Q24 Capital Assets Support, Service Dates 4/1/24 - 6/30/24
AUDITOR	Minnesota Pollution Control Agency	18,904.37	CWP SRF0249 #16
AUDITOR	Minnesota Pollution Control Agency	964.31	CWP SRF0249 #16
AUDITOR	Minnesota Pollution Control Agency	15,842.25	CWP SRF0298 #8
AUDITOR	Minnesota Pollution Control Agency	2,187.71	CWP SRF0298 #8
		39,134.28	
COMMISSIONERS	Holland, Alison	241.20	Mileage to Hwy 23 Board of Directors Mtg & Annual Mtg in Marshall 4/12/24
		241.20	
COUNTY ATTORNEY	1st Choice Document Destruction	156.00	Shredding
		156.00	

COUNTY COORDINATOR	1st Choice Document Destruction	18.00	Shredding
COUNTY COORDINATOR	Amazon Capital Services	40.41	8-tab Binder Dividers, Notepads, Facial Tissues
COUNTY COORDINATOR	Association of MN Counties	150.00	2024 MACA Technical Day, KM
COUNTY COORDINATOR	McNally, Kris	93.80	Mileage to/from St. Paul for MACA Technical Conference
COUNTY COORDINATOR	McNally, Kris	150.77	Lodging for MACA Conference in St. Paul
		452.98	

COUNTY CORONER	Ramsey County	1,440.00	Post Mortem Exam - Toxicology
COUNTY CORONER	River Valley Forensic Services, P.A.	1,750.00	March 2024 Contract & Post Mortem Exams (3)
		3,190.00	

COUNTY EXTENSION	Ernest, Jennifer	75.00	Extension Committee Meeting Per Diem 2/20/24
COUNTY EXTENSION	Ernest, Jennifer	75.00	Extension Committee Meeting Per Diem 4/16/24
COUNTY EXTENSION	Holcomb, Lisa	75.00	Extension Committee Meeting Per Diem 2/20/24
COUNTY EXTENSION	Holcomb, Lisa	75.00	Extension Committee Meeting Per Diem 4/16/24
COUNTY EXTENSION	Mattson, Jean	75.00	Extension Committee Meeting Per Diem 2/20/24
COUNTY EXTENSION	Mattson, Jean	75.00	Extension Committee Meeting Per Diem 4/16/24
COUNTY EXTENSION	Munstersteiger, Adam	83.71	Extension Committee Meeting Per Diem & Mileage 4/16/24
COUNTY EXTENSION	Paulsen, Stephanie	75.00	Extension Committee Meeting Per Diem 2/20/24
COUNTY EXTENSION	Paulsen, Stephanie	107.16	Extension Committee Meeting Per Diem & Mileage 4/16/24
COUNTY EXTENSION	Porter, Dan	75.00	Extension Committee Meeting Per Diem 4/16/24
COUNTY EXTENSION	Porter, Dan	75.00	Extension Committee Meeting Per Diem 2/20/24
COUNTY EXTENSION	Schiferli, Kelsey	75.00	Extension Committee Meeting Per Diem 2/20/24
COUNTY EXTENSION	Schiferli, Kelsey	75.00	Extension Committee Meeting Per Diem 4/16/24
		1,015.87	

COURT ADMINISTRATOR	J. Buberl Law	50.00	Court Appt Attorney Fees 11/15-12/27/23
COURT ADMINISTRATOR	James F. Schneider	545.00	Court Appt Attorney Fees 3/1/24 & 3/7/24
COURT ADMINISTRATOR	Michael Keller, Ph.D., L.P.	9,452.00	Juvenile Safety & Placement fees 6/7/19 - 8/28/20
COURT ADMINISTRATOR	Scott County Sheriff's Office	95.00	Juvenile Safety & Placement Fees
COURT ADMINISTRATOR	Stearns County Sheriff	70.00	Juvenile Safety & Placement Fees
		10,212.00	

ELECTIONS	MCCC Lockbox	5,100.00	DS200 Firmware License 20 & DS200 Hardware Maint 20
ELECTIONS	Snyder, Denise	129.31	Mileage to Election Conference in Nisswa
ELECTIONS	SWIFT	82.89	PVC Mailing 206, Service 3/1/24 - 3/31/24
		5,312.20	
ENVIRONMENTAL SERVICES	Amazon Capital Services	116.00	Computer Surge Protector
ENVIRONMENTAL SERVICES	Amazon Capital Services	18.70	Computer Monitor Cables
ENVIRONMENTAL SERVICES	Association of MN Counties	300.00	2024 MN Assoc. Solid Waste Administrators 1/1-12/31
ENVIRONMENTAL SERVICES	Carda, Ryan	1,670.00	UMN Septic Classes for GIS Tech-Intro, Installs, Soils, Inspection
ENVIRONMENTAL SERVICES	Kanabec County Highway Dept	48.23	Fuel & Postage 3/1-3/31
ENVIRONMENTAL SERVICES	Kanabec Publications	45.82	Board of Adjustments 4/11 Public Notice
ENVIRONMENTAL SERVICES	Peterson, Ronald	91.75	Board of Adjustments Hearing & Mileage
ENVIRONMENTAL SERVICES	Sawatzky, Fred	109.12	Board of Adjustment Hearing, Site Visit, Mileage
ENVIRONMENTAL SERVICES	Strickland Jr., Charlie	84.38	Board of Adjustments Hearing & Mileage
		2,484.00	
HUMAN RESOURCES	Carney Forensics	2,119.93	IT Forensic Services
HUMAN RESOURCES	Made of Mora/Promotional Designs	47.95	Employee Recognition Plaque, MD
HUMAN RESOURCES	Ratwik, Roszak & Maloney, PA	1,276.00	Professional Fees - March 2024
HUMAN RESOURCES	SwipeClock LLC	300.00	Monthly Billing for 5/20/24 - 6/20/24, Applicant Stack
		3,743.88	
INFORMATION SYSTEMS	1st Choice Document Destruction	280.00	Shredding
INFORMATION SYSTEMS	VC3	875.00	Microsoft 365
		1,155.00	
PROBATION & JUVENILE PLACEMENT	1st Choice Document Destruction	54.00	Shredding
PROBATION & JUVENILE PLACEMENT	East Central Regional Juvenile Center	4,957.00	April 2024, Contracted Beds at East Central Juv. Center
PROBATION & JUVENILE PLACEMENT	RS Eden	231.15	Urine Samples Sent to Lab, 5 Panel Oral Fluid Test Swabs (25), Shipping for Chain of Custody Forms
		5,242.15	

PUBLIC TRANSPORTATION	Ace Hardware	179.00	Shop Supplies
PUBLIC TRANSPORTATION	Amazon Capital Services	9.56	Bus Parts
PUBLIC TRANSPORTATION	Auto Value Mora	126.54	Bus Parts
PUBLIC TRANSPORTATION	Barlow, Jeffery	1,487.37	Volunteer Mileage 4/8-4/28
PUBLIC TRANSPORTATION	Curtis, Michael	651.24	Volunteer Mileage 4/8-4/28
PUBLIC TRANSPORTATION	Granite City Jobbing Company	236.40	Office Supplies
PUBLIC TRANSPORTATION	Hoefert, Robert	1,404.99	Volunteer Mileage 4/8-4/28
PUBLIC TRANSPORTATION	Kanabec County Highway Dept	577.40	Bus Repairs 3/1-3/18
PUBLIC TRANSPORTATION	North Central Bus & Equipment	526.04	Bus Parts & Repairs
PUBLIC TRANSPORTATION	Van Alst, Lillian	1,675.00	Volunteer Mileage 4/8-4/28
		6,873.54	
SHERIFF	1st Choice Document Destruction	48.00	Shredding
SHERIFF	Ace Hardware	6.59	Key Fob Battery for Squad
SHERIFF	Amazon Capital Services	19.16	Tape Refills
SHERIFF	Amazon Capital Services	78.56	Dual Monitor Desk Mount, SD Card
SHERIFF	Amazon Capital Services	42.28	Flash Drives
SHERIFF	Arnold, Josh	147.06	Reimbursement for Paddle Holster, Handcuff & Mag Case
SHERIFF	Aspen Mills	285.09	Alterations, Patches Sewn on Shirts & Jackets, Shirt
SHERIFF	Galls	91.07	Under Vest, AG
SHERIFF	Horizon Towing	502.66	Towing Services (2)
SHERIFF	IT SAVVY	772.14	HP Pro 400 F9
SHERIFF	Kanabec Publications	73.00	Emergency Foster Care Intake Forms (Carbon Copy)
SHERIFF	Michael Keller, Ph.D., L.P.	650.00	Psych Evaluation, NB
SHERIFF	Motorola Solutions	216.00	Antenna, GPS Antenna, Wifi for Squads
SHERIFF	O'Reilly Auto Parts	18.59	Headlight Capsule for Squad
SHERIFF	Segelstrom, Chad	175.00	Reimbursement for Drone Test
		3,125.20	
SHERIFF - 911 EMERGENCY	Motorola Solutions	16,919.81	Service from 4/1/24 - 3/31/25
SHERIFF - 911 EMERGENCY	ProPhoenix Corporation	60,109.80	Phoenix Annual Maintenance 7/20/24 - 7/19/25

		77,029.61	
SHERIFF - JAIL/DISPATCH	1st Choice Document Destruction	24.00	Shredding
SHERIFF - JAIL/DISPATCH	Adam's Pest Control, Inc.	250.00	Prevention Plus
SHERIFF - JAIL/DISPATCH	Advanced Correctional Healthcare	20,692.92	June 2024 On-site Medical, Mental Health, TPA Pool Mgmt
SHERIFF - JAIL/DISPATCH	Amazon Capital Services	79.49	Composition Notebooks
SHERIFF - JAIL/DISPATCH	Amazon Capital Services	59.90	Jail Medical - Propel Powder Packets
SHERIFF - JAIL/DISPATCH	Aspen Mills	462.11	Stock Collar Brass
SHERIFF - JAIL/DISPATCH	Aspen Mills	20.56	Initial Issue, Name Tag, CH
SHERIFF - JAIL/DISPATCH	Bob Barker	425.00	XL & 2XL Gloves
SHERIFF - JAIL/DISPATCH	Bob Barker	155.69	Paper & Plastic Medication Cups
SHERIFF - JAIL/DISPATCH	Bob Barker	43.25	XL Gloves
SHERIFF - JAIL/DISPATCH	Granite City Jobbing Company	53.94	Jail Supplies, Paper Towels
SHERIFF - JAIL/DISPATCH	Stellar Services	89.57	Canteen 4/15/24
SHERIFF - JAIL/DISPATCH	Stellar Services	96.67	Canteen 4/8/24
SHERIFF - JAIL/DISPATCH	Summit Food Service Management	3,988.99	Inmate Meals 4/13/24-4/19/24
SHERIFF - JAIL/DISPATCH	Summit Food Service Management	3,967.08	Inmate Meals 4/6/24-4/12/24
SHERIFF - JAIL/DISPATCH	Summit Food Service Management	3,931.02	Inmate Meals 3/30/24 - 4/5/24
		34,340.19	
SHERIFF - RESERVES	Streicher's	30.98	Collar Insignia - Sergeant Chevron
SHERIFF - RESERVES	Streicher's	129.99	5 Point Star, JK
		160.97	
STATE FISCAL RECOVERY ARP	Kanabec Publications	246.84	Boiler Project Bid Ad 4/4, 4/11, 4/18
		246.84	
TAX & PENALTY	MN Energy Resources Corporation	1,334.00	2023 Tax Court Abatement P 02-80010-00
TAX & PENALTY	MN Energy Resources Corporation	1,634.00	2023 Tax Court Abatement P 04-80030-00
TAX & PENALTY	MN Energy Resources Corporation	18,734.00	2023 Tax Court Abatement P 22-80030-00
		21,702.00	

UNALLOCATED	DHS SWIFT	609.00	Refund SNAPCWIADMIN Q423, 2/22/24 Overpayment by DHS
UNALLOCATED	Kanabec Publications	394.19	County Board Minutes 3/5 & 3/19, Public Hearing Minutes 3/7, Work Session Notice 5/7
UNALLOCATED	MN Energy Resources Corporation	354.00	2023 Tax Court Abatement P 10-80005-00
UNALLOCATED	MN Energy Resources Corporation	41.08	Interest 2023 P 02-80010-00
UNALLOCATED	MN Energy Resources Corporation	50.32	Interest 2023 P 04-80030-00
UNALLOCATED	MN Energy Resources Corporation	10.90	Interest 2023 P 10-80005-00
UNALLOCATED	MN Energy Resources Corporation	576.90	Interest 2023 P 22-80030-00
		2,036.39	
VEHICLE POOL	Kanabec County Highway Dept	28.61	Service Charge to Jump Battery on '02 Caravan
		28.61	
VETERAN SERVICES	1st Choice Document Destruction	12.00	Shredding
VETERAN SERVICES	Amazon Capital Services	31.26	Highlighters, USB Hub, Replacement Computer Speakers
VETERAN SERVICES	Bliss, Erica	229.00	Reimbursement for Ancestry Annual Fee April 2024 - April 2025
VETERAN SERVICES	Bliss, Erica	93.42	Reimbursement for Shutterstock Jan, Feb, Mar 2024
VETERAN SERVICES	Mora Bakery	32.06	Coffee Talk 4/23/24
		397.74	
123 Claims Totaling:		\$ 218,429.60	

Agenda Item #4
Regular Bills - Road & Bridge
Bills to be approved: 5/7/24

Vendor	Amount	Purpose
Ace	69.90	Shop supplies
Auto Value	2,049.48	Repair parts
B & F Fastener Supply	290.69	Shop/Equipment supplies
Barbara Ennis Living Trust	5,772.50	Payment for ROW Acquisition
Beaudry Oil & Propane	20,269.41	Diesel
Berndt, Steve	78.39	Mileage
Besser, Brandon & Mary	8,463.60	Payment for ROW Acquisition
Besser, Roberta	8,991.40	Payment for ROW Acquisition
Carda, Larry	821.64	Payment for ROW Acquisition
Docken, Miranda & Sundsvold, Christopher	4,164.75	Payment for ROW Acquisition
Esteban, Steven & Durant, Diane	1,147.26	Payment for ROW Acquisition
Frontier Precision, Inc	892.92	Engineering Supplies
Garelick Steel (North 2nd Street Steel)	2,109.00	Supplies
Granite City Jobbing	229.57	Janitor supplies
Halverson, Robert & Melanie	8,379.50	Payment for ROW Acquisition
Johnson, Lennie	896.20	Payment for ROW Acquisition
Kanabec County Highway Dept	96.00	Petty Cash, Postage
MKJ Trucking	10,320.00	Snow Removal
MN Equipment	2,666.15	Repair parts
Murphy, Timothy & Bonita and Bertschi, Shirley	3,339.13	Payment for ROW Acquisition
Northern Tool & Equipment	279.98	Equipment supplies
Nuss Truck Equipment	331.20	Equipment parts
Onasch, Debra & Daryl	1,935.34	Payment for ROW Acquisition
Oslin Lumber	497.68	Maintenance Supplies
Power Plan	1,121.99	Repair parts
Price, Matt & Meghann	3,699.23	Payment for ROW Acquisition
Rinke Noonan	2,480.00	ROW Attorney fees
Sanitary Systems	200.00	Knife Lake Restrooms
Schmidtbauer, Jason & Rebecca	10,705.53	Payment for ROW Acquisition
Schmidtbauer, Jason & Rebecca	4,250.55	Payment for ROW Acquisition
USIC	30.00	Locates
Vanvleet, Frank	6,273.30	Payment for ROW Acquisition
Vestis Group (Aramark)	865.12	Janitor supplies and coveralls
Ziegler Inc	25.16	Repair parts
34 Claims Totaling:	<u><u>113,742.57</u></u>	

Agenda Item #5

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: SCORE Claims – March	b. Originating Department: County Coordinator
c. Estimated time: 2 minutes	d. Presenter(s): None

f. Board action requested:

Resolution # __ – 5/7/24 SCORE CLAIMS

WHEREAS the board has been presented with claims for recycling efforts to be paid from SCORE Funds, and

WHEREAS these claims have been reviewed, tabulated and approved by the Kanabec County Solid Waste Officer, and

WHEREAS SCORE Funds appear adequate for the purpose;

BE IT RESOLVED to approve payment of the following claims on SCORE Funds:

Waste Management	\$557.45
Quality Disposal	\$3,630.20
Arthur Township	\$500.00
Total	\$4,687.65

g. Background:

Provider	Billed	Paid Amount
QUALITY DISPOSAL (March)	\$3,130.20	\$3,130.20
WASTE MANAGEMENT (March)	\$557.45	\$557.45
Sub-Total	\$3,687.65	\$3,687.65
Recycling Center Incentive Payments:		
Quality Disposal (March)	\$500.00	\$500.00
Arthur Township (March)	\$500.00	\$500.00
TOTAL PAYMENTS =		\$4,687.65

Date received in County Coordinators Office:	Various dates in April
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January 1, 2024 SCORE Fund balance = \$121,734.95
Revenue: 01-391-392-0000-5332 =
Expenditure: 01-391-392-0000-6211 = \$14,490.36
Current SCORE Funds balance is = \$107,244.59

Agenda Item #6

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Request for Approval of Employment Termination	b. Origination: Personnel Committee & Personnel Director
c. Estimated time: 5 minutes	d. Presenter(s): Kris McNally, Coordinator

e. Board action requested:

Resolution # _____ **Approval of Employment Termination**

WHEREAS, the Kanabec County Economic Development Authority (EDA) Executive Director is subject to the authority of the Kanabec County Board of Commissioners, and

WHEREAS, the Kanabec County Personnel Committee recommends termination of the employment of the Kanabec County EDA Executive Director James Hartshorn;

THEREFORE BE IT RESOLVED that the Kanabec County Board of Commissioners hereby approves the termination of the employment of James Hartshorn effective April 9, 2024.

f. Background:

Supporting Documents: None **Attached:**

Date received in County Coordinators Office:

Coordinators Comments:

Agenda Item #7

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Request approval of Resolution to Temporarily Suspend New Kanabec County Tax Abatement Applications	b. Origination: Board of Commissioners
c. Estimated time: 10 minutes	d. Presenter(s): Board of Commissioners

e. Board action requested:

Consider approval of the following resolution:

Resolution # -5/7/24

Temporarily Suspending New Kanabec County EDA Tax Abatement Applications

WHEREAS the Kanabec County Economic Development Authority (EDA) is currently without an acting director; and

WHEREAS the Kanabec County Board of Commissioners believes it is in the best interest of the County to temporarily suspend consideration of, as well as the distribution, acceptance, and processing of, any and all new Kanabec County EDA Tax Abatement applications;

THEREFORE BE IT RESOLVED that effective immediately, the Kanabec County Board of Commissioners hereby temporarily suspends distribution, acceptance, processing, and consideration of any and all new Kanabec County EDA Tax Abatement applications until such time as reinstatement is voted upon and passed by the County Board;

BE IT FURTHER RESOLVED that a new Kanabec County EDA Tax Abatement application is defined as any Kanabec County EDA Tax Abatement application that has not been reviewed by the Kanabec County Economic Development Authority Board prior to May 7, 2024;

BE IT FURTHER RESOLVED that this resolution has no impact on the administration of the current, existing Kanabec County tax abatement agreements.

f. Background:

Supporting Documents: None: Attached:

Date received in County Coordinators Office:

Coordinators Comments:

Agenda Item #8

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Discuss Stakeholder Input on the County's Economic Development Authority	b. Origination: Board of Commissioners
c. Estimated time: 10-15 minutes	d. Presenter(s): Kris McNally, Coordinator

e. Board action requested:

Discuss stakeholder input.

f. Background:

At the regular meeting on April 16, 2024 it was decided to seek input from Kanabec County EDA stakeholder townships and cities about the Kanabec County EDA.

Supporting Documents: None Attached:

Date received in County Coordinators Office:

Coordinators Comments:

Agenda Item #9

May 7, 2024

REQUEST FOR BOARD ACTION

a. Subject: Rescind Resolution #14 - 4/16/24 Approval to Hold a Fundraising Event & Create an Assigned Fund	b. Origination: Kanabec County Sheriff's Office
c. Estimated time: 5-10 minutes	d. Presenter(s): Kris McNally, Coordinator

e. Board action requested:

Consider the request to rescind Resolution #14 - 4/16/24 Approval to Hold a Fundraising Event & Create an Assigned Fund.

f. Background:

Shield 616 (a third party) will be hosting a fundraising event and donating gear to the KCSO which is allowable according to CPA Doug Host from Clifton Larson Allen.

Supporting Documents: None **Attached:**

Date received in County Coordinators Office:

Coordinators Comments:

HR will be correcting the language in the employee handbook to reflect the recent fundraising guidance.