

Carlton County
Board of Commissioners
*****ADJOURNED SESSION*****
Monday, July 23, 2018
4:00 p.m.

***Reminder – the Budget Presentations start at 1:00 p.m.
Carlton County Transportation Building***

A. Administrative

1. Roll Call
2. Pledge of Allegiance to the Flag
3. Approve Agenda
4. Approve Minutes of the July 10, 2018, Regular Session
5. Visitors:
 - a.
 - b.
 - c.

B. Human Services

1. Financial
 - a. Approve PH & HS Financial Report for May and June
2. Personnel
 - a. Consider request for unpaid staff leave of absence
 - b. Consider request for temporary staff to cover leave of absence
3. Administrative
4. Social Services
 - a. Moose Tracks Closure and New Site Opening
5. Health Services
6. Income Maintenance

B. Human Services (continued)

- 7. Child Support & Collections
- 8. Commissioner's Comments
- 9. Human Services Advisory Committee Comments
- 10. Case Action & Licensing of Foster and Day Care Homes

C. Zoning and Environmental Services

D. Land and Building

E. Transportation

F. Public Safety

G. Tax Matters

H. Administrative - Other

1. Approve employee vacation year-end rollover
2. 2019 Revenue and Expenditure Budget Presentations
3. Approve Wet Bar Permit for Eskomo Pie's – Thomson Township
4. IRS Declaration of Intent to Reimburse – Informational

I. Unorganized Township Matters

J. Commissioners Comments and Meetings Attended

K. Correspondence

July 18, 2018

**PUBLIC HEALTH & HUMAN SERVICES FINANCIAL REPORT
ESTIMATED REPORT FOR MAY 2018**

BALANCE SHEET:

Cash on Hand - \$ 9,939,049
Receivables - \$ 5,828,244
Fund Equity - \$ 13,470,298
Available fund balance \$ 14,228,100

REVENUE & EXPENDITURES:

REVENUE:

State & Federal revenue over budget by 0.55 %
Other revenue over budget by 5.40 %
Overall revenue over budget by 0.8 %

EXPENDITURES:

Public Aid Assistance on budget at 0.0 %
Personnel Services under budget by 4.3 %
Overhead costs under budget by 11.7 %
Overall expenditures under budget by 3.3 %

As of month end, *estimated* net result of approximately \$ 757,802.

Planned use of Fund Balance for 2018 \$234,639

Kevin

**CARLTON COUNTY PUBLIC HEALTH & HUMAN SERVICES
ESTIMATED BALANCE SHEET
HUMAN SERVICES FUND**

B1 a.

FOR MONTH OF MAY 2018

ASSETS	2017	2018	18 vs 17
Cash on Hand			
Petty Cash Fund	\$8,273,988	\$9,932,849	1,658,661
Receivable:	3,950	6,400	2,450
Taxes - Current			
Taxes - Delinquent	3,116,614	3,149,748	33,134
Taxes - State County Program Aid	298,748	298,748	0
Due from Other Agencies	274,453	271,248	(3,205)
Accounts Receivable - Other	0	0	0
Revenue Accrual Adjustment (due from DHS & others)	0	0	0
Prepaid Expenses	1,886,800	2,108,500	221,700
Suspense	0	0	0
TOTAL ASSETS	\$13,647,620	\$15,686,729	2,039,109
LIABILITIES & FUND EQUITY			
LIABILITIES			
Accounts Payable	\$595,381	\$585,270	(\$10,111)
Current month Payables			
Salary & Wages Payable	446,111	446,111	0
Due other Funds	0	0	0
Due other Gov't Units	86,137	225,803	139,666
Deferred Revenue	142,569	136,851	(6,718)
TOTAL LIABILITIES	\$1,270,198	\$1,393,035	122,837
Reserve for Employee Benefits	65,594	65,594	0
Current Revenue/Expenditures		757,802	
TOTAL EQUITY	12,311,828	13,470,288	1,158,470
TOTAL LIABILITIES & FUND EQUITY	\$13,647,620	\$15,686,729	2,039,109
Designated fund balance			
	0	0	0
Available fund balance	\$12,311,828	\$14,228,100	\$1,916,272

07/18/2018

**CARLTON COUNTY PUBLIC HEALTH & HUMAN SERVICES
ESTIMATED STATEMENT OF REVENUE & EXPENDITURES
HUMAN SERVICES FUND**

B1 a.

FOR MONTH OF MAY 2018

	Current Month 2018	Year To Date 2018	Adjusted Budget 2018	Percent of Budget 41.7%	Over -Under
REVENUE:					
Current Property Taxes	\$636,754	\$3,183,771	\$7,641,051	41.7%	-0.0%
State Shared County Program Aid	54,250	271,248	650,995	41.7%	-0.0%
State	438,094	784,983	3,711,325	21.2%	-20.5%
Federal	949,381	1,631,585	6,133,908	26.6%	-15.1%
Other Revenue	261,151	666,479	2,183,985	30.5%	-11.2%
Transfers	0	3,205	13,400	23.9%	-17.8%
Revenue Accrual Adjustment		2,108,500			
TOTAL REVENUE	\$2,339,630	\$8,649,771	\$20,334,662	42.5%	0.8%
EXPENDITURES:					
Public Aid Assistance & Contracts	\$479,484	\$2,306,815	\$6,637,469	41.7%	-0.0%
(less) 2017 accruals		(468,127)			
est current month accruals		927,340			
Personnel Services	736,909	4,737,286	12,811,770	37.4%	-4.3%
(less) 2016 accruals		(446,111)			
est current month accruals		498,983			
Operations Overhead			1,120,062	30.0%	-11.7%
Services & Charges	44,893	361,000			
Direct Material & Supplies	11,124	30,005			
Sales Tax/Other Misc	0	123			
(less) 2017 accruals		(117,143)			
est current month accruals		61,798			
TOTAL EXPENDITURES	\$1,272,410	\$7,891,969	\$20,569,301	38.4%	-3.5%
Gain (Loss) Revenue over Expenses	\$1,067,220	\$757,802	\$234,839	Use fund balance	

NOTE: Revenue & expenditures DO NOT include Collaborative activity
Kevin

B1 a.

	State	Federal	Other
0 SELF (710-3460) max 7000			0
16,000 IVE SSTS Adm. (5,000/mo - rev 3810-5321)		16,000	
40,000 IV-E FC/MPD (18,300/mo average less rev 5324)		40,000	
0 No NSF RCA (0/mo -rev 3820-5222)			
2,100 Child Care 720-3110/3120 (2,100/mo less revenue)	1,050	1,050	
25,000 Rule 5 MH Facilities MA & Insurance(ave 6,700/mo)		12,500	12,500
43,000 E&T 720-3370 (less revenue)	21,500	21,500	
14,000 FSSW Collab (2,500/mo)& Special Ed & School (3,000/mo less rev)			14,000
0 CMH Respite Grant (max 30,000)			
40,000 CMH-TCM (average 30,000/mo less rev)	0		
229,900 VCAA State Share 1pmt July \$45,980/mo max \$551,672	229,900	24,800	15,200
7,000 CW-TCM (average 11,700/mo)		7,000	
Total Family Services	\$417,000	\$252,450	\$122,850
65,000 Waivered Case Mgmt (avg 65,000/mo)		32,500	32,500
60,000 MA SSTS & R25 F54 (20,000/mo - rev)AS & FS		60,000	
40,000 CSP & ML Alternatives 43k/mo (Max 515,863)	40,000		
29,500 SILS (750-3340 *.70 max 134,500)	29,500		
216,000 LTSS SSTS Admin avg 72k/mo 435&438 State/Fed	108,000	108,000	
200,000 ACT MA & Health Plans Avg 78,500/mo	50,000	50,000	100,000
26,600 Family Support (750-3350 max 89,453)	26,600		
20,000 MH/VA/DD TCM (avg 18,750/mo)		12,000	8,000
Total Adult Services	\$657,100	286,600	262,500
387,000 IM Adm. (*.4 less Fed rev avg 75k/mo)		387,000	108,000
51,000 MAXIS/MA/GAMC 650-4400 (51,000 mo- rev)	28,050	22,950	
0		0	
Total Income Maintenance	\$438,000	28,050	409,950
151,000 Child Support Adm. (*.66 less rev avg 25k/mo)		151,000	
55,000 Collections MA/GAMC/MAXIS (Ave 11,000/mo)			55,000
17,600 Collection Incentives - MA State (Ave \$4,400/mo)	17,600		
15,400 Fed Collection Incentives (Ave \$8,000/mo)		15,400	
Total Child Support Services	\$239,000	17,600	166,400
42,000 Health Svcs A/R - estimated(42k/mo)		31,500	10,500
6,100 SHIP 2.0 Max 45k		6,100	
36,700 LPHG (Pd Qtrly \$146,420 Total) avg 12,200/mo		36,700	
9,800 MCH (YTD - *.75 Max \$45,778) avg 3,800/mo			9,800
4,400 Public Health Preparedness Max \$19,500			4,400
32,300 NFP/EBHV			32,300
0			0
21,400 WIC (YTD less rev) avg 10k/mo			21,400
1,500 WIC Breastfeeding Max 7,990			1,500
0 TANF Home visiting (Max 34,977)			0
4,400 CWG			4,400
22,800 CTC (less St. & fed rev) (Max \$74,253)	11,400	11,400	
0 Canvas Health Max 50k			
0 Universal Home Visiting (50,000-rev)collab avg 4,100/mo	0		
25,000 PH LTSS LCTS avg.8,300/mo			0
1,000 EDHI, Follow Along	12,500	12,500	
150,000 Dept 438 MSHO, MSC+ AC/EW Medica,BluePlus SNBC HP avg. 116k/mo		1,000	
Total Health Services	\$357,400	\$98,200	\$98,700
Agency Total	2,108,500	682,900	1,060,400
			365,200

July 18, 2018

**PUBLIC HEALTH & HUMAN SERVICES FINANCIAL REPORT
ESTIMATED REPORT FOR JUNE 2018**

BALANCE SHEET:

Cash on Hand - \$ 13,028,459
Receivables - \$ 2,017,416
Fund Equity - \$ 13,413,598
Available fund balance \$ 13,503,721

REVENUE & EXPENDITURES:

REVENUE:

State & Federal revenue under budget by 2.15 %
Other revenue over budget by 7.62 %
Overall revenue under budget by 0.2 %

EXPENDITURES:

Public Aid Assistance on budget at 0.0 %
Personnel Services under budget by 0.6 %
Overhead costs under budget by 16.0 %
Overall expenditures under budget by 1.2 %

As of month end, *estimated* net result of approximately \$ 90,123.

Planned use of Fund Balance for 2018 \$234,639

Kevin

07/18/2018

**CARLTON COUNTY PUBLIC HEALTH & HUMAN SERVICES
ESTIMATED BALANCE SHEET
HUMAN SERVICES FUND**

B1 a.

FOR MONTH OF JUNE 2018

ASSETS	2017	2018	18 vs 17
Cash on Hand	\$11,769,165	\$13,022,059	1,252,894
Petty Cash Fund	3,950	6,400	2,450
Receivable:			
Taxes - Current	(616,151)	(608,630)	7,521
Taxes - Delinquent	298,748	235,119	(63,629)
Taxes - State County Program Aid	329,344	325,497	(3,847)
Due from Other Agencies	0	0	0
Accounts Receivable - Other	0	0	0
Revenue Accrual Adjustment (due from DHS & others)	1,719,107	2,065,430	346,323
Prepaid Expenses	0	0	0
Suspense	(190,583)	(31,356)	159,227
TOTAL ASSETS	\$13,313,580	\$15,014,519	1,700,939
LIABILITIES & FUND EQUITY			
LIABILITIES			
Accounts Payable	\$595,381	\$585,270	(\$10,111)
Current month Payables			
Salary & Wages Payable	446,111	446,111	0
Due other Funds	0	0	0
Due other Gov't Units	75,704	277,972	202,268
Deferred Revenue	142,569	135,851	(6,718)
TOTAL LIABILITIES	\$1,259,765	\$1,445,204	185,439
Reserve for Employee Benefits	65,594	65,594	0
Current Revenue/Expenditures		90,123	
TOTAL EQUITY	11,988,221	13,413,598	1,425,377
TOTAL LIABILITIES & FUND EQUITY	\$13,313,580	\$15,014,519	1,700,939
Designated fund balance			
	0	0	0
Available fund balance	\$11,988,221	\$13,503,721	\$1,515,500

07/18/2018

**CARLTON COUNTY PUBLIC HEALTH & HUMAN SERVICES
ESTIMATED STATEMENT OF REVENUE & EXPENDITURES
HUMAN SERVICES FUND**

B1 a.

FOR MONTH OF JUNE 2018

	Current Month 2018	Year To Date 2018	Adjusted Budget 2018	Percent of Budget 50.0%	Over -Under
REVENUE:					
Current Property Taxes	\$636,754	\$3,820,526	\$7,641,051	50.0%	0.0%
State Shared County Program Aid	54,250	325,497	650,995	50.0%	-0.0%
State	95,550	880,533	3,711,325	23.7%	-26.3%
Federal	493,977	2,125,562	6,133,906	34.7%	-15.3%
Other Revenue	233,237	899,716	2,183,985	41.2%	-8.8%
Transfers	2,989	6,194	13,400	46.2%	-3.8%
Revenue Accrual Adjustment		2,065,430			
TOTAL REVENUE	\$1,516,757	\$10,123,458	\$20,334,662	49.8%	-0.2%
EXPENDITURES:					
Public Aid Assistance & Contracts	\$541,288	\$2,848,101	\$6,637,489	50.0%	0.0%
(less) 2017 accruals		(468,127)			
est current month accruals		939,873			
Personnel Services	1,607,479	6,344,768	12,811,770	49.4%	-0.8%
(less) 2016 accruals		(446,111)			
est current month accruals		433,559			
Operations Overhead			1,120,062	34.0%	-16.0%
Services & Charges	45,108	408,108			
Direct Material & Supplies	4,191	34,198			
Sales Tax/Other Misc	0	123			
(less) 2017 accruals		(117,143)			
est current month accruals		57,990			
TOTAL EXPENDITURES	\$2,198,064	\$10,033,335	\$20,569,301	48.8%	-1.2%
Gain (Loss) Revenue over Expenses	(\$681,307)	\$90,123	\$234,839	Use fund balance	

NOTE: Revenue & expenditures DO NOT include Collaborative activity
Kevin

B1 a.

	State	Federal	Other
250 SELF (710-3460) max 7000			250
23,800 IVE SSTS Adm. (5,000/mo - rev 3810-5321)		23,800	
55,000 IV-E FC/MPD (18,300/mo average less rev 5324)		55,000	
0 No NSF RCA (0/mo -rev 3820-5222)			
2,100 Child Care 720-3110/3120 (2,100/mo less revenue)	0		
25,000 Rule 5 MH Facilities MA & Insurance(ave 6,700/mo)	1,050	1,050	
61,900 E&T 720-3370 (less revenue)		12,500	12,500
9,000 FSSW Collab (2,500/mo)& Special Ed & School (3,000/mo less rev)	30,950	30,950	
1,500 CMH Respite Grant (max 30,000)			9,000
40,000 CMH-TCM (average 30,000/mo less rev)	1,500		
275,880 VCAA State Share 1pmt July \$45,980/mo max \$551,672	275,880	24,800	15,200
11,700 CW-TCM (average 11,700/mo)		11,700	
-----> Total Family Services	\$506,130	\$309,380	\$36,700
65,000 Waivered Case Mgmt (avg 65,000/mo)		32,500	32,500
77,700 MA SSTS & R25 F54 (20,000/mo - rev)AS & FS		77,700	
45,000 CSP & ML Alternatives 43k/mo (Max 515,863)	45,000		
39,200 SILS (750-3340 *.70 max 134,500)	39,200		
280,000 LTSS SSTS Admin avg 72k/mo 435&438 State/Fed	140,000	140,000	
200,000 ACT MA & Health Plans Avg 78,500/mo	50,000	50,000	100,000
30,000 Family Support (750-3350 max 89,453)	30,000		
20,000 MH/VA/DD TCM (avg 18,750/mo)		12,000	8,000
-----> Total Adult Services	\$756,900	\$336,700	\$108,000
220,000 IM Adm. (*.4 less Fed rev avg 75k/mo)		220,000	
51,000 MAXIS/MA/GAMC 650-4400 (51,000 mo- rev)	28,050	22,950	
0		0	
-----> Total Income Maintenance	\$271,000	\$28,050	\$242,950
91,000 Child Support Adm. (*.66 less rev avg 25k/mo)		91,000	
55,000 Collections MA/GAMC/MAXIS (Ave 11,000/mo)			55,000
17,600 Collection Incentives - MA State (Ave \$4,400/mo)	17,600		
15,400 Fed Collection Incentives (Ave \$8,000/mo)		15,400	
-----> Total Child Support Services	\$179,000	\$17,600	\$15,400
42,000 Health Svcs A/R - estimated(42k/mo)		31,500	10,500
6,100 SHIP 2.0 Max 45k		6,100	
36,700 LPHG (Pd Qtrly \$146,420 Total) avg 12,200/mo		36,700	
9,800 MCH (YTD - *.75 Max \$45,778) avg 3,800/mo			9,800
4,400 Public Health Preparedness Max \$19,500			4,400
32,300 NFP/EBHV			32,300
0			0
21,400 WIC (YTD less rev) avg 10k/mo			21,400
1,500 WIC Breastfeeding Max 7,990			1,500
0 TANF Home visiting (Max 34,977)			0
4,400 CWG			4,400
22,800 CTC (less St. & fed rev) (Max \$74,253)	11,400	11,400	
0 Canvas Health Max 50k			
0 Universal Home Visiting (50,000-rev)collab avg 4,100/mo	0		
20,000 PH LTSS LCTS avg.8,300/mo	10,000	10,000	0
1,000 EDHI, Follow Along		1,000	
150,000 Dept 438 MSHO, MSC+ AC/EW Medica,BluePlus SNBC HP avg. 116k/mo			150,000
-----> Total Health Services	\$352,400	\$98,200	\$160,500
Agency Total	2,065,430	787,430	360,200

Carlton County Board of Commissioners
Item for Consideration / Agenda Item Cover Sheet

B-2a
Agenda Item #

To: Chairperson, Carlton County Board of Commissioners Meeting Date: 7-23-2018
Via: Paul Gassert, County Auditor/Treasurer
From: Public Health & Human Services
Title of Item for Consideration: Request for one month of unpaid Parental Leave.
Presenter: Dave Lee/Peggy Hart

Type of Action Requested (check all that apply)

- Info only, no action requested at this time
 Award contract or bid
 Approve by resolution (attached)
 Approve request for unpaid leave

Fiscal Impact (check all that apply)

- Item included under current budget Yes No NA
Budget adjustment required Yes No NA
Reviewed by Finance Committee Yes No NA

Staffing Impact

- Duties of a County employee(s) may be materially affected Yes No NA
Applicable job description(s) may require revision Yes No NA
Item may change the department's authorized staffing level Yes No NA
Reviewed by Human Resources Yes No NA

Other

- Reviewed by other Committee, Board or Commission Yes No NA
If yes, what was their recommendation The PH&HS Administrative team has reviewed and support this plan.

Summary

A Social Worker in the Disabilities Services Unit has requested Parental Leave from September through December 2018. The employee will use Personal/Sick/Vacation hours for three months of the leave, and has requested unpaid leave for one month.

Supporting Attachments

-

Motion By _____ Seconded By _____

TO: _____

Action on Motion: _____ AYE _____ NO _____ ABSTAIN

Motion: Carried Defeated

Adopted December 8, 2015

Revised April 12, 2016

Carlton County Board of Commissioners
Item for Consideration / Agenda Item Cover Sheet

B 26
Agenda Item #

To: Chairperson, Carlton County Board of Commissioners Meeting Date: 7-23-2018

Via: Paul Gassert, County Auditor/Treasurer

From: Public Health & Human Services

Title of Item for Consideration: Request to move forward with an internal posting for temporary, .5 social work position for the Disability Services Unit, to cover a parental leave.

Presenter: Dave Lee/Peggy Hart

Type of Action Requested (check all that apply)

- Info only, no action requested at this time
 Award contract or bid
 Approve by resolution (attached)
 Approve request for temporary refill

Fiscal Impact (check all that apply)

- Item included under current budget Yes No NA
Budget adjustment required Yes No NA
Reviewed by Finance Committee Yes No NA

Staffing Impact

- Duties of a County employee(s) may be materially affected Yes No NA
Applicable job description(s) may require revision Yes No NA
Item may change the department's authorized staffing level Yes No NA
Reviewed by Human Resources Yes No NA

Other

Reviewed by other Committee, Board or Commission Yes No NA

If yes, what was their recommendation PH&HS Administrative team has reviewed and supports the temporary refill.
AFSCME representatives have also reviewed and approve of temporary plan.

Summary

Due to internal job changes within Carlton County and an upcoming parental leave, the Disability Services Unit has been short staffed off and on for the past 15 months. In order to prepare for the parental leave (Sept-Dec) we are requesting to move forward with an internal posting for a .5, temporary social worker position. The temporary position would be posted internally (AFSCME) since there are eligible social worker candidates working in different classifications who could serve as a Disability Services Case Manager. This temporary position would work up to 2.5 days per week, and the projected cost to the County would be up to \$2731 (depending on what classification the employee is currently working in) The projected revenue that this temporary position would generate over four months is \$17,010. The estimated revenue after costs, would be \$14,279. Approval of this temporary position would ensure that individuals with significant disabilities would continue to receive necessary case management services.

Supporting Attachments

- _____

Motion By _____ Seconded By _____

TO: _____

Action on Motion: _____ AYE _____ NO _____ ABSTAIN

Motion: Carried Defeated

Adopted December 8, 2015

Revised April 12, 2016

Carlton County Board of Commissioners
Item for Consideration / Agenda Item Cover Sheet

B-4a
Agenda Item #

To: Chairperson, Carlton County Board of Commissioners Meeting Date: 7-23-2018

Via: Paul Gassert, County Auditor/Treasurer

From: Public Health & Human Services

Title of Item for Consideration: Closure of MSOCS DT&H in Moose Lake, opening of new MSOCS vocational site in Cloquet

Presenter: Dave Lee/Peggy Hart

Type of Action Requested (check all that apply)

- Info only, no action requested at this time
 Award contract or bid
 Approve by resolution (attached)

Fiscal Impact (check all that apply)

Item included under current budget Yes No NA

Budget adjustment required Yes No NA

Reviewed by Finance Committee Yes No NA

Staffing Impact

Duties of a County employee(s) may be materially affected Yes No NA

Applicable job description(s) may require revision Yes No NA

Item may change the department's authorized staffing level Yes No NA

Reviewed by Human Resources Yes No NA

Other

Reviewed by other Committee, Board or Commission Yes No NA

If yes, what was their recommendation _____

Summary

All State Operated (MSOCS) vocational sites are closing, and re-opening with a change in structure and billing to offer improved person-centered vocational services to individuals with disabilities. The Moose Tracks program in Moose Lake will close, effective May 31, 2019. MSOCS will open a new day program in the Cloquet area, in May 2019. The individuals that attend MSOCS programs have waiver funding (no county dollars) to pay for services.

Supporting Attachments

Determination of Need Application for Proprietary Changes, Reductions and Closures

Determination of Need Application for Expansion of DT&H Services

Motion By _____ Seconded By _____

TO: _____

Action on Motion: _____ AYE _____ NO _____ ABSTAIN

Motion: Carried Defeated

Adopted December 8, 2015

Revised April 12, 2016



Day Training and Habilitation (DT&H) Services

Determination of Need Application For Expansion of DT&H Services

Instructions

Lead agencies must use this form when they want to develop new DT&H services or expand, change or increase existing DT&H services for people with developmental disabilities.

For more information on the request process and DHS' legal authority, see the Day training and habilitation (DT&H) services need determination page in the Community-Based Services Manual (CBSM).

When completed, submit this form and any additional documentation using the "submit" button on page 4.

Lead agency information

Form with fields: DATE (7/16/2018), NAME OF LEAD AGENCY (Carlton County), CONTACT PERSON'S NAME (Peggy Hart), PHONE ((218) 878-2857), CONTACT PERSON'S EMAIL (peggy.hart@co.carlton.mn.us), CITY (Cloquet), STATE (MN), ZIP CODE (55720).

DT&H program information

Form with fields: PROGRAM NAME (Not yet established), CONTACT PERSON (Nadine Leutem), PHONE ((218) 310-9275), CONTACT PERSON'S EMAIL (nadine.leutem@state.mn.us), FAX NUMBER ((218) 729-1323), STREET ADDRESS (Unknown at this time), CITY (Cloquet), STATE (MN), ZIP CODE (55720), NPI/UMPI NUMBER, DHS LICENSE NUMBER, CORPORATE (PARENT) NAME (DHS-CBS/MSOCS).

Request

Based upon the service and support needs identified in the Coordinated Services and Support Plans and Addendums (CSSP and CSSP Addendum), we request to: (check all that apply)

Request options: [X] Develop a new facility-based, DT&H program; [] Develop a new congregate, community-based, DT&H program; [] Develop a new DT&H program satellite facility. Includes sub-points for each option.

<input type="checkbox"/>	Increase DHS licensed DT&H program facility capacity (e.g., increase the number of people with developmental disabilities who receive DT&H services within the day-service provider's facility)
IF SO	■ Provide a summary of need, the number of people that will be served
<input type="checkbox"/>	Increase the number of service days providing DT&H services (not to exceed 23 days a month)
<input type="checkbox"/>	Change the location of the DT&H service-provider facility/site
IF SO	■ Provide the present and future addresses ■ Provide the increases in primary, usable square footage within the new facility(s) for the purpose of increasing the number of people with developmental disabilities who receive DT&H services.
<input type="checkbox"/>	Change the fundamental DT&H program/services provided to people
IF SO	■ Provide a summary of the proposed services and supports to be provided
<input type="checkbox"/>	Change the DHS license to serve a different age group of people

Requirements

The lead agency must base the development of new DT&H services or the expansion and modification of existing DT&H services upon service needs identified in the Coordinated Services and Support Plan and Addendum (CSSP and CSSP Addendum) as required by Minn. Stat. §256B.092, subd. 1b.

Do all the people who either currently receive who will receive DT&H services have a current CSSP and CSSP Addendum that meets the statutory requirements?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	---

Changes

In column A, list the current license conditions. In column B, list any proposed changes. If you do not request a change in column B, write N/A.

CHANGES	COLUMN A (CURRENTLY)	COLUMN B (PROPOSED)
No more than this number of persons can be served on site at any one time.		20
Age of persons served (as stated on License)		18

County board comments and approval

The county/tribal board supports the need for changes to the programs or services as described in this application and recommends approval of this application.

SIGNATURE OF COUNTY BOARD CHAIRPERSON OR DESIGNATED REPRESENTATIVE	DATE OF COUNTY/TRIBAL BOARD ACTION
--	------------------------------------

Additional requirements

Please answer the following items (If the items are not relevant to this application, write N/A).

1. Please describe how the lead agency's proposed DT&H services determination of need request application is related to the service needs identified in the lead agency's:

- A. Community health and human services plan
- B. Community social services administration (CSSA) plan
- C. Lead agency needs determination/gaps analysis reporting
- D. CSSPs and CSSP Addendums for people with developmental disabilities.

Carlton County Public Health & Human Services continues to need a vocational supports provider that can address the complex needs of individuals that cannot be served by private providers. Carlton County PHHS values an individual's choice of service provider, and supports the option of an MSOCS site in Cloquet.

Carlton County PHHS has identified a service gap for individuals with Autism, whose behaviors are so significant, that their needs cannot be well-met by private day program/vocational providers. Carlton County PHHS would like to see this service need specifically addressed by MSOCS at their new site.

The individuals with disabilities that are served by Carlton County PHHS, as well as individuals that are the service and financial responsibility of other counties, have service plans that identify the need for vocational supports, that are currently served by Moose Tracks, or will need that service in the future.

2. If the lead agency's proposed request increases or expands the size and use of DT&H services, describe the home and community-based services and supports that were considered and ruled out as viable alternative options to DT&H services, and why.

The proposed capacity request of 20 is not a service increase.

3. Please describe how your lead agency provided information about informed choice and viable/alternative service and support options to DT&H services.

Case Managers for Carlton County PHHS have discussed vocational services and support options with each individual/guardian as part of their on-going case management. Each person is given a choice of services and supports during their annual and semi-annual meetings, and on other occasions as necessary.

4. If the lead agency's proposed request increases or expands the size and use of DT&H services, describe the home and community-based services and supports that could be used as viable alternative options to DT&H services in the future.

This request does not increase DT&H capacity.

5. Please describe how the lead agency's proposed request ensures that current and prospective people receiving DT&H services and supports will have all of the following:
- A. Individualized services and supports that meet their needs and preferences
 - B. Individualized opportunities to seek competitive employment and work at competitively paying jobs in the community with people without disabilities and with or without support services
 - C. Meaningful community integration and involvement via regular access to available community services, resources, organizations, activities and people without disabilities.
- A. The new program will use Person-centered principals and Customized Employment to help individuals identify what types of jobs and activities fit their skill level and preferences. Individuals and their teams will develop the plans and identify skill strengths and weaknesses. Giving the individuals the opportunity to participate and make decisions that affect their lives is an important part of the work that MSOCS does.
- B. The new program will assist individuals in pursuing and attaining competitive employment in their community. As individuals learn their jobs, supports will be withdrawn based on the persons ability and needs. Natural supports will be utilized when appropriate in the work setting for that person.
- C. This program will be situated within Cloquet, integration will occur naturally. Finding employment opportunities in the community where the individuals are fully integrated is a priority. Regular tours of local employers, job sites, classes, job shadowing and internships will all be utilized as a means of developing choices for individuals. The local Workforce Center and Rehab services will also be utilized as resources, as well as the local library and other community resources.

6. The lead agency assures the DT&H service provider has policies and practices that protect and support:

A. The right to privacy, dignity and respect?	<input checked="" type="radio"/> Yes <input type="radio"/> No
B. Personal autonomy, independence and control of resources?	<input checked="" type="radio"/> Yes <input type="radio"/> No
C. Accessibility and freedom from restraint?	<input checked="" type="radio"/> Yes <input type="radio"/> No
D. Individualized services and supports that meet people's needs and preferences?	<input checked="" type="radio"/> Yes <input type="radio"/> No
E. Individualized opportunities to seek competitive employment, and work at competitively paying jobs in the community with people without disabilities and with or without support services?	<input checked="" type="radio"/> Yes <input type="radio"/> No
F. Meaningful community integration and involvement via regular access to available community services, resources, organizations, activities and people without disabilities?	<input checked="" type="radio"/> Yes <input type="radio"/> No

What if I have questions?

If you have questions, or need help, please contact the DSD Response Center via email DSD.ResponseCenter@state.mn.us (preferred) or by phone at 651-431-4300 or 866-267-7655.

To send via U.S. mail, write to:

Minnesota Department of Human Services, Community Supports Administration
 Disability Services Division, ATTN: DSD Response Center
 PO Box 64967
 St. Paul, MN 55164-0967

How do I submit this application?

Use the submit button below to email this complete form to DHS. If applicable, remember to attach your documentation to the email before you send it.

SUBMIT



Day Training and Habilitation (DT&H) Services

Determination of Need Application for Proprietary Changes, Reductions and Closures

Instructions

Lead agencies must use this form when they want to make proprietary changes, reduce or terminate existing DT&H services for people with developmental disabilities.

For more information on the request process and DHS' legal authority, see the Day training and habilitation (DT&H) services need determination page in the Community-Based Services Manual (CBSM).

When completed, submit this form and any additional documentation using the "submit" button on page 4.

Lead agency information

Form with fields: DATE (7/16/2018), NAME OF LEAD AGENCY (Carlton County), CONTACT PERSON'S NAME (Peggy Hart), PHONE ((218) 878-2857), CONTACT PERSON'S EMAIL (peggy.hart@co.carlton.mn.us), CITY (Cloquet), STATE (MN), ZIP CODE (55720)

DT&H program information

Form with fields: PROGRAM NAME (Moose Tracks), CONTACT PERSON (Nadine Leutem), PHONE ((218) 310-9275), CONTACT PERSON'S EMAIL (nadine.leutem@state.mn.us), FAX NUMBER ((218) 723-1323), STREET ADDRESS (471 North Arrowhead Lane), CITY (Moose Lake), STATE (MN), ZIP CODE (55767), NPI/UMPI NUMBER (A348260000), DHS LICENSE NUMBER (1070665-2-H_DSF), CORPORATE (PARENT) NAME (DHS - CBS/MSOCS)

Request

Based upon the service and support needs identified in the Coordinated Services and Support Plans and Addendums (CSSP and CSSP Addendum), we request to: (check all that apply)

Request checkboxes: Change the DT&H service provider facility site location, Change ownership, Change name. Includes sub-points for each option.

CONTINUED ON NEXT PAGE

<input type="checkbox"/>	Decrease DHS licensed DT&H program facility (e.g., permanently reduce the number of people with developmental disabilities who receive DT&H services at the day service provider's facility)
<input type="checkbox"/>	Decrease the number of service days providing DT&H services (not to be fewer than 195 days a year)
<input checked="" type="checkbox"/>	Close a DT&H program
IF SO	<input type="checkbox"/> Provide a closing date <input type="checkbox"/> Provide alternative service options for people affected by the program closure

Requirements

Do all the people who either currently receive who will receive DT&H services have a current CSSP and CSSP Addendum that meets the statutory requirements (Minn. Stat. §256B.092, subd. 1b)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	---

County board comments and approval

This request will be submitted to the County Board meeting in August, 2018.

The county/tribal board supports the need for changes to the programs or services as described in this application and recommends approval of this application.

SIGNATURE OF COUNTY BOARD CHAIRPERSON OR DESIGNATED REPRESENTATIVE	DATE OF COUNTY/TRIBAL BOARD ACTION
--	------------------------------------

Additional requirements

Please answer the following items (If the items are not relevant to this application, write N/A).

1. Please describe the proposed DT&H-service modification.

The program will close, last day of services at this program will be early to mid May 2019. The lease for the program will be expiring on May 31, 2019 and will not be renewed. A new program will be opening in the Cloquet area and will focus on those individuals who need support with jobs in their community and for those individuals with complex needs for who other providers cannot or won't provide services. The new proposed program will be in an integrated setting in the community and will focus on individuals who currently have community work, are ready for community work or with a focus on community involvement.

This plan will decrease the on-site licensed capacity from 50 individuals to 20. Those individuals who have been identified as able to be served by private providers will be transitioned into those private programs and those remaining will continue to be served by MSOCS if their teams choose.

2. How is the lead agency's proposed DT&H-services determination of need request application related to the service needs identified in the lead agency's:

- A. Community health and human services plan;
- B. Community social services administration (CSSA) plan;
- C. Lead Agency Needs Determination//Gaps Analysis Reporting; and the
- D. CSSPs and CSSP Addendums for people with developmental disabilities.

Carlton County Public Health & Human Services continues to need a vocational supports provider that can address the complex needs of individuals that cannot be served by private providers. Carlton County PHHS values an individual's choice of service provider, and supports the option of an MSOCS site in Cloquet.

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The individuals with disabilities that are served by Carlton County PHHS, as well as individuals that are the service and financial responsibility of other counties, have service plans that identify the need for vocational supports, that are currently served by Moose Tracks, or will need that service in the future.

3. The lead agency assures the DT&H service provider has policies and practices that protect and support:	
A. The right to privacy, dignity and respect?	<input checked="" type="radio"/> Yes <input type="radio"/> No
B. Personal autonomy, independence and control of resources?	<input checked="" type="radio"/> Yes <input type="radio"/> No
C. Accessibility and freedom from restraint?	<input checked="" type="radio"/> Yes <input type="radio"/> No
D. Individualized services and supports that meet people's needs and preferences?	<input checked="" type="radio"/> Yes <input type="radio"/> No
E. Individualized opportunities to seek competitive employment, and work at competitively paying jobs in the community with people without disabilities and with or without support services?	<input checked="" type="radio"/> Yes <input type="radio"/> No
F. Meaningful community integration and involvement via regular access to available community services, resources, organizations, activities and people without disabilities?	<input checked="" type="radio"/> Yes <input type="radio"/> No

What if I have questions?

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Carlton County Board of Commissioners
Item for Consideration / Agenda Item Cover Sheet

H-1
Agenda Item #

To: Chairperson, Carlton County Board of Commissioners Meeting Date: July 23, 2018

Via: Paul Gassert, County Auditor/Treasurer

From: Dennis Genereau, Jr.

Title of Item for Consideration: Employee Vacation Year-end Rollover Request

Presenter: Dennis Genereau, Jr.

Type of Action Requested (check all that apply)

- Info only, no action requested at this time
 Award contract or bid
 Approve by resolution

Fiscal Impact (check all that apply)

Item included under current budget Yes No NA

Budget adjustment required Yes No NA

Reviewed by Finance Committee Yes No NA

Staffing Impact

Duties of a County employee(s) may be materially affected Yes No NA

Applicable job description(s) may require revision Yes No NA

Item may change the department's authorized staffing level Yes No NA

Reviewed by Human Resources Yes No NA

Other

Reviewed by other Committee, Board or Commission Yes No NA

If yes, what was their recommendation _____

Summary

The request before the Board is to authorize the Highway Maintenance Supervisor position to carry over up to 16 hours of vacation time from 2017 to 2018. The need for this request arose after the Maintenance Supervisor had no choice but to cancel scheduled vacation in December of 2017 due to snow events that mandated he come in to work. The County Engineer authorized the Maintenance Supervisor to take those two vacation days on January 4th and January 5th, as the Maintenance Supervisor had no choice but to forgo using the vacation days as planned. HR reviewed this request on July 11, and supports the relief requested.

Supporting Attachments

- _____

Motion By _____ Seconded By _____

TO: _____

Action on Motion: _____ AYE _____ NO _____ ABSTAIN

Motion: Carried Defeated

Adopted December 8, 2015

Revised November 28, 2016



2019 Carlton County Budget Presentations

** Please arrive at least 30 minutes prior to your scheduled presentation time

H-2

July 23, 2018 1:00 – 4:30	Carlton County Transportation Building 1630 County Road 61 Carlton, MN 55718 Map to Transportation Building
1:00	Carlton County Historical Society
1:10	
1:20	Carlton Soil & Water Conservation District
1:30	Emergency Medical Services Council
1:40	Arrowhead Library System
1:50	Arrowhead Regional Corrections
2:00	Carlton County Fair
2:10	
2:30	Break
2:45	Land Department
3:00	County Assessor
3:15	Community & Family Initiatives Department
3:30	Zoning and Environmental Services
3:45	Recorder/Registrar of Titles/Vital Records
4:00	Coordinator/Human Resources/RJ
4:15	Property Management Department

STATE OF MINNESOTA)
COUNTY OF CARLTON)

) ss

The undersigned, Carlton County Sheriff and Carlton County Attorney, hereby recommend the application of Eskomo Pizza Pies, LLC to be used in conjunction with an outdoor celebration for the period beginning at 6:00pm on August 10, 2018, and ending at 11:00pm on August 10, 2018. It appears to the best of our knowledge that the above-named has not, within a period of five years prior to the date of this application, violated any law relating to the sale of non-intoxicating malt liquor or intoxicating liquor, and that in our judgement, will comply with the laws and regulations relating to the conduct of said business.

Dated at Carlton County, Minnesota, this _____ day of _____, 20__.

Kelly Lake, Carlton County Sheriff
Attorney

Thom Pertler, Carlton County

STATE OF MINNESOTA)
COUNTY OF CARLTON)

) ss

TOWN OF THOMSON

It is hereby certified that the Town Board of the Town of Thomson in the County of Carlton, State of Minnesota, by resolution on the _____ day of _____, 20__, did consent to the issuance of a Wet Bar License to Eskomo Pizza Pies, LLC to be used in conjunction with an outdoor celebration for the period beginning at 6:00pm on August 10, 2018, and ending at 11:00pm on August 10, 2018.

Dated at Carlton County, Minnesota, this _____ day of _____, 20__,

the Town Board of the Town of Thomson.

ATTEST:

STATE OF MINNESOTA)
COUNTY OF CARLTON)

) ss

This is to certify that Eskomo Pizza Pies, LLC is authorized to conduct a Wet Bar in conjunction with an outdoor celebration, subject to the laws and regulations of the State of Minnesota and contingent upon all other requirements being met, for this period beginning at 6:00pm on August 10, 2018 and ending at 11:00pm on August 10, 2018.

County Board

Chairperson
Given Under My Hand and Corporate
Seal of the County of Carlton
This _____ day of _____, 20__.

Paul G. Gassert
Carlton County Auditor/Treasurer

by: _____
Deputy Treasurer

H-4

*** RESOLUTION NO. 18 -000 ***

BY COMMISSIONER:

2018

ADOPTED: July 23,

BE IT RESOLVED by the County Board of Commissioners (the "County Board") of the County of Carlton, Minnesota (the "County"), as follows:

1. Recitals.

- a. The Internal Revenue Service has issued Treasury Regulations, Section 1.150-2 (as the same may be amended or supplemented, the "Regulations"), dealing with "reimbursement bond" proceeds, being proceeds of the County's bonds used to reimburse the County for any project expenditure paid by the County prior to the time of the issuance of those bonds.
- b. The Regulations generally require that the County make a declaration of intent to reimburse itself for such prior expenditures out of the proceeds of subsequently issued bonds, that such declaration be made not later than sixty (60) days after the expenditure is actually paid, and that the bonding occur and the written reimbursement allocations be made from the proceeds of such bonds within eighteen (18) months after the later of (1) the date of payment of the expenditure or (2) the date the project is placed in service (but in no event more than three (3) years after actual payment).
- c. The County heretofore implemented procedures for compliance with the predecessor versions of the Regulations and desires to amend and supplement those procedures to ensure compliance with the Regulations.
- d. The County's bond counsel has advised the County that the Regulations do not apply, and hence the provisions of this Resolution are intended to have no application to payments of County Project cost first made by the County out of the proceeds of bonds issued prior to the date of such payments.

2. Official Intent Declaration.

The Regulations, in the situations in which they apply, require the County to have declared an official intent (the "Declaration") to reimburse itself for previously paid project expenditures out of the proceeds of subsequently issued bonds. The County Board hereby authorizes the County Auditor/Treasurer to make the County's Declarations or to delegate from time to time that responsibility to other appropriate County employees. Each Declaration shall comply with the requirements of the Regulations, including without limitation the following:

- a. Each Declaration shall be made not later than sixty (60) days after payment of the applicable project cost and shall state that the County reasonably expects to reimburse itself for the expenditure out of the proceeds of a bond issue or similar borrowing. Each Declaration may be made substantially in the form of the Attachment C which is attached to and made a part of the Resolution, or in any other format which may at the time comply with the Regulations.
- b. Each Declaration shall (1) contain a reasonably accurate description of the "project" as defined in the Regulations (which may include the property or program to be financed, as applicable), to which the expenditure relates and (2) state the maximum principal amount of bonding expected to be issued for that project.
- c. Care shall be taken so that the County, or its authorized representatives under this Resolution, not make Declarations in cases where the County does not reasonably expect to issue reimbursement to bonds to finance the subject project costs, and the County officials are hereby authorized to consult with bond counsel to the County concerning the requirements of the Regulations and their application in particular circumstances.
- d. The County Board shall be advised from time to time on the desirability and timing of the issuance of reimbursement bonds relating to project expenditures for which the County has made Declarations.

3.Reimbursement Allocations.

The designated County officials shall also be responsible for making the "reimbursement allocations" described in the Regulations, being generally written allocations that evidence the county's use of the applicable bond proceeds to reimburse the original expenditures.

4.Effect.

This Resolution shall amend and supplement all prior resolutions and/or procedures adopted by the County for compliance with the Regulations (or their predecessor versions), and, henceforth, in the event of any inconsistency, the provisions of this Resolution shall apply and govern.

See Attachment A

ATTACHMENT A Declaration of Official Intent

The undersigned, being duly elected and acting County Auditor/Treasurer of the County of Carlton, Minnesota (the "County"), pursuant to and for purposes of compliance with Treasury Regulations, Section 1.150-2 (the "Regulations"), under the Internal Revenue

code of 1986, as amended, hereby states and certifies on behalf of the County as follows:

1.The undersigned has been and is on the date hereof duly authorized by the County Board of Commissioners to make and execute this Declaration of Official Intent (the "Declaration") for and on behalf of the County

2.This Declaration relates to the following project, property or program (the "Project") and the costs thereof to be financed:

Carlton County Justice Center Facilities Site Acquisition and Building Construction Project.

3.The County reasonably expects to reimburse itself for the payment of certain costs of the Project out of the proceeds of a bond issue or similar borrowing (the"Bonds") to be issued by the County after the date of payment of such costs. As of the date hereof, the County reasonably expects that \$50,000,000 is the maximum principal amount of the bonds which will be issued to finance the Project.

4.Each expenditure to be reimbursed from the Bonds is or will be a capital expenditure or a cost of issuance, or any of the other types of expenditures described in Section 1.150-2(d)(3) of the Regulations.

5.As of the date hereof, the statements and expectations contained in this Declaration are believed to be reasonable and accurate.

County Auditor/Treasurer
County of Carlton, Minnesota

Upon motion by , seconded by , and carried, the above resolution was adopted.

Yea votes: Bodie, Brenner, Peterson, Proulx and Zmyslony

Nay votes: None

Absent: None

I, Paul G. Gassert, Auditor of the County of Carlton, do hereby certify that I have compared the foregoing with the original resolution filed in my office on the 23rd day of July, 2018, and that the same is a true and correct copy of the whole thereof.

WITNESS MY HAND AND SEAL OF OFFICE in Carlton, Minnesota, this 23rd day of July, 2018.

Paul G. Gassert
Carlton County Auditor/Treasurer