

### MEEKER-McLEOD-SIBLEY COMMUNITY HEALTH BOARD

McLeod County Solid Waste Large Conference Room 1065 5th Avenue SE, Hutchinson MN 55350

> May 25<sup>th</sup> 2017 9 AM to 11 AM Agenda

- 1. Meeting called to order
- 2. Welcome and Introductions
- 3. Additions to the Agenda
- 4. Approval of April 13th 2017 meeting minutes\*
- 5. CHS Administrative Services- Scott M. Lepak, Attorney at Law
  - a. Office Space Options\*
  - b. Job Classification and Study Options\*
  - c. Approval of MMS CHB Medical Consultant Contract\*
- 6. Administrative Items
  - a. Approval of Federal Mileage Rate
  - b. Approval of Pier Diem for Medical Consultant
- 7. Additional Meeting Dates and Work Session options

### Adjourn

#### Attachments:

- April 13th 2017 Meeting minutes
- Office Space Options
  - o Cornerstone Commons Brochure
  - o Commercial Realty Solutions Brochure
  - o Lease Agreement with McLeod County
- Job Classification and Compensation Options
  - Springsted Proposal
  - Keystone Compensation Services
  - Bjorklund Compensation Consulting
- Medical Consultant Contract

2017 Meeting Dates May 25<sup>th</sup> 9-11

July 13<sup>th</sup> 9-11 October 12<sup>th</sup> 9-11

Large Conference Room McLeod Solid Waste Bldg



### Meeker-McLeod-Sibley Community Health Services

1805 Ford Avenue, Suite 200 Glencoe, Minnesota 55336 Direct Line (507) 766-3531 Fax Number (320) 864-1484

# MEEKER-McLEOD-SIBLEY COMMUNITY HEALTH BOARD Meeting Minutes Thursday, April 13<sup>th</sup>, 2017 McLeod County Household Hazardous Waste Building, Hutchinson

### **Board Members**

Beth Obergabsent Joe Nagelpresent Mike Housmanpresent	Joe Tachenypresent Bill Pinskepresent Doug Kruegerabsent	Ron Shimanskipresent Bobbie Harderpresent Joy Cohrsabsent
Staff Present		
Diane Winterabsent	Jennifer Hauserpresent	Allie Freidrichspresent
John Glisczinskiabsent	Rachel Fruhwirthpresent	Colleen Robeckabsent
Kerry Wardpresent	•	

<u>Guests:</u> Ellen Wolter Research Scientist, Minnesota Compass | Wilder Research; Mary Bachman and Jayme Krauth- Health Educators, Sibley County; Beth Jerabek – Student Nurse

- 1. Meeting called to order
- 2. Welcome and Introductions
- **3. Presentation:** Minnesota's aging population-Ellen Wolter, MPH, MPA Research Scientist, Minnesota Compass | Wilder Research
- **4. Additions to the Agenda** Motion to accept the agenda made by Mike Housman and seconded by Bill Pinske. Motion carries.
- **5. Approval of February 2017 meeting minutes\*** Motion made by Joe Nagel and seconded by Ron Shimanski. Motion carries.
- 6. How MMS Is Meeting the Requirements of the Local Public Health Act
  Powerpoint presentation was done providing information and education on how MMS
  CHS is meeting the requirements of Minnesota Statute 145A as a follow-up from the
  January 2017 presentation by Dee Finley from Minnesota Department of Health.

**Highlights:** Majority of requirements being met. MMS still needs to designate a Medical Consultant and establish a consistent performance management system that monitors data and outcomes. Discussed role and responsibilities of individual County Medical Consultants. At this point in time each county will retain their individual Medical Consultants.

Reviewed the community health assessment process and development of community health improvement plans. In recent years the requirements for the CHA/CHIP process have become more extensive and more inclusive of local partners. In 2013 MMS CHS worked collaboratively with local hospitals and identified 3 health priorities. In 2016 MMS CHS worked with more local partners and identified 6 health priorities. In addition, have adopted a Collective Action model to address the health issues identified. Identified challenges of collecting local data, and writing

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community health plans using data indicators. Additional challenges include staff capacity with increase time intensive work and funding issues. Staff do not have the capacity to implement community health improvement plans.

All CHBs must annual report on work being done in the six areas of Public Health Responsibility through the Planning and Performance Measurement Reporting System (PPMRS). MMS CHS addresses the majority of the 6 areas through grants that provide programs and services tailored to the needs of our communities.

The Strategic Plan is being revised and will be brought to the board in July for approval.

7. Administrative Services Summary\* attached document in the packet. Timeline was developed in order to meet components of the motion made during the February 2017 meeting. Timeline is reflective of information received by consultant Scott Lepak. Summary: Federal and tax identification numbers should be completed by January 1<sup>st</sup> of 2018 after health insurance options have been researched and a determination has been made. Classification and compensation plan – two proposals have been submitted, board request a 3<sup>rd</sup> quote from Bjorklund Compensation Consulting. Completing personnel policies will happen later in the year, may be able to review and revise existing policies from Supporting Hands Nurse Family Partnership and/or Horizon Public Health. Paul Viring- Meeker County Administrator and Allie will work together on insurance options for the CHS. Vince – IT Director from McLeod County and Allie will work to research options for IT services. His recommendation is a clean break including emails, file storage, etc. Research is still being done regarding office locations. Human Resources services as well as payroll services may be contracted out and provided as combination of services. Request to share information to commissioners as it comes in prior to the May meeting which will be May 25<sup>th</sup>.

### 8. SCHSAC Update-

Bobbie Harder, SCHSAC represented provided an update of recent SCHSAC meeting. Suggestion made by Bobbie Harder that rotating the role of SCHSAC representatives is not a good idea and recommends having a representative serve for more than one year. Drew Campbell from Blue Earth County is new chair. Resolution regarding Family Home Visiting reimbursement and bring back to the boards and share with your legislators- not sure what is going on locally and what funding or reimbursement are we receiving to do this now at MMS. Reimbursement locally is based on what we get from PrimeWest and South Country Health Alliance but straight MA is a lesser payout. Lots of work and how do we get it all done. For commissioners to support the home visiting resolution they would like more local data and what we do. Renee from Stearns spoke about performance improvement steering committee in relation to PPMRS and what locals are reporting back to the State. SCHSAC committee reported in regards to regional epidemiologist and other services do MDH provide to local public health. Governor's office spoke to work on better water supply with 25% increase of water quality in MN by 2025. Bobbie has volunteered to help plan an annual workshop for SCHSAC-

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Our Communities, Our Health and Our State is the theme. Next meeting will be planning the work sessions.

### 9. Fiscal Officers Report

Responded to account activity questions 1) Doherty staffing is staffing cost for the peer breastfeeding grant. 2) Project Harmony grant – notebook purchase – for Recovery Coach. 3) Concerns regarding Reproductive Health Alliance membership Family Planning Grant –Allie follow up with Gary at MDH, and Reproductive Health Alliance and report back to board, 4) Purchase of Mental Health 1<sup>st</sup> Aide manuals

Motion by Mike Housman and seconded by Ron Shimanski- Motion carried.

### 10. Administrative Items

- a) Meeker-McLeod-Sibley Mass Fatality Plan\* Motion by Mike Housman and seconded Joe Nagel, Motion carries
- b) Public Health Emergency Preparedness contract amendment for additional funding of \$8,987 for the time period of 12/22/2016-6/30/2017 Motion by Bill Pinske and seconded by Mike Housman. Motion carries.
- c) Time only extension for Healthy Homes grant until 9/30/17 Motion by Ron Shimanski and seconded by Bill Pinske. Motion carries.

Adjourn- Motioned by Mike Housman and Bill Pinske to adjourn. Motion carries.

### Attachments:

- February 2017 Meeting minutes
- MMS CHS Mass Fatality Plan
- Administrative Services Summary
- Fiscal officer's report

### 2017 Meeting Dates

May 25<sup>th</sup>, 9 -11 July 13<sup>th</sup> 9-11 October 12<sup>th</sup> 9-11 Large Conference Room McLeod Solid Waste Bldg

Mike Housman, Secretary

# **Office Space Options**

### **Option One:**

### **McLeod County Household Hazardous Waste Building**

Square Feet	# Offices	# Meeting rooms	Cost	Operating Costs
?	4	2	?	?

Pro's	Con's
<ul> <li>Within county system</li> <li>Furniture included</li> <li>Current location of WIC clinic</li> <li>Cost effective</li> <li>Known to staff and community partners</li> </ul>	<ul> <li>Shared Meeting space within McLeod County system- less room availability</li> <li>No room for expansion</li> <li>IT services not easily separated*</li> </ul>

### **Notes:**

-Will need to draft an agreement between McLeod County and Meeker-McLeod-Sibley Community Health Services.

## **Option Two:**

### Cornerstone Commons- 114 Main St. N, Hutchinson MN

Square Feet	# Offices	# Meeting rooms	Cost	Operating Expense	Built
1 <sup>st</sup> Floor 534-4881	?	?	Negotiable	\$5.61 PSE	2006
2 <sup>nd</sup> Floor 200-2797					

Pro's	Con's
Room for expansion	<ul> <li>Additional cost for furniture</li> </ul>
<ul> <li>Increases visibility of independent agency</li> </ul>	•
•	

### **Notes:**

Brochure available:

https://www.commercialsearch.com/listings/114-Main-St-N\_Hutchinson\_MN\_55350\_bC8T3GT34CMV62DV6CMU3GC9P6WR62C9MC4TPCTB66CRK0T31CMVK0DHM68U34DK2

# **Option Three:**

# Walmart Outlot- 1250 Hwy 15, Hutchinson

Square Feet	# Offices	# Meeting rooms	Cost	Operating Expense	Built
Main 960 Lower Level 3 Suites from 361- 864	?	?	\$6- \$15.00 psf	\$7.50psf, including utilities	

Pro's	Con's
<ul> <li>Room for expansion</li> <li>Increases visibility of independent agency</li> </ul>	<ul><li>Additional cost for furniture</li><li>•</li></ul>

### **Notes:**

Brochure available:

 $\underline{http://commrealty solutions.com/wp-content/uploads/Hutchinson-SouthPoint-EBrochure.pdf}$ 

## **Option Four:**

### Park Place- 101 Main St S, Hutchinson

Square Feet	# Offices	# Meeting rooms	Cost	Operating Expense	Built
Various suites available ranging from 425-872	?	?	\$12 SF/Year		1984

Pro's	Con's
Room for expansion	<ul> <li>Additional cost for furniture</li> </ul>
<ul> <li>Increases visibility of independent agency</li> </ul>	•
•	

### **Notes:**

No brochure available, below is a link to the website:

https://www.commercialsearch.com/listings/101-Main-St-S\_Hutchinson\_MN\_55350\_b60T66DK265J3GEB5C8RPCE3374W6CCK3CGWKGDB56CUKAD1PCDK36E9J75JPACHK

# **CORNERSTONE COMMONS**

114 Main Street North, Hutchinson, MN 55350





1ST FLOOR AVAILABLE SF:	534 - 4,881 SF
2ND FLOOR AVAILABLE SF:	200 - 2,797 SF
LEASE RATE:	Negotiable
OPERATING EXPENSES:	\$5.61/PSF
LOT SIZE:	0.4 Acres
BUILDING SIZE:	24,180 SF
YEAR BUILT:	2006
ZONING:	C3 - Central Commercial District
CROSS STREETS:	Main Street N & 1st Ave NE

### PROPERTY OVERVIEW

Build to suit office/retail space available for lease in Class A mixed use building located in historic Downtown Hutchinson.

### PROPERTY FEATURES

- Build to Suit Offices/Retail/Medical
- Class A Building
- Great Access and Parking
- Flexible Size Office/Retail Spaces
- Great Amenities Including Coffee Shop and Fitness on site
- New Ownership Motivated to do Deals.

### KW COMMERCIAL

3464 Washington Drive, #100

Eagan, MN 55122

### MATTHEW KLEIN, CCIM

Senior Director - Investment Services 612.382.3403 mklein@kwcommercial.com MN #20186454

### ANTHONY PASSANANTE

Senior Associate - Investment Services 218.329.0953 anthony@kwcmidwest.com MN #40283507

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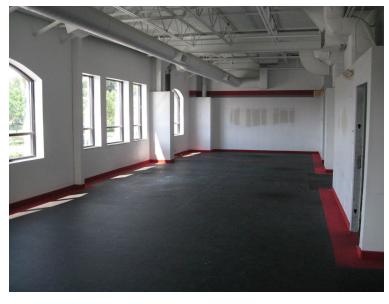
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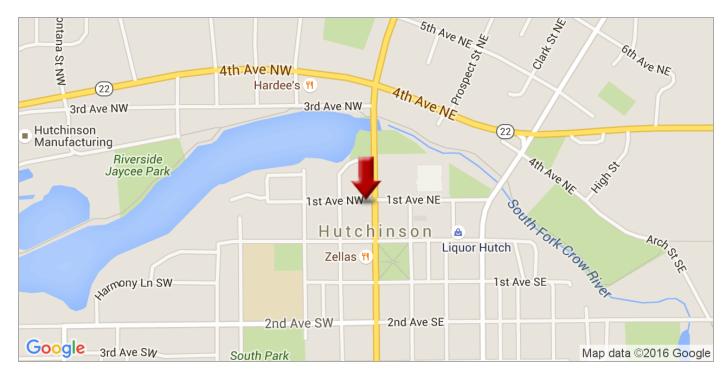
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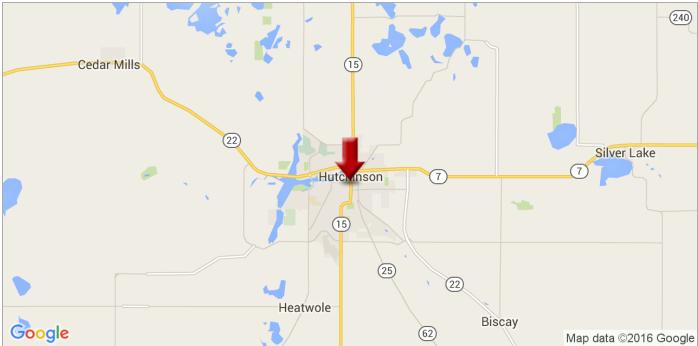
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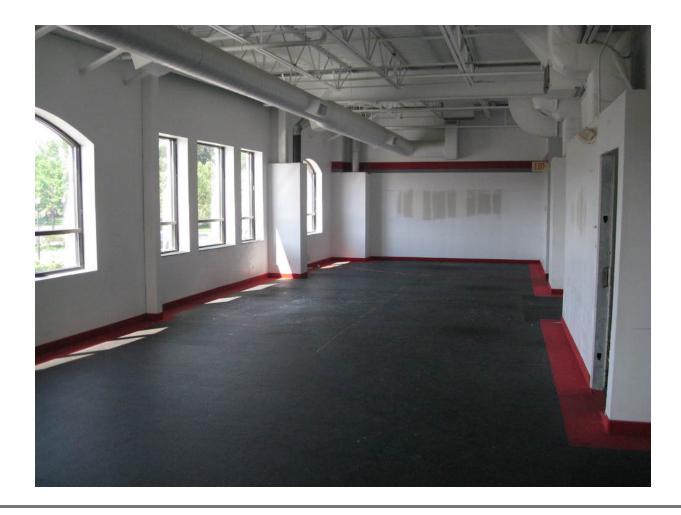
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kwcmidwest.com/

# CORNERSTONE COMMONS

114 Main Street North, Hutchinson, MN 55350





SPACE	SPACE USE	LEASE RATE	OPERATING EXPENSES	LEASE TYPE	SIZE (SF)	AVAILABILITY
First Floor	Neighborhood Center	NEGOTIABLE	\$5.61/PSF	NNN	534 - 4,881 SF	VACANT
Second Floor	Neighborhood Center	NEGOTIABLE	\$5.61/PSF	NNN	200 - 2,797 SF	VACANT

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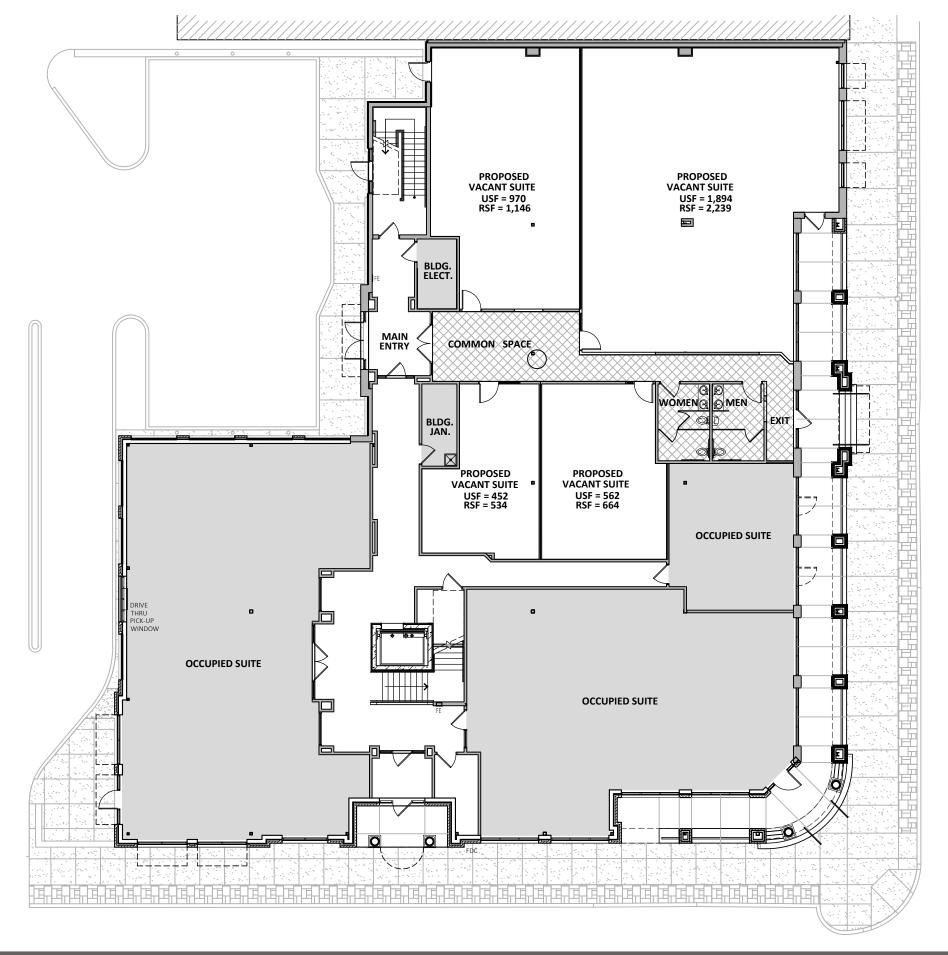
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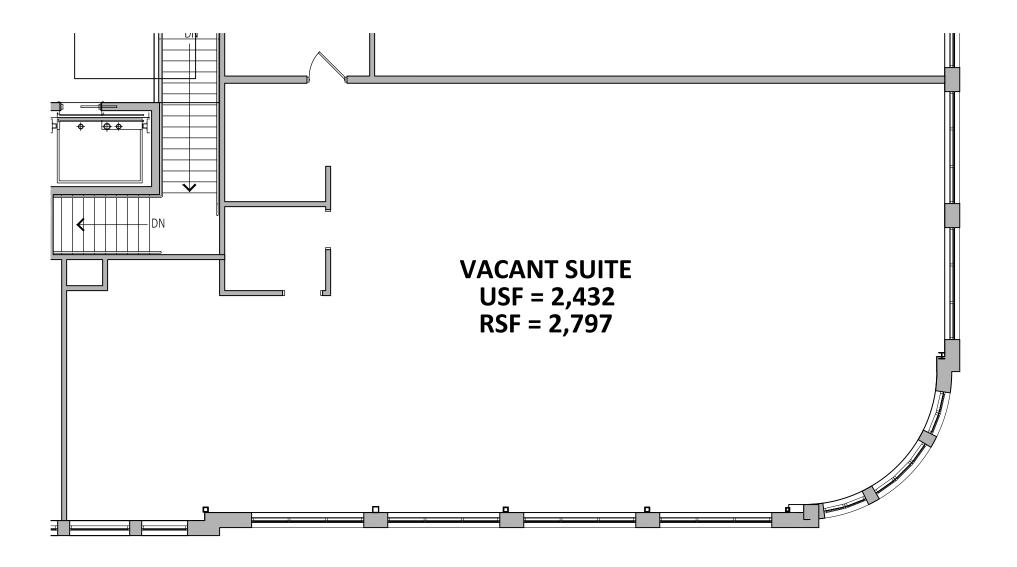
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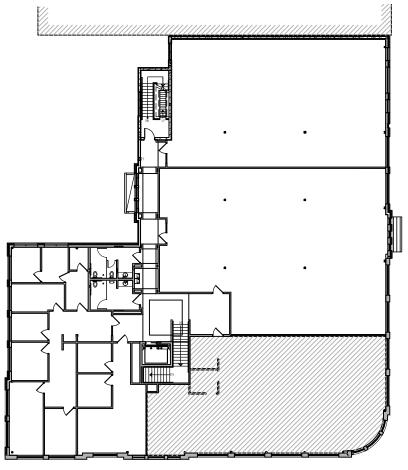
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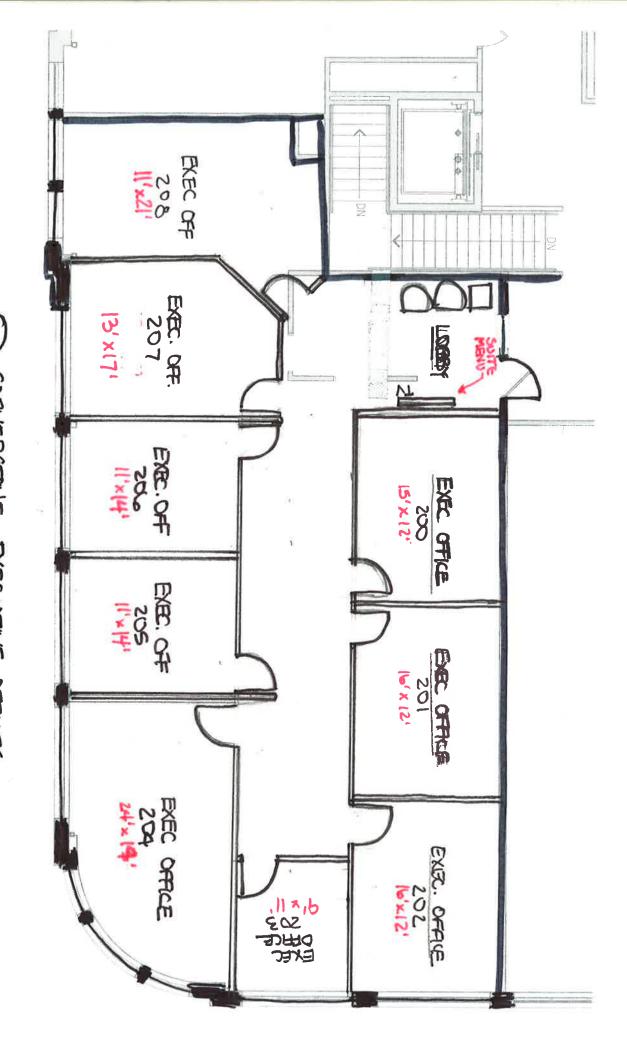












CORNERSIONE EXECUTIVE OFFICES



Demographics

		2015 Proje	ction		2016 Proje	ction
Population	< 1 Mile	< 3 Miles	< 5 Miles	< 1 Mile	< 3 Miles	< 5 Miles
Total Estimated Population	5,692	13,951	17,989	6,152	15,473	20,117
Total Census 2010 Population	5,525	13,008	16,309	5,525	13,008	16,309
Population Change %	5.9%	6.8%	10.3%	15.1%	17.7%	22.9%
Population Density (People/SQ Mile)	3,188	2,389	1,848	3,411	2,574	1,992
Median Age	40	41	42	42	43	43
Total Males	2,773	6,894	8,932	3,035	7,706	10,049
Total Females	2,919	7,057	9,057	3,117	7,767	10,068
		2015 Proje	ction		2016 Proje	rtion
Population By Age Group	< 1 Mile	< 3 Miles	< 5 Miles	< 1 Mile	< 3 Miles	< 5 Miles
4 Years Old and Younger	388	912	1,137	393	973	1,236
5 - 9 Years Old	424	1,020	1,287	442	1,090	1,383
10 - 14 Years Old	411	1,006	1,286	435	1,073	1,377
15 - 19 Years Old	409	1,030	1,341	448	1,126	1,463
20 - 24 Years Old	402	1,039	1,346	434	1,133	1,486
25 - 29 Years Old	390	956	1,199	423	1,083	1,405
30 - 34 Years Old	391	904	1,106	392	977	1,240
35 - 39 Years Old	390	914	1,137	398	971	1,216
0 - 44 Years Old	416	1,024	1,310	436	1,073	1,357
15 - 49 Years Old	391	1,005	1,318	429	1,070	1,380
50 - 54 Years Old	362	935	1,240	400	1,031	1,363
55 - 59 Years Old	315	818	1,097	362	956	1,275
60 - 64 Years Old	238	597	816	300	766	1,034
55 - 69 Years Old	184	459	634	231	601	827
70 - 74 Years Old	144	359	481	176	461	640
75 - 79 Years Old	131	322	413	140	357	480
30 - 84 Years Old	118	278	350	111	287	380
35 Years Old and Older	188	373	491	202	445	575
Population By Ethnicity		2015 Proje	ction		2016 Proje	ction
	< 1 Mile	< 3 Miles	< 5 Miles	< 1 Mile	< 3 Miles	< 5 Miles
White	5,530	13,484	17,434	5,937	14,833	19,348
Black	75	153	188	113	242	301
Native American	3	23	23	6	33	33
Asian	37	185	214	53	259	305
Pacific Islander	N/A	1	1	N/A	1	1
2 or More Races	47	105	129	43	105	129
Hispanic	125	341	375	82	258	279
White Non-Hispanic	5,387	13,105	16,998	5,782	14,406	10.040
sorr i naparno	0,367				1.1,100	18,848
The state of the purity	3,367		ction		•	
Housing		2015 Proje		< 1 Mile	2016 Proje	ction
Housing	< <b>1 Mile</b> 2,480		ction < 5 Miles 7,096	< 1 Mile 2,692	•	
Housing  Total Estimated Households	< 1 Mile	2015 Proje < 3 Miles	< 5 Miles		2016 Project	ction < 5 Miles
Housing Fotal Estimated Households Fotal Census 2010 Households	< <b>1 Mile</b> 2,480	<b>2015 Proje</b> < <b>3 Miles</b> 5,693	< <b>5 Miles</b> 7,096	2,692	2016 Project < 3 Miles 6,302	ction < 5 Miles 7,917
Housing Fotal Estimated Households Fotal Census 2010 Households Average Household Size	< 1 Mile 2,480 2,408 2.3	<b>2015 Proje</b> < <b>3 Miles</b> 5,693 5,310	< <b>5 Miles</b> 7,096 6,455	2,692 2,408	2016 Project < 3 Miles 6,302 5,310	ction < 5 Miles 7,917 6,455
Housing  Fotal Estimated Households  Fotal Census 2010 Households  Average Household Size  Fotal Housing Units	< 1 Mile 2,480 2,408 2,3 2,645	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067	< 5 Miles 7,096 6,455 2.5 7,637	2,692 2,408 N/A 2,740	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450	<ul> <li>&lt; 5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> </ul>
Housing  Fotal Estimated Households  Fotal Census 2010 Households  Average Household Size  Fotal Housing Units  Dwner	< 1 Mile 2,480 2,408 2.3	2015 Proje < 3 Miles 5,693 5,310 2.4	< <b>5 Miles</b> 7,096 6,455 2.5	2,692 2,408 N/A	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383	<ul> <li>&lt; 5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> </ul>
Housing Total Estimated Households Total Census 2010 Households Average Household Size Total Housing Units Owner Renter	< 1 Mile 2,480 2,408 2,3 2,645 1,551	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113	< 5 Miles 7,096 6,455 2.5 7,637 5,336	2,692 2,408 N/A 2,740 1,618	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450	<ul> <li>5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> <li>5,745</li> </ul>
Housing  Fotal Estimated Households  Fotal Census 2010 Households  Average Household Size  Fotal Housing Units  Dwner  Renter	< 1 Mile 2,480 2,408 2,3 2,645 1,551 968	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650	< 5 Miles 7,096 6,455 2.5 7,637 5,336 1,878	2,692 2,408 N/A 2,740 1,618	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743	<ul> <li>&lt; 5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> <li>5,745</li> <li>1,996</li> </ul>
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units	< 1 Mile 2,480 2,408 2.3 2,645 1,551 968 128	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje	< 5 Miles 7,096 6,455 2.5 7,637 5,336 1,878 426	2,692 2,408 N/A 2,740 1,618 994	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327 2016 Projet	<ul> <li>5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> <li>5,745</li> <li>1,996</li> <li>460</li> </ul>
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units  Income	< 1 Mile 2,480 2,408 2.3 2,645 1,551 968 128	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles	< 5 Miles 7,096 6,455 2.5 7,637 5,336 1,878 426 ction	2,692 2,408 N/A 2,740 1,618 994 131	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles
Housing  Total Estimated Households  Total Census 2010 Households  Everage Household Size  Total Housing Units  Eventer  Flacant Housing Units  Income	< 1 Mile 2,480 2,408 2.3 2,645 1,551 968 128	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313	< 5 Miles 7,096 6,455 2.5 7,637 5,336 1,878 426 ction < 5 Miles 383	2,692 2,408 N/A 2,740 1,618 994 131	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341	<ul> <li>5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> <li>5,745</li> <li>1,996</li> <li>460</li> <li>ction</li> <li>&lt; 5 Miles</li> <li>422</li> </ul>
Housing  Total Estimated Households  Total Census 2010 Households  Everage Household Size  Total Housing Units  Everage Household Size  Total Housing Units  Fincome  Income  Income  Inder \$10,000  -10,000 - \$14,999	< 1 Mile 2,480 2,408 2.3 2,645 1,551 968 128 < 1 Mile 166 186	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316	< 5 Miles 7,096 6,455 2.5 7,637 5,336 1,878 426 ction < 5 Miles 383 355	2,692 2,408 N/A 2,740 1,618 994 131  < 1 Mile 179 204	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351	<ul> <li>5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> <li>5,745</li> <li>1,996</li> <li>460</li> <li>ction</li> <li>&lt; 5 Miles</li> <li>422</li> <li>396</li> </ul>
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  110,000 - \$14,999  115,000 - \$19,999	< 1 Mile 2,480 2,408 2.3 2,645 1,551 968 128 < 1 Mile 166 186 204	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403	2,692 2,408 N/A 2,740 1,618 994 131  < 1 Mile 179 204 216	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381	<ul> <li>5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> <li>5,745</li> <li>1,996</li> <li>460</li> <li>ction</li> <li>&lt; 5 Miles</li> <li>422</li> <li>396</li> <li>445</li> </ul>
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  110,000 - \$14,999  155,000 - \$19,999  120,000 - \$24,999	< 1 Mile 2,480 2,408 2.3 2,645 1,551 968 128 < 1 Mile 166 186 204 237	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459	2,692 2,408 N/A 2,740 1,618 994 131  < 1 Mile 179 204 216 262	2016 Project < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327 2016 Project < 3 Miles 341 351 381 449	<ul> <li>5 Miles</li> <li>7,917</li> <li>6,455</li> <li>N/A</li> <li>8,198</li> <li>5,745</li> <li>1,996</li> <li>460</li> <li>ction</li> <li>&lt; 5 Miles</li> <li>422</li> <li>396</li> <li>445</li> <li>513</li> </ul>
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  \$10,000 - \$14,999  \$15,000 - \$19,999  \$20,000 - \$24,999  \$25,000 - \$29,999	<1 Mile 2,480 2,408 2.3 2,645 1,551 968 128 <1 Mile 166 186 204 237 141	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404 403	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459 490	2,692 2,408 N/A 2,740 1,618 994 131  < 1 Mile 179 204 216 262 147	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381 449 443	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles 422 396 445 513 543
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  \$10,000 - \$14,999  \$15,000 - \$19,999  \$20,000 - \$24,999  \$25,000 - \$29,999  \$30,000 - \$34,999	<1 Mile 2,480 2,408 2.3 2,645 1,551 968 128 <1 Mile 166 186 204 237 141 150	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404 403 329	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459 490 401	2,692 2,408 N/A 2,740 1,618 994 131  < 1 Mile 179 204 216 262 147 160	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381 449 443 364	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles 422 396 445 513 543 447
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  \$10,000 - \$14,999  \$15,000 - \$19,999  \$20,000 - \$24,999  \$25,000 - \$29,999  \$30,000 - \$34,999  \$35,000 - \$34,999	<1 Mile 2,480 2,408 2,3 2,645 1,551 968 128 <1 Mile 166 186 204 237 141 150 194	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404 403 329 434	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459 490 401 519	2,692 2,408 N/A 2,740 1,618 994 131  < 1 Mile 179 204 216 262 147 160 210	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381 449 443 364 481	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles 422 396 445 513 543 447 579
Housing  Total Estimated Households  Total Census 2010 Households  Average Household Size  Total Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  \$10,000 - \$14,999  \$15,000 - \$14,999  \$20,000 - \$24,999  \$25,000 - \$29,999  \$30,000 - \$34,999  \$35,000 - \$34,999  \$40,000 - \$44,999	<1 Mile 2,480 2,408 2,3 2,645 1,551 968 128 <1 Mile 166 186 204 237 141 150 194 159	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404 403 329 434 358	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459 490 401 519 419	2,692 2,408 N/A 2,740 1,618 994 131 <ul> <li>1 Mile</li> <li>179</li> <li>204</li> <li>216</li> <li>262</li> <li>147</li> <li>160</li> <li>210</li> <li>169</li> </ul>	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381 449 443 364 481 395	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles 422 396 445 513 543 447 579 465
Housing  Fotal Estimated Households  Fotal Census 2010 Households  Average Household Size  Fotal Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  \$10,000 - \$14,999  \$15,000 - \$14,999  \$20,000 - \$24,999  \$20,000 - \$24,999  \$30,000 - \$34,999  \$30,000 - \$34,999  \$40,000 - \$44,999  \$45,000 - \$44,999	<1 Mile 2,480 2,408 2,3 2,645 1,551 968 128 <1 Mile 166 186 204 237 141 150 194	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404 403 329 434	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459 490 401 519	2,692 2,408 N/A 2,740 1,618 994 131  < 1 Mile 179 204 216 262 147 160 210	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381 449 443 364 481	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles 422 396 445 513 543 447 579 465 460
Housing  Fotal Estimated Households  Fotal Census 2010 Households  Average Household Size  Fotal Housing Units  Dwner  Renter  Vacant Housing Units  Income  Under \$10,000  \$10,000 - \$14,999  \$15,000 - \$14,999  \$20,000 - \$24,999  \$20,000 - \$24,999  \$30,000 - \$34,999  \$30,000 - \$34,999  \$40,000 - \$44,999  \$45,000 - \$44,999	<1 Mile 2,480 2,408 2,3 2,645 1,551 968 128 <1 Mile 166 186 204 237 141 150 194 159	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404 403 329 434 358	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459 490 401 519 419	2,692 2,408 N/A 2,740 1,618 994 131 <ul> <li>1 Mile</li> <li>179</li> <li>204</li> <li>216</li> <li>262</li> <li>147</li> <li>160</li> <li>210</li> <li>169</li> </ul>	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381 449 443 364 481 395	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles 422 396 445 513 543 447 579 465
Housing Total Estimated Households Total Census 2010 Households Average Household Size Total Housing Units Owner Renter Vacant Housing Units	<1 Mile 2,480 2,408 2,3 2,645 1,551 968 128  <1 Mile 166 186 204 237 141 150 194 159 136	2015 Proje < 3 Miles 5,693 5,310 2.4 6,067 4,113 1,650 306  2015 Proje < 3 Miles 313 316 347 404 403 329 434 358 320	< 5 Miles 7,096 6,455 2,5 7,637 5,336 1,878 426  ction < 5 Miles 383 355 403 459 490 401 519 411	2,692 2,408 N/A 2,740 1,618 994 131 <ul> <li>1 Mile 179 204 216 262 147 160 210 169 151</li> </ul>	2016 Projet < 3 Miles 6,302 5,310 N/A 6,450 4,383 1,743 327  2016 Projet < 3 Miles 341 351 381 449 443 364 481 395 355	ction < 5 Miles 7,917 6,455 N/A 8,198 5,745 1,996 460 ction < 5 Miles 422 396 445 513 543 447 579 465 460



Income		2015 Projection			2016 Projection		
income	< 1 Mile	< 3 Miles	< 5 Miles	< 1 Mile	< 3 Miles	< 5 Miles	
\$100,000 - \$124,999	57	160	275	63	179	312	
\$125,000 - \$149,999	7	40	74	8	45	85	
\$150,000 - \$199,999	N/A	69	97	N/A	79	111	
Over \$200,000	18	48	61	18	52	67	
Median Household Income	\$39,057	\$43,504	\$46,312	\$38,982	\$43,521	\$46,352	
Aggregate Household Income	\$105, 175,744	\$284, 306,435	\$373, 249,853	\$115, 026,852	\$316, 511,287	\$419, 047,142	
Average Household Income	\$42,095	\$47,759	\$51,437	\$42,075	\$47,825	\$51,519	
Per Capita Household Income	\$18,245	\$19,770	\$20,285	\$18,332	\$19,815	\$20,331	

Household Expenditures		2015 Projecti	on		2016 Projection	on
Household Expenditures	< 1 Mile	< 3 Miles	< 5 Miles	< 1 Mile	< 3 Miles	< 5 Miles
Total Annual Household	\$95, 281,076	\$239, 678,373	\$307, 946,961	\$104, 467,618	\$267, 487,476	\$346, 726,746
Average Annual Household	\$38,574	\$41,109	\$42,896	\$38,796	\$41,347	\$43,179
ood	\$5,096	\$5,355	\$5,537	\$5,034	\$5,301	\$5,496
Cereals & Bakery Products	\$396	\$407	\$414	\$390	\$401	\$408
Cereals & Cereal Products	\$137	\$142	\$146	\$136	\$141	\$145
Bakery Products	\$281	\$290	\$297	\$275	\$283	\$288
Meats, Poultry, Fish & Eggs	\$829	\$862	\$884	\$844	\$879	\$901
Dairy ProductseFMisc	\$328	\$342	\$351	\$331	\$345	\$357
lousing	\$12,792	\$13,496	\$13,996	\$12,905	\$13,621	\$14,140
Owned Dwellings	\$4,636	\$5,069	\$5,384	\$4,661	\$5,113	\$5,450
Nortgage Interest & Charges	\$2,340	\$2,581	\$2,756	\$2,249	\$2,472	\$2,631
roperty Taxes	\$1,340	\$1,453	\$1,536	\$1,323	\$1,427	\$1,504
Rented Dwellings	\$2,527	\$2,460	\$2,401	\$2,463	\$2,394	\$2,332
Jtilities, Fuels & Public Services	\$3,009	\$3,127	\$3,202	\$3,057	\$3,167	\$3,238
Natural Gas	\$449	\$466	\$476	\$433	\$447	\$457
Electricity	\$1,102	\$1,138	\$1,162	\$1,122	\$1,155	\$1,176
uel Oil or Other Fuels	\$118	\$120	\$122	\$118	\$121	\$123
elephone Services	\$998	\$1,038	\$1,063	\$1,030	\$1,076	\$1,105
Vater & Other Public Services	\$325	\$338	\$346	\$336	\$349	\$358
Household Operations	\$602	\$652	\$691	\$598	\$648	\$686
Personal Services	\$229	\$248	\$262	\$233	\$251	\$265
Other Household Expenses	\$419	\$453	\$477	\$418	\$457	\$485
Housekeeping Supplies	\$550	\$574	\$591	\$533	\$555	\$571
Household Furnishings & Equipment	\$1,283	\$1,389	\$1,467	\$1,251	\$1,345	\$1,414
urniture	\$333	\$366	\$390	\$329	\$359	\$382
Toor Coverings	\$34	\$37	\$39	\$33	\$36	\$39
Vlajor Appliances	\$194	\$206	\$215	\$192	\$205	\$214
Sm. Appliances & Misc Housewares	\$88	\$93	\$96	\$88	\$93	\$97
Apparel & Services	\$1,390	\$1,476	\$1,539	\$1,412	\$1,496	\$1,559
	\$7,109	\$7,606	\$7,937	\$7,300	\$7,807	\$8,147
Maintenance & Repairs	\$561	\$591	\$611	\$562	\$589	\$609
/ehicle Insurance	\$1,021	\$1,076	\$1,113	\$1,053	\$1,103	\$1,135
Public Transportation	\$323	\$356	\$380	\$322	\$355	\$379
Health Care	\$2,800	\$2,898	\$2,957	\$2,745	\$2,841	\$2,900
Intertainment	\$1,979	\$2,141	\$2,255	\$2,001	\$2,176	\$2,303
Tobacco & Smoking Related	\$274	\$278	\$280	\$285	\$288	\$290
Cash Contributions	\$1,204	\$1,308	\$1,385	\$1,198	\$1,302	\$1,380
Personal Insurance & Pensions	\$3,657	\$4,101	\$4,428	\$3,632	\$4,054	\$4,366
ife & Other Personal Insurance	\$305	\$331	\$350	\$310	\$336	\$355
Pensions & Social Security	\$3,367	\$3,782	\$4,088	\$3,331	\$3,731	\$4,027



1250 Hwy 15 So., Hutchinson, MN 55350



# **Newly Remodeled** Located on Walmart Outlot!

### PROPERTY INFORMATION

- \* LEASE RATE \$6.00-15.00/psf NNN Lease
- \* Operating Expenses \$7.50/psf (including utilities)
- \* Building is 10,000 Square Feet
- \* Available: Main Floor 960/sf Lower Level (3) Suites 361/sf - 864/sf
- \* Lot is appx. 1.0 Acre
- \* McLeod County PID 23.317.0020
- Fastest growing city in Central, MN
- \* Progressive and innovative community
- State-of-the-art telecommunications service
- \* Visibility and access to Highway 15
- \* Located near Walmart Super Center, Subway, Game Stop, Liberty Tax, Kwik Trip, Applebee's, Hutchinson Community Hospital, Taco Bell, McDonald's, Buffalo Wild Wing's and much more . . .





**Contact: WAYNE ELAM** (763) 229-4982

WElam@commrealtysolutions.com

3 Highway 55 West, Buffalo, MN 55313

cell **763 229 4982** 

office **763 682 2400** fax **763 682 4524** 

1250 Hwy 15 So., Hutchinson, MN 55350

## **TRAFFIC COUNTS - 2016**

- \* Highway 15 13,000 VPD
- \* Century Ave. 4,850 VPD



# **Contact: WAYNE ELAM** (763) 229-4982

WElam@commrealtysolutions.com





### PROPERTY INFORMATION

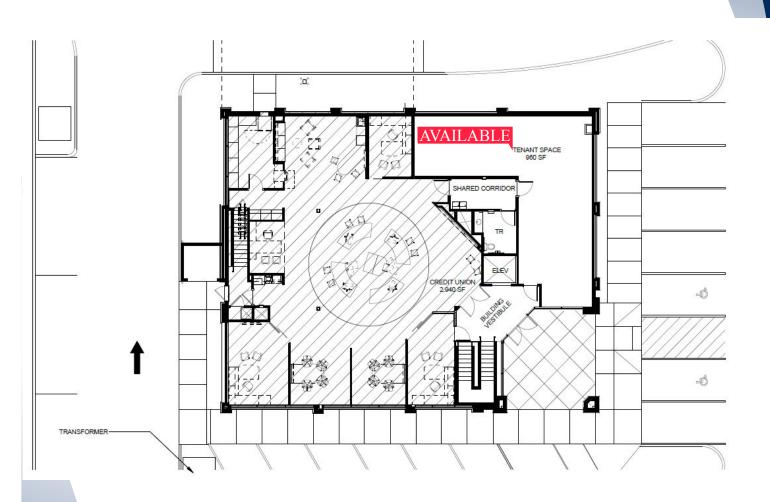
- \* Quick and easy access to Highway 15
- \* Less than 1 hour from Minneapolis
- \* Just 45 miles from I-94
- \* Regional Healthcare Hutchinson Area Health Care
- \* Major retailers in the area include Walmart Super Center, Taco Bell, Target, Best Buy, Buffalo Wild Wing's, Applebee's and much more.

3 Highway 55 West, Buffalo, MN 55313

cell **763 229 4982** office **763 682 2400** fax **763 682 4524** 

1250 Hwy 15 So., Hutchinson, MN 55350

960/sf **Available** 



**Main Level** Floorplan



**Contact:** WAYNE ELAM (763) 229-4982

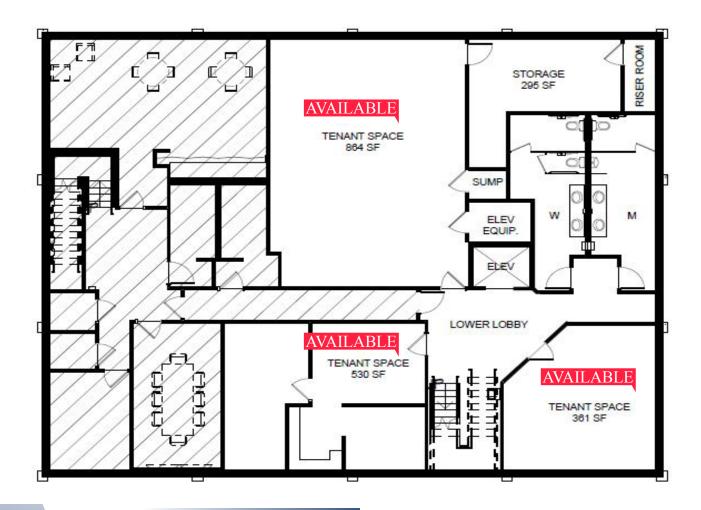
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# **Lower Level** Floorplan





Suite 864/sf Suite 530/sf Suite 361/sf



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# Job Classification and Compensation Study Options

**Option One: Springsted** 

Julie Urell

jurell@springsted.com

651-223-3041

Projected	Fee	Time Frame	#
Hours			Positions/Employees
20	\$2,900	Initiation 3 weeks of notification	5 Positions
		Completion within 4 months	5 Employees

### **Process:**

- 1) Project Initiation
- 2) Data Collection
- 3) Preliminary Classifications and Position Descriptions
- 4) Market Survey
- 5) Job Evaluation
- 6) Development of Pay Plan and Implementation Strategy
- 7) Executive Summary
- 8) Post Contract Maintenance

### See Attached Quote

### **Considerations:**

- Includes review and updated position descriptions
- Includes market study

### **Option Two: Keystone Compensation Group**

Saado Abboud sabboud@keystonecomp.net 612-810-3522

Projected	Fee	Time Frame	#
Costs			Positions/Employees
\$400/job	\$1,600-\$2,000	Within two weeks of notification	4-5 jobs

### **Process:**

- 1) Review job descriptions and verify job contents
- 2) Evaluate 4-5 jobs with Keystone Leveling System
- 3) Assign appropriate grade and range utilizing McLeod County salary structure and design
- 4) Provide recommendations to Community Health Services Administrator
- 5) Available for future support

### **See Attached Quote**

### **Considerations:**

- Based on McLeod County grading and compensation schedule
- Provides job analysis and grading
- Does not include market study

### **Option Three: Bjorklund Compensation Consulting**

Robert Bjorklund rbjorklund@earthlink.net 952-974-9787

F	ee	Time Frame	#
			<b>Positions/Employees</b>
\$	52,770-\$3,370	14 weeks	4 positions

### **Process:**

- 1) Collect job information
- 2) Study jobs and conduct interviews
- 3) Create, prepare, revise and/or update job descriptions
- 4) Conduct job evaluations
- 5) Conduct market study
- 6) Prepare and present a final report

### **See Attached Quote**

### **Considerations:**

- Includes review and updated position descriptions
- Includes market study
- Step 6 is optional

### Meeker-McLeod-Sibley Community Health Services Work Plan - Classification and Compensation Study January 5, 2017

### Introduction

Springsted is one of the most established independent public sector advisory firms in the United States. For nearly 60 years, we have continually grown in the range of our local government relationships, the comprehensiveness of our services and our prominence within the industry. Our managed growth is focused on providing local governments with a balance of national perspective and local expertise.

Springsted is a women-owned business and is certified as a Women's Business Enterprise ("WBE") by the City of Saint Paul, Minnesota. Three employee-owners lead Springsted and our 70 staff members. Our headquarters are located in Saint Paul, Minnesota, with additional offices located close to our clients throughout the Midwest and Mid-Atlantic states. Specifically, our regional offices include Milwaukee, Wisconsin; Des Moines, Iowa; Kansas City, Missouri; Richmond, Virginia; Denver, Colorado, Dallas, Texas and Los Angeles, California.

### **Contact Information and Brief Bios**

### **Springsted Incorporated**

Ms. Julie Urell, Assistant Vice President and Consultant 380 Jackson Street, Suite 300
Saint Paul, Minnesota 55101
651-223-3041 Office
612-248-7350 Cell
jurell@springsted.com

Ms. Julie Urell is a human resources leader with over 20 years in the field, most recently in senior manager, director and consulting human resources roles for regional non-profit, as well as global organizations. In these capacities, she has applied both tactical and strategic insight across a variety of human resources functions. Areas of interest and specialization include employment practices and benefit/retirement plan compliance, human resource systems optimization and deployment, classification and compensation and business process efficiencies. Ms. Urell holds a master of business administration degree from the University of St. Thomas and a bachelor's degree in human resources management from the University of Iowa.

Ms. Urell is certified as a Senior Professional, Human Resources with the Society for Human Resource Management and a Senior Certified Professional with the Human Resources Certification Institute. Since joining Springsted in 2012, she has provided project and consulting services for clients in Minnesota, Kansas, Wisconsin, Illinois, North Dakota, North Carolina, New Jersey, Iowa, Virginia, Texas and Missouri.

### **Outcomes**

The outcome of the study includes the following items:

- A classification and compensation study. The study is anticipated to include:
  - Data collection utilizing Position Analysis Questionnaires for all positions included in the study;
  - Preliminary classification and position description development;
  - A market study and salary survey using up to ten Meeker-McLeod-Sibley CHS benchmark agencies and organizations;



- Job evaluation for compliance with state law;
- Pay plan development and implementation;
- An Executive Summary report of all findings including final presentation.

### **Approach**

In conducting a classification and compensation study the typical approach Springsted uses to prepare and update an organization's plan is described below. We can customize this process to meet the specific needs of your organization.

### 1. Project Initiation

Springsted meets with the organization's Director to discuss study methodology and timetable. The existing classification and compensation plan is discussed and reviewed, noting major issues the organization would like the study to address. The purpose of the meeting is also to obtain information regarding organizational structure and classification and compensation issues that may be affecting operations, including recruitment and retention issues.

### 2. Data Collection

Springsted conducts an employee informational meeting to introduce the study, explain study procedures and answer any questions employees may have about the process. Springsted will explain the distribution of Position Analysis Questionnaires (PAQs) to employees at these meetings. The questionnaire will collect information from each employee on their job duties, responsibilities, essential functions, and other job-related factors that affect the position. Employees will also identify specific physical requirements and working conditions of their position to assist in the consultant's review for compliance with the Americans with Disabilities Act. The information gathered from the PAQs will provide the information to be used in developing new position descriptions, evaluating jobs, and creating a survey instrument to gather wage data from comparable organizations. After reviewing the completed PAQs, Springsted may, at our discretion, conduct individual telephone job audit(s) with employees in positions requiring clarification of information outlined in the PAQ.

#### 3. Preliminary Classifications and Position Descriptions

Springsted will use the information collected from the PAQs to prepare preliminary class and position descriptions and a preliminary assignment of employees to appropriate job classes based on a review of job duties and responsibilities, knowledge, skills and abilities, and minimum education and experience requirements.

Position descriptions will be prepared to define the essential functions and minimum requirements. Special attention is given to ensure that bona fide occupational qualifications, registrations, licensing, certification and special training, if dictated by standards of practice and/or job requirements, are included as minimum qualifications. These descriptions will also identify the essential functions customarily performed by employees assigned to each position, physical requirements and working conditions in compliance with the Americans with Disabilities Act. At this time, we also review each position's designation (exempt v. non- exempt) under the Federal Fair Labor Standards Act.

Preliminary position descriptions are submitted to the Director for review and comment. Springsted will modify the position descriptions as deemed appropriate. Final classification decisions will be made after all comments have been reviewed.

### 4. Market Survey

Springsted will conduct a comprehensive salary survey to compare your organization's positions with analogous positions in other comparable agencies in the area labor market. Potential survey participants should be comparable to the organization, relate to those organizations with which your organization competes for employees, and represent the appropriate labor market. External market comparisons for positions is based on similar organizational structure, population, geographic location, job responsibilities, scope of authority, financial, socio-economic, growth, and other relevant factors.



The study team will identify appropriate sources for the survey data in consultation with the organization's Director. Springsted will prepare a salary survey instrument that includes all positions in the organization.

#### 5. Job Evaluation

While salary survey data will assist in determining an organizations' position in the competitive market, job evaluation is the mechanism that ensures that internal pay relationships are equitable, and in Minnesota, ensures compliance with the Local Government Pay Equity Act. Springsted has developed and copyrighted a job evaluation system known as Systematic Analysis and Factor Evaluation (SAFE®) System. The SAFE system is a unique job evaluation method designed to measure job factors which apply specifically to local government.

The system rates and ranks jobs based on various skill levels which include various levels of trades positions, administrative support, human support, technical, administrative, protective services, professional and executive levels and nine work factors, which include:

- Training and Ability
- Independence of Actions
- Physical Demands

· Level of Work

- Supervision Exercised • Experience Required
- Human Relations Skills
- Working Conditions/Hazards
- Impact on End Results

The result is an equitable and consistent method of evaluating jobs and relating positions to the compensation plan. The system facilitates proper and equitable comparisons between and among classes, and minimizes the appearance of favoritism in evaluating, rating and ranking jobs.

### 6. Development of a Pay Plan and Implementation Strategy

Developing a compensation plan typically draws substantially from market data in conjunction with the job evaluation results for each position. Springsted will assign each position to an appropriate salary grade based on the classification system and prevailing rates paid by survey participants. The compensation plan is developed to reflect information obtained from the organization regarding its pay philosophy as well as goals and objectives established for its compensation program. Springsted will propose a compensation plan and implementation options which will ensure that the organization remains competitive with the labor market, and meets the financial and budgetary requirements of the organization. Cost estimates of the implementation option(s) will be provided.

### 7. Executive Summary

The Executive Summary includes:

- · A study methodology overview
- A succinct discussion of the consulting team's findings, conclusions, and recommendations regarding proposed changes in job descriptions, salary structure, compensation philosophy, pay and compensation mechanisms, estimated cost and implementation plan
- Study information and attachments including:
  - A list of positions and the assignment of each class to a salary grade
  - ➤ Identification of positions that are exempt from FLSA overtime requirements
  - > Salary survey results
  - > Job evaluation factor analysis for each position
  - > Status under the State of Minnesota Local Government Pay Equity Act

Springsted staff will meet with designated officials to present and explain the findings outlined in the Executive Summary. Copies of study documents will be provided in electronic form.



#### 8. Post Contract Maintenance

Springsted can provide on-going assistance to clients after completion of a classification and compensation study. Post-contract maintenance services include assisting the organization with the development of new position descriptions, assignment of positions to the classification plan, determining the FLSA status of a new or revised position, and conducting job evaluations for reclassification requests and new positions created by the organization.

### Fee Schedule and Timeline

Springsted takes pride in meeting its time commitments. The schedule to commence this project coincides with Springsted's completion of other studies. This will ensure that the proposed staff members will be available to concentrate on this study for Meeker-McLeod-Sibley CHS. Springsted is prepared to initiate the study within three weeks of notification to proceed, and will complete the study within four (4) months or according to the schedule outlined by the CHS.

There are factors which impact the timeline which are beyond the consulting team's control. The proposed time frame is contingent upon a timely decision, the receipt of the data from the participants when requested and the timely receipt of feedback and comments on the submitted preliminary data.

Springsted Incorporated will perform all the tasks delineated as described in this proposal for a professional fee not to exceed \$2,900. This fee includes approximately 5 regular employees in 5 different job classifications. Project costs are itemized in the following schedule:

Process Step	Hours	Fee	Cumulative Percentage Invoiced
Project Initiation			
Assumes:			
<ul> <li>One (1) on-site visit</li> <li>One (1) employee orientation meeting and one (1) individual meeting with the Director</li> </ul>	3	\$435	15%
Classification Analysis and Job Evaluation			
Assumes:			
Microsoft Word electronic PAQ completion per job class	7	\$1,015	50%
Internal equity analysis using the SAFE System		<b>4</b> 1, <b>0</b> 1.0	
Draft job descriptions developed for five (5) job classes in Word Format			
External Market Comparison			
Assumes:			
Customized compensation survey including five (5) job	4	\$580	70%
classes, to be distributed to a maximum of ten (10) public		Ų O O O	
sector peer employers			
Compensation System Development			
Assumes:			
Up to three (3) standard implementation options	3	\$435	85%
One (1) pay schedule		ψ100	
Recommended grade assignments for each job class  One (4) electronic deeft Evenutive Summer:			
One (1) electronic draft Executive Summary  Presentation of Study Findings and Final Report			
Assumes:			
One (1) on-site visit and presentation	3	\$435	100%
One (1) final Executive Summary			
Total Not-To-Exceed Professional Fee Estimate	20	\$2,900	



As indicated above, it is anticipated that the project will take approximately 20 hours to complete, allocated between consultants, project managers, analysts and administrative professionals.

Springsted would charge Meeker-McLeod-Sibley CHS, at cost, for actual out-of-pocket expenses. Out-of-pocket expenses include, but are not limited to, travel and sustenance, overnight or messenger deliveries, conference calling beyond our internal capabilities, WebEx meeting fees, purchase of commercially available wage data, photocopying and mailing costs. Direct out-of-pocket expenses are not expected to exceed \$175 for the project.

Should Meeker-McLeod-Sibley CHS request and authorize additional work, we would invoice the agency at an agreed upon fee or our standard hourly fees. Additional customized implementation options will be billed at a \$160/hour. In addition, we would charge, at cost, for any related out-of-pocket expenses.

Title	Hourly Rate
Principal & Senior Officer	\$260
Senior Professional Staff	\$215
Professional Staff	\$160
HR Analyst/Project Coordinator	\$100
Associates	\$75

Additional work would include work outside the scope of services as agreed to including, but not limited to:

- Additional position descriptions or job classes
- Additional on-site meetings
- · Additional reports
- Work related to a special request

We are happy to answer any questions you have about our proposal, and would be delighted to work with Meeker-McLeod-Sibley Community Health Services and its employees on this important project.

Respectfully submitted,

Julie Urell

Assistant Vice President, Consultant



February 8, 2017

### **Allie Freidrichs**

Director, Community Health Services MMS Community Health Services 1805 Ford Ave SE, Suite 200 Glencoe, MN 55336

#### Dear Allie:

Thank you for the inquiry regarding evaluating and grading the MMS Community Health Services jobs using the Keystone Job Leveling System and the McLeod County salary grade structure. This letter of understanding outlines the services we discussed and provides a budget estimate for delivering these services.

### **BACKGROUND**

MMS Community Health Services would like to create a standalone pay plan and administer the new compensation program independently. This includes evaluating 4-5 jobs and assigning them to salary grades based on the new organization structure. The plan would mirror the McLeod County compensation system and takes into consideration the structure of this separate entity. Keystone has developed the compensation program for McLeod County using the Keystone Public Sector Survey data and the Keystone Point-Factor Job Leveling system.

### STEPS FOR COMPLETING THIS ANALYSIS

- 1. Review job descriptions for each job to ensure completeness, and if necessary verify job contents with incumbent or supervisor via a phone call.
- 2. Evaluate 4-5 jobs using the Keystone Job Leveling System.
- 3. Using the results of the job evaluation in step #2, and utilizing the McLeod County salary structure design, assign each job to the appropriate grade and salary range. The McLeod County salary ranges include a minimum, midpoint, and a maximum for each job.
- 4. Provide grade recommendations to the Community Health Department Director.
- 5. Be available for future support as necessary.

### **BUDGET ESTIMATE AND TIMELINE**

Based on the steps we outlined above, the budget estimate for this project would be \$400/job (\$1,600-\$2,000).

Typically, we can complete this job analysis and grading for 4-5 jobs within two weeks from the date of receiving your request and the job descriptions to be evaluated.

Additional work outside the scope of this agreement would be quoted separately upon request.

Allie, I look forward to assisting you with this project. Please call me at: 612.810.3522 or email me at: <a href="mailto:sabboud@keystonecomp.net">sabboud@keystonecomp.net</a> with any questions.

Sincerely,

Saado Abboud, Ph.D.

Soado y Offand

Principal Consultant Keystone Compensation Group LLC

### **APPROVAL**

This letter sets forth the understanding of the scope of services provided and professional fees for this agreement between MMS and Keystone Compensation Group, LLC. If you approve this agreement, please sign and return a copy to Keystone at: <a href="mailto:sabboud@keystonecomp.net">sabboud@keystonecomp.net</a>

Signature:			
Allie Freidrichs	MMS Community Hea	lth Director	
Approved by	Title	Date	



# Saado Y. Abboud, Ph.D.

# **Keystone Compensation Group**, LLC **Principal Consultant**

3316 Ensign Ave North Minneapolis MN 55427 Tel: 612.810.3522 Sabboud@keystonecomp.net

www.keystonecomp.net

Saado is the founding partner of Keystone Compensation Group LLC with over twenty five years of experience in the field of compensation. His experience involves all phases of compensation program development, strategy, design and management. His clients include organizations in the private, public, and nonprofit sectors. He consults with top executives and board of directors on executive compensation programs design and management. His combined experience in managing compensation programs as a corporate manager and as a professional consultant gives him a balanced view for solving compensation issues.

Most recently Saado served as Vice President, Compensation Practice for Stanton Group, a regional consulting and survey research firm in Minneapolis. He worked closely with business and HR leaders as well as Boards of Directors to develop rewards programs for executives, middle management, and other employees. Saado's compensation experience includes developing base pay, short-term, and long-term incentive programs to attract and motivate employees. He also helps his clients with communicating their reward programs.

Prior to joining Stanton Group, Saado spent several years in a senior leadership position at Best Buy Co. with responsibilities over corporate compensation programs as well as executive compensation. Among his other accomplishments was taking a key role in restructuring the HR function and leading several HR technology initiatives to support business growth. He contributed articles and interviews to several trade publications, including Workspan, a monthly journal for total rewards professionals, Star Tribune, and the Twin Cities Business Journal.

Early in his career, Saado taught at the college and graduate school levels, domestically and abroad. He has a doctorate and master's degrees from the University of Minnesota in Quantitative Analysis. He also received an MBA degree in Corporate Finance from the University of St. Thomas in Minnesota. Saado is a certified compensation professional (CCP), a member of WorldatWork, and past Chairman of the Local Network Advisory Board for WorldatWork. Saado also served as the Chair of the Twin Cities Compensation Network Board of Directors.

### Meeker-McLeod-Sibley Community Health Services WIC Coordinator JOB DESCRIPTION

**TITLE:** Meeker-McLeod-Sibley Community Health Services WIC Director

**DEPARTMENT:** PUBLIC HEALTH

**REPORTS TO:** Meeker-McLeod-Sibley Community Health Services Administrator

### PRIMARY OBJECTIVES:

• To administer the WIC Program to all eligible residents in Meeker-McLeod-Sibley Counties according to local, state, and federal requirements.

• To promote health and wellness to all qualifying residents through WIC Nutrition Program.

### **DUTIES INCLUDE:**

### **Essential Functions**

### **WIC Program Administration**

- Develops, implements, supervises policies which assure that WIC Program rules and policies are met.
- Manages WIC caseload within the state WIC authorized quarterly caseload.
- Oversight of determination of client eligibility for the WIC program and scheduling of eligible clients for clinics based on priority and time slots available.
- Coordinates and assists clinic activities including certification, additional education, and voucher issuance in three counties at multiple sites.
- Assures that clinic activities are directed at improving infants, children and pregnant or postpartum women's nutritional status, and promoting positive health outcomes. This includes:
  - Evaluating nutritional status using VENA questions, health history, lab results, height and weight measurements.
  - o Performing anthropometric and physiologic measurements.
  - o Determining the need for referral and follows through appropriately.
  - o Providing nutrition counseling/education.
  - o Determining appropriate distribution of food vouchers.
  - Educating women on breastfeeding and referring participants to a lactation professional as needed
- Assures and provides follow up for all referred WIC participants. Assures coordination with health care providers when referrals for WIC participants are needed, while following data privacy statutes and rules.

Revised 3/2012

- Initial investigation of WIC participants who reportedly misrepresent certification information, resulting in receipt and cashing of WIC vouchers.
- Coordinates, maintains and updates the computerized WIC information/record keeping system.
- Serves as the liaison to the State WIC program
- Assists preparation and implementation of the nutritional education plan for the WIC program. This includes needs assessment (including monitoring and interpretation of statistical data related to population served) and evaluation of activities as they relate to goals and objectives, and using evaluation results to plan for future activities.
- Keeps up to date on WIC State and Federal policies and procedures.
- Coordination of WIC outreach activities, to encourage program participation by all eligible county residents.
- Assist with development of the WIC budget, and monitors expenditures. Will review expenditures with WIC team on regular basis.
- Responsible for meeting contractual obligations under the WIC Program. The contract is between the Minnesota Department of Health and Meeker-McLeod-Sibley Community Health Services.

### **Staff Development and Training**

- Assists with orientation of WIC staff in Meeker, McLeod and Sibley Counties
- Assists staff training in addition to state sponsored training. This includes the following;
  - O Civil Rights training is a self-study module that the coordinator is responsible for assuring that WIC Staff complete it according to policies (new employees within 6 months, then every 2 years at a minimum).
  - o On-going breastfeeding education.
  - o Nutrition education beyond certifier training,
  - o Any updates related to program changes and WIC computer system changes.

# Coordination and integration of other programs and resources with the WIC program, to offer families comprehensive family health services.

- Follow mandated reporter guidelines for suspected cases of child maltreatment or neglect are reported to the appropriate sources.
- May provide outreach and other grant services as appropriate/needed during WIC clinics.
  This can include but is not limited to; Family Planning, Child and Teen Check-up Outreach,
  Home Visiting Outreach, Maternal and Child Health Grant Outreach. Time providing these
  other services will be billed to the appropriate program.

Coordination with local county management which may include Agency Directors and or supervisors and CHS Director and WIC County coordinators

### **Other Duties May Include:**

Revised 3/2012

- Provides accurate information about all agency programs and functions.
  - o Handles incoming phone calls, giving current information.
  - o Promotes agency programs in all public contact.
- Assists in revision/development of programs and/or projects in addition to WIC.
- Or as assigned

### **REQUIRED QUALIFICATIONS:**

- Bachelor's degree in nursing, certification as a public health nurse and two years experience as a WIC coordinator. Or Registered Dietician
- Ability to communicate effectively, both written and verbal
- Demands flexibility in hours to respond to client, family, and community requests for service. (Includes evenings, weekends, nights, holidays.) Work demands may require longer than 8-hour workdays o
- Valid Minnesota driver's license, own vehicle and auto insurance

### **DESIRABLE QUALIFICATIONS:**

- Trained as a WIC Certified Professional Authority.
- Knowledge and ability to coordinate with State and County Government Systems.
- Experience in working with pregnant women and families with young children and knowledge of available resources.
- Ability to work with various personalities effectively.
- Knowledge of the day to day operations of the WIC computerized system, and ability to
  trouble shoot and problem solve with the system. Also knowledge of multiple computer
  systems including immunization registries and CATCH III for Child and Teen Check-up
  outreach.
- Knowledge of budgeting and expenditure management procedures at the Federal, State, Community Health Services, and County level.
- Ability to problemsolve and make accommodations quickly.
- Trained in Child and Teen Check-Up,
- Additional training in family systems.
- Vaccine preventable disease training and knowledge of current immunization practices.
- Additional lactation training and certifications



1805 Ford Avenue, Suite 200 Glencoe, Minnesota 55336 Direct Line (507) 766-3531 Fax Number (320) 864-1484

### MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES JOB DESCRIPTION

Job Title: PUBLIC HEALTH EMERGENCY PREPAREDNESS

COORDINATOR

Reports To: CHS Administrator

#### **SUMMARY**

Responsible for the planning, organizing, and coordination of activities for Public Health response to all hazard emergencies. These activities include education, communication, and collaborative efforts to prepare for an all hazard response to emergencies, infectious disease outbreaks, and other public health threats.

#### **ESSENTIAL DUTIES & RESPONSIBILITIES**

- 1. Coordinates preparedness and response to public health emergencies in Meeker, McLeod and Sibley Counties; serving in a central communication role.
- Participates in the development, review, and management of policies and preparedness to mitigate any event that could jeopardize the health and safety of the public.
- Completes, evaluates, maintains, and updates as appropriate the Meeker-McLeod-Sibley Community Health Services Public Health Emergency Preparedness and Response Plan and all other plans as directed by the Minnesota Department of Health.
- 4. Participates in the design of planning exercises to test the efficiency of Public Health emergency preparedness plans.
- 5. Assists the Minnesota Department of Health (MDH) with investigations regarding communicable and infectious disease.
- 6. Participates on the Meeker-McLeod-Sibley Healthy Communities Disease Prevention and Control Work Group, South Central Public Health Emergency Coordinators and South Central Healthcare Coalition and other coalitions as instructed.
- 7. Develops materials to educate the public and facilitate compliance with public health emergency preparedness programs.
- 8. Coordinates and tests the Health Alert Network for Meeker, McLeod and Sibley Counties (HAN).
- 9. Recruits and trains volunteers of the Meeker-McLeod-Sibley Community Health Services Medical Reserve Core
- 10. Completes all deliverables as required by the Public Health Emergency Preparedness (PHEP) and Community Readiness Initiative (CRI) grant contract.
- 11. Ensures timely and accurate submission of reports to MDH.
- 12. Prepares press releases and articles for submission to the press.
- 13. Designs and utilizes evaluation tools to measure program outcomes and effectiveness.
- 14. Performs other job duties as assigned.



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#### **QUALIFICATIONS**

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- 1. Possess the ability to develop and maintain effective working relationships with a wide variety of disciplines and community partners.
- Ability to effectively prepare plans, reports, budgets and grant applications.

#### **EDUCATION and/or EXPERIENCE**

- 1. Bachelor's Degree in Nursing or Bachelor's Degree in related field plus 3 years of public safety experience
- Experience in Public Health Nursing
- 3. Experience in disease prevention and control activities
- 4. Working knowledge in the area of Emergency Response
- 5. Or an equivalent combination of education and experience sufficient to perform the essential functions of the job.

#### LANGUAGE SKILLS

- 1. Ability to communicate clearly and effectively with individuals and groups.
- 2. Ability to effectively prepare plans, reports, budgets and grant applications.

#### **REASONING ABILITY**

1. Ability to make appropriate observations and decisions independently as well as within a team.

#### CERTIFICATES, LICENSES, REGISTRATIONS

- Current MN RN License
- 2. Public Health Nursing certificate
- 3. State and Federally certified Emergency Manager. To be obtained within 3 years of hire
- 4. Hazardous Materials certification (preferred, but not required)
- 5. Valid MN Driver's License and proof of insurance

### **PHYSICAL DEMANDS:**

The physical demands here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- 1. Occasional lifting, requirement of up to 50 pounds.
- 2. Duties include being able to perform the following movements on an occasional to continuous basis: sitting, walking, bending, turning, twisting, pushing, pulling, kneeling, squatting, crawling, climbing, reaching, grasping, and finger manipulation.
- 3. Must be capable of maneuvering under and around existing structures and furniture for network cabling and connections.

### **WORK ENVIRONMENT:**



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The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- 1. The noise level in the work environment is usually moderate.
- 2. The work is performed in a comfortable work environment.
- 3. Occasionally the work is performed where there is dust and dirt.
- 4. Some travel is required.
- 5. Will require occasional evening, weekend and holiday hours.

**SALARY LEVEL:** Grade 170, McLeod County 2017 salary schedule (PHN or Emergency Services Director)

# Meeker-McLeod-Sibley Community Health Services Job Description

Official Title: Community Health Services Director

Date: April 2010

**Reports To:** Community Health Board

# **Primary Objective:**

An appointed official of the Community Health Services (CHS) Agency. Provides leadership, direction and administration for public health program and staff. Develops policy recommendations; evaluates public health needs in the three county areas and develops long and short range plan to address health needs in the most efficient effective manner possible while maintaining quality services for the residents of Meeker, McLeod and Sibley Counties. This position reports directly to the Meeker-McLeod-Sibley Community Health Board, which is a Joint Powers Board of the Meeker County Board of Commissioners, McLeod County Board of Commissioners, and Sibley County Board of Commissioners. Membership is 15 County Commissioners, 5 from each county.

# **Major Responsibilities**

#### 1. Core Public Health Functions

### A. Assessment

- Coordinate and provide oversight to the public health assessment and planning process as required under The Local Public Health Act, MN Statute 145A. This is done for the following areas of public health responsibility:
  - a. Assure an adequate local public health infrastructure
  - b. Prevent the spread of infectious disease
  - c. Promote healthy communities and healthy behavior
  - d. Assure the quality and accessibility of health services
  - e. Protect against environmental health hazards
  - f. Prepare for and respond to disasters and assist communities in recovery
- 2. Community assessment data and the local public health improvement plan will be brought to the CHB for review and approval of the plan.
- 3. Coordinate and do a final review of the annual report on the three county public health activities, statistics, staffing and expenditures reporting in PPMRS to the Minnesota Department of Health. Provide the Community Health Board with a summary of this report.
- 4. Identification of and reporting on major health and related fiscal issues facing the CHS.

### B. Policy Development

1. Provide the Board with information, analysis and administrative consultative services and updates to allow them to make appropriate

- public health policy decisions that benefit the residents of Meeker, McLeod and Sibley Counties
- 2. Represent the local public health interests of the Community Health Board and the individual counties with various policy making groups that includes but is not limited to: State and Federal Legislative bodies, Minnesota Department of Health, State Community Health Services Advisory Committee, Association of Minnesota Counties, Local Public Health Association of Minnesota, other State agencies.
- 3. Provide input to State and Federal Government Agencies on public health problems, development of public health goals and effective strategies to meet these goals.
- 4. The effect of state and local government policies and actions on the health of the public shall be reported to the Community Health Board.
- 5. All legislators representing the counties shall be regularly informed of the progress of Public Health programs and legislative issues.
- 6. All Public Health requests for board action shall be done in such a way that provides the following:
  - a. The provision of relevant background information.
  - b. The identification of the policy implications of each agenda item, if appropriate.
  - c. The identification of the cost implications of each agenda item.
  - d. The identification of alternative courses of action which are possible to take on each agenda item.
  - e. Conformance to all legal timetables and requirements.
- 7. The Board will be provided with progress reports on the implementation of board actions.
- 8. All members of the Community Health Board will be provided an orientation to the Public Health services provided within the three counties upon initial appointment to the board.

#### C. Assurance

- To develop and maintain awareness of advancements in professional health fields which potentially affect the future availability of public health resources to the residents of the three counties by performance of the following activities:
  - a. All relevant inter-governmental communications and professional literature shall be reviewed on a timely basis.
  - b. At least 75% of statewide and regional meetings of the Local Public Health Association shall be attended.
  - c. Coordination and information exchange meetings will be held with representatives of other local public health agencies, county human/social service agencies, other social services agencies and health care providers.
- 2. To serve as a program, three county, and clientele advocate on Public Health issues by performance of the following activities
  - a. All State of Minnesota procedures and guidelines governing the

- delivery of pubic health services shall be reviewed on a regular basis and challenged where appropriate.
- b. Invitations to make presentations on the three county Public Health programs at public health, human services, and county government conferences shall be accepted whenever possible.
- c. Program approaches, which represent cost effective use of health resources, shall be advocated.
- d. To provide active leadership on various task forces and collaborations that has a public health component.
- 3. The Public Health Agency will participate in cooperative efforts to develop county and regional wide programs and materials.

# 2. Agency Administration

- Provides leadership and coordination of the Community Health Services (CHS)
  - a. Provide leadership to the CHS Management Team.
  - b. Provide administration and oversight to grants and programs of the Community Health Board.
  - c. Provide oversight to manage communications with various State, Federal and other Agencies to ensure the flow of communications between local staff, other interested local agencies, and the State, Federal or other Agency.
  - d. Negotiate, review and sign grant contracts on behalf of the Community Health Board. Develop and negotiate subcontracts with outside agencies as per the grant contract. Monitor contracts and subcontracts for compliance with the stated requirements.
- 2. To provide supervision, oversight and leadership to CHS Staff, CHS Team and Community Groups
  - a. Work with local agency staff to build their capacity to meet local public health needs through the various grant programs of the CHS. This includes providing oversight and direction to Grant Teams as well as any ad hoc teams that are formed. Teams have a Team Leader and at least one staff person from each county.
  - b. Provide leadership to Teams for Grants and Programs in the absence of a Team Leader. This can be due to a variety of causes, staff leaving their county position, staff reassigned to different work in the county agency, new Teams formed due to new grants/programs.
  - c. To provide direct supervision of and consultation with CHS contracted and employed staff through performance of the following activities:
  - d. An onsite review of contracted staff performance in a work setting shall be conducted at least once per year.
  - e. Staff shall be provided with a current listing of all duties, responsibilities, and expectations.
- 3. To provide fiscal policy oversight of Community Health Services Agency by performance of the following activities:

- a. Provide fiscal management/oversight in cooperation with the McLeod County Auditor-Treasurer and the local agency directors. This includes working with local program and fiscal staff to develop budgets, approving budgets and expenditures, monitoring appropriateness of expenditures, preparing and submitting various grant expenditure reports.
- b. Review/approve various agency fiscal statements including account activity reports, CHS financial statement for State Auditors. This position requires significant communications with the State Auditors during the annual agency fiscal audit.
- c. The annual budget shall be prepared and administered in accordance with all legal and timing requirements of the Minnesota Department of Health and any other granting agencies.
- d. The Agency accounting system shall operate consistent with the requirements of the countywide accounting system and any Federal and State Requirements.
- e. Complete yearly county sub recipient monitoring according to State and Federal Regulations.
- 4. On-going performance of Quality Assurance and Continuous Quality Improvement activities shall be conducted to continually evaluate Agency programs. Documentation of activities shall be maintained.
- 5. To provide leadership and facilitate research and evaluation activities in the Department. Promote the use of evidence based practice in Public Health
- 6. To provide direction to the planning, program design, and operation of the Public Health agency.
- 7. General administrative activities include:
  - a. Coordination of various meetings. This includes development of the agenda which includes arranging for speakers and determining administrative items that require Board approval; obtaining signatures on minutes, resolutions, budgets, other documents as necessary; informing the media of the meeting if required by the Open Meeting Law; maintaining records for the archives.
  - b. Oversight of the CHS website for accurate information on the public side of the website. The private side of the website is used as a communication tool for staff in all three counties and requires oversight to be sure that files and the calendar are organized and updated.

All of the listed responsibilities are very important to the functioning of the CHS and there could be significant consequences to the agency and to the counties if they are not done.

#### Qualifications:

Certified as a Public Health Nurse in Minnesota and licensed as a registered nurse or a bachelor's degree in Community Health or a related field. At least five years of professional experience in the health care field and supervisory experience or training. Master degree in Public Health preferred. Advanced level skills in management, public health concepts. Knowledge of nursing and scientific theory, epidemiology, statistics;

independent judgment. Knowledge of accounting principles, cost analysis/cost containment/cost effectiveness. Direct impact on budget. Ability to develop and maintain effective working relationships with a wide variety of people. Ability to communicate clearly and effectively with individuals and groups. Ability to lead, develop, and supervise contracted and three county personnel. Required ability to interpret statistical data.

# Meeker-McLeod-Sibley Community Health Services WIC Registered Dietitian JOB DESCRIPTION

TITLE: Meeker-McLeod-Sibley Community Health Services WIC Registered

Dietitian

**DEPARTMENT:** PUBLIC HEALTH

**REPORTS TO:** Meeker-McLeod-Sibley Community Health Services Administrator

#### PRIMARY OBJECTIVES:

 To administer the WIC Program to all eligible residents in Meeker-McLeod-Sibley Counties according to local, state, and federal requirements.

• To promote health and wellness to all qualifying residents through WIC Nutrition Program.

#### **DUTIES INCLUDE:**

#### **Essential Functions**

#### 1. Public Health Sciences

- A. Facilitates implementation of community-focused initiatives to promote nutrition, breastfeeding and prevent disease, in settings including, but not limited to all Health Department buildings/sites, homes, community organizations and worksites, schools, and the community at large.
- B. Performs individual and family assessments which include health and nutrition history, physical assessment, growth monitoring, developmental assessment, psycho-social assessment, assessment of family functioning, assessment for substance abuse or domestic violence issues, and assessment of basic needs including food, housing, income, resources and supports, and access to health care.
- C. Perform the certification procedures for all WIC participants by verifying identity of client, confirm that income is within established guidelines, obtain proof of residency and identify nutritional risk factors.
- D. Accept walk-ins for applications, transfers, late pickups, out-of-state transfers, food package changes, and re-issuance of vouchers if lost or stolen.
- E. Process requests for Medically Prescribed Formulas, including evaluating if Medical formula is warranted.
- F. Develop Individual Nutrition Care Plan (INCP) and provide education based on identified risk factors.
- G. Provides referral and follow-up to individuals and families who are members of a vulnerable population and/or high-risk groups. Evaluates outcomes, effectiveness of plan, and makes changes as necessary. Provide high-risk follow-up according to the participant's INCP to assess and monitor progress toward meeting their nutrition goals.
- H. Provide nutrition training for Competent Professional Authorities (CPA's), and create nutrition education displays and materials to be displayed at WIC clinic.
- I. Assesses and implements the nutrition education needs of the county employees as it relates to chronic disease and the population's general health.

Revised 3/2012

J. Assess and provides nutrition education and counseling to individuals, families and community groups that are adapted to their unique needs, lifestyle, cultural and socioeconomic situation.

# 2. Community Dimensions of Practice

- A. Advocates on behalf of vulnerable individuals and populations; participates in assessing and evaluating health care services to ensure that people are informed of available programs and services and are assisted in the utilization of those services.
- B. Responsible for using quality improvement (QI) and performance management (PM) processes and/or techniques to improve the effectiveness of the respective public health programs.
- C. Participates in the community health assessment and health improvement planning and intervention activities within Meeker, McLeod, and Sibley Counties.
- D. Designs and delivers orientation for Department staff and public health education and technical assistance for community agency staff as well as community members on nutrition and breastfeeding.
- E. Coordination of WIC outreach activities, to encourage program participation by all eligible county residents.

# 3. Analysis and Assessment

A. Develops and/or uses databases and software programs to gather and maintain needed data for nutrition, breastfeeding, and disease prevention, evaluation and quality improvement efforts.

## 4. Policy Development and Program Planning

- A. Participate in developing strategies on how Public Health can be actively involved in the development of policies and plans that impact the built environment and public health of the three counties. May serve on inter-jurisdictional or multi-agency committees involved in policy development; coordinate review/comment processes for proposed policy documents.
- B. Keeps up to date on WIC State and Federal policies and procedures.

# 5. Communication and Cultural Competency

- A. Delivers targeted, culturally-appropriate (other language) information to help individuals and groups understand health promotion and disease prevention information, policies, regulations and local code.
- B. Adheres to ethical principles and CHS policy in the collection, maintenance, use, and dissemination of data and information.

## 6. Financial Planning and Management

- A. Participates in activities such as time studies that contribute to the development of budgets and the efficient use of resources.
- B. Assist with development of the WIC budget, and monitors expenditures.

# 7. Other

- A. Performs public health emergency response duties as assigned and consistent with training provided, in response to threats to the public's health consistent with job classification.
- B. Participates in community emergency response training and drills in support of public health emergency and disaster preparedness consistent with job classification.
- Assists with orientation of WIC staff in Meeker, McLeod and Sibley Counties
- Assists staff training in addition to state sponsored training. This includes the following;

- Civil Rights training is a self-study module that the coordinator is responsible for assuring that WIC Staff complete it according to policies (new employees within 6 months, then every 2 years at a minimum).
- o On-going breastfeeding education.
- Nutrition education beyond certifier training.
- Any updates related to program changes and WIC computer system changes.

#### INTERNAL/EXTERNAL RELATIONSHIPS:

- Collaboration with Public Health Nurses, Social Services, local medical clinics to establish interdisciplinary plan of care to meet the needs of participants.
- Coordination with local county management which may include Agency Directors and/or supervisors and CHS Director, CHS WIC Coordinator and individual WIC County staff.

#### **REQUIRED QUALIFICATIONS:**

### **Education and Experience**

- Bachelor's Degree in Dietetics plus internship (6-12 months) or period of supervised work experience followed by successful completion of national exam.
- Past experience in a WIC Program, public health agency, working with pregnant and breastfeeding women and young children
- Or an equivalent combination of education and experience sufficient to perform the essential functions of the job. (Added. Standard in all McLeod County job descriptions.)

### Required Training

- Satisfactory completion of training modules in Certification Procedures (for example, state provided New Staff Training or training by the local agency).
- 15 hours of continuing education annually

#### Required Certifications/Licenses

- Registered Dietitian (RD) or Registered Dietitian Nutritionist (RDN) Registered by the American Dietetic Association, Commissioned on Dietetic Registration; OR Licensed Dietitian (LD) or Licensed Nutritionist (LN) – Licensed by the Minnesota Board of Dietetics and Nutrition Practice, Minnesota Statues, Section 148.621 to 148.633.
- Valid MN driver's license and proof of insurance.

#### **Preferred Education and Experience**

• Previous experience in Public Health or WIC

#### **Preferred Certificates**

- Certified Lactation Specialist
- Health Care Provider CPR

### **LEADERSHIP RESPONSIBILITIES:**

None

#### **WORKING CONDITIONS:**

- Most work is performed in an office environment.
- Work involves regular travel between worksites within county and community agencies.
- May be exposed to communicable diseases through patient interaction.

#### Revised 3/2012

- May be exposed to angry or hostile clients.
- Some responsibilities may require evening and/or weekend work.

#### PHYSICAL REQUIREMENTS OF THIS POSITION:

- Sit or stand at a desk for extended periods of time to perform work at a computer and/or talk on the phone.
- Hear and speak effectively to communicate in person and over the phone with contacts listed under Internal/External Relationships above.
- Visual acuity to read computer screens and printed documents and to see to drive a motor vehicle.
- Apply physical coordination in order to safely drive an automobile throughout the county under various road and weather conditions.
- Physical ability to move to and about the various work sites entailed in Essential Functions above.
- Manual dexterity to:
  - Type on a keyboard and use a computer mouse;
  - o Perform manual tasks such as handwriting and compiling material.
- Office work may include reaching for documents and supplies, standing or kneeling to search through file cabinets, fingering to find files, grasping documents, and repetitive motions such as typing and sorting/compiling material.
- Ability to lift and carry files and boxes weighing up to 40 pounds.

#### **EQUIPMENT REQUIRED TO PERFORM THIS JOB:**

- Desktop/laptop computer
- Desktop phone
- Mobile phone
- Motor vehicle
- Hemocue machine
- Scale and Stadiometers
- Personal Protective Equipment such as gloves, masks, gowns etc.

#### **ADDITIONAL NOTES:**

 All positions at MMS CHS are subject to a background check. This may include, but is not limited to, the following checks: criminal history, credit, driver's license, preemployment physical assessment, pre-employment drug and alcohol screening and psychological testing.

If unable to demonstrate these all reasonable accommodations will be made, in compliance with the Americans with Disabilities Act and any other applicable Federal and Minnesota law.



1805 Ford Avenue, Suite 200 Glencoe, Minnesota 55336

Direct Line (507) 766-3531 Fax Number (320) 864-1484

# MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH BOARD MEDICAL CONSULTANT CONTRACT

THIS CONTRACT, which shall be interpreted pursuant to the laws of Minnesota, entered into and executed this 1st day of June, 2017, between the Meeker-McLeod-Sibley Community Health Board (hereinafter BOARD) and Catherine McGinnis, M.D. of the County of McLeod and State of Minnesota (hereinafter MEDICAL CONSULTANT), witnesseth that:

WHEREAS, the BOARD has general authority and responsibility for the development and maintenance of an integrated system of community health services pursuant to Minnesota Statutes 145A.04, and

WHEREAS, the BOARD has responsibility to and shall ensure responsible medical consultation and direction by employing or contracting with a practicing licensed physician pursuant to Minnesota Statues 145A.04, services and duties set forth therein.

# NOW THEREFORE it is agreed:

#### I. MEDICAL CONSULTANT'S DUTIES

The MEDICAL CONSULTANT shall insure responsible medical consultation and direction for the Meeker-McLeod- Sibley Community Health Board and those activities which are part of this total Community Health Services Plan(CHS). These functions shall include:

- 1. Participation in local Community Health Services planning and policy development.
- 2. Promotion of Community Health Services development.
- Consultation and maintenance to the BOARD and Advisory Committees in developing the medical aspects of community health programs.
- 4. Assistance in formulation and maintenance of standards on medical care aspects of CHS programs.
- 5. Liaison between the BOARD and practicing physicians in the community to develop understanding of CHS and to promote preventive health programs.



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Physician functions include traditional physician functions defined by Minnesota Statutes and federal or local legislation where applicable. These functions include:

- 1. Medical responsibilities in disease control and prevention.
- 2. Medical responsibilities in consultation and assistance to immunization, lactation consultant, screening and other community clients.
- 3. Minimal supervisory responsibilities in medically delegated functions as defined by the Medical Practices Act and Nursing Practices Act. Implementation is determined by local policies for standing orders and backup procedures.

#### II. TERM OF CONTRACT

This contract shall be effective on the 1st day of June 2017 and terminate at the request of either party.

## III. CONSIDERATION, TERMS AND CONDITIONS OF PAYMENT

- A. Consideration for all services and duties performed and goods or materials supplied by the MEDICAL CONSULTANT pursuant to this contract shall be requested and paid by the BOARD and/or staff as follows:
  - Compensation for service actually and necessarily performed by the MEDICAL CONSULTANT in performance of this contract as requested or delegated.
  - Reimbursement for travel and subsistence expenses actually and necessarily incurred by the MEDICAL CONSULTANT in performance of this contract.

## B. Terms of payment.

1. Payment for compensation shall be made by the BOARD to the MEDICAL CONSULTANT at an hourly rate of \$75.00 (seventy-five dollars) per hour and the currently approved mileage rate for travel expenses.



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- Per diem and travel expenses for official attendance at BOARD meetings and its committees shall be at the current rate established by the BOARD.
- Payment for compensation and/or reimbursement of expenses shall be made by the BOARD promptly after the MEDICAL CONSULTANT'S presentation of receipts and other documentation of services and/or expenses actually and necessarily performed and incurred.

# C. Conditions of Payment.

All services and duties performed by the MEDICAL CONSULTANT pursuant to this contract shall be performed to the satisfaction of the BOARD and in accord with all application federal, state local laws, ordinance and rules and regulations as a condition of payment.

### IV. STANDARDS AND LICENSES

- A. The MEDICAL CONSULTANT warrants and represents that he/she is currently licensed as a medical doctor by the State of Minnesota. In the event said license is cancelled, revoked, suspended, or expires during the term of the contact, MEDICAL CONSULTANT agrees to immediately inform the Board. The Board will pay only for services provided pursuant to such licensing requirements.
- B. The MEDICAL CONSULTANT shall comply with all applicable federal and state statutes and regulations as well as local ordinances now in effect or hereafter adopted.
- C. Failure to meet the requirements of Sections A and B above may be cause for cancellation of this contract effective the date of receipt of the Notice of Cancellation.

#### V. INDEPENDENT CONTRACTOR

It is agreed that nothing herein contained is intended or should be construed in any manner as creating or establishing the relationship of co-partners between the parties hereto or as constituting the MEDICAL CONSULTANT as the agent, representative, or employee of the BOARD for any purpose or in any manner whatsoever. The MEDICAL CONSULTANT is to be and shall remain an independent contractor with respect to all services performed under this Agreement.



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#### VI. INSURANCE

Medical Consultant agrees to obtain and maintain professional liability insurance coverage in a minimum amount of \$1,000,000 per claimant for personal injuries, bodily injuries, death, and/or damages, and \$1,000,000 for total personal injuries, bodily injuries, death, and/or damages arising from one occurrence.

### VII. SUBCONTRACTING AND ASSIGNMENTS

The MEDICAL CONSULTANT shall not enter into any subcontract for performance of any of the services contemplated under this contact nor assign any interests in the contract without the prior written approval of the BOARD and subject to such conditions and provisions as the BOARD may deem necessary.

#### VIII. DATA PRIVACY

A. All data collected, created, received, maintained, or disseminated, or used for any purposes in the Court of the MEDICAL CONSULTANT'S is governed by the Minnesota Government Data Practices Act., Minn. Stat. Ch. 13., or any other applicable state statutes and any state rules adopted to implement the Act, as well as state statutes and federal regulations on data privacy. The MEDICAL CONSULTANT agrees to abide by the Statutes, rules, and regulations as they may be amended.

## IX. CANCELLATION

This contract may be cancelled by the BOARD or MEDICAL CONSULTANT at any time, with or without cause, upon sixty (60) days written notice to the other party. In the event of such cancellation, the MEDICAL CONSULTANT shall be entitled to payment determined in a prorated basis for services and duties satisfactorily performed.

#### X. MODIFICATIONS

Any material alteration, modification, or variation shall be reduced to writing as an amendment and signed by the parties. Any alternations, modifications, or variations deemed not to be material by agreement of the BOARD and MEDICAL CONSULTANT shall not require written approval.



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MEDICAL CONSULTANT	:	
Ву:		
Date:	day of	, 201
MEEKER-MCLEOD-SIBL	EY COMMUNTY HEALTH BOARD:	
Ву:	d-Sibley Community Health Board	
Chairman, Meeker-McLeo	d-Sibley Community Health Board	Date
Administrator, Meeker-McLeod-Sibley Community Health Services		Date
Approved as to legality, form and execution.		
Meeker-McLeod-Sibley Appointed Legal Counsel		Date

# MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES JOB DESCRIPTION

**JOB TITLE:** Recovery Coach

**DEPARTMENT:** Community Health Services

**REPORTS TO:** Community Health Services Director

**DATE:** January 2012

**PRIMARY OBJECTIVE:** To serve as an active member of the Project Harmony Multi-Disciplinary Team in order to provide Project Harmony program clients with comprehensive and coordinated case management; to provide support to achieve sobriety goals, assess the need for and arrange for supportive services.

# REQUIRED QUALIFICATIONS

- 1. Possess a high school diploma or equivalent
- 2. Maintain valid Minnesota drivers' license, automobile insurance and reliable transportation
- 3. Complete a satisfactory background check
- 4. Ability to communicate effectively, both written and verbal
- 5. Ability to set appropriate limits and recognize boundaries with clients
- 6. Ability to maintain cooperation and effective working relationships with agency personnel, community partners, health care providers and others

## PREFERRABLE QUALIFICATIONS

- 1. Knowledge of various community and sobriety resources
- 2. Coursework in drug and alcohol counselor education
- 3. Demonstrated interest in the treatment of substance use disorders

#### MAJOR PERFORMANCE RESPONSIBILITIES:

- 1. Actively partner with the Licensed Chemical Dependency Counselor (LADC) and Public Health Nurse (PHN) on the Project Harmony Multi-disciplinary Team to establish and implement a comprehensive and coordinated sobriety plan.
- 2. Foster and maintain a supportive relationship with women, provide ongoing assessment of need for supportive community services, i.e. AA, NA, etc.
- 3. Foster independence by empowering women to navigate the substance abuse service system and access services for herself and family that encourage and sustain long-term recovery.
- 4. Promote access to and communication with treatment providers and supportive services (i.e. child welfare workers, health care providers, child care, etc.).
- 5. Advocate for and support clients in overcoming barriers to health services by assisting with the MA application process, transportation, setting appointments, choosing providers, etc.
- 6. Support clients to identify unmet basic needs, i.e. transportation, emergency financial assistance, food assistance, etc.; explore and coordinate resources to meet needs.

- 7. Assist clients to obtain competent and dependable child care providers for care of their dependent children.
- 8. Arrange transportation for health care, recreational and other services.
- 9. Maintain accurate documentation of client interactions, interventions and communication with team members and community partners.
- 10. Ability to independently plan and organize work responsibilities.
- 11. Outreach to community partners and potential referral sources to communicate the goals of the program.
- 12. Compliance with data privacy and mandatory reporting regulations.
- 13. Perform other duties as assigned.

**TOOLS:** Computer (word processing and related software, charting/documentation software, and internet).

**MATERIALS:** Resources and teaching tools in various mediums.

07/16