

Pennington County Human Service Committee

Meeting Agenda

March 18, 2025

12:00 pm

Members Present

_____ Bruce Lawrence _____ Dave Sorenson _____ Seth Nelson
_____ Neil Peterson _____ Roy Sourdif

Section A

- I. Minutes: Review of 02/18/2025 HSC Meeting minutes
- II. Personnel:
 - A. Update on MSHO/Elderly Wavier Social Worker
 - B. Update on Licensor/Children's Mental Health Social Worker
- IV. General:
 - A. To approve the 2024-2026 State-County Civil Rights Assurance Agreement.
 - B. To adopt and approve DHS's Merit System Equal Employment Opportunity and Affirmative Action Guidelines as the agency's EEO and AA action plan.
 - C. Child Welfare opiate allocation-Agency annual report.
 - D. Purchase of Service Agreement for Mental Health-Targeted Case Management Clinical Supervision Services.
 - E. Out-of-Home Cost Report
 - F. Month's End Cash Balance
 - G. Other

Section B

- I. Special Case Situations (Social Services)
- II. Income Maintenance Update
- III. Special Case Situations (Public Assistance)
- IV. Payment of Bills

Section C

- I. Dates of Upcoming Committee Meetings:

04/15/2025
12:00 pm

05/20/2025
12:00 pm

06/17/2025
12:00 pm

A regular meeting of the Pennington County Human Service Committee was held at 12:00 pm, February 18, 2025, at the Pennington County Justice Center.

COMMITTEE MEMBERS PRESENT:

Seth Nelson
Neil Peterson
Dave Sorenson
Bruce Lawrence
Roy Sourdif

STAFF MEMBERS PRESENT:

Julie Sjostrand, Director
Stacy Anderson
Tammy Johnson
Mitch Anderson

SECTION A

I. MINUTES:

The January 21, 2025, Human Service Committee Meeting Minutes were electronically posted for review. Noting no corrections or changes, a recommendation was made to forward the Minutes to the Consent Agenda.

II. PERSONNEL:

- A. The Director presented an update on the Social Work/Disability Position.

III. GENERAL:

- A. The Director presented for approval an updated Pennington County Pre-Petition Screening Team list of authorized screeners. Individuals recommended for appointment as screeners to conduct investigations pursuant to judicial commitments chemical dependency, mentally ill, or intellectually disabled. Please see attached.
- B. Committee members were appraised by a letter received from the Department of Human Services Commissioner, Jodi Harpstad, commending our agency for requirements for calendar year 2023. The letter acknowledged that all key quarterly reports were submitted to the DHS Financial Operations Division before the report deadlines presented on or before the report deadlines and in perfect order. Upon conclusion of the presentation a recommendation was made to forward this item to the Consent Agenda.
- C. The Director presented the Governor's proposed budget cost shift to the Counties.
- D. The Director presented a letter from the Housing Redevelopment Authority. Upon conclusion of the presentation a recommendation was made to forward this item to the Consent Agenda.
- E. The Director presented Pennington County Statewide Affordable Housing Aid Policy for 2025. This aid is \$5,000.00. Upon conclusion of the presentation a recommendation was made to forward this item to the Consent Agenda.
- F. The Out-of-Home Cost Report through January 2025 was presented for Review.

- G. The month's end cash balance January 2025 stands at \$ 4,637,333.31.

SECTION B

- I. No Social Service cases were presented for special case review.
- II. Tammy Johnson, Eligibility Supervisor, presented the Emergency Assistance/Emergency General Assistance January 2025 report of activity. She reported the Income Maintenance open case count stands at 2000.
- III. No Income Maintenance cases were presented for special case consideration.
- IV. A listing of bills presented for payment was reviewed. A recommendation for payment of the bills was forwarded to the Consent Agenda.

SECTION C

Be resolved that the foregoing record is a true and accurate recording of the official actions and recommendations of the Human Service Committee for Pennington County and, as such, constitutes the official minutes thereof.

Chair: _____

Attest: _____

NEXT COMMITTEE MEETING: March 18, 2025, at 12:00 p.m.



2024-2026 STATE-COUNTY CIVIL RIGHTS ASSURANCE AGREEMENT

The County Agency Pennington County Human Services agrees to act in accordance with the provisions of the Food and Nutrition Act of 2008, as amended, implementing regulations and any applicable provisions of the FNS approved State Plan of Operation with the State of Minnesota. The County Agency and the State agency further agree to fully comply with any changes in Federal law and regulations. This agreement may be modified with the mutual consent of the County Agency, the State agency, and FNS USDA.

The County Agency agrees to comply with the State-County Civil Rights Assurance Agreement as a condition of receiving Federal financial assistance provided to the State of Minnesota by the USDA under the authority of the Food and Nutrition Act of 2008, as amended.

The State-County Civil Rights Assurance Agreement is binding upon the County Agency, its successors, transferees, and assignees for as long as the County Agency receives Federal financial assistance from the State of Minnesota by the USDA under the authority of the Food and Nutrition Act of 2008, as amended.

The State of Minnesota may enforce all parts of the Civil Rights Assurance Agreement as a condition of the County Agency's receipt of Federal funds from the State of Minnesota by the USDA under the authority of the Food and Nutrition Act of 2008, as amended.

Compliance by Contractors and Vendors: The County Agency further agrees that by accepting this Civil Rights Assurance Agreement, it will obtain a written statement of assurance from all of its contractors and vendors (*i.e.*, applying to all programs), assuring that they will also operate in compliance with the stated nondiscrimination laws, regulations, policies, and guidance. The written statement of assurance from all of its contractors and vendors must be maintained as part of the County Agency's Comprehensive Civil Rights Plan and must be made available for review upon request by the State of Minnesota or the U.S. Department of Agriculture.

RECIPIENT AGREES TO COMPLY WITH ALL APPLICABLE FEDERAL AND STATE CIVIL RIGHTS LAWS:

The County Agency agrees to:

1. Administer all programs in accordance with the provisions contained in the Food and Nutrition Act of 2008, as amended, and in the manner prescribed by regulations issued pursuant to the Act; and to follow the FNS-approved State Plan of Operation.
2. Assurance of Civil Rights Compliance: Comply with Title VI of the Civil Rights Act of 1964 ([42 U.S.C. 2000d et seq.](#)), Title IX of the Education Amendments of

1972 ([20 U.S.C. 1681](#) *et seq.*), Section 504 of the Rehabilitation Act of 1973 ([29 U.S.C. 794](#)), the Age Discrimination Act of 1975 ([42 U.S.C 6101](#) *et seq.*), section 11(c) of the Food and Nutrition Act of 2008, as of amended (7 U.S.C 2020), Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendments Act of 2008 ([42 U.S.C. 12131-12189](#)) as implemented by Department of Justice regulations at [28 CFR part 35](#) and [36](#), Executive Order 13166, “Improving Access to Services for Persons with Limited English Proficiency” (August 11, 2000), and all requirements imposed by the regulations issued by the Department of Agriculture to the effect that, no person in the United States shall, on the grounds of sex, including gender identity and sexual orientation, race, color, age, political belief, religious creed, disability, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subject to discrimination under SNAP. This includes program-specific requirements found at [7 CFR part 15](#) *et. seq.* and [7 CFR 272.6](#).

This assurance is given in consideration of and for the purpose of obtaining any and all Federal assistance extended to the State by the USDA under the authority of the Food and Nutrition Act of 2008, as amended. Federal financial assistance includes grants, and loans of Federal funds; reimbursable expenditures grants or donations of Federal property and interest in property; the detail of Federal personnel; the sale, lease of, or permissions to use Federal property or interest in such property; the furnishing of services without consideration, or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient; or any improvements made with Federal financial assistance extended to the State by USDA. This assistance also includes any Federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

By accepting this assurance, the County agency agrees to compile data, maintain records, and submit records and reports as required, to permit effective enforcement of nondiscrimination laws and permit authorized USDA personnel during hours of program operation to review and copy such records, books, and accounts, access such facilities and interview such personnel as needed to ascertain compliance with the nondiscrimination laws. If there are any violations of this assurance, the State agency, shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the County agency, its successors, transferees and assignees as it receives assistance or retains possession of any assistance from USDA. The person or persons whose signatures appear below are authorized to sign this assurance on behalf of the County agency.

3. (For States with Indian Reservations only). Implement the program in a manner that is responsive to the special need of American Indians on reservations and

consult in good faith with tribal organizations about that portion of the State’s Plan of Operation pertaining to the implementation of the Program for the members of the tribe on reservations.

- 4. FNS agrees to: 1. Pay administrative cost in accordance with the Food and Nutrition Act of 2008, implementing regulations, and an approved Cost Allocation Plan.
- 2. Carry out any other responsibilities delegated by the Secretary in the Food and Nutrition Act of 2008, as amended.

By signing on behalf of the County Agency, I state that I am authorized to bind the County Agency to the terms of the 2024-2026 Civil Rights Assurance Agreement and commit it to the above provisions.

Signature of agency representative

Print Name

Name of County Agency

Street Address, City, State, Zip Code

Unless amended or rescinded, this 2024-2026 Civil Rights Assurance Agreement is valid through December 31, 2026.

ADDENDUM

Clarification of SNAP Civil Rights Requirements - Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency (LEP)," and Titles II and III of the Americans with Disabilities Act.

This addendum clarifies core civil rights requirements to ensure meaningful access to programs, services, and information for persons with Limited English Proficiency (LEP) and persons with disabilities in accordance with Federal law, regulations, and current guidance from the U.S. Department of Department of Justice (DOJ) and the U.S. Department of Agriculture (USDA).

Meaningful Access for LEP Individuals

County agencies that participate in the Supplemental Nutrition Assistance Program (SNAP) must take reasonable steps to ensure that LEP persons have meaningful access to programs, services, and benefits. This includes the requirement to provide bilingual program information and certification materials and interpretation services to single-language minorities in certain project areas. SNAP County agencies that do not provide meaningful access for LEP individuals risk violating prohibitions against discrimination based on National Origin in the Food and Nutrition Act of 2008, as amended, Title VI of the Civil Rights Act of 1964 (Title VI), and SNAP program regulations.

Federal LEP regulations and guidance include:

- SNAP regulations provided by 7 CFR Part 272.4 (b), "Bilingual requirements";
- Executive Order 13166 of August 11, 2000, "Improving Access to Services for Persons with Limited English Proficiency," reprinted in 65 FR 50121, 50122 (August 16, 2000);
- DOJ policy guidance titled, "Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons," published in 67 FR 41455, 41457 (June 18, 2002); and
- USDA policy guidance titled, "Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons," published in 79 FR 70771-70784 (November 28, 2014).

Four Factor Analysis for Assessing LEP Needs

To be in compliance, the Title VI guidance provided by DOJ and USDA instructs County Agencies to assess the LEP needs of the population served and determine the LEP services required by balancing four factors:

1. The number or proportion of persons with limited English proficiency are eligible to be served or likely to be encountered within the area serviced by the recipient;

2. The frequency with which persons with limited English proficiency come in contact with the program;
3. The nature and importance of the program, activity, or service to people's lives; and
4. The resources available to the recipient and costs.

SNAP County agencies must also comply with the specific requirements established by 7 CFR Part 272.4 (b) and should include these obligations in the LEP assessment.

Developing an LEP Plan

After completing an assessment of LEP needs, SNAP County agencies should develop an implementing plan to address the LEP needs of the population served. This may include contracting for oral interpretation services, hiring bilingual staff, arranging for telephone interpreters and/or language lines, coordinating community volunteers, translating vital documents, and providing written notice that language line services are available in appropriate languages. Quality and accuracy of the language service is critical in order to avoid serious consequences to the LEP person and to the recipient. LEP needs should be considered in developing County and local budgets and front-line staff should understand how to obtain LEP services.

USDA's 2014 policy guidance includes detailed information on assessing LEP needs, identifying practices for translating documents that will be seen as strong evidence of compliance. For additional assistance and information regarding LEP matters, please also visit <http://www.lep.gov>. The website includes online LEP mapping tools designed to help assess the language needs of the population served by a particular program or facility.

Ensuring Equal Opportunity Access for Persons with Disabilities

SNAP County agencies must also ensure equal opportunity access for persons with disabilities. This includes ensuring that communications with applicants, participants, members of the public, and companions with disabilities are as effective as communications with people without disabilities. County agencies that do not provide persons with disabilities equal opportunity access to programs may risk violating prohibitions against disability discrimination in the Rehabilitation Act of 1978, the Americans with Disabilities Act (ADA), and SNAP program regulations. DOJ published revised final regulations implementing Titles II and III of the ADA on September 15, 2010. These regulations are codified at 28 CFR Part 35, "Nondiscrimination on the Basis of Disability in State and Local Government Services" and 28 CFR Part 36, "Nondiscrimination on the Basis of Disability in Public Accommodations and Commercial Facilities." In accordance with the implementing regulations, County Agencies must provide auxiliary aids and services where necessary to ensure effective communication and equal opportunity access to program benefits for individuals with disabilities. The type of auxiliary aids and services required will vary, but a County agency may not require an individual with a disability to bring another individual to interpret, and may rely on a person accompanying a

disabled individual only in limited circumstances. When a County agency communicates with applicants and beneficiaries by telephone, it must provide text telephone services (TTY) or an equally effective electronic telecommunications system to communicate with individuals who are deaf, hard of hearing, or hearing impaired. County agencies must also ensure that interested persons, including people with low vision or who are hard of hearing can obtain information as to the existence and location of accessible services, activities, and facilities. For more information, please visit the ADA website: www.ada.gov

Please submit the signed 2024-2026 STATE-COUNTY CIVIL RIGHTS ASSURANCE AGREEMENT to:

**Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division (EOAD)
P.O. Box 64997
St. Paul, MN 55164-0997
Email: dhs.equalopportunity@state.mn.us**

EOAD Telephone: 651-431-3040 (voice) or use your preferred relay service

ANNUAL REPORT TEMPLATE

MMS EEO/AA Guidelines Annual Report Form

[Name of County/Agency] is committed to complying with the Minnesota Merit System EEO/AA Guidelines, Bulletin No. 21-89-01 (Guidelines). Pursuant to the Guidelines the following information is submitted as the county's 2024 annual report:

1. Report of Discrimination Complaints brought by employees and applicants for employment.

a. Number of Discrimination Complaints: 0

b. List each type of Discrimination Complaint and status of resolution (do not list individual's names, employee ID numbers, or other identifying information):

1)

2)

2. Report recruitment activities conducted. Check the boxes for the diversity recruitment activity conducted and protected group (females, racial/ethnic minorities¹, persons with disabilities) community organizations contacted.

☐ Career Services and/or DEi department of the following college: _____(fill in blank)

☐ CareerForce office in the following location: _____(fill in blank)

☐ Tribal Nation: _____(fill in blank)

☐ Participated in job fair or tabled at the following school, church, farmers market, etc.: _____(fill in blank)

☐ Other-fill in the name of the resource/activity here: _____

3. Report recruitment activities planned for coming year. Check the boxes for the diversity recruitment activity to conduct and protected group {females, racial/ethnic minorities, persons with disabilities} community organizations to contact.

☐ Career Services and/or DEi department of the following college (find college at this [link](#)): Bemidji State Career Expo (fill in blank)

☐ CareerForce office in the following location (find location at this [link](#)): _____(fill in blank)

☐ Tribal Nation (find nation at this [link](#)): _____(fill in blank)

☐ Participate in job fair or table at the following school, church, farmers market, etc.: _____(fill in blank)

☐ Other -fill in the name of the resource/activity here: _____

¹As used throughout this document, the phrase "racial/ethnic minorities" means individuals who identify as: Black, Hispanic, Asian, Pacific Islander, American Indian, or Alaskan native. Minnesota Rules, part 9575.0010, subpart 34a.

4. Report workforce utilization and hiring goals for females, racial/ethnic minorities, persons with disabilities and action steps taken to achieve those goals.

a. Underutilization analysis was completed with _regional *[statewide or regional?]* data for all job categories using census data available on the Minnesota Department of Human Rights website.

b. Fill in the table below for current workforce utilization and hiring goals of females, racial/ethnic minorities, and persons with disabilities.

Current Utilization - Include# of Individuals								Hiring Goals [year]		
Job Categories	Total Employees	Females	% Available	Racial/Ethnic Minorities	% Available	Persons w/Disabilities	% Available	Females	Racial/Ethnic Minorities	Persons w/Disabilities
Officials/Administrators	5	4	76.50		10.20		3.30			
Professionals	13	11	80.60		8.70		3.50		1	
Office/Clerical	5	5	78.60		7.20		5.50			
Technicians	14	11	89.20		8.50		7.70		1	
Skilled Craft										
Service Maintenance										

c. Provide a narrative on action steps taken to achieve goals and list goals that were achieved in this reporting year:

5. Report all staff training and other sessions conducted related to affirmative action and equal employment opportunity. List training and information sessions related to AA/EEO and dates activity conducted.

a. Safety Training

b. Sexual Harassment Training

c. Cultural Competency/Diversity Training= Which is continuing with a Internal Staff Committee.

6. This document has been reviewed and approved by the following MMS county/multi-county human service Agency Director or EEO/AA Designated Liaison:

Signature: J.

Title: ---'---LfJ---=-----=-=iizl:w--

Print Name: .l·e.<Sg"os+c,,,,,J

Date: 3'---ilr--/ 4)cxc)- <

CHILDREN AND FAMILY SERVICES – CHILD SAFETY AND PERMANENCY

Child Welfare opiate allocation – agency annual report

County/tribal agency contact information

COUNTY/TRIBAL AGENCY NAME Pennington County Human Services		CONTACT PERSON Julie Sjostrand, Director	
STREET ADDRESS 101 Main Ave. N.		CITY Thief River Falls	STATE MN
		ZIP CODE 56701	
PHONE NUMBER 218-681-2880	EMAIL ADDRESS jasjostrand@penningtonmn.gov		
BUDGET PERIOD January 1, 2024 - December 31, 2024			TOTAL AMOUNT \$7,354.00

Budget information

Identify the service/program/staff that funding is being used for:

SERVICE/PROGRAM Flexible spending	
DESCRIPTION Flexible spending will provide services for families affected by addiction to access much needed resources.	
BUDGET FOR THIS PROGRAM/SERVICE \$7,354.00	ACTUAL EXPENDITURES FOR THIS PROGRAM/SERVICE \$0.00
WHAT SPECIFIC POPULATION(S) IS/ARE BEING SERVED WITH THIS FUNDING? Families affected by Drugs and Out of Home Placement	
HOW MANY CHILDREN AND FAMILIES WILL BE SERVED? 10 families will be served in Pennington County	
HOW IS EQUITY/DIVERSITY/INCLUSION BEING ADDRESSED WITH THIS PROGRAM/SERVICE? We have and will be doing out reach to families and addressing programs and services that are culturally inclusive.	

Assurances

How did the agency assure that program funds were used appropriately, as directed by law? Check all that apply.

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

DESCRIBE PROTOCOL: In fiscal Director signs off on bills and bills proceed to fiscal supervisor. Child Protection Supervisor signs off as well.
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What procedures are in place to ensure program policies are followed and applied accurately?

Check all that apply.

- ☒ Case Consultation
- ☐ Sample case review by workers
- ☐ Sample case review by supervisors
- ☐ Other

DESCRIBE:

Supervisor and Caseworkers consult once a week on all cases and as ongoing basis if needed. County Attorney meeting consult is ongoing once a week to review court cases for the following week and any ongoing cases to review. Law Enforcement will meet with Child Protection staff if Needs arise in situations in ongoing case management. Child Protection meets with advocates in ongoing case management.

Assurances

It is understood and agreed by the county/tribal board that:

- Funds granted pursuant to this service agreement will be expended solely for the purposes outlined in Minnesota Statutes, section 256.043, subdivision 3(b) and as outlined in the Opiate Account bulletin;
- Annual reports will be made to the commissioner of the Minnesota Department of Human Services on how funds were used to provide child protection services, including measurable outcomes, as determined by the commissioner, and that documentation is subject to audit;
- Funds must not supplant state or local funding for child protection services for children and families affected by addiction; and
- The allocation is funded with state funds and paid quarterly.

☒ By checking here, I agree to the assurance statement above.

By checking "I agree" and typing my name in the "Electronic Signature" field, I understand that I am electronically signing this form. In addition, I attest and certify that I have verified the profile change against an acceptable form of identification and that the information provided above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)

<input checked="" type="checkbox"/> I agree	ELECTRONIC SIGNATURE (type name) Julie Sjostrand	DATE 3/10/2025
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DHS staff approval:

By checking "I agree" and typing my name in the "Electronic Signature" field, I understand that I am electronically signing this form. In addition, I attest and certify that I have verified the profile change against an acceptable form of identification and that the information provided above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)

<input type="checkbox"/> I agree	ELECTRONIC SIGNATURE (type name)	DATE
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Budget Period: January 1, 2024 - December 31, 2024

Service/Program	Budget	Expenditures	Underspend
Flexible spending	\$7,354.00	\$0.00	\$7,354.00
Grand Total:	\$7,354.00	\$0.00	\$7,354.00

PURCHASE OF SERVICE AGREEMENT

THIS AGREEMENT made and entered into by and between Pennington County Human Services, 101 Main Ave N, Thief River Falls, MN 56701 (Agency)

419 E 3rd St, Suite B, Thief River Falls, MN 56701 (Provider).

WHEREAS: The provider is qualified and able to provide Mental Health-Targeted Case Management clinical supervision services, the Provider is Jennifer Manning.

WHEREAS: The Agency and Provider agrees as follows;

- I.
 - A. The Agency will purchase, and the Provider will provide Mental-Health Targeted Case Management Clinical Supervision.
 - B. Provider will provide proof of credentialing and maintain clinical supervision qualifications for the duration of this agreement.
 - C. The Agency will determine the frequency, length and duration of purchase services.
 - D. The Agency and Provider will confer and mutually agree upon service expectations and mode of service delivery.
- II. Payment:
 - A. Provider will be reimbursed at the rate of \$165.00/hour.
 - B. Provider will submit claims for work preformed via and itemized invoice.
 - C. Claims will be processed according to standard Agency protocol and within 30 days of receipt of service invoice.
 - D. This agreement will not provide a guaranteed minimum amount over the term of the agreement.
- III. Independent Contractor: The Agency and Provider agree that the status of the Provider under this agreement is that of independent contractor. The Provider, while engaged in the performance of any services provided to the Agency, shall not be considered an employee of the Agency.
- IV. Insurance: Agency and Provider are responsible for their own liability insurance coverage. Provider will hold harmless Pennington County and Pennington County Human Services from liability, loss damages, cost expenses which may be claimed against the County arising out of the performance of the Provider.
- V. HIPAA and safeguarding of Client Information: It is understood that Identifying client information will not be shared between Agency and Provider. If such disclosure becomes necessary, it will be done so under a duly authorized release of information

and that the maintenance of shared information will follow HIPAA and Data Privacy protocols.

- VI. Duration of Agreement: This agreement will commence upon signature of the parties and will be effective 3/25/2025 through 12/31/2025. Any modifications or alterations to this agreement will only become valid when they have been reduced to writing and signed by the parties. Early termination of this agreement by any party, shall be valid upon 45 (forty-five) days written notice.

County Board Chair

Date

Provider

Date

Agency Director

Date

Pennington County Attorney

Date

Pennington County Human Services
 Out Of Home Placement Costs
 Year Ending December 31, 2025 & 2024

SS
 SS

	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	YTD	YTD 2024	Change
Expense															
Foster Care	3,145.26	10,171.02											13,316.28	30,205.00	-55.9%
Rule 4													-	1,103.60	-100.0%
Rule 8													-	-	
Rule 5	12,399.05	9,475.46											21,874.51	-	
Corrections	19,146.58	29,738.16											48,884.74	94,700.44	-48.4%
Adoption Aid													-	-	
Totals	34,690.89	49,384.64	-	-	-	-	-	-	-	-	-	-	84,075.53	126,009.04	-33.3%
Revenue															
Reimburse													-	-	
MH Recovery	3,266.05	1,890.87											5,156.92	5,579.46	-7.6%
4E Recovery													-	13,306.00	-100.0%
NFC Settlement													-	-	
Totals	3,266.05	1,890.87	-	-	-	-	-	-	-	-	-	-	5,156.92	18,885.46	-72.7%
														-	
Net Expense	31,424.84	47,493.77	-	-	-	-	-	-	-	-	-	-	78,918.61	107,123.58	-26.33%

2023 Totals	57,244.52	49,879.06	67,169.93	81,595.18	49,198.49	70,938.37	52,730.26	59,000.52	40,103.55	51,887.09	40,643.74	53,176.03			
YTD Change	(25,819.68)	(28,204.97)	(95,374.90)	(176,970.08)	(226,168.57)	(297,106.94)	(349,837.20)	(408,837.72)	(448,941.27)	(500,828.36)	(541,472.10)	(594,648.13)			

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	YTD
Expense													
Foster Care	14,509.12	15,695.88	11,208.21	11,012.25	9,771.75	10,842.54	10,414.56	8,870.93	6,442.67	3,038.40	4,536.83	3,043.80	109,386.94
Rule 4	-	1,103.60	2,064.80	-	1,560.90	2,885.30	-	1,419.00	476.00	-	-	-	9,509.60
Rule 8	-	-	-	-	-	-	-	-	-	-	-	-	-
Rule 5	-	-	-	-	-	6,185.14	8,650.50	22,779.65	17,877.70	17,699.50	-	35,178.70	108,371.19
Corrections	48,314.86	46,385.58	65,215.38	77,092.30	49,283.30	56,604.85	46,683.94	39,800.31	21,351.59	32,687.27	38,341.58	21,440.40	543,201.36
Adoption Aid	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals	62,823.98	63,185.06	78,488.39	88,104.55	60,615.95	76,517.83	65,749.00	72,869.89	46,147.96	53,425.17	42,878.41	59,662.90	770,469.09
Revenue													
Reimburse	-	-	-	-	-	-	-	-	-	-	-	-	-
MH Recovery	5,579.46	-	5,579.46	6,509.37	5,579.46	5,579.46	13,018.74	6,509.37	6,044.41	1,538.08	2,234.67	1,890.87	60,063.35
4E Recovery	-	13,306.00	-	-	5,838.00	-	-	7,360.00	-	-	-	4,596.00	31,100.00
NFC Settlement	-	-	5,739.00	-	-	-	-	-	-	-	-	-	5,739.00
Totals	5,579.46	13,306.00	11,318.46	6,509.37	11,417.46	5,579.46	13,018.74	13,869.37	6,044.41	1,538.08	2,234.67	6,486.87	96,902.35
												-	
Net Expense	57,244.52	49,879.06	67,169.93	81,595.18	49,198.49	70,938.37	52,730.26	59,000.52	40,103.55	51,887.09	40,643.74	53,176.03	673,566.74

1035.4
1054
1035.4
149.1
149.1
149.1
520.95
1257.67
520.95
1315.64
1146.38

67.95
745.5
78.69
745.5
67.95
745.5
952
935.2
935.2
194.3
334.11
309.05
1236.2
1336.44
1135.96
1188.32
36.98
369.8

314.76
1035.4
1035.4
1054
271.8
271.8
81.14
1176.53
1368.65

1479.63
1146.38
1230.76

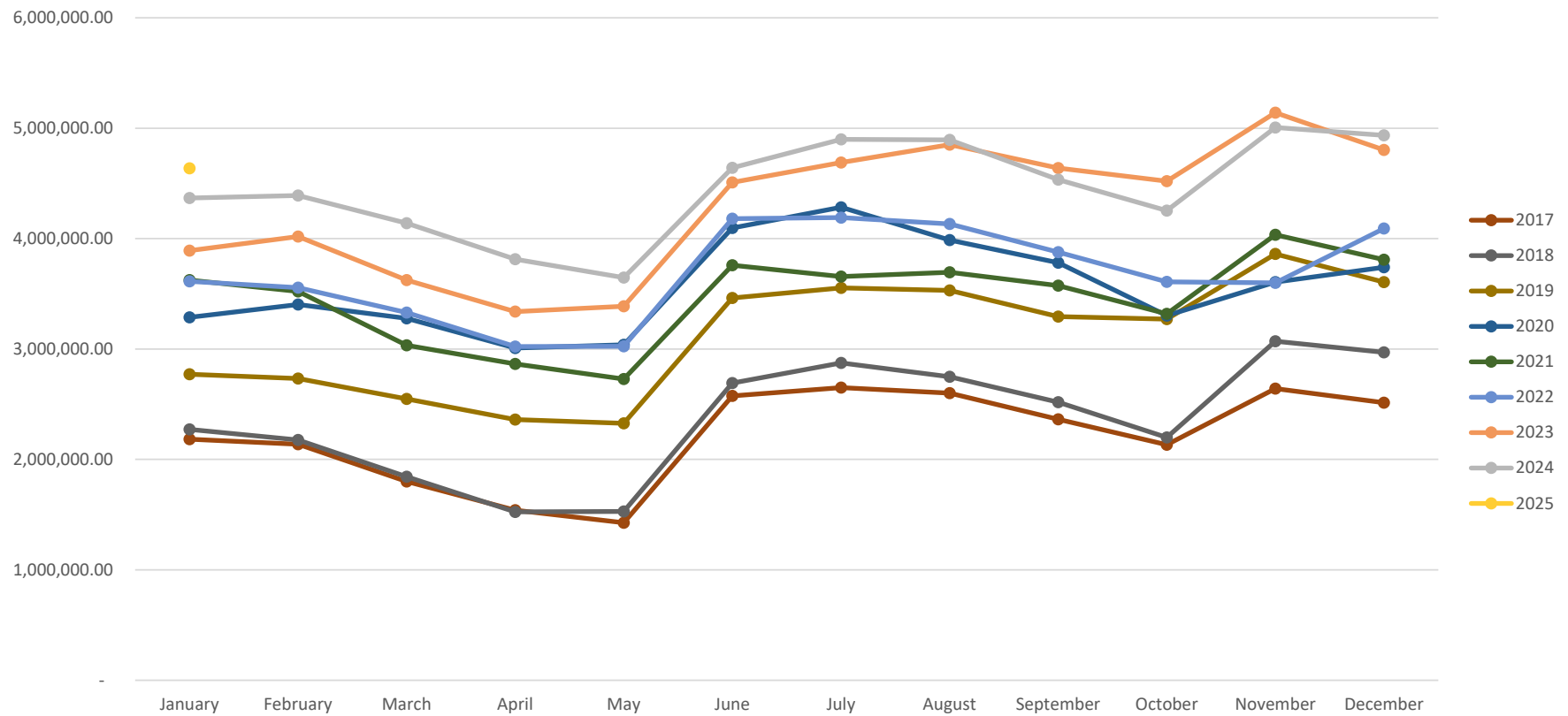
1020
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1273.2
358.53
259.02
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259.02
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259.02

Human Service's Month End Balance

	2017	2018	2019	2020	2021	2022	2023	2024	2025	% of Budget
January	2,182,630.66	2,271,729.26	2,772,063.80	3,288,028.76	3,624,301.56	3,612,634.01	3,892,137.92	4,368,802.80	4,637,333.31	82.71%
February	2,138,616.83	2,176,762.19	2,732,919.27	3,403,266.76	3,521,041.97	3,555,431.44	4,019,670.50	4,391,391.39	4,512,156.56	80.48%
March	1,800,227.71	1,844,672.30	2,547,429.81	3,277,046.86	3,033,593.35	3,329,525.51	3,624,644.30	4,140,708.64	0.00	0.00%
April	1,539,707.40	1,525,256.03	2,361,226.50	3,009,330.45	2,865,586.09	3,022,501.53	3,338,694.34	3,814,053.11	0.00	0.00%
May	1,426,858.37	1,528,544.15	2,327,158.79	3,038,957.98	2,728,273.46	3,023,675.98	3,386,550.78	3,646,747.76	0.00	0.00%
June	2,576,374.42	2,692,513.93	3,462,928.17	4,095,797.92	3,759,448.23	4,180,077.80	4,510,080.21	4,640,679.57	0.00	0.00%
July	2,650,496.79	2,874,408.12	3,554,336.75	4,284,273.43	3,656,785.80	4,190,786.57	4,690,147.87	4,898,652.24	0.00	0.00%
August	2,600,332.14	2,749,859.99	3,531,954.80	3,987,655.57	3,694,899.51	4,132,301.59	4,850,104.65	4,894,959.57	0.00	0.00%
September	2,362,913.96	2,518,750.84	3,294,188.08	3,781,078.10	3,573,442.34	3,878,451.23	4,637,867.07	4,535,101.45	0.00	0.00%
October	2,133,041.74	2,198,557.64	3,270,530.55	3,301,898.06	3,318,688.76	3,609,060.10	4,520,293.45	4,253,349.62	0.00	0.00%
November	2,642,643.71	3,070,756.97	3,860,836.73	3,606,171.73	4,035,310.35	3,599,570.32	5,140,626.01	5,006,519.16	0.00	0.00%
December	2,513,770.14	2,970,003.64	3,606,171.73	3,741,217.85	3,808,445.10	4,092,234.23	4,802,666.26	4,935,928.28	0.00	0.00%
Expense Budget								5,606,750.00		

*****Fund balance should be at 42% of Annual Expenditures.

Human Services Cash Balance 2017-2025



Pennington County Human Services Income Maintenance Unit 2025 Active Cases by Program	
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[illegible]

Food

[illegible]

Health Care

[illegible]

Total Active Programs	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

[illegible]

Total Active Cases	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

[illegible]

Pennington County Human Services
Income Maintenance Unit
Active Cases by Program
Feb-25

Cash	# Cases	## in HH	# Adults	# Children	
MFIP	35	66	26	40	Minnesota Family Investment Program
DWP	4	9	4	5	Diversiary Work Program
GA	47	47	47	0	General Assistance
GRH	41	41	41	0	Group Residential Housing
MSA	48	48	48	0	Minnesota Supplement Aid
EA	1	4	2	2	Emergency Assistance
EGA	1	1	1	0	Emergency General Assistance
TOTAL	177	216	169	47	

Food					
SNAP	617	,243	738	505	Supplemental Nutrition Assistance Program
TOTAL	617				

Health Care					
MA (MAXIS)	473	481	413	68	Medical Assistance
IMD	1	1	1	0	Institute for Mental Disease
QMB	245	246	246	0	Qualified Medicare Beneficiary (Medicare Savings Program)
SLMB	59	60	60	0	Service Limited Medicare Beneficiary (Medicare Savings Program)
QI-1	23	25	25	0	QI-1 (Medicare Savings Program)
MA (METS/MNsure)	969				Medical Assistance (as of).
MCRE (METS)	59				MinnesotaCare (as of).
TOTAL	1,829	813	745	68	

TOTAL ACTIVE PROGRAMS:	2,623
TOTAL ACTIVE CASES:	2,005

<p align="center"> Pennington County Human Services Emergency Assistance/Emergency General Assistance Emergency Requests Related to Potential Evictions/Housing and Utilities February-25 </p>

Approvals

Eligibility Worker	File Date	Case	Request	Employment Status	Number of Children	Amount and Purpose	Agency Action	Date of Action
X157539	2/3/2025	2189724	Lot rent	1 adult emp full time	2	\$1120 lot rent	EA Approved for \$1120 for lot rent	2/7/2025
x157535	2/5/2025	1479839	Utilities	1adult - GA of 350	0	\$169.49	EGA of \$169.49 approved for utilities	2/10/2025
TOTAL						EA	\$1,120.00	
						EGA	\$169.49	

Denials

[illegible]