



# 2018-2019 County MFIP Biennial Service Agreement

January 1, 2018 - December 31, 2019

Enter the county's unique ID number

### Contact Information

COUNTY/CONSORTIUM NAME

PLAN YEAR

CONTACT PERSON

TITLE

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

EMAIL ADDRESS (where correspondence related to this form will be sent)

CONFIRM EMAIL ADDRESS

**Note: Please review the 2018-2019 MFIP Biennial Service Agreement Bulletin for more details before you complete this document.**

**A. Needs Statement**

**1. Besides funding, what is the single biggest challenge you are facing in financial assistance services?**

Wabasha County is experiencing a lack of daycare providers to meet the needs of MFIP customers. We currently have 45 registered providers and no new ones becoming registered. This is a big barrier to some customers finding and retaining employment.

7750 characters remaining

**2. Besides funding, what is the single biggest challenge you are facing in employment services?**

One of the biggest challenges in this labor market is finding the right people for the right jobs and having those jobs pay enough to move people off of assistance. We are working with Career Pathway models that include short term training the can help to get people into jobs that have future mobility and room to learn and grow. The challenge is always getting the people to those jobs (transportation) and having those jobs fit with the realities of our families (childcare, work hours, flexibility). We are working to develop career pathways in Healthcare, Construction/Infrastructure, Manufacturing, Public Service, Customer Service/retail management.

7344 characters remaining

**A. Needs Statement** (continued)

**3. What strengths and resources do you have available to address the needs of your participants?**

Please check all the resources available to participants in your service area and check whether the resource is available within MFIP financial or employment services "in-house" or from a partner organization (county resources with developed connections to MFIP), and/or an external community resource or both. If you lack sufficient resources in your area, check the Resource Gaps column, even if there are some resource sources. Add any "other" resources that you consider necessary.

MFIP Resources	Partner Resources	Community Resources	Resource Gaps	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ABE/GED
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adult/elder services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Career planning
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Childcare funds
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Chemical health services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Computer lab access
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Credit counseling/financial literacy
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	English Language Learner (ELL)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food shelf
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Housing assistance
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job club
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job development
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job placement
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job retention
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job search workshops
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Mental health services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-the-job training program
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Post-secondary education planning
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Short-term training
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Supported work
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Paid work experience
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Transportation assistance (gas cards, bus cards)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vehicle repair funds
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Volunteer opportunities
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Youth program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other

**4. County Program Contact Information**

Please name contacts for the following programs if different from the contact on the cover page. You only need to give a person's phone and email once.

<b>MFIP STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
Lisa McNally	651-565-3043	lmcnally@co.wabasha.mn.us

<b>DWP STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
Lisa McNally	651-565-3043	lmcnally@co.wabasha.mn.us

<b>FINANCIAL ASSISTANCE SERVICES STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
Lisa McNally	651-565-3043	lmcnally@co.wabasha.mn.us

County MFIP Biennial Service Agreement

A. Needs Statement (continued)

Employment Services Provider(s) Information

Statute 256J.50, subdivision 8: Each county, or group of counties working cooperatively, shall make available to participants the choice of at least two employment and training service providers as defined under Minnesota Statutes, section 256J.49, subdivision 4, except in counties contracting with workforce centers that use multiple employment and training services or that offer multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs.

List your current employment services provider(s) and check the respective box to indicate which population served. If a Workforce Center is the only employment services provider, list the multiple employment and training services among which participants can choose. Section G of this form addresses provider choice.

NAME	ADDRESS	CONTACT PERSON	PHONE NUMBER
Workforce Development Inc.	222 West Main Street, Wabasha MN 55981	Wanda Jensen	507-292-5166
Population Served	<input checked="" type="checkbox"/> MFIP ES	<input checked="" type="checkbox"/> DWP ES	<input checked="" type="checkbox"/> FSS
	<input checked="" type="checkbox"/> Teen Parents	<input checked="" type="checkbox"/> 200% FPG	

B. Service Models

Minnesota Family Investment Program (MFIP) and the Diversionary Work Program (DWP)

1. Do you have culturally specific employment services for different racial/ethnic groups?

- Radio buttons for No/Yes. Checkboxes for African American, African immigrant, Asian American, Asian immigrant, American Indian, Hispanic/Latino, Other.

2. What strategies do you use for hard-to-engage participants? Check all that apply.

- Checkboxes for Home visits, Sanction outreach services, Incentives, Off-site meeting opportunities, Other.

3. What types of job development do you do? Check all that apply.

- Checkboxes for Sector job development, Individual job development, Other.

4. Do you have an ongoing job development partnership or sector based job development with community employers to help participants with employment?

- Radio buttons for No/Yes. Checkboxes for Interview opportunities, Job skills training, Job placement, Job shadowing, On-site job training, Work experience, Helps plan training programs, Other.

5. Do you provide job retention services to employed participants while they are receiving MFIP?

- Radio buttons for No/Yes. Checkboxes for Available to assist with issues that develop on the job, Financial planning, Soft skills training, Mentoring, Transportation, Personal contact with the employee, Other.

HOW OFTEN? Upon Customer Request

How long do you provide job retention services?

- Radio buttons for Less than 3 months, 3-6 months, 7-12 months, More than one year.

6. Do you provide job advancement services to employed participants?

- Radio buttons for No/Yes. Checkboxes for Career laddering, Networking, Coaching/mentoring, Ongoing job search, Education/training, Other.

7. Do you utilize any career pathways programs or skill assessment and credentialing programs for your participants?

- Radio buttons for No/Yes. Checkboxes for Pathways to Prosperity (P2P), Work Keys, National Career Readiness Certificate (NCRC).

Other SPECIFY: Using several different skill & career assessment tools and pursuing P2P grant.

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**B. Service Models** (continued)**Family Stabilization Services (FSS)**

1. Do you have professionals available to assist with FSS cases?

 No  Yes *Check all that apply*

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Adult Mental Health professional      | <input checked="" type="checkbox"/> Psychologist                     | <input checked="" type="checkbox"/> Adult Rehabilitation Mental Health Services (ARMHS) worker |
| <input checked="" type="checkbox"/> Public Health Nurse                   | <input checked="" type="checkbox"/> Chemical Health professional     | <input checked="" type="checkbox"/> Social Worker  |
| <input checked="" type="checkbox"/> Children's Mental Health professional | <input checked="" type="checkbox"/> Vocational Rehabilitation worker | <input type="checkbox"/> Other   |

2. Do you make referrals for children of FSS participants?

 No  Yes *Check all that apply*

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Children's Mental Health Services         | <input checked="" type="checkbox"/> Public Health Nurse home visiting services | <input checked="" type="checkbox"/> Child Wellness Check-ups |
| <input checked="" type="checkbox"/> Women, Infants and Children Program (WIC) | <input type="checkbox"/> Other   |  |

3. Are any of these services for children offered to non-FSS families?

 No  Yes**Services for families no longer on MFIP/DWP but under 200% of Federal Poverty Guideline**

1. Do you provide services to families who are not receiving DWP or MFIP assistance but are under 200% of the Federal Poverty Guideline (FPG)?

 No  Yes *Check all the services that apply*

- |   |  |  |   |
|---|--|--|---|
| <input checked="" type="checkbox"/> ABE/ELL Classes     | <input checked="" type="checkbox"/> Job retention services | <input checked="" type="checkbox"/> Child care | <input checked="" type="checkbox"/> Referral to other programs  |
| <input checked="" type="checkbox"/> Computer Lab Access | <input checked="" type="checkbox"/> Support Services       | <input checked="" type="checkbox"/> GED        | <input checked="" type="checkbox"/> Training/Job Skills Classes |
| <input checked="" type="checkbox"/> Job postings        | <input type="checkbox"/> Other                             |  |   |

**B. Service Models** (continued)

**Minnesota Family Investment Program (MFIP) Services for Teen Parents**

1. Are there specialized workers who work primarily with teens (for example, child care worker provides child care resources to teens only)?

No  Yes *Check all that apply for each age group*

Minors (under age 18)	Age 18/19	
<input type="checkbox"/>	<input type="checkbox"/>	Financial worker
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Employment service worker
<input type="checkbox"/>	<input type="checkbox"/>	Social worker (Social Services)
<input type="checkbox"/>	<input type="checkbox"/>	Public health nurse
<input type="checkbox"/>	<input type="checkbox"/>	Child care worker
<input type="checkbox"/>	<input type="checkbox"/>	Other job role

2. Is there a single point of contact for teens, that is, one staff with primary responsibility for keeping in contact with the teen, working with the teen, and making connections to other services? Respond for each age group separately. If yes for an age group, check the one position that serves this function within that age group.

No  Yes

Minors (under age 18)	Age 18/19
<input type="radio"/> Financial worker	<input type="radio"/> Financial worker
<input type="radio"/> Employment service worker	<input type="radio"/> Employment service worker
<input checked="" type="radio"/> Social worker (Social Services)	<input type="radio"/> Social worker (Social Services)
<input type="radio"/> Public health nurse	<input type="radio"/> Public health nurse
<input type="radio"/> Child care worker	<input type="radio"/> Child care worker
<input type="radio"/> Other job role	<input type="radio"/> Other job role

3. Does your county have an active partnership with the local public health agency to get teen parents enrolled and engaged in public health nurse home visiting services? *Check one for each age group.*

Minors (under age 18)	Age 18/19
<input type="radio"/> Yes, mandatory	<input type="radio"/> Yes, mandatory
<input checked="" type="radio"/> Yes, voluntary	<input checked="" type="radio"/> Yes, voluntary
<input type="radio"/> No	<input type="radio"/> No

### C. Measures

#### Performance Measures

1. Performance-based funding is determined by a service area's annualized Self-Support Index value. Review the information and report links in this section to see the effect of performance on funding and reporting, based on Statute 256J.626, subdivision 7.

Starting for calendar year 2016, each service area funding allocation starts at 100 percent. Each year starting with the 2016 allocation, a bonus to a service area's Consolidated Fund allocation will be based on its performance on the Self-Support Index in the previous April to March year.

The **three-year Self-Support Index (S-SI)**: This measure starts with all adults receiving MFIP or DWP cash assistance in a quarter and tracks what percentage of them, three years later, are no longer receiving family cash assistance or are working an average of 30 hours a week if still receiving cash assistance. Those who left MFIP after reaching 60 counted months and those who left due to 100 percent sanction are only counted as a success if they worked an average of 30 hours per week in their last month of eligibility or if they began receiving Supplemental Security Income (SSI) after family cash assistance ended. To provide fair comparisons across service areas, DHS calculates a "Range of Expected Performance" for the S-SI that is based on local caseload characteristics and economic conditions. The service area's Self-Support Index value is whether the service area was above, within, or below its expected Range.

The S-SI and Range are annualized for the four quarters in the April through March year ending in the reporting year before the funding year. See the MFIP Annualized S-SI and WPR report for 2017 on the MFIP Reports page on the DHS website. A service area with an annualized S-SI "above" its customized Range of Expected Performance for 2017 will receive a 2.5 percent bonus added to its Consolidated Fund allocation for calendar year 2018.

[MFIP Annualized S-SI and WPR report \(PDF\)](#)

If your service area is receiving a bonus, congratulations! Please share a success strategy here:

N/A

7997 characters remaining

In the future, if your service area has an annualized S-SI below its range for two consecutive years, you will have to **negotiate a multi-year improvement plan** with the commissioner. If no improvement is shown by the end of the second year of the multi-year plan, the next year's allocation must be decreased by 2.5 percent, to remain in effect until the service area performs within or above its Range of Expected Performance. For example, a service area scoring "below" for 2016 and 2017 would need to put in place a multi-year improvement plan. If continuing "below" for 2018 and 2019, there would be a 2.5 percent decrease for the 2020 Consolidated Fund allocation which would continue until an annualized S-SI above or within its Range. Then the service area would receive 100 percent of the allocation.

Supplemental information about the Performance Management System and Performance Improvement Plans can be found on CountyLink: [www.dhs.state.mn.us/HSPM](http://www.dhs.state.mn.us/HSPM). If you would like additional information, contact the DHS Performance Management team at [DHS.HSPM@state.mn.us](mailto:DHS.HSPM@state.mn.us) or 651-431-5780.



C. Measures (continued)

**Racial/Ethnic Disparities**

- 2. A racial/ethnic disparity for a service area is defined as a **one-year Self-Support Index** that is five or more percentage points lower for a non-white racial/ethnic group than for the white group of MFIP/DWP-eligible adults in that area. Access the report "Two-Year Performance Trends of Racial/Ethnic and Immigrant Group". This report lists (1) service areas that have any racial/ethnic disparities requiring action and (2) the table of differences for all service areas.

[Performance Measures by Racial/Ethnic or Immigrant Group \(PDF\)](#)

**If your service area is in the disparity list, please answer the following question:**

DHS will work with you to reduce these disparities.

What strategies and action steps for each of the groups with disparities do you plan for the coming biennium?

N/A

7997 characters remaining

**D. Program Monitoring/Compliance**

1. What procedures do you have in place to ensure that program funds are being used appropriately as directed in law? *Check all that apply.*

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

2. What procedures do you have 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

**If your service area has not made changes to your random drug testing policy since the last BSA, go to Section E.**

3. What procedures/policies do you have in place for administering random drug tests of convicted drug felons on MFIP as required by Minnesota Statutes, section 256J.26, subdivision 1?

- Written policy within the MFIP unit                       Coordination with Corrections  
 Currently establishing new policy/procedure(s)                       Other

**If your random drug testing policy has changed since the last BSA, please submit a copy to Tria Chang at [Tria.Chang@state.mn.us](mailto:Tria.Chang@state.mn.us)**

**E. Collaboration and Communication with Others**

1. How many employment services front-line staff are employed in your county or consortium?

1

How many employment services front-line staff in your county or consortium have MAXIS access?

1

How many managers/supervisors have MAXIS access?

0

2. Describe the process your service area uses to identify and resolve discrepancies between MAXIS and WF1 data in areas such as Family Stabilization Services coding, employment/hours, sanction status, etc.

Monthly in-person meeting with county staff to review cases and make corrections. Daily conversations are held between ES and EW staff to make sure that both systems reflect accurate and current information. ES uses MAXIS inquiry view to help ensure that they are working with the most current information and any discrepancies are discussed with county staff.

7638 characters remaining

## F. Emergency Services

### 1. Does your county provide emergency or crisis services from your Consolidated Fund?

No  Yes

If yes, enter your most up-to-date emergency/crisis services plan

- No family unit member can currently be under a disqualification due to fraud.
- No family unit caregiver can have refused to accept employment or training, or voluntarily terminated employment without good cause within the last 60 days. Involuntary termination of employment cannot be due to the fault of the employee (i.e. not showing up for work, etc.)
- The household must not have used more than 50% of its gross income, less required income tax and court ordered deductions, and liquid assets for purposes other than basic needs during the month of application and the prior two months before the month of application. Basic needs are defined as food, shelter, clothing and expenses that would result in loss of household income and self-sufficiency.
- The household is unable to resolve its emergency by combining liquid assets (no assets are excluded) and assets they can liquidate in time to help, income they will receive in time to help, and other funds for which they are eligible.
- The household must not have used EA, EGA or EMSA in the prior 18 months from the date of application, unless the request is for a separate type of emergency from the first issuance in the 18-month period prior to application.
- If verifications request by the Financial Worker are not provided within ten (10) days, the application will be denied unless prior arrangements have been made with the Financial Worker.

#### APPLICATION AND VERIFICATION

- Verification of all factors needed to determine eligibility and emergency circumstances is required prior to issuance of emergency aid.
- Emergency aid payment shall not exceed \$1500 per emergency request.
- Coordination with other local resources that may meet the emergency need, either fully or in part, is expected (e.g.: Energy Assistance Program, Three Rivers, Salvation Army, etc.). Denial of eligibility from such local resources, or verification that funds are not available to assist with the emergency, may be required prior to issuance of Emergency Assistance if it appears that the family may qualify for other help.

#### a. HOUSING ASSISTANCE

- Housing emergency aid is limited to occupancy payments (rent/mortgage) and does not include repairs of any kind.
- Verification of rent or mortgage which is two or more months past due, which may result in an eviction or foreclosure, or proof of eviction or foreclosure is required.
- Housing aid is limited to dwellings currently occupied and is habitable under local building/housing codes.
- Verification of a landlord/tenant relationship must be provided. Payments to family members are prohibited unless a landlord tenant relationship can be verified.
- For clients with a written eviction notice, verification of the date of the lease agreement and the issuance date of the eviction notice must be dated prior to the application date.
- Aid for new housing assistance is limited to an amount equal to one month's rent and/or deposit, not to exceed \$1500.
- Aid for rental/mortgage assistance is limited to no more than \$1500 per emergency request.

#### b. UTILITIES

- Verification of pending utility shut-off is required.
- The county agency may not issue assistance unless it receives confirmation from the utility provider that any assistance combined with payment from applicant and other funding sources will restore the utility or prevent shut-off.
- Utility bill must be in applicant's name.
- Client must have made a "reasonable attempt" toward payment of utility costs within the previous six months from the date of application, as determined by the County. County will take into account income and household circumstances when determining reasonable attempt. LIHEAP payments will not count toward reasonable attempt.
- Verification of payment plan arrangements (and/or subsequent denial) with the utility company must be provided.

The county agency reserves the option of requiring cash assistance clients to vendor pay some or all of client's rent or a utility for up to six (6) months from the issuance of EA, if a pattern of money mismanagement has been determined by the county.

AFTER the county agency has determined that the unit has met all the above conditions, the county will try to resolve the emergency in the most cost-effective manner. An emergency payment is cost-effective if the household's anticipated income together with the Emergency Assistance payment will be sufficient to cover the client's basic needs for the three-month period beginning with the month of application, and another emergency situation cannot reasonably be anticipated within two months after the month of EA issuance. Verification must be provided of sufficient income, or anticipated income, for the two months following the application month, and income must be sufficient to cover basic needs as well as prevent emergencies within that same time period. Verbal statements of potential income will not be considered when evaluating this requirement.

2375 characters remaining

G. Other

**Administrative Cap Waiver**

Minnesota Family Investment Program (MFIP) allows counties to request a waiver of the MFIP administrative cap (currently at 7.5%) for providing supported employment, uncompensated work or community work experience program for a major segment of the county's MFIP population. Counties that are operating such a program may request up to 15% administrative costs.

If your county is interested in applying for the waiver for the coming biennium, please complete the following four questions. Email [Tria.Change@state.mn.us](mailto:Tria.Change@state.mn.us) if you need assistance with the waiver.

1. Describe the activity(s) you will provide.

N/A

3997 characters remaining

2. Explain the reasons for the increased administrative cost.

N/A

3997 characters remaining

3. Describe the target population and number of people expected to be served.

N/A

3997 characters remaining

4. Describe how the unpaid work experience is designed to impart skills and what steps are taken to help participants move from unpaid work to paid work.

N/A

3997 characters remaining

**G. Other** (continued)**Addendum for Unpaid Work Experience Activities**

If your county is providing unpaid work experience activities for MFIP participants and you don't already have an Injury Protection Plan (IPP) in place, please fill out the IPP form. Email the completed form to [Tria.Chang@state.mn.us](mailto:Tria.Chang@state.mn.us).

**Provider Choice**

Does your county:

- Have at least two employment and training services providers. Go to Section H.
- Have a workforce center that provides multiple employment and training services, offers multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs. Go to Section H.
- Intend to submit a financial hardship request.

G. Other (continued)

**Financial Hardship Request**

**FINANCIAL HARDSHIP - Exception to Choice of Employment Service Providers Requirement**

MFIP provisions require counties to make a choice of at least two employment service providers available to participants unless a workforce center is being utilized (Minnesota Statutes, section 256J.50, subdivision 8). Counties may request an exception if meeting this requirement results in a financial hardship (Minnesota Statutes, section 256J.50, subdivision 9).

A financial hardship is defined as a county's inability to provide the minimum level of service for all programs if a disproportionate amount of the MFIP consolidated fund must be used to cover the costs of purchasing employment services from two providers or the cost of contracting with a workforce center.

To request approval of a financial hardship exception from the choice of provider requirement, please provide the following information.

1. If the county had a choice of providers in calendar year 2015, describe:
  - factors that have changed which indicate a financial hardship
  - why the hardship is expected to persist in the near future and
  - the magnitude of the hardship, which makes limiting delivery of employment services the best financial option for the county.

2000 characters remaining

2. Summarize options explored by the county, including use of other partners in a workforce center or other community agencies, such as a Community Action Program or a technical college. The summary should also include:
  - major factors which prevent the county from utilizing these options and include a cost analysis of each option considered; and
  - the process used to determine the cost of other options (RFP or other county process).

2000 characters remaining

3. If the county proposes to directly deliver MFIP employment services, provide a budget and staffing plan that clearly indicates consolidated funds will not be used to supplant county funds. The description should include information about what steps will be taken to ensure that county staff have the experience and skills to deliver employment services.

2000 characters remaining

The Department of Human Services (DHS) and the Department of Employment and Economic (DEED) will also review the amount budgeted by the county for employment and training during calendar year 2015 and use this amount as a guide to determine whether the amount budgeted by the county for calendar year 2016 is reasonable.

If a financial hardship is approved, DHS and DEED will closely monitor county programs to ensure outcomes are achieved and services are being delivered consistent with state law.

## County MFIP Biennial Service Agreement

## H. Budget

Click on the link below to review your service area's 2018 MFIP allocations:

[MFIP Consolidated Fund \(PDF\)](#)

In the budget table, indicate the amount and percentage for each item listed for the budget line items for calendar years 2018-2019. Also note:

- Total percent must equal 100.
- MFIP administration is capped at 7.5 percent unless the county is applying for an administrative cap waiver. To apply for the administrative cap waiver, respond to the questions in Section G under Administrative Cap Waiver.
- If "other" is used, briefly describe the line item.

## 2018 Budget

Budgeted Amount	Percent	Line Items
45,000.00	33.64%	Employment Services (DWP)
66,000.00	49.35%	Employment Services (MFIP)
12,719.00	9.51%	Emergency Services/Crisis Fund
10,031.00	7.50%	Administration (cap at 7.5%)
0.00	0.00%	Income Maintenance Administration
	0.00%	Other 1 <input type="text"/>
	0.00%	Other 2 <input type="text"/>
<b>\$133,750.00</b>	<b>100.00%</b>	<b>Total</b>

## 2019 Budget

Budgeted Amount	Percent	Line Items
45,000.00	33.64%	Employment Services (DWP)
66,000.00	49.35%	Employment Services (MFIP)
12,719.00	9.51%	Emergency Services/Crisis Fund
10,031.00	7.50%	Administration (cap at 7.5%)
0.00	0.00%	Income Maintenance Administration
	0.00%	Other 1 <input type="text"/>
	0.00%	Other 2 <input type="text"/>
<b>\$133,750.00</b>	<b>100.00%</b>	<b>Total</b>

Email [Brandon.Riley@state.mn.us](mailto:Brandon.Riley@state.mn.us) if you need assistance with this section.



### Certifications and Assurances

#### Public Input

Prior to submission, did the county solicit public input for at least 30 days on the contents of the agreement?

No  Yes

Was public input received?

No  Yes

If received but not used, please explain.

4000 characters remaining

#### Assurances

It is understood and agreed by the county board that funds granted pursuant to this service agreement will be expended for the purposes outlined in Minnesota Statutes, section 256J; that the commissioner of the Minnesota Department of Human Services (hereafter department) has the authority to review and monitor compliance with the service agreement, that documentation of compliance will be available for audit; that the county shall make reasonable efforts to comply with all MFIP requirements, including efforts to identify and apply for available state and federal funding for services within the limits of available funding; and that the county agrees to operate MFIP in accordance with state law and federal law and guidance from the department.

#### Federal Funding Sources

The catalog of Federal Domestic Assistance (CDA) Number is 93.558 - Temporary Assistance for Needy Families (TANF)  
The Award number for the period of January 1, 2018 - December 31, 2019 is 2014G996115.

### Service Agreement Certification

Checking this box certifies that this 2018-2019 MFIP Biennial Service Agreement has been prepared as required and approved by the county board(s) under the provisions of Minnesota Statutes, section 256J. In the box below, state the name of the chair of the county board of commissioners or authorized designee, their mailing address and the name of the county.

<b>DATE OF CERTIFICATION</b>	<b>NAME (CHAIR OR DESIGNEE)</b>	<b>COUNTY</b>
9/27/2017	Brian Goihl	Wabasha
<b>MAILING ADDRESS</b>	<b>CITY</b>	<b>STATE</b>
625 Jefferson Ave	Wabasha	MN
		<b>ZIP CODE</b>
		55981

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