

The Board of Supervisors met on 6/2/20 at 10:00 a.m. in the Story County Administration Building. Members present: Linda Murken and Lisa Heddens, with Murken presiding and both participating via conference call. Lauris Olson absent. (all audio of meetings available at storycountyiowa.gov). Murken read the special note to the public: due to recommendations to limit gatherings to no more than ten (10) people in order to help slow the spread of the COVID-19 virus, public access to the meeting will be provided via conference call originating from the Story County Administration Building.

ADOPTION OF AGENDA: Heddens moved, Murken seconded adopting the agenda as presented. Motion carried unanimously (MCU) on a roll call vote.

MINUTES: 5/1/20, 5/5/20, 5/8/20, 5/12/20, 5/15/20, 5/19/20, 5/22/20, and 5/26/20 Minutes - Heddens moved, Murken seconded as listed. Roll call vote. (MCU)

PERSONNEL ACTIONS: 1) pay adjustment, effective 6/7/20, in a) Attorney's Office for Samantha Betz @ \$18.94/hr; Casandra Eames @ \$21.13/hr; b) Planning & Development for Marcus Amman @ \$25.16/hr; c) Secondary Roads for Dennis Clatt @ \$30.63/hr; Steve Johnson @ \$33.29/hr; Paul Ogden @ \$30.70/hr; d) Sheriff's Office for Andrew Boeckman @ \$2,580.80/bw; Levi Hansen @ \$2,834.80/bw; Diane Hobart @ \$2,357.60/bw; e) Treasurer's Office for Ardis Baldwin @ \$36.00/bw; Shelly Campbell @ \$18.09/hr. Heddens moved, Murken seconded the approval of Personnel Action as presented. Roll call vote. (MCU)

Heddens moved, Murken seconded approval of the Consent Agenda as presented

1. Acknowledgement of Facilities Management Quarterly Report - submitted report only
2. Amended Agreement between Securus Technologies and Story County effective 1/22/20
3. Iowa Communities Assurance Pool (ICAP) renewal application, effective 7/1/20-6/30/21, for \$257,512.00
4. Receipt of a Feeding Operation Construction Permit Application and Master Matrix for Maxwell North, by applicant Maxwell Farms, Inc., located in the NE ¼ of the SW¼ of Section 17, Indian Creek Township
5. Road Closure: #20-41
6. Utility Permit: #20-4987
7. Acknowledgement of Storytime Childcare Center Annual Report - submitted report only
8. The Request for Proposals (RFP) for the position of Program Coordinator for the Pre/Post Arrest Diversion to Treatment Program Grant

Roll call vote. (MCU)

PUBLIC FORUM #2: Lucy Martin, Auditor, provided information for voters about today's Primary Election.

LIAISON ASSIGNMENTS, COMMITTEE MEETINGS UPDATES, AND ANNOUNCEMENTS FROM THE SUPERVISORS: The Board reported on a number of meetings for the upcoming week.

Heddens moved, Murken seconded to adjourn at 10:07 a.m. Roll call vote. (MCU)

Story County
Board of Supervisors Meeting
Agenda - Limited
6/2/20

1. Originating From Administration Building, Story County Public Access Provided Via Conference Call

SPECIAL NOTE TO THE PUBLIC: Due to recommendations to limit gatherings to no more than ten (10) people in order to help slow the spread of the COVID-19 virus, public access to the meeting will be provided via conference call to listen to the meeting.

Members of the public who would like to call in:

- Dial 515-603-3144
- Enter 895791# when prompted for the access code

**We ask that you mute your phone if possible.

Audio recordings of all Board meetings will be posted on our website www.storycountyiowa.gov shortly after the meeting is concluded. You may access these recordings at any time by clicking on the Meetings and Agendas button on the home page.

**If you have called to listen to the Board of Supervisors meeting and you have a question or comment, You can now text us during the meeting at 515-451-7293

2. CALL TO ORDER: 10:00 A.M.
3. PLEDGE OF ALLEGIANCE:
4. STATEMENT EXPLAINING WHY A MEETING IN PERSON IS IMPOSSIBLE OR IMPRACTICAL, PER CODE SECTION 21.8.1
5. ADOPTION OF AGENDA:
6. UPDATES ON COVID-19
 - a) Staff
 - b)Supervisors
7. PUBLIC COMMENT #1:

This comment period is for the public to address topics on today's agenda
8. DISCUSSION AND CONSIDERATION OF ITEMS BROUGHT BEFORE THE BOARD WITH REQUEST FOR IMMEDIATE ACTION:
9. CONSIDERATION OF MINUTES:
 - I. 5/1/20, 5/5/20, 5/8/20, 5/12/20, 5/15/20, 5/19/20, 5/22/20, And 5/26/20 Minutes

Department Submitting Auditor
10. CONSIDERATION OF PERSONNEL ACTIONS:
 - I. Action Form
 - 1)pay adjustment, effective 6/7/20, in a)Attorney's Office for Samantha Betz @ \$18.94/hr; Casandra Eames @ \$21.13/hr; b)Planning & Development for Marcus Amman @ \$25.16/hr; c)Secondary Roads for Dennis Clatt @ \$30.63/hr; Steve Johnson @ \$33.29/hr; Paul Ogden @ \$30.70/hr; d)Sheriff's Office for Andrew Boeckman @ \$2,580.80/bw; Levi Hansen @ \$2,834.80/bw; Diane Hobart @

\$2,357.60/bw; e)Treasurer's Office for Ardis Baldwin @ \$36.00/bw; Shelly Campbell @ \$18.09/hr

Department Submitting HR

11. CONSENT AGENDA:

(All items listed under the consent agenda will be enacted by one motion. There will be no separate discussion of these items unless a request is made prior to the time the Board votes on the motion.)

I. Acknowledgement Of Facilities Management Quarterly Report - Submitted Report Only

Department Submitting Auditor

Documents:

FM QTR RPT.PDF

II. Consideration Of Amended Agreement Between Securus Technologies And Story County Effective 1/22/2020

Department Submitting Sheriff

Documents:

SECURUS TECHNOLOGIES.PDF

III. Consideration Of Iowa Communities Assurance Pool (ICAP) Renewal Application Effective 7/1/20-6/30/21 For \$257,512.00

Department Submitting Board of Supervisors

Documents:

ICAP.PDF

IV. Consideration Of Receipt Of A Feeding Operation Construction Permit Application And Master Matrix For Maxwell North, By Applicant Maxwell Farms, Inc., Located In The NE ¼ SW¼ Section 17 Indian Creek Township

Department Submitting Environmental Health

Documents:

MM APPLICATION.PDF

V. Consideration Of Road Closure(S): 20-41

Department Submitting Engineer

Documents:

RC 20 41.PDF

VI. Consideration Of Utility Permit(S): #20-4987
consent

Department Submitting Engineer

Documents:

UT 20 4987.PDF

VII. Acknowledgement Of Storytime Childcare Center Annual Report - Submitted Report
Only

Department Submitting Auditor

Documents:

STORY COUNTY AUDITOR MEETING 2020.PDF

VIII. Consideration Of The Request For Proposal For The Position Of Program Coordinator
For The Pre/Post Arrest Diversion To Treatment Program Grant

Department Submitting County Attorney's Office

Documents:

DRAFT RFP.PDF

12. PUBLIC FORUM #2:

Comments from the Public on Items not on this Agenda. The Board may not take any
Action on the Comments due to the Requirements of the Open Meetings Law, but May
Do So In the Future.

13. UPCOMING AGENDA ITEMS:

14. LIAISON ASSIGNMENTS, COMMITTEE MEETINGS UPDATES, AND ANNOUNCEMENTS
FROM THE SUPERVISORS:

15. ADJOURNMENT:

Story County strives to ensure that its programs and activities do not discriminate on the basis of
race, color, national origin, sex, age or disability. Persons requiring assistance, auxiliary aids or
services, or accommodation because of a disability may contact the county's ADA coordinator at
(515) 382-7204.

February 26, 2020-May 27, 2020			Q2 2019	
Completed	Work Orders	On-Call	Work Orders	On-Call
Admin	95	7	204	1
Group Homes	46	2	44	1
Conservation	17	0	16	5
HSC	73	2	103	6
Jail	109	2	120	18
JC	64	2	95	9
Animal Control	9	1	53	1
Engineer	11	0	11	2
Total	424	16	646	43

Snow days: 1

Yearly testing of generators completed for all buildings

Due to COVID-19, hired out our landscaping service to allow Facilities staff time to concentrate on necessary items

Many staff hours spent on cleaning and disinfecting all public areas of all buildings

Plexiglass barriers installed for all departments that have requested them

Water heater for jail had a tank failure-replacement heater installed

Ackman/Leade
APPROVED

DENIED

Board Member Initials: *RL*

Meeting Date: 6/2/2020

Follow-up action: _____

**FIRST AMENDMENT
TO
MASTER SERVICES AGREEMENT**

This FIRST AMENDMENT ("First Amendment") is effective as of January 22, 2020 ("First Amendment Effective Date") and amends and supplements the Master Services Agreement by and between Securus Technologies, LLC ("we," "us," or "Provider") and Story County Sheriff's Office ("you" or "Customer") dated August 19, 2014 (the "Agreement"), as subsequently amended (collectively, the "Agreement"). Capitalized terms not defined in this First Amendment have the meanings given to them in the Agreement.

1. **General.** **This First Amendment DOES NOT CHANGE the Agreement's terms and conditions, financial arrangements (if applicable), or service requirements. The purpose of this First Amendment is to confirm (for purposes of meeting regulatory requirements) the standard inmate calling services that Securus will continue to provide to you under the Agreement.**

2. **Background and Purpose.** On November 27, 2019, the Iowa Utilities Board (the "Board") adopted new rules addressing telecommunications service (codified at 199 IAC Chapter 22), which were published in the Iowa Administrative Bulletin on December 18, 2019 (and effective January 22, 2020). These rules include a new provision relating to alternative operator services ("AOS") at subrule 22.6(7) addressing inmate calling services ("ICS") providers (including Securus). The Board's AOS rules are oriented to providing services outside of the correctional context and do not address the unique requirements of ICS. This new rule clarifies that an ICS provider may provide services differently from those provided under the public-oriented AOS rules by (a) including a statement in its tariffs, *subject to approval by the Board*; and (b) *filing a copy of each contract in support of that statement*. The purpose of this First Amendment is to confirm the services Securus provides to you as your ICS provider for purposes of supporting a necessary tariff statement.

[PLEASE CHECK EACH BOX BELOW confirming the services Securus provides at your facility. If you do not check the box, Securus is required to apply the civilian-oriented AOS standard to calls at your facility.]

3. **Blocking.** Pursuant to 199 IAC subrule 22.6(2), AOS companies shall not block the completion of calls which would allow the caller to reach a long distance telecommunications service different from the AOS company, and all AOS company contracts with contracting entities (such as Customer) must prohibit call blocking by the contracting entity.

 Customer confirms that during the Term, Securus will be the sole provider of long distance telecommunications services relating to ICS at Customer's facility, for purposes of ensuring that calls are properly monitored, taped, and stored in compliance with Customer's requirements. Securus will block all incoming calls, and may block any number requested to be blocked by Customer or by a called party.

4. **Posting.** Pursuant to 199 IAC subrule 22.6(3), contracting entities must post on or in close proximity to all phones served by an ICS company the following information: (1) the name and address of the AOS company, (2) a customer service number for receipt of further service and billing information, and (3) dialing directions to the AOS operator for specific rate information.

 Customer confirms that Securus is responsible for the form of the posting and will install (or provide) compliant materials and will update the materials as needed, but Customer has exclusive authority regarding the posting of materials in its facility.

5. **Oral Identification.** Pursuant to 199 IAC subrule 22.6(4), all AOS companies shall announce to the end-user customer the name of the provider carrying the call and, before billing begins, shall include a sufficient delay period to permit the caller to terminate the call or advise the operator to transfer the call to the end-user customer's preferred telecommunications service provider.

- Customer confirms that during the Term, Securus will be the sole provider of local and intrastate telecommunications services relating to ICS at Customer's facility for the purposes of ensuring that calls are properly monitored, taped, and stored in compliance with Customer's requirements. Except as modified at Customer's request pursuant to the Agreement, Securus will utilize its standard voice prompts, which comply with the Federal Communications Commission's ICS rules.

- 6. Billing. 199 IAC subrule 22.6(5) sets forth requirements for bills issued by AOS companies to end-user customers.
 - Customer confirms: Securus does not issue bills to inmates for inmate debit accounts. Securus' standard voice prompt provides the inmate caller a debit account balance and a rate quote. An inmate may request a copy of a debit account statement through Customer's normal procedure. For AdvanceConnect accounts, Securus makes an online statement available for downloading on Securus' website. An end-user customer may request a paper bill, which may incur a charge as allowed in the Agreement.

- 7. Emergency Calls. Pursuant to 199 IAC subrule 22.6(6), all AOS companies shall have a Board-approved methodology to ensure the routing of all emergency zero-minus (0-) calls in the fastest possible way to the proper local emergency service agency.
 - Customer confirms that Securus will block inmates from dialing outgoing 1+, Operator (0-, 00-, 10xxx), information (411, 1-411, 555-1212, 1-555-1212), talk lines (900, 976, etc., exchanges), IXC access (950, 10xxx), emergency lines (911, etc.), and toll-free lines (1-800, etc.).

- 8. Tariff Filing. Pursuant to the Board's rules, Securus will update its current tariff on file with the Board to include a statement consistent with this First Amendment. Securus will also provide a copy of this First Amendment to the Board in support of that statement.

- 9. Except as expressly amended by this First Amendment, all of the terms, conditions, and provisions of the Agreement remain in full force and effect.

EXECUTED as of the First Amendment Effective Date.

<p><u>CUSTOMER:</u> Story County Sheriff's Office <i>Board of Supervisors</i></p> <p>By: <i>[Signature]</i> Name: <i>LINDA MURKIN</i> Title: <i>CHAIR. BD. OF SUPS.</i> Date: <i>6-2-2020</i></p>	<p><u>PROVIDER:</u> Securus Technologies, Inc.</p> <p>By: _____ Name: David Able Title: President and Chief Executive Officer Date: _____</p>
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Please return signed contract to:
4000 International Parkway
Carrollton, Texas 75007
Attention: Contracts Administrator
Phone: (972) 277-0300



Iowa Communities Assurance Pool

INVOICE

FOR

Story County

Anniversary Date: 07/01/2020

**5701 Greendale Road
Johnston, IA 50131
www.icapiowa.com**



Member Invoice

Member Name: Story County
Policy Number: R0432PC2020-2

Anniversary Date: 07/01/2020

<u>Coverage</u>	<u>Limit of Coverage</u>	<u>Contribution</u>
General Liability	\$2,000,000	\$40,923
Auto Liability	\$2,000,000	\$19,257
Law Enforcement Liability	\$2,000,000	\$54,418
Public Officials Liability	\$2,000,000	\$20,696
Excess Liability	\$13,000,000	\$41,262
Property	\$68,657,321	\$85,790
Equipment Breakdown	Included	Included
Crime	\$10,000	\$0
Marketing and Administration Fees		\$20,143
TOTAL CONTRIBUTION		\$282,489

**MAKE CHECKS PAYABLE TO IOWA COMMUNITIES ASSURANCE POOL ON OR BEFORE:
07/01/2020**

ICAP accepts online payments! To pay your invoice online, please visit www.icapiowa.com, click "Pay Now" at top right of home page and follow the instructions provided. There is no fee for paying online. If preferred, members may also issue a check payable to the Iowa Communities Assurance Pool. Please note: providing a check as payment authorizes us to either use the information from your check to make a one-time electronic fund transfer (EFT) from your account or process the payment as a check transaction. If you have questions or wish to discuss, please contact the ICAP office via 1-800-383-0116.



Quote Summary

Story County

Anniversary Date: 07/01/2020

Coverage	Contribution	Limit of Coverage	Deductible	Retroactive Date	Coverage Effective
General Liability	\$40,923	\$2,000,000	\$10,000	07/01/2020	7/1/2020
Auto Liability	\$19,257	\$2,000,000	\$0	07/01/2020	7/1/2020
Law Enforcement Liability	\$54,418	\$2,000,000	\$10,000	07/01/2020	7/1/2020
Public Officials Liability	\$20,696	\$2,000,000	\$10,000	07/01/2020	7/1/2020
Excess Liability	\$41,262	\$13,000,000		07/01/2020	7/1/2020
Property	\$85,790	\$68,657,321	See Schedule	07/01/2020	7/1/2020
Equipment Breakdown	Included	Included			Included
Crime	\$0	\$10,000	\$500	07/01/2020	7/1/2020
TOTAL CONTRIBUTION	\$262,346				
Agency Fee	\$17,278				
CRMS	\$2,865				
FINAL CONTRIBUTION	\$282,489				

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This quotation expires on the Proposed Effective Date.



Iowa Communities Assurance Pool

Commitment to Continue Membership

I, Story County, do hereby affix my signature to this form and promise to submit the contribution of \$282,489.00 (less attached vouchers if applicable) by 7/9/20. In order to fulfill this commitment, our payment will be received by the Iowa Communities Assurance Pool, at the address on this form, no later than 7/30/20.

Printed Name LINDA MURKIN
Signature [Handwritten Signature]
Date 6/2/2020

Iowa Communities Assurance Pool
5701 Greendale Road
Johnston, IA 50131



Iowa Communities Assurance Pool
 5701 Greendale Road
 Johnston, IA 50131

Member Name: Story County
 Member Address: 900 6th Street
 City, State, Zip: Nevada, IA 502010530
 Member #: 0432 Anniversary Date: 7/1/2020

Coverage	Limit of Coverage	Contribution
General Liability	\$2,000,000	\$40,923
Automobile Liability	\$2,000,000	\$19,257
Law Enforcement Liability	\$2,000,000	\$54,418
Public Officials Wrongful Acts	\$2,000,000	\$20,695
Excess Liability	\$13,000,000	\$41,262
Property	\$68,639,321	\$85,724
Equipment Breakdown	Included	Included
Crime	\$10,000	\$0

Agency Fee \$17,278
 CRMS \$2,865
FINAL CONTRIBUTION \$282,423

Pay total Gross Contribution less any attached Vouchers
Please return Voucher(s) with payment
Pay To: Iowa Communities Assurance Pool

ICAP accepts online payments! To pay your invoice online, please visit www.icap.org and click "Pay Now" at top right of home page and follow the instructions provided. There is no fee for paying online. If preferred, members may also issue a check payable to the Iowa Communities Assurance Pool. Please note: providing a check as payment authorizes us to either use the information from your check to make a one-time electronic fund transfer (EFT) from your account or process the payment as a check transaction. If you have questions or wish to discuss, please contact the ICAP office at 1-800-363-1111.

Iowa Communities Assurance Pool
 5701 Greendale Road
 Johnston, IA 50131

Number 0432

In recognition of
 continued ICAP
 membership Story County

Date 5/14/2020

\$ 24,977.00

Twenty-Four Thousand Nine Hundred And Seventy-Seven Dollars

FOR: Member Distribution - Redemption

THE ICAP BOARD OF DIRECTORS

Not Negotiable - Voucher must be applied with current year anniversary invoice



Member Proxy

Be it known, that the undersigned representative of the Governmental Sub-Division (hereafter referred to as MEMBER) by resolution of the governing body, a copy of which is attached hereto, hereby nominates and appoints the following individual and alternate to represent the MEMBER with the Iowa Communities Assurance Pool (hereinafter referred to as the POOL). The individual and alternate shall act as liaison between MEMBER and the POOL for the purposes of relating risk reduction and loss control information, and any other loss information or instructions concerning the obligations of the MEMBER imposed by signing the Iowa Risk Management Agreement and the rules and regulations established thereunder, to the same extent and with like effect as the undersigned thereunder, to the same extent as the undersigned could do if personally present and the undersigned does hereby ratify and confirm and adopt all action done or taken by the individual or alternate.

Primary Contact:	<u>Linda Murken</u>	Alternate Contact:	<u>Lisa Heddens</u>
Title:	<u>Chair</u>	Title:	<u>Vice Chair</u>
Address:	<u>900 - 6th St.</u>	Address:	<u>900 - 6th St.</u>
Address:	<u></u>	Address:	<u></u>
City, State, Zip:	<u>Nevada, IA 50201</u>	City, State, Zip:	<u>Nevada, IA 50201</u>
Email:	<u>lmurken@storycountyiowa.gov</u>	Email:	<u>lheddens@storycountyiowa.gov</u>
Telephone:	<u>515-382-7202</u>	Telephone:	<u>515-382-7201</u>

In witness whereof, this proxy was executed on the And day of June, in the year 2020, by the undersigned duly authorized officers of the Governmental Subdivision indicated below:

Governmental Subdivision: Story County

Member ICAP #: 0432

By: *Linda Murken*

Title: BOARD CHAIR

By: *Michelle L. Delle*

(City Clerk/County Auditor/Board Secretary)



Anniversary Information Acknowledgement

The undersigned representative of the Story County acknowledges that he/she:

- Reviewed the information provided on all Iowa Communities Assurance Pool applications and all applicable supplemental applications.
- Reviewed all applicable property and vehicle schedules.
- Confirms, to the best of his/her knowledge, that all information provided is complete and accurate.
- Reviewed the optional coverage(s) offered by the Iowa Communities Assurance Pool for increased limits. After consideration of the coverage(s) offered and the contribution for same, Story County has elected to:

N/A

- Waive any and all coverage(s) and any applicable contribution charges. Story County understands that to add increased limits coverage in the future, it will be subject to Iowa Communities Assurance Pool's approval and underwriting guidelines at the time of the request and that such request must be made in writing. In addition, Story County will not hold the Iowa Communities Assurance Pool responsible for this decision to waive optional coverage(s).

- Accept the increased limits: _____
(Limit of Liability Accepted)

Executed on the 2nd day of June, in the year 2020, by the undersigned duly authorized officer of the Governmental Subdivision Story County indicated below:

By: Mulamba

Title: Board Chair

Member: Story County
Member Number: 0432
Anniversary Date: 07/01/2020

Closure No. 20-41

Date May 29, 2020

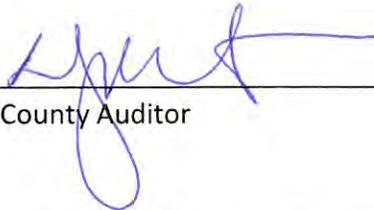
Resolution

BE IT RESOLVED

By the Board of Supervisors of Story County, Iowa, to approve the road Closure(s) for the purpose of Construction in section 28 / 33 Lafayette Twp on

150th St is closed between 520th Ave and 530th Ave.


Chair, Board of Supervisors

Attest: 
County Auditor

ROLL CALL	Lauris Olson	Yea	<input type="checkbox"/>	Nay	<input type="checkbox"/>	Absent	<input type="checkbox"/>
FOR ALLOWANCE	Lisa Heddens	Yea	<input type="checkbox"/>	Nay	<input type="checkbox"/>	Absent	<input type="checkbox"/>
	Linda Murken	Yea	<input type="checkbox"/>	Nay	<input type="checkbox"/>	Absent	<input type="checkbox"/>

ALLOWED BY VOTE OF THE BOARD Yea Nay Absent


CHAIRPERSON Above tabulation made by _____

STORY COUNTY UTILITY PERMIT

Date 05/22/2020

To the Board of Supervisors, Story County, Iowa:

13300046900078/OSP-19833

The Windstream Iowa Communications, LLC Company, incorporated under the laws of Iowa, authorize to do business within the State of Iowa, with its principal place of business at 4001 N Rodney Parham Rd, Little Rock, AR, does hereby make application requesting permission to occupy certain portions of public right-of-way and that the County Engineer be directed to establish the location of lines of transmission of remove one pedestal and lower on secondary route N/A, from 10770 Timberland DR to 10770 Timberland DR, a distance of N/A miles.

Agreements: The utility company, corporation, applicant, permittee, or licensee, (hereinafter referred to as the permittee) agrees that the following stipulations shall govern under this permit.

1. The Permittee will file a plat setting out the location of proposed line on the secondary route and that the description of the proposed installation including type, height, and spacing of poles, maximum voltage, lengths of cross arms, minimum clearance and number of wires, type, size and capacity of underground cables, conduits, tile lines, and pipe lines, maximum working pressures for pipe lines carrying gas or flammable petroleum products are described as follows:
2. The installation shall meet the requirements of county, state, and federal laws, franchise rules, and of the Iowa State Commerce Commission Regulations and Directives, Utilities Division, the Iowa State Department of Health, and any other laws or regulations applicable.
3. The Permittee shall be fully responsible for any future adjustments of its facilities within the established highway right-of-way caused by highway construction or maintenance operations.
4. Story County assumes no responsibility for damages to the Permittee's property occasioned by any construction or maintenance operations on said highways.
5. The Permittee shall take all reasonable precautions during the construction and maintenance of said installation to protect and safeguard the lives and property of the traveling public and adjacent property owners.
6. The Permittee, and its contractors, shall carry on the construction or repair of the accommodated utility with serious regard to the safety of the public. Traffic protection shall be in accordance with Part VI of the current Iowa Department of Transportation Manual on Uniform Control Devices for Streets and Highways.
7. The Permittee shall be responsible for any damage resulting to said highways because of the construction operation, or maintenance of said utility, and shall reimburse Story County for any expenditure the County may have to make on said highways because of said permittee's utility having been constructed, operated, and maintained thereon.
8. The Permittee shall indemnify and save harmless Story County from any and all causes of action, suits at law or in equity, or losses, damages, claims, or demands, and from any and all

liability and expense of whatsoever nature for, on account of or due to the acts or omissions of said Permittee's officers, members, agents, representatives, contractors, employees or assigns arising out of or in connection with its (or their) use or occupancy of the public highway under this permit.

9. Noncompliance with any of the terms of permit, or agreement, may be considered cause for shut down of utility construction operations, or revocation of the permit.

10. The following special requirements, if applicable, shall apply to this permit:

Whenever the route of the proposed cable line runs along a paved secondary highway, the location of said cable shall be constructed on top of the road shoulder so as to be within approximately two-feet of the pavement edge.

Whenever the route of the proposed cable line runs along a dirt or gravel surfaced highway, the location of said cable shall be constructed on top of the road surface and as near possible to the shoulder line

Whenever a cross road culvert or bridge is encountered along the route of the proposed cable lines, said cable shall be constructed around the ends of said cross road culvert or bridge even though this looping is not designated on the situation plans attached hereto.

The crossing of the cable line from one side of the highway to the other shall be accomplished at a near right angle rather than diagonally so as to disturb the roadbed of the traveled way as little as possible.

Whenever the route of the proposed cable line is to cross a paved highway, such crossing shall be in a bored hole rather than open cut trench.

Date 05/22/20

Windstream Iowa Communications, LLC
Name of Company (Applicant - Permittee)

Gabrielle Johnson 501-748-7807
by Gabrielle Johnson Phone no.

Recommended for Approval:

Date 5-26-20

Jaren M 515-382-7355
County Engineer Phone no.

Approved:

Date 6/2/2020

Shudaville
Chair, Board of Supervisors
Story County, Iowa

Three (3) copies of this form will be required for each installation. A plat shall be attached to each copy submitted.

Storytime Childcare:

With Story County helping fund Storytime it has helped in keeping Storytime open to serve the families in Southern Story County for the last 29 yrs.

BEFORE COVID19

Storytimes finances and enrollment have stayed steady for the past few years. Storytime had 36 kids enrolled before Covid19, now due to Covid19 Storytime will have 19 kids for our Summer Program. Most of my parents are still working from home and with the numbers presented by the Govenor to the public, parents have chosen to keep their children home until a better lowering of numbers. Before Covid19, Storytime would have had 4 School-age openings, 2 Full-time and the Babyroom is full.

I have had the same Staff for over the last 6 yrs, which is important for the kids and parents to have that consistency in their lives.

Storytime Closed their doors on March 18 due to Covid19 and parents keeping kids home and we just recently re-opened on May 18th. We've had a slow couple weeks but I have heard from Parents this week and the kids are slowly going to start coming back starting June 1st. When the Payroll Protection Program came out, I applied for that and Storytime received \$38381 the Small Business Relief Grant I applied for \$20000 and received \$0.

CONS

Our Landlord is still very slow at getting things done for Storytime but a making small steps at slowly getting things accomplished. We were wanting to improve the playground 2 summers ago, but unfortunately the Landlord hasn't finshed what they need to do. I will be and have been reminding them of what needs done and try to set a time limit for their projects to be finished.

All in all Storytime is doing good!! We are going to survive this new way of life the best we can and keep providing the services of Pre-school, Full-time care, Infant Care and Before/After School Care to Collins-Maxwell and surrounding communities. Storytime so appreciates the support and funding from the County.

Thank You

Storytime Childcare Families, Kids & Staff
Jayne Underhill - Director
515-387-1259

Acknowledgement

APPROVED **DENIED**

Board Member Initials: JU

Meeting Date: 6/2/2020

Follow-up action: _____

Please staple check here



Iowa Department of Natural Resources

Construction Permit Application Form Confinement Feeding Operations

INSTRUCTIONS:

Prior to constructing, installing, modifying or expanding a confinement feeding operation structure¹, answer questions 1-8 on Item 3, Section A (page 2), to determine if a construction permit is required. To calculate the animal unit capacity (AUC) of the operation, complete Table 1 (page 4). If a construction permit is required, complete the rest of the form, have the applicant(s) sign it on pages 5 and 6. Mail to the DNR (see address on page 5) this application form, documents and fees requested in Checklist No. 1 or 2 (pages 10-15). See item 5 (page 5), to determine which checklist to use.

If a construction permit is not needed, some pre-construction requirements may still apply prior to the construction of a formed manure storage structure². See page 5 for additional DNR contact information.

Approve Receipt
APPROVED **DENIED**
Board Member Initials: *gm*
Meeting Date: 6/2/2020
Follow-up action: _____

THIS APPLICATION IS FOR:

- 1. A new confinement feeding operation
- 2. An existing confinement feeding operation (answer all of the following questions):
 - a) Facility ID No. (5 digit number): _____
 - b) Date when the operation was first constructed: _____
 - c) Date when the last construction, expansion or modification was completed: _____

(Not needed if the confinement operation has previously received a construction permit from DNR.)

- d) Is this also an ownership change? Yes No If yes box is checked additional fees apply. See page 8

ITEM 1 – LOCATION AND CONTACT INFORMATION (See page 17 for instructions and an example):

A) Name of operation: Maxwell North

Location:	<u>NE</u>	<u>SW</u>	<u>17</u>	<u>T82N R22W</u>	<u>Indian Creek</u>	<u>Story</u>
	(¼ ¼)	(¼)	(Section)	(Tier & Range)	(Name of Township)	(County)

B) Applicant information:

Name: Maxwell Farms, Inc. Title: Owner

Address: 31075 640th Ave., Maxwell, IA 50161

Telephone: 515-387-1374 Fax: _____ Email: _____

C) Person to contact with questions about this application (if different than applicant):

Name: Brian Ritland Title: Consultant

Address: 620 Country Club Rd., Iowa Falls, IA 50126

Telephone: 641-648-7300 Fax: 641-648-7310 Email: britland@pinnacleiowa.com

Enclose aerial photo or engineering drawing showing the proposed location of the confinement feeding operation structure¹ and all applicable separation distances, as requested in Attachment 1 (pages 11-12 or 14-15). See example of aerial photo on pages 18 to 19, at the end of this form.

I manage or have a 10% or more ownership interest in another confinement feeding operation located within 2,500 feet of the proposed site. Please contact the DNR AFO Program staff at (712) 262-4177 to verify site adjacency requirements.

¹ Confinement feeding operation structure = animal feeding operation structure (confinement building, manure storage structure or egg washwater storage structure) that is part of a confinement feeding operation. Manure storage structures include formed and unformed manure storage structures.

² Formed manure storage structure = covered or uncovered concrete or steel tanks, and concrete pits below the building.

REQUEST FOR PROPOSAL FOR
Position of Program Coordinator
for the Pre/Post Arrest Diversion to Treatment Program Grant
Story County, Iowa

Story County, Iowa ("County") seeks proposals and cost estimates for a qualified person to fill the position of Program Coordinator for the Pre/Post Arrest Diversion to Treatment Program Grant ("the Consultant") as described in this Request for Proposal ("RFP").

This request invites individuals to submit proposals for accomplishment of the items of work specified below under Scope of Work. Proposals should be prepared and submitted in accordance with the guidelines and requirements set forth in this request.

Sealed proposals: One (1) hard copy and one digital format (CD or flash drive) will be submitted to the following address:

Story County Attorney's Office
Story County Justice Center
1315 South B Ave.
Nevada, Iowa 50201

APPROVED **DENIED**

Board Member Initials: 6-2-2020 *MM*

Meeting Date: _____

Follow-up action: _____

The envelope must be clearly marked "SEALED RFP". The name and address of the contact person must be listed on the outside of the envelope. Any restrictions on the use of data within proposals must be clearly stated in the proposal itself. Non-disclosure cannot be guaranteed after the selection stage of this procurement due to public record laws.

Proposal Deadline: 12:00 PM CST, Tuesday, June 16, 2020.

Proposals received after the proposal deadline will be considered late and will not be accepted. Proposals may be withdrawn and/or modified in writing prior to the submission deadline. Request for withdrawal must be in writing by the contact person named on the outside of the envelope. Proposals that are resubmitted must be sealed and received prior to the submission deadline. Each Consultant may submit only one proposal.

Submittal Requirements: to be considered, interested parties must submit by the deadline the following:

- Letter of interest – must be no more than two pages (note: one page is one side of an 8½" x 11" paper) in length and include contact information and signature.
- Summary of qualifications, experience and availability – must be no more than four (4) pages in length, summarizing qualifications, relevant experience, and availability to participate in the RFP process (including Interviews) and provide services to Story County.
- Proposed approach to the position, including a proposed schedule and description of proposed stakeholder identification and participating needs summarizing method and approach to providing consulting services to the Story County – must be no more than five pages.
- Proposed budget – no more than two pages, include detailed project costs, by task, and estimated hours. Actual compensation is subject to contract negotiation.

- List of professional references – no more than one-page listing most recent professional references and their contact information.
- A minimum of three examples of relevant work related to Scope of Services.

Scope of Services

The Individual selected for the position of Program Coordinator will provide the following services for a two (2) year period from July 1, 2020, through June 30, 2022:

The Program Coordinator is responsible for implementing the Pre/Post Arrest Diversion to Treatment Program grant. This position will refine protocols for service delivery, provide care coordination and develop partnerships with law enforcement and service providers to provide linkage to care along the continuum of services. This is a full-time position with a minimum of 40 hours per week expected. Some evening or weekends are possible. Office space, computer equipment and other office supplies will be provided through the grant funding. The relationship between Story County and the Program Coordinator is solely that of independent contractor and nothing in this RFP or any subsequent Agreement shall be construed or deemed to create any other relationship including one of employment, agency or joint venture. Program Coordinator shall maintain Social Security, workers compensation and all other employee benefits covering Program Coordinator as required by law. The Duties and Responsibilities, Required Skills and Abilities, and Minimum Position Requirements for the position are outlined below:

Duties and Responsibilities:

- Work with public safety officers to facilitate warm-handoffs to Program Coordinator or treatment provider for program participants
- Develop in conjunction with the participant, a plan of care based on the initial intake screening. Plan of care should be reviewed with participant through weekly contacts and documented in participant file.
- Assist participants in setting up any necessary evaluations/assessments, including establishing an initial appointment and determining a plan for attending the appointment
- Maintain a minimum of weekly contact with participants and verify treatment attendance through the treatment provider.
- Support day to day collaboration between those receiving care coordination services, treatment services, primary care providers, housing and community resources
- Provide education-related resources and health-related information to participants
- Ensure cultural responsiveness including racial, cultural, gender identity and sexual orientation
- Interact with primary care providers, behavioral health providers, other social service providers, public safety officers and officials to make needed connections for services and provide a conduit for information sharing
- Meet at least monthly for case staffing with treatment, police, participant and family (if applicable) as part of a multi-disciplinary team that is tasked with collaboratively making service coordination decisions
- Monitor participant concerns and the types of whole health resources needed
- Work within the team model, recognizing and utilizing the expertise of team members
- Attend and lead regular meetings with Advisory Board

- Collaborate with law enforcement, primary care physicians, health providers, justice system professionals, treatment professionals, advisory board and local stakeholders as needed
- Maintain confidential participant information
- Collaborate with the ODCP Program Coordinator to collect, maintain and report data in accordance with grant requirements
- Attend trainings

Skills and Abilities Required:

- Proficient computer skills
- Excellent communication and interpersonal skills, including the ability to be flexible, remain calm under pressure and diplomatic in tense situations
- Experience working with formerly incarcerated people, homeless, substance addiction, severe and persistent mental illness and/or poverty
- Compile relevant information and synthesize it into efficient reports for use by team members in decision making
- Conflict resolution and problem-solving strategies
- Ability to work independently, self-motivate, and prioritize tasks appropriately.

Minimum Position Requirements:

- Must have BA degree in related field, or commensurate experience, and experience working in the substance abuse field answering client questions and interacting with clients.
- Demonstrate competency with email, internet, and word processing computer programs
- Valid driver's license and reliable transportation
- Subject to background check

Submittal Process and Details

All proposals must be submitted as detailed in the manner described herein. Exceptions nor extensions to established deadlines will not be granted.

Estimated Timeline

June 2, 2020	Release RFP
June 16, 2020	Deadlines for submissions
June 17 – June 19, 2020	Proposals reviewed by Selection Committee
June 22 – 24, 2020	Interviews
June 30, 2020	Position selection approved

The above dates are subject to change at the option of Story County.

Selection Procedures

A selection committee will analyze and evaluate all properly submitted proposals in response to this request, choosing individuals for further evaluation to include interviews with the selection committee.

Proposal Terms and Milestones for Payment

Story County reserves the right to reject any and all proposals received in response to this Request for Proposal. If a proposal is selected, it will be the most advantageous in terms of quality of service, qualifications, and capabilities to provide the specified service, and other factors that Story County may

consider. Story County reserves the right, at its discretion, to waive informalities or irregularities in proposals or proposal procedures, and to accept or further negotiate cost, terms, or conditions of any proposal determined by Story County to be in the best interests of Story County even though not the lowest bid.

The price quotations stated in the proposal will not be subject to any price increase from the date on which the proposal is opened by Story County to the mutually agreed-to date of bid. Proposals must be signed by an official authorized to bind the provider to its provisions for at least a period of 90 days. Failure of the successful Consultant to accept the obligation of the bid may result in the cancellation of any award. A service contract will be executed between Story County and the awarded Consultant.

The selected Consultant may not subcontract any of the work specified in this RFP without prior written consent of Story County.

Insurance

Consultant shall take out and maintain during service to the County under a contract such public liability and property damage insurance as shall protect Consultant, its subcontractors, and the County from claims for damages for personal injury, including accidental death, as well as for claims for property damage, which might arise from operations under its contract with the County, whether such operations be by Consultant or its subcontractor, or by anyone directly or indirectly employed by either of them. All insurance policies shall be issued by responsible companies who are acceptable to the County. The Consultant shall not cause any insurance to be canceled nor permit any insurance to lapse during the life of the contract with the County. Consultant shall indemnify and hold County harmless from any damages, cost, claims or expenses which may arise as a result of any failure on the part of the Consultant to provide accurate and/or complete data and information to the County as outlined and required by the terms and conditions of its contract with the County.

Sample Form of Consultant Services Contract is provided as Appendix A.

Appendix A
Sample Provider Agreement

THIS AGREEMENT is entered into by and between Story County, an Iowa Municipal Corporation, whose mailing address and telephone number is 900 Sixth Street, Nevada, Iowa 50201, telephone 515-382-7200, hereinafter referred to as "County", and _____, hereinafter referred to as "Provider", whose mailing address and telephone number is _____, telephone _____.

1. PURPOSE AND INTENT. The purpose of this agreement is for the Provider to

2. FEES, EXPENSES & COMPENSATION. Consultant may charge a maximum hourly fee of \$ _____ for professional services necessary under the terms of this Agreement. Consultant may bill Client for travel expenses at the rate of not more than _____ per mile, which shall be limited to actual mileage incurred to perform necessary tasks required to reach the Client's objective under this Agreement. Consultant may not bill or receive compensation from client for time spent traveling. All invoices must be itemized and specify the invoice total and time period covered and detail the work performed or expense incurred per this Agreement. Consultant agrees that the hourly fee and mileage expense shall be Consultant's sole compensation for professional services and work performed because of this Agreement.

Provider understands that the County reserves the right to request additional specific information in assessing the accuracy of claim information.

3. INDEPENDENT CONTRACTOR. It is understood that Provider is an independent professional contractor and that Provider will not in any event be construed as or hold itself out to be an employee or agent of the County. It is further agreed that at no time will the Provider or the work efforts of the Provider be under the supervision or control of the County, although Provider agrees to comply with all reasonable requests and regulations applicable to any other business invitee of the County. It is also agreed that Provider, as an independent contractor, is not restricted to working exclusively for the County during the term of the Agreement.

4. INSURANCE & TAXES. Provider is responsible for Workers Compensation, Disability, Unemployment, Automobile Insurance, and any other insurance required by the State of Iowa and will provide certificates of insurance to the County on an annual basis. Provider is also responsible for payment of State and Federal taxes, and any other applicable tax. Provider is not eligible for any benefits the County may provide for its employees.

5. CONFIDENTIALITY. Provider agrees to comply fully with confidentiality in compliance with all laws and regulations regarding protected health information.

6. TERM AND TERMINATION OF AGREEMENT. This Agreement is effective on the ____ day of _____, 2018 for a period of _____ year (s). The County may terminate this agreement immediately

upon Provider's refusal to, or inability to perform under the agreement or Provider's breach of this agreement. Either party may terminate this agreement for any reason, without cause, by giving 90 days written notice to the other party.

7. ACCESS TO BOOKS AND RECORDS. Unless otherwise required by applicable laws, Provider shall allow the County access to all books and records for purposes of auditing or reviewing Provider's claims, upon request by the County. Provider's failure to provide access under this section shall constitute a material breach of the agreement.

8. REQUIREMENTS. Provider hereby agrees to perform all duties in accordance with all state and federal laws and regulations. This provision includes but is not limited to Iowa Code Section 144.32. Provider assures that no person shall on the grounds of race, color, national origin, or sex, as provided by Title VI of the Civil Rights Act of 1964 be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under this program or activity. Failure to perform duties in accordance with the applicable laws and regulations shall be considered a material breach of this agreement by the Provider.

9. EXTENSION. If mutually agreeable to County and Provider, this Agreement may be extended. Such extension will be documented by written amendment, duly signed and dated by both parties.

10. ASSIGNMENT. Neither party to this Agreement may assign, sell or transfer any part thereof to any other firm or entity without first obtaining the written permission of the other party hereto.

11. APPLICABLE STATE LAW AND WAIVER OF FEDERAL REMOVAL. This Agreement has been negotiated, executed and delivered in the State of Iowa. The parties hereto agree that all questions pertaining to the validity and interpretation of this agreement will be determined in accordance with the laws of the State of Iowa in Story County, Iowa. The parties hereby waive removal of any issue hereunder to the federal courts.

This Agreement and referenced attachments constitute the entire contract of the parties hereto and supersedes any prior agreement between the parties.

STORY COUNTY, IOWA (County) _____ (Provider)

By:

By:

Chairperson of the Board of Supervisors

Dated: _____

Dated: _____