

**POLK COUNTY BOARD OF SUPERVISORS AGENDA  
POLK COUNTY ADMINISTRATIVE OFFICE BUILDING  
111 COURT AVENUE - ROOM 120  
JUNE 14, 2016 9:30 A.M.**

1. Roll Call.
2. Action on the Minutes of the Previous Meeting(s).
3. Special Claims as submitted by the County Auditor, if any.
4. Action on the Bill List as submitted by the County Auditor.

5. **PUBLIC COMMENTS**

**RESOLUTIONS**

6. Resolution approving MH/ID/DD service approvals and authorizing expenditures from the MHDS Services Fund.
- \*7. Resolution approving agreement with Kavalier and Associates for psychiatric services at the juvenile detention center.
- \*8. Resolution approving agreement with Visiting Nurse Services for well elderly activities and screenings at Polk County senior centers.
- \*9. Resolution approving agreement with Young Women's Resource Center to provide supportive Services to teenagers impacted by sexual violence.
- \*10. Resolution approving agreement with Molly Kinser Douglas for trauma sensitive yoga services.
- \*11. Resolution approving agreement with FoReNsic Consulting for SANE coordination services (Sexual Assault Nurse Examiner).
- \*12. Resolution approving agreement with Taher, Inc. for meals at Polk County congregate meal sites.
- \*13. Resolution approving Cooperative Public Service Agreement with Polk Soil and Water Conservation District for funding of a Watershed Coordinator position (within Polk SWCD).
- \*14. Resolution approving updated 28E agreement for Central Iowa Regional Transportation Planning Alliance (CIRTPA).
- \*15. Resolution approving easements for sanitary sewer main for 4342 NE 3<sup>rd</sup> Street.
16. Resolution approving payment of annual dues to the Iowa Drainage District Association and approving dues be paid from the maintenance fund of each drainage district.

- \*17. Resolution approving agreement with Iowa Department of Public Health for Integrated HIV and Viral Hepatitis Counseling, Testing and Referral services.
- 18. Resolution authorizing the Auditor's Office to publish Notice of Public Hearing for June 21, 2016 regarding easement conveyance for Four Mile Creek bank stabilization and infrastructure protection.
- \*19. Resolution approving an agreement with Central Iowa Shelter and Services to provide security.
- \*20. Resolution approving a Community Development Grant to Latino Resources, Inc for Iowa's Latino Heritage Festival.
- 21. Resolution approving Community Betterment Grant awards.

#### **COMMUNICATIONS**

- \*22. Communication from City of Mitchellville regarding annexation of land (IA-KY, LLC and Iowa Interstate Railroad, LTD).
- \*23. Manure Management Plan (MMP) update from Brookside Farms Site 2.
- \*24. Manure Management Plan (MMP) update from Mud Creek Feeders.

#### **BUDGET ACTIONS**

- 25. Memorandum of Budget Actions.

#### **APPOINTMENTS**

- 26. Memorandum of Appointments.

#### **ADJOURNMENT**

*\* Asterisk denotes attachments to items are on file in the Auditor's Office.*

RESOLUTION

Moved by \_\_\_\_\_

Seconded by \_\_\_\_\_

THAT THE FOLLOWING RESOLUTION BE ADOPTED:

WHEREAS, the persons on the attached Memorandum of MH/ID/DD Service Approval have legal residence in Polk County; and

WHEREAS, these persons are in need of the services as described in the attached Memorandum of Service Approval; and

WHEREAS, no Polk County network providers of such services are able to meet the needs of these persons at this time; and

WHEREAS, the Board of Supervisors in the counties where the out-of-county providers are located have approved the proposed rates; and

WHEREAS, the rates for out-of-network providers in Polk County have been established by the Iowa Department of Human Services; and

WHEREAS, these services were reviewed and approved by the Service Appeal Board; and

WHEREAS, Polk County Service Appeal Board has determined that it is in the best interests of the clients and the county for the providers listed to provide the services needed by the clients.

NOW THEREFORE BE IT RESOLVED, that the Polk County Board of Supervisors does hereby approve the attached Memorandum of Service Approval and authorize the necessary expenditures from the Polk County MHDS Services Fund for these individuals.

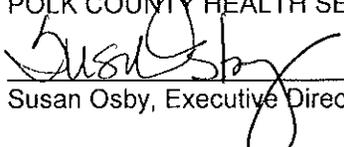
POLK COUNTY BOARD OF SUPERVISORS

By \_\_\_\_\_  
Chairperson

Log #339

SUBMITTED BY:

POLK COUNTY HEALTH SERVICES, INC.

  
\_\_\_\_\_  
Susan Osby, Executive Director

**Fiscal Impact \$100,786.76 from the  
MHDS Services Fund.**

#6

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution approving MH/ID/DD service approvals and authorizing expenditures from the MHDS Services Fund.

**Agenda Date:** 6/14/2016

**Contact Individual:** Annie Uetz, Director of Case Management

**Previous Action taken by the Board:** NA

**Board/Commission Actions:** Approved by Service Appeal Board

**Action Requested (Recommended):** Approval

**Comply with Policy:** Polk County Management Plan developed pursuant to Iowa Administrative Code 441 Section 25.13(2)f-g

**Background:** Polk County contracts with selected providers in Polk County to provide services to persons with mental illness, intellectual disability, or a developmental disability. If those providers are unable to meet the needs of a consumer and we must use an out-of-county provider or a local provider with whom we do not contract but who meets the criteria adopted by the Board of Supervisors in the Polk County Management plan. The Polk County Board of Supervisors has appointed the Polk County Service Appeal Board to review each request for services outside of Polk County or for services by local providers who the county does not contract with, to determine whether the service request is in the best interest of the consumer and the county, and to maintain client confidentiality.

**Action Impact:** The Polk County Service Appeal Board has determined that the services requested in the attached resolution are in the best interests of the consumers and the county. The Board of Supervisors in the counties where the providers are located have approved the proposed reimbursement rates. The attached cost summery outlines the services and the proposed costs that were reviewed and approved by the Service Appeal Board.

**Fiscal Note:**

Fiscal Year	Budget- ed? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
15/16	Y	\$100,786.76	\$0	N		
16/17	Y	\$100,786.76	\$0	N		

**Additional Fiscal Note Information (optional):**

**MEMORANDUM OF MH/MR/DD SERVICE APPROVAL  
POLK COUNTY SERVICE APPEAL BOARD**

Wednesday, June 8, 2016

Page 1 of 1

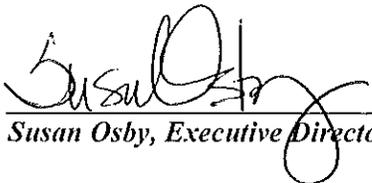
<b>Client ID</b>	10952	<b>County Portion</b>	14.37%	<b>Unit Rate</b>	\$243.14
<b>Provider</b>	Optimae LifeServices Inc/Davis Center (fka ResCare),			<b>Maximum Monthly Cost</b>	\$5,349.08
<b>Service</b>	6517a Nursing Facility/ICF-PMI			<b>Maximum Cost of Approval</b>	\$5,349.08
<b>Units</b>	22 Monthly	<b>Start and End Date</b>		6 /9 /2016 to	6 /30/2016

<b>Client ID</b>	10952	<b>County Portion</b>	14.37%	<b>Unit Rate</b>	\$243.14
<b>Provider</b>	Optimae LifeServices Inc/Davis Center (fka ResCare),			<b>Maximum Monthly Cost</b>	\$1,083.12
<b>Service</b>	6517a Nursing Facility/ICF-PMI			<b>Maximum Cost of Approval</b>	\$90,448.08
<b>Units</b>	31 Monthly	<b>Start and End Date</b>		7 /1 /2016 to	6 /30/2017

<b>Client ID</b>	36402	<b>County Portion</b>	100%	<b>Unit Rate</b>	\$20.79
<b>Provider</b>	Iowa Home Care LLC, Clive			<b>Maximum Monthly Cost</b>	\$415.80
<b>Service</b>	3220a Homemaker/Home Health (Non-Waiver)			<b>Maximum Cost of Approval</b>	\$4,989.60
<b>Units</b>	20 Monthly	<b>Start and End Date</b>		6 /1 /2016 to	5 /31/2017

**SUBMITTED BY:**

\$100,786.76

  
\_\_\_\_\_  
Susan Osby, Executive Director

**RESOLUTION**

MOVED BY \_\_\_\_\_, SECONDED BY \_\_\_\_\_, that the following Resolution be approved:

WHEREAS, Community, Family and Youth Services (CFYS) has a continued need for the availability of on-site psychiatric services for youth in detention; and,

WHEREAS, Dr. Randall Kavalier, M.D. is a highly qualified board certified practitioner in child psychiatry licensed to practice in Iowa; and,

WHEREAS, the term of this agreement is July 1, 2016 through June 30, 2019; and,

WHEREAS, the cost of these services shall not exceed \$55,000 per year for FY16/17, FY17/18 and FY18/19; and,

WHEREAS, Polk County requests that Dr. Kavalier sign a Business Associate Addendum to comply with the covered entity's requirements under the Federal Health Insurance Portability and Accountability Act of 1996 (HIPAA); and,

WHEREAS, it is recommended that the attached agreement with Kavalier and Associates to provide on-site psychiatric services twice weekly be approved.

NOW, THEREFORE, BE IT RESOLVED, that the Polk County Board of Supervisors approves the attached agreement with Kavalier and Associates and directs the County Auditor to take the necessary steps to effectuate said agreement.

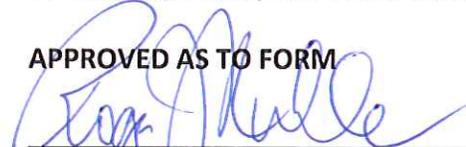
**POLK COUNTY BOARD OF SUPERVISORS**

\_\_\_\_\_  
Tom Hockensmith, Chair

**SUBMITTED BY**

  
\_\_\_\_\_  
Betty Devine, Director  
Community, Family and Youth Services

**APPROVED AS TO FORM**

  
\_\_\_\_\_  
Polk County Attorney, Civil Division

# 7

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Agreement between Polk County and Kavalier and Associates for psychiatric services at the Polk County Juvenile Detention Center.

**Agenda Date:** June 14, 2016

**Contact Individual:** Dan Larson, Program Administrator  
Community, Family and Youth Services  
286-3644

**Previous Action taken by the Board:** A similar resolution was passed by the Board on January 28, 2014.

### Board/Commission Actions

**Action Requested (Recommended):** Approval is recommended.

**Comply with Policy:** Yes

**Background:** The Polk County Juvenile Detention Center has a continued need for on-site psychiatric consultations. This individual is responsible for helping meet the psychiatric needs of youth being served in detention. Dr. Randall Kavalier, M.D. is a highly qualified, board certified practitioner of child psychiatry who is agreeable to providing these services at the detention center twice per week. Youth referrals are made to Dr. Kavalier by nursing staff and the Detention program administrator. Generally, youth who have past or current involvement with a psychiatrist are referred for an initial consultation. Without this service, youth who may need psychiatric treatment would not receive it because they are typically released before a local psychiatrist could work them in for an appointment. Dr. Kavalier also monitors youth who are on suicide precautions and advises staff when the level of precautions needs to be raised or lowered. Suicidal ideation and impulses to self harm are disproportionately high among the population served in detention. The term of this agreement is July 1, 2016 through June 30, 2019. The cost for services shall not exceed \$55,000 per fiscal year.

**Action Impact:** Polk County benefits from this agreement because access to timely psychiatric evaluations and related services reduces length of stays in detention and helps expedite court case processing.

### Fiscal Note:

Fiscal Year	Budgeted? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
16/17	Y	\$55,000		Y	10233302.76470	
17/18	Y	\$55,000		Y	10233302.76470	
18/19	Y	\$55,000		Y	10233302.76470	

### Additional Fiscal Note Information (optional):

**RESOLUTION**

Moved by \_\_\_\_\_, Seconded by \_\_\_\_\_,  
that the following Resolution be approved:

WHEREAS, the Polk County Department of Community, Family and Youth Services Senior Services Division receives Aging Resources of Central Iowa grant funds to provide "wellness" activities for senior citizens at Congregate Meal Sites in Polk County; and,

WHEREAS, Visiting Nurse Services (VNS) is uniquely qualified to provide health promotion, disease prevention and wellness programs for the Senior Services Division; and,

WHEREAS, an agreement with Visiting Nurse Services of Iowa has been developed to provide wellness activities at Polk County congregate meal sites for the period of July 1, 2016 through June 30, 2019; and,

WHEREAS, this agreement is conditional upon the availability of budgeted funds, satisfactory performance by the Provider, and the Provider's continued compliance with the Agreement terms; and,

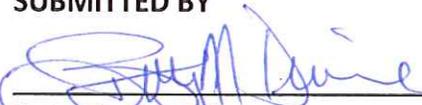
WHEREAS, the total cost of the agreement shall not exceed \$57,231 per year for the term of this agreement.

NOW, THEREFORE, BE IT RESOLVED that the Polk County Board of Supervisors approves the attached Agreement with Visiting Nurse Services of Iowa and directs the County Auditor to take the necessary steps to effectuate said agreement.

**POLK COUNTY BOARD OF SUPERVISORS**

\_\_\_\_\_  
Tom Hockensmith, Chairperson

**SUBMITTED BY**

  
\_\_\_\_\_  
Betty Devine, Director  
Community, Family and Youth Services

**APPROVED AS TO FORM**

  
\_\_\_\_\_  
Assistant County Attorney  
Civil Division

#8

Fiscal Note: This agreement uses federal funding provided to the County through a Title III B contract with Aging Resources of Central Iowa.

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Agreement between Polk County and Visiting Nurse Services of Iowa for well elderly activities and screenings for seniors at Polk County senior centers.

**Agenda Date:** June 14, 2016

**Contact Individual:** Joy Ihle, Program Administrator  
Community, Family & Youth Services  
(515) 286-2062

**Previous Action taken by the Board:** The Board approved a similar three year agreement on July 23, 2013.

### Board/Commission Actions

**Action Requested (Recommended):** Approval is recommended.

**Comply with Policy:** Yes.

**Background:** Visiting Nurse Services of Iowa (VNS) provides health promotion, disease prevention, wellness programs and direct nursing (R.N.) services on a monthly basis at each of the congregate meal sites. The Seniors of Polk County have access to preventative health screenings and wellness activities free of charge. These screenings include but are not limited to foot care, blood pressure, hemoglobin, cholesterol and glucose. The services are identified in an agreement with Aging Resources of Central Iowa as vital to senior health and were determined by the Senior Health Advisory Committee, which is a multidisciplinary group of Polk County health professionals. The term of this agreement is July 1, 2016 through June 30, 2019.

**Action Impact:** Approval of this agreement will benefit Polk County seniors by providing the following services at no cost:

- Blood pressure, glucose, hemoglobin and cholesterol screenings
- Preventative foot care
- Monthly wellness education
- Early detection of health concerns and referrals to health professionals

### Fiscal Note:

Fiscal Year	New Budget Item? (Y/N)	# of New Position(s) Required	Anticipated Expense	Anticipated Revenue	Budget Amendment Required? (Y/N)	If Amendment is Required,	
						Expense Account Code	Revenue Account Code
16/17	N		\$ 57,231		N	10233403.76470	10233403.52450
17/18	N		\$ 58,930		N	10233403.76470	10233403.52450
18/19	N		\$ 60,691		N	10233403.76470	10233403.52450

**Additional Fiscal Note Information (optional):** This agreement uses federal funding provided to the County through a Title III B contract with Aging Resources of Central Iowa.

**RESOLUTION**

MOVED BY \_\_\_\_\_, SECONDED BY \_\_\_\_\_, that

the following Resolution be adopted:

WHERE AS, the Polk County Department of Community, Family and Youth Services - Crisis and Advocacy Services division, provides services to families encountering life problems as a result of being victimized by crime; and,

WHEREAS, Crisis and Advocacy Services has a need to collaborate with a local agency for the provision of group counseling and related services to area teens; and,

WHEREAS, the Young Women's Resource Center is uniquely qualified to provide these services; and,

WHEREAS, the term of this agreement is for the period of July 1, 2016 through June 30, 2017; and,

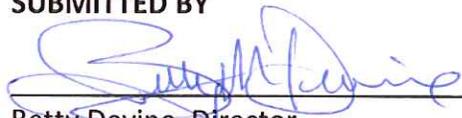
WHEREAS, the cost of these services shall not exceed \$15,000 and grant dollars provided by a State of Iowa Crime Victim Assistance Grant for Sexual Abuse are available to pay for the cost of this agreement.

NOW, THEREFORE, BE IT RESOLVED, that the Polk County Board of Supervisors approves the attached agreement with the Young Women's Resource Center and directs the County Auditor to take the necessary steps to effectuate said agreement.

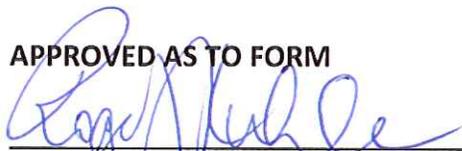
**POLK COUNTY BOARD OF SUPERVISORS**

\_\_\_\_\_  
Tom Hockensmith, Chairperson

**SUBMITTED BY**

  
\_\_\_\_\_  
Betty Devine, Director  
Community, Family and Youth Services

**APPROVED AS TO FORM**

  
\_\_\_\_\_  
Assistant County Attorney  
Civil Division

Additional Fiscal Note Information (optional):

#9

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Agreement between Polk County and Young Women’s Resource Center to provide supportive services to teenagers who have been impacted by sexual violence.

**Agenda Date:** June 14, 2016

**Contact Individual:** Joy Ihle, Program Administrator  
Community, Family, and Youth Services  
515-323-5262

**Previous Action taken by the Board:** A similar contract was approved by the Board on August 4, 2015.

**Board/Commission Actions**

**Action Requested (Recommended):** Approval is recommended.

**Comply with Policy:** Yes.

**Background:** Polk County Crisis & Advocacy Services (PCCAS) and Young Women’s Resource Center (YWRC) have historically worked together to provide supportive services to teens in Polk County that have been affected by sexual violence. Evaluations of the program have revealed that group participants experience positive changes with respect to how they view sexual abuse. Polk County has received grant funding to cover the cost of this agreement. The cost of this agreement shall not exceed \$15,000.

**Action Impact:** Approval of this agreement allows the YWRC to provide co-facilitated group counseling services for teens. The term of this contract is July 1, 2016 – June 30, 2017.

**Fiscal Note:**

Fiscal Year	Budgeted? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
16/17	Yes	\$15,000	\$15,000	N	10233412.77440.03	10233412.52460.03

**Additional Fiscal Note Information (optional):** Grant funds from the Iowa Attorney General’s Office Victim Service Support Program pay for the cost of this agreement.

**RESOLUTION**

MOVED BY \_\_\_\_\_, SECONDED BY, \_\_\_\_\_,  
that the following Resolution be approved:

WHEREAS, Polk County Crisis and Advocacy Services (PCCAS) provides therapy services to meet the needs of clients who are survivors of sexual abuse; and,

WHEREAS, trauma sensitive yoga is an evidence based intervention that has been shown to be an effective response to trauma; and,

WHEREAS, Molly Kinser Douglas MA, LMHC, ATR is certified to facilitate trauma sensitive yoga groups; and,

WHEREAS, this agreement is conditional upon the availability of budgeted funds, satisfactory performance by the service provider, and the provider's continued compliance with the contract terms; and,

WHEREAS, funds have been received by the Iowa Attorney General's Office Victim Services Support Program to cover the cost of this agreement. This agreement shall not exceed \$15,750.00; and,

WHEREAS, the term of this agreement is July 1, 2016- June 30, 2017.

NOW, THEREFORE, BE IT RESOLVED, that the Polk County Board of Supervisors approves the attached agreement with Molly Kinser Douglas MA, LMHC, ATR and directs the County Auditor to take the necessary steps to effectuate said agreement.

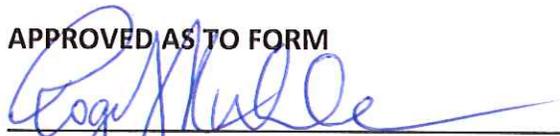
**POLK COUNTY BOARD OF SUPERVISORS**

\_\_\_\_\_  
Tom Hockensmith, Chairperson

**SUBMITTED BY**

  
\_\_\_\_\_  
Betty Devine, Director  
Community, Family, and Youth Services

**APPROVED AS TO FORM**

  
\_\_\_\_\_  
Assistant Polk County Attorney  
Civil Division

#10

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Agreement between Polk County and Molly Kinser Douglas, MA, LMHC, ATR, for trauma sensitive yoga services.

**Agenda Date:** June 14, 2016

**Contact Individual:** Joy Ihle, Program Administrator  
Polk County Crisis and Advocacy Services  
286-2062

**Previous Action taken by the Board:** The board approved a similar contract on August 4, 2015.

**Board/Commission Actions:**

**Action Requested (Recommended):** Approval is recommended.

**Comply with Policy:** Yes.

**Background:** Polk County Crisis and Advocacy Services has received funding from the Iowa Attorney General's Office Victim Services Support Program to provide trauma sensitive yoga to victims of sexual violence. Molly Kinser Douglas, MA, LHMC, ATR, is certified to provide the service. This contract would allow for the provision of 90 sessions of trauma sensitive yoga with a total expense not to exceed \$15,750. The term of this agreement is July 1, 2016 through June 30, 2017.

**Action Impact:** This contract would allow for increased services to sexual assault victims through the use of a time-limited evidence based group format.

**Fiscal Note:**

Fiscal Year	Budget- ed? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
16/17	N	\$15,750	\$15,750	N	10233412.77440.03	10233412.52460.03

**Additional Fiscal Note Information (optional):** Funding is contingent upon the availability of grant funds.

RESOLUTION

MOVED BY \_\_\_\_\_, SECONDED BY, \_\_\_\_\_,  
that the following Resolution be approved:

WHEREAS, Community, Family and Youth Services successfully operates a Sexual Assault Response Team (SART) through the Crisis and Advocacy Services (CAS) program; and,

WHEREAS, the SART program relies on the 24 hour availability of Sexual Assault Nurse Examiners (SANE's) and the on-going coordination of the SANE's; and,

WHEREAS, Shannon Knudsen, FoReNsic Consulting, LLC has agreed to serve as the SANE Coordinator for the period of July 1, 2016 through June 30, 2017; and,

WHEREAS, grant funds from the Iowa Attorney General's Victim Service Support Program covers the cost of this agreement; and,

WHEREAS, funds to cover the additional expense of a SANE training will be provided by funds donated to the Mid-Iowa Sexual Assault Response Team; and

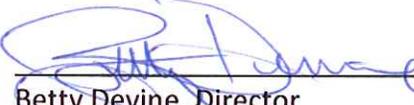
WHEREAS, the cost of this agreement shall not exceed \$42,800.

NOW, THEREFORE, BE IT RESOLVED, that the Polk County Board of Supervisors approves the attached agreement with FoReNsic Consulting, LLC and directs the County Auditor to take the necessary steps to effectuate said agreement.

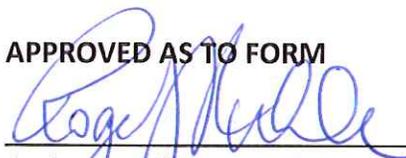
POLK COUNTY BOARD OF SUPERVISORS

\_\_\_\_\_  
Tom Hockensmith, Chairperson

SUBMITTED BY

  
\_\_\_\_\_  
Betty Devine, Director  
Polk County Community, Family & Youth Services

APPROVED AS TO FORM

  
\_\_\_\_\_  
Assistant Polk County Attorney  
Civil Division

# 11

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Agreement between Polk County and FoReNsic Consulting, LLC for Sexual Assault Nurse Examiner (SANE) coordination services.

**Agenda Date:** June 14, 2016

**Contact Individual:** Joy Ihle, Program Administrator  
Community, Family & Youth Services  
286-2062

**Previous Action taken by the Board:** A similar agreement was approved on August 4, 2015.

### Board/Commission Actions

**Action Requested (Recommended):** Approval is recommended.

**Comply with Policy:** Yes

**Background:** Polk County Crisis and Advocacy Services has been successfully operating a Sexual Assault Response Team (SART) since 2006. The SART program requires on-going coordination of the Sexual Assault Nurse Examiners (SANE's). Shannon Knudsen, FoReNsic Consulting, LLC, has successfully performed the duties of the SART Coordinator. Polk County Crisis and Advocacy Services received funding from the Iowa Attorney General's Victim Service Support Program to cover the cost of this agreement (\$41,000). An additional expense of \$1,800 for a SANE training will be paid from funds donated to the Mid-Iowa Sexual Assault Team.

**Action Impact:** Approval of this contract would allow the SANE coordinator to perform the duties of the position and to provide a SANE training.

### Fiscal Note:

Fiscal Year	Budget-ed? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
16/17	Y	\$41,000	\$41,000	N	10233412.77440.04	10233412.52290
16/17	Y	\$1,800	\$1,800	N	10233412.77490.02	10233412.55490.02

**Additional Fiscal Note Information (optional):** Funding for this agreement is contingent upon grant funds.

**RESOLUTION**

MOVED BY \_\_\_\_\_, SECONDED BY \_\_\_\_\_, that the following Resolution be adopted:

WHEREAS, the Polk County Board of Supervisors has a contract with Aging Resources of Central Iowa, to provide a nutrition program for senior citizens; and,

WHEREAS, Taher, Inc. provides the catering through an agreement with Polk County; and,

WHEREAS, an adjustment to pricing is need to more accurately reflect the cost of food based on the consumer price index and the actual number of meals served; and,

WHEREAS, the Department of Community, Family and Youth Services wishes to amend the contract with Taher, Inc. for the period of July 1, 2016 through June 30, 2018; and,

WHEREAS, Taher, Inc. will provide up to 198,500 catered meals at a base unit cost of \$4.75 per meal for FY 16/17 and \$4.92 per meal for FY 17/18 and add alternates for the following amounts:

Picnic Sack Lunch	\$ .36 per meal for FY 16/17 and \$ .37 per meal for FY 17/18
Summer Picnic	\$2.94 per meal for FY 16/17 and \$3.04 per meal for FY 17/18
Pie	\$ .98 per meal for FY 16/17 and \$1.01 per meal for FY 17/18

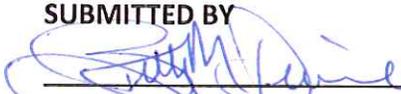
WHEREAS the maximum amount to be paid by Polk County under this agreement shall not exceed \$998,330 in FY 16/17 and \$1,033,787 in FY 17/18.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Supervisors approves the Agreement Amendment with Taher, Inc. and directs the County Auditor to take the necessary steps to effectuate said agreement.

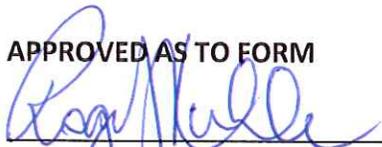
**POLK COUNTY BOARD OF SUPERVISORS**

\_\_\_\_\_  
Tom Hockensmith, Chairperson

**SUBMITTED BY**

  
\_\_\_\_\_  
Betty Devine, Director  
Community, Family & Youth Services

**APPROVED AS TO FORM**

  
\_\_\_\_\_  
Assistant County Attorney  
Civil Division

#12

**POLK COUNTY BOARD OF SUPERVISORS**  
**Tuesday Agenda Memorandum**

**Item Type & Title:** Amendment to agreement between Polk County and Taher, Inc. for the provision of meals at Polk County congregate meal sites.

**Agenda Date:** June 14, 2016

**Contact Individual:** Joy Ihle, Program Administrator  
Community, Family & Youth Services  
(515) 286-2062

**Previous Action taken by the Board:** A five year agreement was approved by the Board on December 9, 2014.

**Board/Commission Actions**

**Action Requested (Recommended):** Approval is recommended.

**Comply with Policy:** Yes.

**Background:** Polk County provides meals to persons 60 and older through a Title III grant from Aging Resources of Central Iowa. Polk County provides these meals through a contract with Taher, Inc. A five year agreement with Taher was approved by the Board of Supervisors in December 2014. This agreement amendment will increase the cost of catered meals and add alternates to more accurately reflect the cost of food based on the consumer price index and the number of meals actually served.

Base meal amount from	\$4.59 to \$4.75 per meal for FY 16-17 \$4.75 to \$4.92 per meal for FY 17-18
Picnic sack lunch from	\$.35 to \$.36 per meal for FY 16-17 \$.36 to \$.37 per meal for FY 17-18
Senior Fest from	\$2.84 to \$2.94 per meal for FY 16-17 \$2.94 to \$3.04 per meal for FY 17-18
Pie from	\$.95 to \$.98 per meal for FY 16-17 \$.98 to \$1.01 per meal for FY 17-18
Total meal costs from	\$1,041,289 to \$998,330 for FY 16-17 \$998,330 to \$1,033,787 for FY 17-18

**Action Impact:** Approval of this contract amendment will allow Polk County Senior Services to continue to provide quality meals to Polk County residents at congregate meal sites.

**Fiscal Note:**

Fiscal Year	Budgeted? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
16/17	Y	\$998,330		Y	10233402.74450	
17/18	Y	\$1,033,787		Y	10233402.74450	

**Additional Fiscal Note Information (optional):** Meal costs are funded, in part, by Aging Resources of Central Iowa Title III funds. Additional funds are available in the CFYS budget. Costs are based on the following assumptions (see attached worksheet).

**Taher Amendment  
2016-17**

**FY 16-17**

Item	Current Cost	Rate of Increase	Increase Amount	New Cost
Base Meal	\$ 4.59	3.50%	\$ 0.16	\$ 4.75
Picnic Sack Lunch	\$ 0.35	3.50%	\$ 0.01	\$ 0.36
Senior Fest	\$ 2.84	3.50%	\$ 0.10	\$ 2.94
Pie	\$ 0.95	3.50%	\$ 0.03	\$ 0.98

**Formula for Figuring Total Meal Costs (FY 16-17)**

Item	Amount Needed	New Cost	Total
Base Meals	198,500	4.75	\$ 942,875
Picnic Sack Lunch	235	0.36	\$ 84.60
Senior Fest	1,500	2.94	\$ 4,410.00
Pie*	52,000	0.98	\$ 50,960.00
<b>TOTAL</b>			<b>\$ 998,330</b>

\*52 Weeks X 1,000 Seniors

**FY 17-18**

Item	Current Cost	Rate of Increase	Increase Amount	New Cost
Base Meal	\$ 4.75	3.50%	\$ 0.17	\$ 4.92
Picnic Sack Lunch	\$ 0.36	3.50%	\$ 0.01	\$ 0.37
Senior Fest	\$ 2.94	3.50%	\$ 0.10	\$ 3.04
Pie	\$ 0.98	3.50%	\$ 0.03	\$ 1.01

**Formula for Figuring Total Meal Costs (FY 17-18)**

Item	Amount Needed	New Cost	Total
Base Meals	198,500	4.92	\$ 976,620
Picnic Sack Lunch	235	0.37	\$ 86.95
Senior Fest	1,500	3.04	\$ 4,560.00
Pie*	52,000	1.01	\$ 52,520.00
<b>TOTAL</b>			<b>\$ 1,033,787</b>

\*52 Weeks X 1,000 Seniors

RESOLUTION

Moved by \_\_\_\_\_, Seconded by \_\_\_\_\_ that the following resolution be adopted:

WHEREAS, the Polk County Board of Supervisors as a public agency, may enter into an agreement with a public or private agency to cooperate in the provision of services to the public and to cooperate in other ways to mutual advantage; and

WHEREAS, Polk County is a member of the Fourmile Creek Watershed Management Authority, the Mud, Camp and Spring Creek Watershed Management Authority, and the Walnut Creek Watershed Management Authority, collectively known as the Central Iowa Watershed Management Authorities (CIWMA); and

WHEREAS, to more efficiently implement and fund the Watershed Management Plans developed by each WMA, the Central Iowa Watershed Management Authorities have determined that this can be best accomplished by funding the position of Watershed Management Coordinator within the Polk Soil and Water Conservation District; and

WHEREAS, Polk County Public Works has prepared a Cooperative Service Agreement between Polk County and the Polk Soil and Water Conservation District which details the responsibilities of each party and the proposed funding commitments of each of the WMA members; and

WHEREAS, it is understood and included within this Agreement that Polk County will not provide their funding to the Polk Soil and Water Conservation District until it has received funding commitments from all those parties to the agreement that are contributing more than \$500 as per Attachment D of said Agreement and as verified by the Public Works Department.

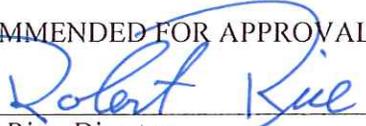
NOW, THEREFORE, BE IT RESOLVED that the Polk County Board of Supervisors approves the terms of the attached agreement, adopts the agreement, and authorizes the Chairperson to execute the agreement on behalf of Polk County; and

BE IT FURTHER RESOLVED that the Public Works Department return a copy of the signed agreement to the Polk Soil and Water Conservation District and administer the agreement on behalf of Polk County.

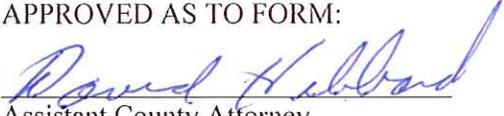
POLK COUNTY BOARD OF SUPERVISORS:

\_\_\_\_\_  
Chairperson

RECOMMENDED FOR APPROVAL:

  
\_\_\_\_\_  
Robert Rice, Director  
Polk County Public Works

APPROVED AS TO FORM:

  
\_\_\_\_\_  
Assistant County Attorney

FISCAL NOTE: None at this time.

<u>Estimated Costs</u>	
Polk County Net FY 16/17 cost	\$55,350
Other WMA Agency Funding	\$89,650
<hr/> Total Estimated FY 16/17 Cost	<hr/> \$145,000

Polk County costs to be funded using Economic Development Funds.

#13

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution No. 88-16 to approve a Cooperative Public Service Agreement with the Polk Soil and Water Conservation District for the funding of a Watershed Coordinator position within Polk SWCD.

**Agenda Date:** June 14, 2016

**Contact Individual:** Robert Rice, Director, Polk County Public Works, 286-3705

**Previous Action taken by the Board:** None Required

**Board/Commission Actions:** None Required

**Action Requested (Recommended):** Approve the terms of the Cooperative Public Service agreement, adopt the agreement, and authorize the Chairperson to execute the agreement on behalf of Polk County.

**Comply with Policy:** Yes

**Background:** Polk County is a member of the Fourmile Creek Watershed Management Authority, the Mud, Camp and Spring Creek Watershed Management Authority, and the Walnut Creek Watershed Management Authority, collectively known as the Central Iowa Watershed Management Authorities (CIWMA). To more efficiently implement and fund the Watershed Management Plans developed by each WMA, the Central Iowa Watershed Management Authorities have determined that this can be best accomplished by funding the position of Watershed Management Coordinator within the Polk Soil and Water Conservation District. Polk County Public Works has prepared a Cooperative Service Agreement between Polk County and the Polk Soil and Water Conservation District which details the responsibilities of each party and the proposed funding commitments of each of the WMA members. It is understood and included within this Agreement that Polk County will not provide their funding to the Polk Soil and Water Conservation District until it has received funding commitments from all those parties to the agreement that are contributing more than \$500 as per Attachment D of said Agreement and as verified by the Public Works Department.

**Action Impact:** Allows development of the Watershed Management plans and projects to move forward in a coordinated manner and reduce duplication of expenses and effort by each Watershed Management Authority.

**Fiscal Note:**

<u>Estimated Costs</u>	
Polk County Net FY 16/17 cost	\$ 55,350
<u>Other WMA Agency Funding</u>	<u>\$ 89,650</u>
Total Estimated Cost	\$145,000

Polk County costs to be funded using Economic Development Funds.

Fiscal Year	Budget ed? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
15/16						
16/17	N	\$145,000	\$89,650	N	50106230.79400	50106320.52790

**Additional Fiscal Note Information (optional):**

RESOLUTION

Moved by \_\_\_\_\_, Seconded by \_\_\_\_\_ that  
the following resolution be adopted:

WHEREAS, the Central Iowa Regional Transportation Planning Alliance (CIRTPA) is responsible for programming federal transportation funds in the eight (8) county central Iowa area; and

WHEREAS, Polk County is a member of the CIRTPA; and

WHEREAS, the 28E Agreement establishing the CIRTPA requires that member governments approve amendments to the 28E Agreement; and

WHEREAS, the CIRTPA Policy Committee approved an amendment to allow the City of Huxley to join the CIRTPA on July 16, 2015.

NOW, THEREFORE, BE IT RESOLVED that the Polk County Board of Supervisors approve the amended 28E Agreement for CIRTPA; and

BE IT FURTHER RESOLVED that the chairperson sign the signature page of the amended 28E Agreement.

POLK COUNTY BOARD OF SUPERVISORS:

\_\_\_\_\_  
Chairperson

RECOMMENDED FOR APPROVAL:

Robert Rice  
Robert Rice, Director  
Polk County Public Works

APPROVED AS TO FORM:

David Hubbard  
Assistant County Attorney

FISCAL IMPACT: None

#14

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution No. 90-16 Resolution to approve the updated 28E agreement for Central Iowa Regional Transportation Planning Alliance (CIRTPA)

**Agenda Date:** June 14, 2016

**Contact Individual:** Bret VandeLune, Planning & Development Manager, Polk County Public Works, 286-2290

**Previous Action taken by the Board:** N/A

**Board/Commission Actions:** N/A

**Action Requested (Recommended):** Approval

**Comply with Policy:** Yes

**Background:** In July, 2015 the CIRTPA Policy Committee approved to amend the 28E agreement in order to allow the City of Huxley to become a member of CIRTPA. The 28E Agreement adoption process requires local jurisdictions to formally approve the new agreement and submit a signed resolution and signature page to CIRTPA staff. Polk County needs to complete this process.

**Action Impact:** Approval of resolution approves the amended 28E agreement and authorized the Chairperson to sign the agreement and directs the Auditor to forward original to CIRTPA.

**Fiscal Note:** None

Fiscal Year	Budgeted? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
15/16	Y	\$0	N/A	N		

**Additional Fiscal Note Information (optional):**

**RESOLUTION**

Moved by \_\_\_\_\_, Seconded by \_\_\_\_\_ that the following resolution be adopted:

WHEREAS, the Polk County Sanitary Sewer was installed to promote connections to the public sanitary sewer; and

WHEREAS, the property located at 4342 NE 3<sup>rd</sup> Street desires to connect to public sanitary sewer; and

WHEREAS, the Polk County requested an easement across 4342 NE 3<sup>rd</sup> Street for future extension of the sanitary sewer.

NOW, THEREFORE, BE IT RESOLVED that the Polk County Board of Supervisors approves the sanitary sewer easement for 4342 NE 3<sup>rd</sup> Street; and

BE IT FURTHER RESOLVED that the Polk County Board of Supervisors authorizes the County Auditor to record all necessary documents.

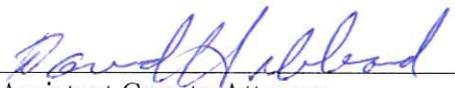
POLK COUNTY BOARD OF SUPERVISORS:

\_\_\_\_\_  
Chairperson

RECOMMENDED FOR APPROVAL:

  
\_\_\_\_\_  
Robert Rice, Director  
Polk County Public Works

APPROVED AS TO FORM:

  
\_\_\_\_\_  
Assistant County Attorney

FISCAL IMPACT: None

#15

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution No. 91-16 to approve easements for the sanitary sewer main

**Agenda Date:** June 14, 2016

**Contact Individual:** Bret VandeLune, Planning & Development Manager, Polk County Public Works, 286-2290

**Previous Action taken by the Board:** N/A

**Board/Commission Actions:** N/A

**Action Requested (Recommended):** Resolution approves the easements for future sanitary sewer extension. Also authorizes the Polk County Auditor to record all necessary documents.

**Comply with Policy:** Yes

**Background:** Polk County sanitary sewer system is available in certain areas to be connected to once a septic system fails. In this case, an adjacent property (4342 NE 3<sup>rd</sup> Street) system failed and the owner desired to connect to public sanitary sewer. Polk County requested a permanent sanitary sewer easement for future extension and maintenance.

**Action Impact:** Approval of resolution approves the easement and directs the auditor to record the documents.

**Fiscal Note:** None

Fiscal Year	Budgeted? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
15/16	Y	\$0	N/A	N		

**Additional Fiscal Note Information (optional):**

**RESOLUTION**

MOVED BY \_\_\_\_\_ SECONDED BY \_\_\_\_\_ that  
the following resolution be adopted.

WHEREAS, Iowa Code §468.176 authorizes levee or drainage districts to become members of drainage associations for their mutual protection and benefit and to pay dues and membership fees therein out of the districts' maintenance funds; and

WHEREAS, fiscal year 2016-2017 dues for the Iowa Drainage District Association are:  
\$0.025/Acre - Basic Dues

WHEREAS, the Polk County Board of Supervisors are trustees of the twenty-four (24) Polk County Drainage Districts listed below.

NOW THEREFORE BE IT RESOLVED that payment of fiscal year 2016-2017 basic dues to the Iowa Drainage District Association at the rate of two and one-half cents per acre with a \$2.00 district minimum is hereby approved as follows:

<u>DRAINAGE DISTRICT NO.</u>	<u>TOTAL ACRES</u>	<u>ANNUAL DUES</u>
Saylor 1	1,389	\$34.73
Washington 4	2,342	\$58.55
Franklin 5	1,664	\$41.60
Madison 7	832	\$20.80
Elkhart 11	1,078	\$26.95
Beaver 19	969	\$24.23
Alleman 23	302	\$7.55
Franklin 24	357	\$8.93
Camp 26	864	\$21.60
Camp 29	365	\$9.13
Elkhart-Road 33	132	\$3.30
Granger Road 34	130	\$3.25
Panora Speedway 35	61	\$2.00
Washington 37	178	\$4.45
Lincoln 40	2,164	\$54.10
Lincoln 41	542	\$13.55
Lincoln 43	604	\$15.10
Madison 46	544	\$13.60
47	32	\$2.00
48	32	\$2.00
50	1,699	\$42.48
51	1,659	\$41.48
54	15	\$2.00
<u>Douglas 57</u>	<u>623</u>	<u>\$15.58</u>
TOTAL: 24 Districts	18,577 Acres	\$468.93

#16



# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution No. 89-16 approving payment of annual dues to the Iowa Drainage District Association and approving that the dues are paid from the maintenance fund of each drainage district.

**Agenda Date:** June 14, 2016

**Contact Individual:** Bret VandeLune, Planning & Development Manager, Polk County Public Works, 286-2290

**Previous Action taken by the Board:** Annual resolution

**Board/Commission Actions:**

**Action Requested (Recommended):** Approve resolution

**Comply with Policy:** Yes

**Background:** Iowa Code §468.176 authorizes levee or drainage districts to become members of drainage associations. IDDA is the only organization in the state that solely represents the interests of organized drainage districts and protects the districts' ability to install, improve or maintain drainage systems. Polk County has been paying the annual dues since 1995. Dues did not increase this year.

**Action Impact:** Approve the payment of the fiscal year 2015-2016 dues to the Iowa Drainage District Association and pay the dues from the maintenance fund of each drainage district.

**Fiscal Note:** All costs paid by Drainage Districts.

Fiscal Year	Budget ed? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
16/17	N	N/A	N/A	N		

RESOLUTION

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_

THAT THE FOLLOWING RESOLUTION BE ADOPTED:

WHEREAS, the Iowa Department of Public Health (IDPH) allocated funds to Polk County to conduct Integrated HIV and Hepatitis Counseling, Testing and Referral (CTR) services; and

WHEREAS, Polk County was initially awarded \$40,750 to continue to provide these services for the period covering January 1, 2016 through December 31, 2016; and

WHEREAS, a first amendment added additional funding of \$13,750 for a new total of \$54,500; and

WHEREAS, this second amendment corrects the name of the contractor on the contract face page.

NOW, THEREFORE, BE IT RESOLVED: That the Polk County Board of Supervisors/Board of Health approves Amendment 2 to Contract #5886AP10 with the Iowa Department of Public Health to fund Polk County Integrated HIV and Viral Hepatitis Counseling, Testing and Referral (CTR) services program authorizes the Chairperson to sign the agreement.

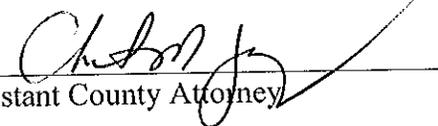
NOW, THEREFORE, BE IT FURTHER RESOLVED: That the Director of the Polk County Health Department, or his designee, be authorized to execute any and all documents in furtherance of this contract or distribution.

POLK COUNTY BOARD OF SUPERVISORS

By \_\_\_\_\_  
Chair

  
\_\_\_\_\_  
Rick Kozin  
Director of Public Health

Approved as to form:  
JOHN P. SARCONI  
POLK COUNTY ATTORNEY

BY   
Assistant County Attorney

FISCAL NOTE: no change

#17

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Amendment to Agreement with Iowa Department of Public Health (IDPH) for Integrated HIV and Viral Hepatitis Counseling, Testing and Referral Services

**Agenda Date:** 6/14/2016

**Contact Individual:** Scott Slater, 286-3752

**Previous Action taken by the Board:** Original contract approved by BOS on 1/19/2016 and amended on 5/17/2016.

**Board/Commission Actions:** None

**Action Requested (Recommended):** Approval

**Comply with Policy:** Controlling the spread of communicable disease in the county is an essential public health function and mandated by Iowa law.

**Background:** Each year, the Iowa Department of Public Health awards funds to Polk County to carry out HIV and Hepatitis C Prevention, Counseling, Testing and Referral and Hepatitis immunization services for at-risk individuals. The initial award was \$40,750 for the period January 1, 2016 through December 31, 2016. An amendment added additional funding for a new total of \$54,500.

**Action Impact:** This second amendment changes the name of the contractor from Polk County Health Department to Polk County Board of Health.

**Fiscal Note:**

Fiscal Year	Budgeted? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
15/16	Y					
16/17	Y					

**Additional Fiscal Note Information (optional):**

RESOLUTION

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_  
that the following resolution be adopted:

WHEREAS, Wastewater Reclamation Authority (WRA) proposes to stabilize the stream banks along Four Mile Creek to protect existing sewer infrastructure on property located within the Polk County Conservation-managed Four Mile Creek Greenbelt; and

WHEREAS, WRA is requesting easements for the purpose of installing and maintaining said improvements; and

WHEREAS, the Polk County Conservation Board will consider at their June 8, 2016 regular meeting that the proposed infrastructure protection project will not interfere with park purposes; and

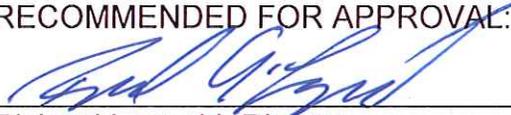
WHEREAS, a public hearing on the proposed easement conveyance is necessary for the disposition of property and has been scheduled for 9:30 a.m. on June 21, 2016 at the regularly scheduled meeting of the Polk County Board of Supervisors, Polk County Administrative Office Building, Room 120, 111 Court Avenue, Des Moines, Iowa; and

NOW, THEREFORE BE IT RESOLVED that the Polk County Auditor is directed to publish the attached notice of hearing, and to furnish the Polk County Board Conservation Board with an affidavit of publication.

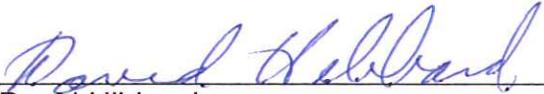
POLK COUNTY BOARD OF SUPERVISORS

\_\_\_\_\_  
Tom Hockensmith, Chair

RECOMMENDED FOR APPROVAL:

  
\_\_\_\_\_  
Richard Leopold, Director  
Polk County Conservation

APPROVED AS TO FORM:

  
\_\_\_\_\_  
David Hibbard  
Assistant Polk County Attorney

Fiscal Impact: N/A

#18

# POLK COUNTY BOARD OF SUPERVISORS

## Agenda Memorandum

### For 06/14/2016

**Item Type & Title:** WRA Easement Request - Four Mile Creek bank Stabilization and infrastructure protection

**Agenda Date:** June 14, 2016

**Contact Individual:** Richard Leopold, Director, Polk County Conservation, 515-323-5322

**Background:** The WRA installed trunk sewer running along Four Mile Creek is threatened by continuing erosion of the stream bank. The proposed work will protect the existing sewer line and also provide protection for the nearby Gay Lea Wilson multipurpose recreational trail. The WRA will need both a temporary construction easement to perform the stabilization but also a permanent easement to allow maintenance and repair if required. There will be no impacts to the park that will interfere with the use of the land for park purposes.

The Conservation Board will be considering at their June 8 meeting that the granting of the easements will not interfere with park purposes. Conservation requests that the Board of Supervisor act to publish a notice of a public hearing on June 14 and then to hold that hearing on June 21, 2016 to grant the easements.

**Action Impact:** Action to set a public hearing will be requested for easement to be conveyed on 6/21/16.

**Fiscal Note:**  
The WRA is using State Revolving Funds to cover 100% of the cost to stabilize and protect this segment of the stream corridor

Fiscal Year	New Budget Item? (Y/N)	# of New Position(s) Required	Anticipated Expense	Anticipated Revenue	Budget Amendment Required? (Y/N)	If Amendment is Required,	
						Expense Account Code	Revenue Account Code
15/16							

**Additional Fiscal Note Information (optional):**N/A

## NOTICE FOR PUBLIC HEARING

Notice is hereby given that a Public Hearing will be held on June 21, 2016 at 9:30 A.M. at the regularly scheduled meeting of the Polk County Board of Supervisors, Room 120, Polk County Administration Building, 111 Court Avenue, Des Moines, Iowa, 50309 regarding the Wastewater Reclamation Authority's (WRA) request for a temporary and permanent easement along Four Mile Creek on property located within the Polk County Conservation-managed Four Mile Creek Greenbelt for the purpose of stabilizing the stream banks along Four Mile Creek to protect existing sewer infrastructure on the following property as described:

### PROPERTY DESCRIPTION - TEMPORARY EASMENT

THAT PART OF THE EAST 1/2 OF THE SOUTHEAST 1/4 AND PART OF THE SOUTH 56 ACRES OF THE EAST 1/2 OF THE NORTHEAST 1/4 LYING SOUTH OF INTERSTATE HIGHWAY No. 80 ALL IN SECTION 17, TOWNSHIP 79 NORTH, RANGE 23 WEST OF THE

5TH P.M., POLK COUNTY, IOWA AND DESCRIBED AS FOLLOWS:

COMMENCING AT THE SOUTH 1/4 CORNER OF SAID SECTION 17; THENCE NORTH 89°39'10" EAST ALONG THE SOUTH LINE OF SAID SOUTHEAST 1/4, 1321.31 FEET; THENCE NORTH 0°15'53" EAST, 170.01 FEET TO A POINT ON THE NORTHERLY RIGHT-OF-WAY LINE OF NE 46TH AVENUE AND THE POINT OF BEGINNING; THENCE CONTINUING NORTH 00°15'53" EAST ALONG THE WEST LINE OF SAID EAST 1/2 OF THE SOUTHEAST 1/4, 2465.78 FEET TO A POINT ON THE NORTH LINE OF SAID SOUTHEAST 1/4; THENCE NORTH 00°15'16" EAST ALONG THE WEST LINE OF SAID SOUTH 56 ACRES OF THE EAST 1/2 OF THE NORTHEAST 1/4, 710.04 FEET; THENCE SOUTH 89°44'44" EAST, 180.00 FEET; THENCE SOUTH 81°32'47" EAST, 244.69 FEET; THENCE SOUTH 16°37'15" EAST, 346.16 FEET; THENCE SOUTH 09°39'21" WEST, 283.66 FEET; THENCE SOUTH 28°54'27" WEST, 167.59 FEET; THENCE SOUTH 03°37'46" WEST, 304.70 FEET; THENCE SOUTH 14°45'05" WEST, 196.95 FEET; THENCE SOUTH 00°06'01" WEST, 735.46 FEET; THENCE SOUTH 78°25'15" EAST, 233.38 FEET; THENCE SOUTH 51°09'51" EAST, 447.37 FEET; THENCE SOUTH 01°46'47" EAST, 414.06 FEET; THENCE SOUTH 13°33'03" WEST, 488.39 FEET TO A POINT ON SAID NORTHERLY RIGHT-OF-WAY LINE OF NE 46TH AVENUE; THENCE SOUTH 89°39'10" WEST ALONG SAID NORTHERLY RIGHT-OF-WAY LINE, 131.95 FEET; THENCE N00°20'50" WEST CONTINUING ALONG SAID LINE, 70.00 FEET; THENCE SOUTH 89°39'10" WEST CONTINUING ALONG SAID LINE, 679.45 FEET TO THE POINT OF BEGINNING AND CONTAINING 40.68 ACRES (1,772,048 S.F.) MORE OR LESS.

### PROPERTY DESCRIPTION - PERMANENT EASEMENT

A PART OF AN ACQUISITION PLAT AS RECORDED IN BOOK 9067, PAGE 982 AS FILED IN THE POLK COUNTY RECORDER'S OFFICE AND BEING IN THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 17, TOWNSHIP 79 NORTH, RANGE 23 WEST OF THE 5TH P.M., POLK COUNTY, IOWA AND DESCRIBED AS FOLLOWS:

COMMENCING AT THE SOUTHEAST CORNER OF SAID SECTION 17; THENCE SOUTH 89°39'13" WEST ALONG THE SOUTH LINE OF SAID SOUTHEAST 1/4, A DISTANCE OF 800.44 FEET; THENCE NORTH 0°20'47" WEST, 170.00 FEET TO THE NORTH RIGHT-OF-WAY LINE OF NE 46TH STREET AND TO THE POINT OF

BEGINNING; THENCE SOUTH 89°39'13" WEST ALONG SAID NORTH RIGHT-OF-WAY LINE, 245.00 FEET; THENCE NORTH 0°25'10" WEST, 284.00 FEET; THENCE NORTH 89°39'13" EAST, 239.69 FEET; THENCE NORTH 0°00'00" WEST, 403.86 FEET; THENCE NORTH 81°59'05" WEST, 272.65 FEET; THENCE NORTH 51°38'50" WEST, 130.79 FEET; THENCE NORTH 29°43'14" WEST, 177.28 FEET; THENCE NORTH 11°07'58" EAST, 453.97 FEET; THENCE NORTH 28°51'19" WEST, 106.50 FEET; THENCE NORTH 52°17'28" EAST, 232.61 FEET; THENCE SOUTH 38°12'12" EAST, 113.37 FEET TO THE EASTERLY LINE OF SAID ACQUISITION PLAT; THENCE SOUTH 0°06'04" WEST ALONG SAID EASTERLY LINE, 405.00 FEET; THENCE SOUTH 78°25'12" EAST ALONG SAID EASTERLY LINE, 24.03 FEET; THENCE SOUTH 23°19'11" WEST, 162.19 FEET; THENCE SOUTH 55°39'05" EAST, 109.96 FEET; THENCE NORTH 55°28'46" EAST, 254.11 FEET TO SAID EASTERLY LINE; THENCE SOUTH 51°09'48" EAST ALONG SAID EASTERLY LINE, 347.37 FEET; THENCE SOUTH 10°36'37" WEST, 677.67 FEET; THENCE SOUTH 51°43'27" WEST, 178.27 FEET; THENCE SOUTH 86°21'17" WEST, 88.13 FEET; THENCE SOUTH 0°20'49" EAST, 75.97 FEET TO THE POINT OF BEGINNING AND CONTAINING 13.23 ACRES (576,186 S.F.).

Persons wishing further information should contact the Polk County Conservation Board office at 515-323-5300.

**RESOLUTION**

**MOVED** by \_\_\_\_\_ **SECONDED** by \_\_\_\_\_

that the following Resolution be adopted:

**WHEREAS**, the Polk County Board of Supervisors has supported numerous downtown Des Moines safety initiatives; and,

**WHEREAS**, the Polk County Board of Supervisors have been engaged in reducing homelessness and supporting the efforts of Central Iowa Shelter & Services (CISS); and,

**WHEREAS**, Primary HealthCare, Inc. has agreed to provide essential medical services to the residents of CISS if adequate security is made available at designated times; and,

**WHEREAS**, Polk County and the City of Des Moines have agreed to provide funding to provide such security services; and,

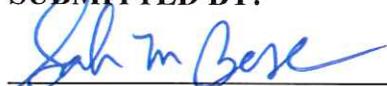
**WHEREAS**, Polk County has agreed to contribute \$20,000 per year for two years towards this effort.

**NOW, THEREFORE BE IT RESOLVED** that the Polk County Board of Supervisors hereby approves and authorizes the Chair to sign the attached agreement with Central Iowa Shelter & Services to provide security services at the shelter for two years.

**POLK COUNTY BOARD OF SUPERVISORS**

\_\_\_\_\_  
Chairperson

**SUBMITTED BY:**



\_\_\_\_\_  
Sarah Boese  
Board Executive Assistant

# 19

**APPROVED AS TO FORM:**



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Assistant County Attorney

FY16/17-FY17/18  
Fiscal Impact: \$20,000

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution approving an agreement between Polk County and Central Iowa Shelter & Services to provide security services at designated times at the shelter.

**Agenda Date:** June 14, 2016

**Contact Individual:** Sarah Boese, Board Executive Assistant  
Board of Supervisors  
286-3895

**Previous Action taken by the Board:** None

**Board/Commission Actions:** N/A

**Comply with Policy:** Yes

**Background:** The Des Moines police presence will help address and prevent issues that have greatly increased with shelter clients and nightly overflow. The off duty Des Moines police officer will be able to provide positive proactive enforcement and provide a sense of security for the shelter's clients, staff and volunteers. The presence of authority will reduce behavioral outbursts from clients and reduce the need for police calls. The officer is also on-site to stop any issues that need to be de-escalated immediately.

**Action Impact:** The passage of this resolution approves the agreement between Polk County and Central Iowa Shelter & Services for the provision of security during designated times at the shelter.

**Fiscal Note:**

Fiscal Year	New Budget Item? (Y/N)	# of New Position(s) Required	Anticipated Expense	Anticipated Revenue	Budget Amendment Required? (Y/N)	If Amendment is Required,	
						Expense Account Code	Revenue Account Code
16/17	Y		\$20,000			50106320.79410	
17/18	Y		\$20,000			50106320.79410	

**Additional Fiscal Note Information (optional):**

**RESOLUTION**

**MOVED** by \_\_\_\_\_ **SECONDED** by \_\_\_\_\_ that the following  
Resolution be adopted:

**WHEREAS**, Latino Resources, Inc. is a non-profit entity that serves as the umbrella to Iowa's Latino Heritage Festival, and;

**WHEREAS**, the mission of Iowa's Latino Heritage Festival is to provide the public with:

- A family oriented event filled with learning through music, dance, food, children's activities, arts and cultural exhibits from several of the twenty-two Latin American countries
- A venue to showcase performers, artisans, cultural craftsmen from Iowa and the Midwest
- To help youth gain a better understanding and appreciation of the Latino culture; to teach them tolerance and appreciation of diversity through distinct activities and exhibits, and;

**WHEREAS**, the Annual Latino Heritage Festival will take place on Saturday, September 24<sup>th</sup> and Sunday September 25<sup>th</sup> located at the Western Gateway Park in downtown Des Moines and;

**WHEREAS**, the Polk County Board of Supervisors desires to support Latino Resources, Inc. with a grant to assist in funding Iowa's Latino Heritage Festival.

**NOW, THEREFORE BE IT RESOLVED** that the Polk County Board of Supervisors hereby approves a grant in the amount of \$10,000.00 to Latino Resources, Inc. and authorizes the Chair to sign the attached agreement.

**POLK COUNTY BOARD OF SUPERVISORS**

\_\_\_\_\_  
Chairperson

**SUBMITTED BY:**

*Lisa Moody-Tunks*  
Lisa Moody-Tunks  
Grant Administrator

Approved as to Form:

*Ch...*  
Assistant Polk County Attorney

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution approving a Community Development Grant to Latino Resources, Inc. for Iowa's Latino Heritage Festival.

**Agenda Date:** June 14, 2016

**Contact Individual:** Lisa Moody-Tunks, Grant Administrator  
Board of Supervisors  
515-286-2272

**Previous Action taken by the Board:** July 13, 2015-\$15,000.00

**Board/Commission Actions:** N/A

**Action Requested (Recommended):** Approves a \$10,000.00 Community Development Grant to Latino Resources Inc. for Iowa's Latino Heritage Festival.

**Comply with Policy:** Yes

**Background:**

Latino Resources, Inc. is a non-profit entity that serves as the umbrella for the Iowa's Latino Heritage Festival. The mission of Iowa's Latino Heritage Festival is to provide the public with:

- A family oriented event filled with learning through music, dance, food, children's activities, arts and cultural exhibits from several of the twenty-two Latin American countries.
- A venue to showcase Iowa-based performers, artisans, cultural craftsmen and artifact producers
- Distinct activities and exhibits to educate the youth so they can better understand the Latino culture, as well as teach them tolerance and appreciation of diversity.

Iowa's Latino Heritage Festival has proven to be a needed venue for the Latino community and for those of non-Latino heritage and expanded to a two day celebration. The Polk County Board of Supervisors desires to support Latino Resources, Inc. with a grant to assist in funding Iowa's Latino Heritage Festival.

**Action Impact:** \$10,000.00 in gaming revenues.

**Fiscal Note:**

Fiscal Year	Budget- ed? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
15/16	N	\$10,000.00		N	40109032.79410	

**Additional Fiscal Note Information (optional):**

# RESOLUTION

MOVED by \_\_\_\_\_ SECONDED by \_\_\_\_\_ that  
the following Resolution be adopted:

WHEREAS, the Polk County Board of Supervisors has identified funding for Community Betterment projects in the FY 15-16 Prairie Meadows Revenue Gaming Plan; and,

WHEREAS, community agencies/organizations throughout the metropolitan area submit requests for Community Betterment funding; and,

WHEREAS, requests for support of community agencies/organizations throughout the metropolitan area have been received from all of the agencies listed on the attached Community Betterment Grant Award List; and,

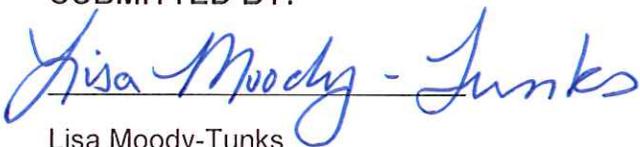
WHEREAS, the nature of these agencies/organizations and their projects are an appropriate use of the Community Betterment funds.

NOW, THEREFORE, BE IT RESOLVED that the Polk County Board of Supervisors hereby approves awarding \$57,500.00 in Community Betterment Grants, in the individual amounts as identified, to the agencies/organizations on the attached Community Betterment Grant Award List from the Community Betterment fund.

## POLK COUNTY BOARD OF SUPERVISORS

\_\_\_\_\_  
Chairperson

SUBMITTED BY:



Lisa Moody-Tunks  
Grant Administrator

Fiscal Impact: \$57,500.00 from the Community Betterment fund, FY 15-16

#21

# POLK COUNTY BOARD OF SUPERVISORS

## Tuesday Agenda Memorandum

**Item Type & Title:** Resolution Approving Community Betterment Grant Awards.

**Agenda Date:** June 14, 2016

**Contact Individual:** Lisa Moody-Tunks,  
Grant Administrator  
Polk County Board of Supervisors  
286-2272

**Previous Action taken by the Board:** Community Betterment Awards June 7, 2016-\$80,611.00.

**Board/Commission Actions:** N/A

**Action Requested (Recommended):** Approval of the attached June 14, 2016 Community Betterment Grant Award List.

**Comply with Policy:** Yes

**Background:** Polk County has funding for Community Betterment projects in the FY15-16 Prairie Meadows Revenue Gaming Plan. Request for support of community agencies/organizations have been received and their projects are an appropriate use of the Community Betterment funds.

**Action Impact:** Passing of this resolution approves awarding \$57,500.00 in Community Betterment Grants in the individual amounts as identified on the attached Community Betterment Grant Award List.

**Fiscal Note:**

Fiscal Year	Budget- ed? (Y/N)	Anticipated Expense	Anticipated Revenue	Ongoing Commitment? (Y/N)	If Amendment is Required,	
					Expense Account Code	Revenue Account Code
15/16		\$57,500.00		N		40109033.79410

**Additional Fiscal Note Information (optional):**

**Community Betterment Grant Awards  
June 14, 2016**

American Legion Post 663	\$2,000.00
Clive Community Services	\$2,000.00
Clive Festival	\$4,000.00

Des Moines Performing Arts	\$15,000.00
Downtown Urbandale Neighborhood Association	\$2,000.00
Grimes Chamber & Economic Development	\$2,500.00
Iowa Women Lead Change	\$10,000.00
Johnston Partnership for a Healthy Community	\$9,000.00
Living History Farms	\$6,000.00
Pursuit of Innovation	\$5,000.00

<b>TOTAL</b>	<b>\$57,500.00</b>
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**CITY OF MITCHELLVILLE**

Office of City Clerk  
PO Box 817, 204 Center Ave N  
Mitchellville, IA 50169  
Phone (515)967-2935, Fax (515)967-2631  
tammi.dillavou@mitchellville.org

June 7, 2016

Polk County Board of Supervisors  
111 Court Ave  
Des Moines, IA 50309-2251

Dear Interested Party,

Attached to this letter is Resolution #2016-38 A Resolution of Voluntary Annexing Real Estate owned by IA-KY LLC, E. Edward Craig, President, and Voluntary Annexation of Real Estate owned by Iowa Interstate Railroad, LTD. This resolution was approved by the Mitchellville City Council on June 6, 2016. Also attached is a legal description for the properties and a map showing the location of the properties requesting voluntary annexation.

If you have any questions concerning this annexation, please contact me.

Tammi Dillavou  
Interim City Clerk

#22



# MMP Short Form for Annual Updates

Iowa law requires confinement feeding operations to submit updated manure management plans (MMPs) and fees on an annual basis. The update, which must be submitted on this form, may be submitted any time in the 45 days prior to the due date. If the update is not submitted to the appropriate DNR field office by the due date, a Notice of Violation will be issued. If a **complete update, including fees, is not submitted by the end of the month in which it is due, the matter will be referred to our legal services section for enforcement action, including a \$3,000 penalty.** The postmark is considered the submittal date for mailed updates.

### Instructions:

1. Fill in the Owner's name, facility ID, location and contact information below.
2. Check the box(es) below that apply to your operation.
3. Make copies of this form for yourself, the appropriate county or counties, and the DNR field office.
4. Submit a copy of this form and the changes to the plan to the appropriate county or counties.
5. Submit a copy of this form [signed by the facility owner and by the county representatives] to the appropriate DNR field office. You do not need to submit the changes to the DNR field office. Submit only this form.
6. Attach a copy of the Compliance fee form (542-8064) along with a check made out to the DNR.

Owner's Name: John Hall Facility ID #: \_\_\_\_\_

Facility Name: Brookside Farms Site 2

Location: Se  $\frac{1}{4}$  of the SE  $\frac{1}{4}$  of Sec 22 T 81 R 22 Washington Polk  
( $\frac{1}{4}$ ) (Section) (Tier & Range) (Township Name) (County)

Facility Address: 13470 Northeast 104 th St Maxwell Ia 50161  
(Address) (City) (State) (Zip)

Date: 5/10/16 Contact: David Halvorsen Phone: 641-751-6638

Changes indicated below must be included in your current, on-site copy of the MMP (kept within 30 miles of the site). Prior to making changes in manure management practices, the on-site copy must be updated to show the proposed changes.

I have made no changes to my MMP.

I have made the following changes to my MMP:

- I have added acres.
- I have changed my crop rotation or optimum yields.
- My type of feeding system has changed.
- I used a different method of application.
- I am using a manure analysis for determining application rates when applying manure

The animal unit capacity of my facility has changed. (Contact your local DNR field office.)

I have made other changes to my MMP. Describe: 4 Year Update

Signature of Facility Owner: John Hall Date: 6-5-16

**VERIFICATION OF COUNTY RECEIPT:** I have received a complete copy of the annual MMP update.

County: Polk Signature: Jamie Fitzgerald MS Date: 6/8/16

County: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

County: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To be approved, the update must be submitted on this form, at least one of the boxes above must be checked, the form must be signed by the county and the facility owner, and the fees must be paid.

RECEIVED  
 16 JUN -8 AM 11:55  
 POLK CO. ADMIN BLDG  
 JAMIE FITZGERALD



# MMP Short Form for Annual Updates

Iowa law requires confinement feeding operations to submit updated manure management plans (MMPs) and fees on an annual basis. The update, which must be submitted on this form, may be submitted any time in the 45 days prior to the due date. If the update is not submitted to the appropriate DNR field office by the due date, a Notice of Violation will be issued. If a complete update, including fees, is not submitted by the end of the month in which it is due, the matter will be referred to our legal services section for enforcement action, including a \$3,000 penalty. The postmark is considered the submittal date for mailed updates.

### Instructions:

1. Fill in the facility information including name, ID number, location, and owner/contact information. Check the box(es) below that apply to your operation. Sign and date the form.
2. Make copies of this form for yourself, the appropriate county or counties, and the DNR field office.
3. Submit a copy of this form and the changes to the plan to the appropriate county or counties.
4. Submit a copy of this form [signed and dated by the facility owner and by the county representative(s)] to the appropriate DNR field office. You do not need to submit the changes to the DNR field office. Submit only this form.
5. Attach a copy of the compliance fee form (542-8064) along with a check made out to the DNR.

Facility Name: Mud Creek Feeders Facility ID #: 67869

Facility Address: 33674 720th Ave Collins IA 50055  
(Address) (City) (State) (Zip)

Location: NW  $\frac{1}{4}$  of the SW  $\frac{1}{4}$  of Sec 35 T 82N R 21W Collins Story  
( $\frac{1}{4}$   $\frac{1}{4}$ ) (%) (Section) (Tier & Range) (Township Name) (County)

Owner's Name: Mud Creek Feeders, LLC Phone Number: 515-559-3455

Mailing Address: 33674 720th Ave Collins IA 50055  
(Address) (City) (State) (Zip)

Contact Name: Brian Ritland Phone Number: 641-648-7300  
(if different than owner)

Mailing Address: 620 Country Club Rd Iowa Falls IA 50126  
(Address) (City) (State) (Zip)

Changes indicated below must be included in your current, on-site copy of the MMP (kept within 30 miles of the site). Prior to making changes in manure management practices, the on-site copy must be updated to show the proposed changes.

- I have made no changes to my MMP.
- I have made the following changes to my MMP:
- I have added acres.
  - I have changed my crop rotation or optimum yields.
  - My type of feeding system has changed.
  - I used a different method of application.
  - I am using a manure analysis for determining application rates when applying manure
  - I am electing to be a small animal feeding operation (SAFO)
    - The manure has been removed/applied effective \_\_\_\_\_ (date)
    - The animal unit capacity of my facility has changed to \_\_\_\_\_ (AUCs)
    - Compliance Fee Form (542-8064) to be submitted with original election (no check required)
  - The animal unit capacity of my facility has changed. (Contact your local DNR field office.)
  - I have made (other) changes to my MMP. Describe: \_\_\_\_\_

RECEIVED  
 16 JUN -9 AM 11:05  
 POLK CO. AUDITOR  
 JAMIE FITZGERALD

Signature of Facility Owner: [Signature] Date: 6-2-16

VERIFICATION OF COUNTY RECEIPT: I have received a complete copy of the annual MMP update.

County: Polk Signature: [Signature] Date: 6/9/16

County: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

County: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To be approved, the update must be submitted on this form, at least one of the boxes above must be checked, the form must be signed and dated by the county representative(s) and the facility owner, and the correct fees must be paid.

#24