# Staff Detail

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| **Completed by** |  | | | | | |
| **Date** |  | | | | | |
|  | | | | | | |
| **Position** | **Staff Name** | **Direct Supervisor** | **Hire Date (in current role)** | **FTE in MFIP Contract** | **Currently managing cases?** | **Total assigned cases** |
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| **Are any of the case managers listed above assigned a specific type of MFIP caseload? If so, please explain details of specialty caseloads.** *(for example: temporary/coverage, specialty, secondary, intake, activity specific)* |
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# Agency Policy and Procedure

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| **Beyond Hennepin County’s engagement expectations, does your agency specifically outline additional requirements for Employment Counselors to complete prior to sending a NOITS?**  *(for example: meeting with Program Manager or peer to complete case consultation, sending a particular template)* |
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| **In support of flexible service delivery, the Hennepin County Employment Services Manual (Chapter 5) recommends that agencies identify an approved list of community locations where Employment Counselors can safely and comfortably meet participants face to face in their community. What community locations does your agency recommend and/or use most frequently?** |
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Hennepin County requires that MFIP ESPs develop written policies and procedures on the agency level that contain the following information. These policies must be readily available to program staff to ensure Hennepin County residents receive consistent services within the agency. They must also be available to Hennepin County staff upon request.

These agency specific materials may be updated as needed by ESP leadership without county approval but must correspond with all relevant State and County requirements. If program monitoring indicates inconsistent or incorrect case management practices related to the following areas, the agency and may be required to update any contradictory or incorrect information it contains.

Review your current policies against the list of required content for each area below. If one of the items is missing, the policy needs to be edited prior to submitting this document. If the policy contains all required content, confirm this by selecting each checkbox. For each policy area listed, add the date your agency’s current policy was most recently developed or revised.

In addition, in 2025 we are requesting that as a part of your monitoring visit, you provide us with a copy of each of the below agency policies. Current versions of specified agency policies are required as part of the start of this contract cycle.

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| *By providing these dates and checking the boxes below, I am confirming that I have thoroughly reviewed the current versions of my agency’s policies and to the best of my understanding, they contain all required information. I will provide a copy of the current versions of my agency’s polices as a part of this year’s monitoring process.* | | | |
| **Completed By** |  | | |
| **Review Date** |  | | |
| **Effective date of current policy** | **Policy Area** | **Required Content** | |
|  | New Participant Enrollment |  | Timeline expectations around first attempts to contact, overview invitations, follow up steps after unsuccessful contact.  Staff roles around referral queue management, enrollment, intake, and overview processes. |
|  | Self-Employment Business Plans |  | Which agency staff are designated to approve business plans.  Which agency staff are designated to complete progress reviews.  Process for conducting business plan and progress reviews (timelines, expectations, involvement of participant etc.)  What resources are provided to participants to support business plan development (if different from those listed in DHS ES Manual 10.12) |
|  | Support Services |  | The process for approving participant requests, standard approval amounts by request type, and who is authorized to approve different categories of support.  The process for completing a payment according to the agency’s accounting procedures. (For example, check requests, authorization to use credit cards, use of stored value cards, etc.)  Any additional documentation requirements beyond those listed in Hennepin County’s Support Services policy.  Guidelines for issuance amounts of bus and gas cards.  The process for mailing support services according to Hennepin County policy. |
|  | Incentives |  | Specifically defined milestones/accomplishments/behavioral benchmarks that make a participant eligible to receive an incentive.  The amount to be given for achieving each of the steps.  Documentation and tracking requirements. |