MARSHALL PLACE

STAFF MEETING SUMMARY

Subject: Marshall Place Staff Meeting

Date: July 10th, 2025

Time: 10:30-12:30PM

- Safety/Health Review –
  - ☐ With summer months upon us we need to remember:
    - To apply sunscreen
    - To apply bug spray
    - To stay hydrated
- Nursing Inservice – NA
- Program policies (STAR) – Bed bath (assigned on STAR)
- Emergency Procedures – Severe weather: hail, thunderstorms, natural disasters, fire, flood.
  - ☐ July - Fire Drill- (JO) Bedroom #3 Smoke Detector (Cheryl Responsible)
  - ☐ MISSING: May: Fire Drill – Family room carbon/smoke detector (*Mary Kay responsible*)
    BLOCKED EXIT DRILL (patio door)

Meeting Review:

A. **July Calendar Reviewed** – Reminder to turn in requests off by the 10th of the month prior. Calendars will be released on the 15th of the month. After the 10th of the month, staff will be responsible for filling their own shifts. (see attached calendars)

B. ***Administration Memo*** – see attached

- Warren Fair:
  - Decorating the float Tuesday the 22nd 10:30amRiver Place Garage
  - Parade on Wednesday, the 23rd. Line up at 5pm parade starts at 6pm
- Warren Crazy Days: Thursday August 14th
  - Serving Root beer floats
- Expense Sheets – due by the 5th of every month.
- Reminder: Staff and Staff family must stay away from the homes when not working. (This means that you CANNOT stop by for any reason.) You all need to understand this is our commercial insurance company's policy. None of the staff except for administration have the approval to be at the homes at any given time. This is putting the group homes at huge risk of losing insurance. Effective immediately if you are at the house when you are not scheduled to work you will be written up and reported to insurance. If insurance states, you are a liability and not insurable you will not have a job. I do not know how else to make this clear.

- All concerns need to be taken to the supervisor. This is the job of the supervisor, and they cannot handle things if they are not brought to their attention. Please send these concerns in an SCOMM so that there is documentation and then the supervisor will contact you to discuss it further.
- We will be transferring all the medications back to the Warren Pharmacy. Please be patient with Kelsey and Cindy as they work with the pharmacy and give them time to get things set up. Bubble packets will be used, and they will put as many AM and PM meds in each bubble that they can to reduce the number of packets needed.
- Signs with your programs name will be put up at the end of the month outside of the homes to help assist in locating our homes for emergency personnel, delivery drivers and visitors.
- Staff cannot be paying for clients under any circumstances. If clients do not have funds available to them at the time of purchase, they cannot do the transaction. (Even if there are funds at home.) Clients CANNOT reimburse staff from their personal funds. These transactions end up having to come out of the office budget, and there is no room for them. Legally staff cannot purchase anything for the clients under any circumstances.
- MA/Medicare - Individual's will need to complete renewal paperwork every 6 months. This needs to be completed promptly so there is no lapse in coverage. If there is a lapse, the individual will lose benefits.
- Ring cameras will be installed at the point of entry doors.
- Nursing meeting was held with Henrietta, Kristal, Kelsey and Cindy as Henrietta would like to start stepping back towards retirement. Gena will start to train with Henrietta and eventually take over as the lead nursing staff.
- DHS Direct Care Support Grant – This will be dispersed in July. Kristal has entered all the increase of wages into payroll.
- Kristal will be sending out a Parade Memo for the Marshall Co Parade with times and dates to decorate the float, riding the float, taking down the float and serving root beer floats on Crazy Dayz in Warren. This is to celebrate the 50th Anniversary of MCGH!

C. **Behavior Plans/Data** – all clients have behavior plans in therap. These need to be charted on for AM& PM shifts daily. HS needs to chart if there is a behavioral incidence on their shift.
   - Every individual that is prescribed a psychotropic medication needs to have a behavior plan – these will be done in Therap. This data is vital for the consumers to continue getting the therapeutic value out of their psychotropic medication.
   - https://support.therapservices.net/simulators-th/Behavior-Data-Record-Data-Web-2024/ This link will be sent to all staff via Scomm to practice submitting behavior data. On.
   - Please chart behaviors that are under the behavior tab even if they seem to be their normal habits.

D. **GOALS NEED TO BE COMPLETED AND CHARTED ON**

E. House Concerns
   - Charting
     1. Bag numbers need to be charted

2. Case notes need to be done every day for every client. (Chart only what you complete)

- Cleaning
    1. If you use something up, please replace it and make note if you notice the supply is getting low.
    2. House should be straightened after the guys leave in the morning counters and table wiped off floors swept
    3. Check JO room and guys bathroom for urine in the morning
    4. JO and WD rooms are to be cleaned on the weekend on either Saturday or Sunday
        a. JO dust/ sweep/mop
        b. WD vacuum/dust if needed

- BS and AT are budgeting their money please be supportive of the budget they have set.
- Snacks are going to be personal serving sized so that the guys are getting a wider variety and portion-controlled snacks.
- AT has chosen to keep the PS5 in his room. Please support AT with this decision. Please support AT with any tough conversations that come up due to his decision to keep the PS5 in his room.
- Please fill in the menu with the main item, fruit and vegetable. (chicken, green beans, strawberries). Do this for all meals so that the same items do not get served over and over.
- Reminder to document in a T-Log (per Joann at May Mtg) if WD mask is on or off at nightly checks CPAP documentation should be: usage number, events number and for the seal if its a smiley face=good, sad face=bad Remind staff not to document no concerns for the overnight. Document quiet all night and if a client gets up that should be documented.
- Jack OT. It was decided that the time on the Nustep will be increased to 9 minutes. Arm exercises were there is a one pound weight on the counter for jack to use. He is to do 5-10 reps of bicep curls He is to do 5-10 reps of over the shoulder raises (start at chest and lift arm straight over the head) Jack will put a sticker on the day he has completed these exercises on the calendar on counter. He is to do these daily and is to be t-logged when he does them or if he does not do them.
- Please read the communication book when you come on shift.
- Do not use items marked or stated in communication book for AT lunch to make meals. These are items AT has picked specifically for his lunches at DAC.
- Please remember to offer WD and JO their cans of pop
- Until further notice, Alex is not able to eat in his room at all right now. He is struggling to keep it clean and we are going to have a bad bug problem soon. Staff need to stick to this and not allow this to happen. I have talked to him and so has Cheryl, and he is understanding of it right now. We also need to be better at encouraging him to vacuum once a week. His room was bad when he vacuumed as it had not been done in a very long time. We do not own that home and so we need to keep it clean. Not being able to eat in his room is a natural consequence of not being clean. Remind him that it is important to do if he wants to further his goal of living on his own. Please document in T-log when Alex does vacuum so that we can keep track as this is our way to help him earn his privileges back.

- Brandie needs to also vacuum his room. Please help remind him as well. T-Log when Brandie vacuums.
- The pantry needs to always remain locked when clients are home. Wayne has taken more food items recently due to it being unlocked. On Tuesdays, make sure snacks are set out for Alex after the other clients leave. Even if Alex does not want anything we need to set things out for him. They need to be put away before others get home.
- The silver Key on the key ring is for the cabinet in the garage.
- Brandie is stating that he is telling staff he does not want his Clearlax and it is getting charted on the MAR that it is given. We need to mark refused if he is not taking it. Please make sure you document this correctly. This is a med error if you are marking it given and it was not.
- Jack needs reminders when doing his laundry. Especially with taking off his sheets and washing them.
- When the guys are doing laundry make sure they are having full loads it is hard on the washer to wash just a few items at a time.
- Please also check to make sure that Jacks mattress is on the bed frame and not hanging drastically of the side of the bed.
- Shaving WD and JO. After you have Wayne shave please go back and spot shave where he missed. It is also staff responsibility to shave Jack daily. It is our job to make sure that these guys are looking their best please make sure they are getting shaved properly.
- IF YOU GIVE A STANDING ORDER PRN OR A REGULAR PRN YOU MUST DOCUMENT AND TLOG. REPORT TO ONCOMING STAFF.

Consumer reports:

WAYNE: WAYNE: weight 187 (down 4#)

APPTS: none

OUTINGS: church 2x, Library, Legion for lunch, Movie, shopping, home 4th weekend, H/C, DAC picnic in EGF, music in park, was in Argyle parade

BEHAVIOR/NORMAL:
-He has taken food from ODC
-He tried to take something from another prize basket at picnic,

Outcome (ISP): Weekly, Wayne will write a letter or send a card to his mother or sister on Fridays.

JACK: weight 170.5 (up 1#)
APPTS: Music therapy wed's, , 6/13 OT follow up – Nustep for 9 min and arm exercises
OUTINGS: church 2x, Library, Legion for lunch, Movie, H/C, DAC picnic in EGF, music in park, was in Argyle parade, 6/22 spent the night at Holly's (got some bday gifts)

BEHAVIOR/NORMAL:

- He did not want to do the arm exercises, but did not hesitate to do the Nustep, couple days he didn't do either
-He didn't like Wayne to be by him at picnic when talking to others.
-Threw glasses on floor because nobody was able to help to fix nose piece.
-He told Wayne to shut up one night from all his talking.

Outcome (ISP): Jack will work on an art project.

BRANDIE: weight 138.5 (up 3.5#)

APPTS: Alluma on Thursdays

OUTINGS: Legion for lunch, Library, Movie, DAC picnic in EGF, was in Argyle parade

BEHAVIOR/NORMAL:
- Hard to wake a couple of mornings from staying up to late.
-Took a toy snake and a shirt from Alex room.
-Does not want to go to church or music in park.
-Dug in the garbage for a squeaky toy that was long in dimension.
-He needs to vacuum every sat or sun and it needs to be t-logged.

Outcome (ISP): Brandie will budget his personal needs money monthly with DCC.

ALEX: weight 158.5 (down .5#)

APPTS: Jolee on Tuesdays

OUTINGS: Legion for lunch, Library, Movie, DAC picnic, was in argyle parade, went to his moms, spent time with brother Connor

BEHAVIOR/NORMAL:

-Not keeping his room clean, especially the floor.
-Not putting clean clothes away after washing them.
-he wants to shower in the mornings
-he needs to vacuum every sat or sun and that needs to be t-logged
Outcome (ISP): Monthly, Alex will budget his personal needs money monthly with DCC.
Weekly , Alex will choose a baking item to make or assist in planning and cooking a meal.

The next monthly staff meeting will be held Thursday, August 7th 2025 at 10:30a.

STAFF MEMBERS: meeting notes assigned to review this month due to illnesses amongst staff members

Name:		Position:	Name:		Position:
Kristal Walen	Present	CEO	Mary Kay Stinar	Phone	DCS
Kelsey Grandstrand	Present	CRSS	Holly Confer	Present	DCS
Henrietta Linder	Present	RN	Amanda Mock	EXC	DCS
JoAnn Saunders	Present	LPN	Madison Mock	Present	ONP
Cheryl Lubarski	Present	DCC	Maxine Mitchell	Present	DCS

Authorized By: Kelsey Grandstrand CRSS

Acknowledgement completed in STAR Services

Marshall County Group Homes, Inc.

POLICY AND PROCEDURE ON EMERGENCIES

I. PURPOSE

The purpose of this policy is to provide guidelines on preparing for, reporting, and responding to emergencies to ensure the safety and well-being of persons served.

II. POLICY

The company will be prepared to respond to emergencies as defined in MN Statutes, section 245D.02, subdivision 8, that occur while providing services, to protect the health and safety of and minimize risk of harm to the person(s) served. Staff will address all emergencies according to the specific procedure outlined in this policy and act immediately to ensure the safety of persons served. After the situation has been resolved and/or the person(s) involved are no longer in immediate danger, staff will complete the necessary documentation in order to comply with licensing requirements on reporting and to assist in developing preventative measures, if applicable. For incident response procedures, staff will refer to the *Policy and Procedure on Responding to and Reporting Incidents*.

All staff will be trained on this policy and the safe and appropriate response to and reporting of emergencies. Program sites will have contact information of a source of emergency medical care and transportation readily available for quick and easy access. In addition, a list of emergency phone numbers will be posted in a prominent location and emergency contact information for persons served at the facility including each person's representative, physician, and dentist.

III. PROCEDURE

Defining emergencies

A. Emergency is defined as any event that affects the ordinary daily operation of the program including, but not limited to:
   1. Fires.
   2. Severe weather.
   3. Natural disasters.
   4. Power failures.
   5. Emergency evacuation or moving to an emergency shelter.
   6. Temporary closure or relocation of the program to another facility or service site for more than 24 hours.
   7. Other events that threaten the immediate health and safety of persons served and that require calling "911."

Preparing for emergencies

A. To be prepared for emergencies, a staff person trained in first aid will be available on site in a community residential setting, and when required in a person's *Support Plan and*/or *Support Plan Addendum*, be able to provide cardiopulmonary resuscitation (CPR), whenever persons are present and staff are required to be at the site to provide direct services.

B. Each community residential setting will have first aid supplies stored in the medication cupboard available for use by, and that meet the needs, of persons served and staff. The first aid kit will contain, at a minimum, bandages, sterile compresses, scissors, an ice bag or cold pack, an oral or surface thermometer, mild liquid soap, adhesive tape.

C. Community residential setting facilities will have:
   1. A floor plan available that identifies the locations of:
      a. Fire extinguishers and audible or visual alarm systems
      b. Exits, primary and secondary evacuation routes, and accessible egress routes, if any
      c. An emergency shelter within the facility
   2. A site plan that identifies:
      a. Designated assembly points outside the facility
      b. Locations of fire hydrants

c. Routes of fire department access
3. An emergency escape plan for each resident.
4. A floor plan that identifies the location of enclosed exit stairs for facilities that have three (3) or more dwelling units.

D. Quarterly fire and severe weather drills will be conducted throughout the year on various days of the week and times of the day or night. Staff and persons served in the facility will not be notified prior to the drill, if possible, to ensure correct implementation of staff responsibilities for response. The manager or designee will be responsible for the initiation of the emergency drill and will record the date, day, and time of the drill in the emergency plan files.

E. As part of the emergency plan file kept at the facility site, the following information will be maintained:
1. The log of quarterly fire and severe weather drills.
2. The readily available emergency response plan.
3. Emergency contact information for persons served at the facility including each person's representative, physician, and dentist.
4. Information on the emergency shelter within the facility and the designated assembly points outside the facility.
5. Emergency phone numbers that are posted in a prominent location.

F. If persons served require the use of adaptive procedures or equipment to assist them with safe evacuation, staff will receive specific instruction on these procedures and equipment.

Responding to emergencies

A. Staff will call "911" based upon the emergency situation as provided in each individual response procedure as stated below.

B. **Fire**
1. Staff will respond immediately to all fire and smoke detector alarms or signs of fire by activating the alarms system.
2. All persons will be evacuated from the building by staff and assembled at the established designated assembly point outside the facility.
3. "911" will be immediately called from a neighbor's telephone or a cell phone in order to report the fire.
4. Staff will contain the area of the fire, if feasible, by closing doors. If it is possible to put out the fire with a fire extinguisher, staff will attempt to do so.
5. Staff will notify the manager or designee.
6. Persons served and individuals will not reenter the program site until the police or fire department issue instructions that the area is safe.
7. If the program site is not habitable and relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.

C. **Severe weather conditions and natural disasters**
1. At the first sign of severe weather, including but not limited to high winds, heavy snow or rain, or extreme temperatures, staff will confirm the location and safety of all persons served.
2. Staff will listen to the radio or watch television for current weather conditions.
3. Upon hearing sirens or a take cover warning, staff will notify all persons that they need to seek shelter and will guide all persons to the designated safe area in the facility and will also bring a battery-operated radio or television set, first aid kit, and flashlight.
4. If feasible, persons served but not scheduled for supervision will be called and warned.
5. Staff will assist all persons in staying in the safe area until an all clear is issued through the radio or by other means.
6. If an injury or damage occurs, staff will notify the manager or designee and follow directions given.
7. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the

procedures in Letter E of this **Responding to emergencies** section.

D. **Power failure (electricity outage or gas leak)**
   1. During a power failure, all staff will remain with persons served. If persons are not in the immediate area at the program, staff will locate them and bring them to the central program area.
   2. The power company will be contacted by cell phone to determine estimated length of the power outage. If estimated to last less than two hours, the manager or designee will be contacted to determine what actions will be taken. If the power outage is to last more than two hours, staff will transport the persons to a safe area or location as previously established by the manager.
   3. If gas is smelled or a gas leak is suspected, staff will evacuate persons to the established designated assembly point outside the facility.
   4. The gas company will be immediately notified and instructions followed.
   5. No one will be permitted to use lighters, matches, or any open flame during this time. All electrical and battery-operated appliances and machinery will be turned off until the all clear has been provided.
   7. The manager or designee will be notified of the gas leak. This call will be made by staff from the safe area using a cell phone or from a neighbor's phone.
   8. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.

E. **Emergency evacuation, moving to an emergency shelter, and temporary closure or relocation of the program to another facility or service site for more than 24 hours**
   1. Staff will ensure that everyone leaves the building and will assist all persons in gathering at the designated assembly point outside the facility.
   2. Staff will immediately notify the manager or designee of the conditions that may require emergency evacuation, moving to an emergency shelter, temporary closure, or the relocation of program to another site.
   3. The manager or designee will coordinate relocation of services in a way that promotes continuity of care of persons served.
   4. The manager or designee will coordinate and assist staff as necessary in transporting persons to the designated location.
   5. If access to the program site is permitted, staff will transfer persons' program files, clothing, necessary personal belongings, current medications, and medication administration records to the designated location.
   6. The manager will notify the legal representative or designated emergency contact, and case manager, and other licensed caregiver (if applicable) of the new location of the program if necessary.

F. **Other events that threaten the immediate health and safety of persons served and that require calling "911"**
   1. Pandemic event: Upon request, staff will cooperate with state and local government disaster planning agencies working to prepare for or react to emergencies presented by a pandemic outbreak.
   2. Bomb threat
      a. Upon receiving a bomb threat, staff at the program site should pull the fire alarm, if available.
      b. Staff will ensure that everyone leaves the building and assembles at the designated assembly point outside the facility.
      c. Staff will immediately call "911" from a neighbor's telephone or a cell phone.
      d. Staff and persons will remain outside the building until further instructions are received from the police or fire department.
      e. If unable to re-occupy the building, staff will follow the procedures in Letter E of this **Responding to emergencies** section.
   3. Repeated and unwanted or threatening phone calls
      a. Upon receiving repeated and unwanted or threatening phone calls, staff will hang up the phone immediately or encourage the person served to hang up the phone.
      b. Staff will lock all doors and windows.

c. Staff will monitor the frequency of disruptive phone calls, informing the manager when the calls continue to a point where the safety of persons served is in question or when the calls are personally threatening or environmentally threatening to a program site or property.
d. Staff will call "911" if at any point they feel threatened.
e. The manager will determine when and if the telephone number will be changed due to the harassing or threatening telephone calls.

Reporting emergencies

A. Staff will immediately notify the manager that an incident or emergency has occurred and follow direction issued to them and will document the incident or emergency on an *Incident and Emergency Report* any related program or health documentation. Each *Incident and Emergency Report* will contain the required information as stated in the *Policy and Procedure on Reviewing Incidents and Emergencies.*

B. If an incident resulted from the emergency situation, the manager will maintain information about and report incidents to the legal representative or designated emergency contact and case manager within 24 hours of an incident occurring while services are being provided, within 24 hours of discovery or receipt of information that an incident occurred, unless the company has reason to know that the incident has already been reported, or as otherwise directed in the person's *Support Plan* and/or *Support Plan Addendum.*

C. When the incident or emergency involves more than person served, the company and staff will not disclose personally identifiable information about any other person served when making the report to each person and/or legal representative and case manager unless the company has the consent of the person and/or legal representative.

D. If a serious injury or death were to occur as a result of the emergency situation, staff will follow the response and reporting procedures as stated in the *Policy and Procedures on Responding to and Reporting Incidents* and, if needed, the *Policy and Procedure on Death of a Person Served.*

Marshall July 2025

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
			1 JO camp	2 AT- dentist Halstad 2p	3 BS-Caylie 3p JO music Therapy 2p	4 4th holiday Library	5
Wk 2			12p-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	10.30a-9p-Cheryl 1p-?- Holly Shop (AT) 9p-9a- Holly JO pick up camp NO AT DAC	NO AT-DAC 1p-9p-(AM)Cheryl 9p-9a-MaryKay WD leave 4p-home	9a-2p-Madison 2p-9p-Marykay 9p-9a-(AM)Marykay WD gone home	Admin-Kristal 9a-12p-(AM)Marykay 12p-9p(AM) Cheryl 9p-9a-(AM) Cheryl WD gone home
	6	7	8	9 JO music Therapy 3p	10 Staff Mtg 10.30a	11 JO-OT 10am	12
Wk 1	Admin-Kristal 10a-11.15a-Cheryl 9a-8p-(AM) Holly 8p-9a-Madison WD come home	AT-DAC 12.15a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	12p-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	AT-DAC 1p-9p-Cheryl 9p-9a-(CL)Holly	AT-DAC 1p-9p-(AM)Cheryl 9p-9a-(AM)Madison	9a-12.15p-Madison 12.15p-5.15p-Cheryl 5p-9p-Holly 9p-9a-Holly	Admin-Kristal 9a-9p-Holly 9p-9a-Holly
	13	14 BS-10.30a Nupdahl BS-11a Jessica TRF	15	16 JO MusicTherapy 3p Shopping	17 BS-Caylie 3p JO massage 4.15	18 LIBRARY	19
Wk 2	Admin-Kristal 9a-8p-Holly 8p-9a-Madison 10a-11.30a-CL	AT-DAC 9.15a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	AT-Valerie 9.45am 9.30a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	AT-DAC 10.15a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Holly	AT-DAC 1p-9p-(AM)Cheryl 9p-9a-(MK)Madison Music in Park 6p	9a-1.30p-Holly 1.30p-6p-Madison 6p-9p-(AM)Holly 9p-9a-(AM)Holly	Admin-Kristal 9-12p-Madison 12p-9p-(AM)Cheryl 9p-9a-(AM) Cheryl
	20	21	22	23 JO MusicTherapy 3p Fair parade-GH 50th	24 BS-Caylie 3p Fair	25 Fair	26 Fair
Wk 1	Admin-Kristal 9a-2p-(AM)Holly 2p-8p-(AM)MaryKay 8p-9a-Madison	AT-DAC 12p-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	12p-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison	AT-DAC 12p-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-(CL)Holly Parade lineup is at 5pm	AT-DAC 1p-9p-(AM)Cheryl 9p-9a-(AM)Cheryl	9a-2.30p-Kelsey 2.30p-5p-(MM)Holly 5p-9p-Holly 9p-9a-Holly	Admin-Kristal 9a-9p-Holly 9p-9a-Holly
	27 Fair	28	29 Shopping	30	31 BS-Caylie 3p		
Wk 2	Admin-Kristal 9a-8p-Holly 8p-9a-Madison 9.45a-11.15- CL	AT-DAC 11a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a- Madison	9a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Madison JO mtg ODC 10am	AT-DAC 11a-1p-Cheryl DCC 1p-9p-Cheryl 9p-9a-Holly	AT-DAC 1p-9p-(AM)Cheryl 9p-9a-MaryKay		Marykay gone July 12-19

Marshall County
Group Homes, Inc.

Date: July 1, 2025

To: Marshall County Group Homes Direct Care Employees

From: Kristal Walen, CEO

Re: Differential Pay

Marshall County Group Homes, under the advisement of our accountants, has had to make a difficult decision and cut the differential pay effective with the August 22, 2025, Payroll (pay dates: 8/3/25-8/16/25). All current differential pay will no longer be paid out starting 8/3/2025.

This decision was not made easily. Currently with 2 open beds and the legislation proposing a cut to the daily rates for clients residing in the homes at a minimum of 4 percent, we are forced to make some financial decisions. As we are ablet to fill the beds, we will look at the possibility of bringing back differential pay again.

MCGH will pay the weekend differential of $2/hour between the hours of Friday at 4p through Sunday at 9p.

Please contact me with any questions.

Your support and understanding are appreciated. Thank you all for everything you do for MCGH.

Sincerely,

Kristal Walen, CEO

cc: Angie Sobolik & Jay Friedt, Accountants with Dahl, Hatton, Muir & Reece, LTD.
Marshall County Group Homes, Inc. Board of Directors.

805 Pacific Ave., P O Box D, Argyle MN 56703
Phone: 218-437-6695

Marshall Place Weekly Meal Calendar	Breakfast	Lunch	Supper
Sunday	Entrée: Fruit: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):
Monday	Entrée: Fruit: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):
Tuesday	Entrée: Fruit: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):
Wednesday	Entrée: Fruit: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):
Thursday	Entrée: Fruit: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):
Friday	Entrée: Fruit: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):
Saturday	Entrée: Fruit: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):	Entrée: Fruit: Vegetable: Side (Optional):