MINNETONKA INDEPENDENT SCHOOL DISTRICT #276
District Service Center
5621 County Road 101
Minnetonka, Minnesota

Minutes of March 4, 2021 Regular Board Meeting

The School Board of Minnetonka Independent School District #276 met in regular session at 7:00 p.m. on Thursday, March 4, 2021 in the Community Room at the District Service Center, 5621 County Road 101, Minnetonka, Minnesota. Chairperson Chris Vitale presided. Other Board members present were: Mark Ambrosen, Katie Becker, John Holcomb, Mike LeSage, Christine Ritchie, Lisa Wagner and Superintendent Dennis Peterson, ex officio. The meeting was also livestreamed on the District's YouTube channel.

Prior to the meeting, Board members recognized, via a video, the following groups and individuals: Scholastic Art and Writing Award Winners; DSC Honored Artists from MME and MMW; MMEA All-State Musicians (Band, Choir and Orchestra); Science Bowl State Qualifiers; the King's Singers New Music Prize Award Winner; the Miss Amazing Teen Queen Minnesota Award Winner; the International Literacy Association 30 Under 30 Award Winner; the National High School Baseball Coaches Association Hall of Fame Honoree; and the Certificate of Appreciation Honoree for the Restoration of Naval Artifacts.

Chairperson Vitale then called the meeting to order and asked that everyone stand and recite the Pledge of Allegiance to the Flag.

1. AGENDA

Wagner moved, Ambrosen seconded, that the School Board approve the agenda, as presented. Upon vote being taken thereon, the motion carried unanimously.

2. SCHOOL REPORT: MMW

MMW Principal Freya Schirmacher provided an update regarding the site-based implementation of School Board Goals 1, 2 and 3 at MMW and the successes and challenges of ensuring an excellent student experience while also adapting to the realities of COVID-19. The report specifically focused on the e-Learning and hybrid learning models and related instructional strategies in place at MMW. Principal Schirmacher also provided information and shared student experiences regarding student well-being, belonging, and personalization this year at MMW.

In the discussion that followed, Board member Holcomb asked for more information about the combined e-Learning model with MME as well as the process for students moving between learning models at the start of the next quarter. Board member Ritchie shared positive feedback regarding virtual parent-teacher conferences and asked about classroom changes required for the upcoming learning model shift. Board member Becker commended the MMW team on their efforts to incorporate Goal 2 in a virtual setting and thanked teachers for their efforts. Chairperson Vitale thanked Principal Schirmacher for incorporating so many student voices into the presentation.

3. **COMMUNITY COMMENTS**

Chairperson Vitale noted that this opportunity for comment was available to community members who wished to address the Board on any item on that night's agenda.

Minnetonka parent Heidi Calhoun-Lopez began to address the Board regarding a personnel concern. Chairperson Vitale told Ms. Calhoun-Lopez that personnel matters are not discussed at Board meetings, per the Community Comments guidelines.

4. **UPDATE ON SECONDARY LEARNING PLAN**

Dr. Peterson updated the Board on the plan to move all students in Grades 6-12 to in-person learning on March 15, if the parents agree to that placement. A survey of parents is underway to determine which students will be in school starting March 15 or be learning through streaming. Dr. Peterson shared preliminary student numbers with the Board, noting that some parents have not yet responded to the survey. He also noted that one change to the plan is for the Grades 6-8 teachers to have their planning days on March 12 and April 6, rather than March 11-12. Therefore, Grades 6-8 students will be in school on March 11 and not in school on April 6.

Ambrosen moved, LeSage seconded, that the Board approve the updated Secondary Learning Plan. In the discussion that followed, Board members asked questions regarding the change in planning dates, the vaccination schedule for teachers and other staff, and the delivery of activities and co-curricular offerings.

Upon vote being taken thereon, the motion carried unanimously.

5. **APPROVAL OF FY21 AMENDED BUDGET**

Executive Director of Finance and Operations Paul Bourgeois presented this item to the Board. He began by saying that the District continually monitors actual revenue and expenditures against budgeted amounts through the year, and typically makes mid-year budget adjustments to reflect any changes in revenue and expenditure projections that have materialized in the first 6-7 months of the year. For FY21, there have been more adjustments than usual due to the impact of the COVID-19 Pandemic on the cost of delivering instruction in a safe manner.

Mr. Bourgeois noted that the FY22 budget is in the process of development during the months of February through May for final approval in June prior to the start of FY2022 on July 1, 2021. As part of the FY2022 budget process, updated projections for FY2022 and subsequent years will be presented at that time.

The FY2021 Amended Budget projects the following amounts for the General Fund:

General Fund Revenues	*$139,631,456*
General Fund Expenditures	*$145,985,233*
Projected Revenues Over (Under) Expenditures	*$ (6,353,777)*
Net Change in Fund Balance	*$ (6,353,777)*
Projected Ending Unassigned Fund Balance	*$ 20,135,155*
Unassigned Fund Balance as Percent of Expenditures	*13.8%*
Net Change in Unassigned Fund Balance From FY20	*$ (6,365,199)*

Mr. Bourgeois then reviewed amended budgets for the following funds: Nutrition Services Fund, Community Education Fund, Capital Expenditures Fund, and the Building Construction Fund. He thanked members of his staff, particularly Bridget Merrill-Myhre, for their expert help on the budget in the past few months.

Wagner moved, Ritchie seconded, that the Board approve the following resolution:

Resolution to Approve Amended Budgets for Fiscal Year 2021

BE IT RESOLVED, that the School Board of Minnetonka Independent School District 276 does hereby approve amendments to the Fiscal Year 2021 Budget for all funds as presented in the District fund projections for Fiscal Year 2021 as of February 19, 2021, including General Fund Revenues of $139,631,456 and General Fund Expenditures of $145,985,233.

In the discussion that followed, Board Treasurer Lisa Wagner read the following statement from the District's Finance Advisory Committee:

To the School Board:

On behalf of the Citizens Finance Advisory Committee, we wish to commend the School Board and District administration for their long history of sound financial stewardship of taxpayer resources.

2020 required extraordinary flexibility and thoughtfulness how to safely, while still effectively, teach students. Teachers, paraprofessionals, staff, administrators and the Board successfully did so.

Possessing financial resources to implement change, including a dramatic increase in teacher and para FTEs, was a piece of that success.

The District's fund balances used to pay for 2020/2021's incremental demands exist because of smart financial decisions made over the past decade plus, including careful expense *management, shrewdly timed debt refinancings, open enrollment and an honest, conscientious message to 2015 levy voters asking for taxpayer support.*

The fund balance was accumulated for a rainy day. Enter 2020 and 2021.

A highly challenging situation would have been worse without a clear vision and careful execution of financial stewardship.

Warm thanks to all of you.

Best regards,

John Groton - Citizens Finance Advisory Committee Chair
Dierdre Keller - Citizens Finance Advisory Committee Vice-Chair

Board members thanked Mr. Bourgeois for his swift and successful work during the challenges of the past year.

Upon vote being taken on the foregoing resolution, the resolution carried unanimously.

6. **APPROVAL OF SELF-INSURANCE FUND RATES FOR FY22**

Executive Director of Finance and Operations Paul Bourgeois presented this item to the Board. He explained that the District has had a Self-Insurance Fund for health and dental insurance since Fiscal Year 2001 (FY2001). In the 19-year period since FY2002 after the fund established its reserve, average premium increases have been 3.51%, significantly below regional health insurance cost trends over that same time.

For FY21, the Health Insurance Plan through January is having a closer-to-normal year compared to FY20. Projections for June 30, 2021 indicate a potential cash-basis surplus estimated at $394,927.96, or 2.5% of projected expenses. This would follow on the FY20 cash-basis surplus of $2,837,639.11, or 23.3% of actual expenses, which was primarily the result of the onset of the COVID-19 Pandemic. It is important to note that medical premiums were increased 2.2% for FY21.

FY21 Medical Claims of $6,871,602.14 through January 2021 are running approximately level with FY20 Medical Claims of $6,853,242 through January 2020 (prior to the onset of the pandemic).

For FY21, the Dental Insurance Plan through January 31, 2021 is running at a projected break-even level on a cash basis after premiums were held flat with FY20 premiums. The dental plan had a cash-basis surplus in FY20 of $203,016.59, or 20.7% of actual expenses. The Dental Plan is projected to have an ending FY21 cash balance of $292,760.45, or 25.9% of expenses for the year.

Looking forward to FY22, for the Health Insurance Plan, applying medical trend rates of 7.5% as projected by the Segal Health Trend Cost Survey (a widely used projection by actuaries for developing health insurance premiums) to the FY21 District projection, and 3% historical inflation rates to administrative costs to the FY21 District projection results in total expected expenses for the Health Insurance Plan in FY22 of $16,158,553. This compares to the CBIZ Actuarial Calculation which used expenses of $16,066,679 for the 12 months of calendar 2019 (weighted at 20%) and $15,520,179 for the 12 months of calendar 2020 (weighted at 80%), to get a calculation of $15,629,479 for FY22.

CBIZ Actuaries have calculated that to have revenues equal expenses for the Health Insurance Plan in FY22, a premium decrease of (1.19%) would achieve that balance. However, they recommend to never reduce premiums in the health insurance world given that the long-term trend is for increasing costs. But they have communicated that a 0% increase in medical rates would be appropriate.

District calculations using the District alternative methodology of applying trend rates to the FY21 projection, (which uses actual expense projected out to year end based on prior month averages) does show that a 0% premium increase would generate an estimated $15,516,066 in revenue, which is essentially a breakeven level with numbers very close to the CBIZ Actuary estimates.

Given the unusual medical activity levels over the prior 12 months related to the pandemic, it is prudent to rely on the CBIZ Actuary projection in this instance. Given the fact that the Health Plan had an abnormally high surplus in FY20 due to the pandemic, and that it is projected to operate at a small surplus in FY21, there are sufficient resources available to cover a small revenue shortfall in FY22 should that materialize. This option would also be the best way to utilize some of the assets from the large FY20 surplus, by using small amounts at a time to hold down premium increases over time, which has the effect of funneling some of those funds back to the plan members while not setting up a large premium increase at a later date.

The following table of rates is being recommended by the Self-Insurance Advisory Committee for approval by the School Board, with the recommendation having been approved by the Self-Insurance Advisory Committee on a 13-0 vote at their meeting of February 22, 2021, as follows:

Base Plan Perform Network	FY21	FY22	Change
Employee	$727	$727	$0
Employee + 1	$1,235	$1,235	$0
Family	$1.735	$1.735	$0
VEBA HRA Plan Open Access	FY21	FY22	Change
Employee	$672	$672	$0
Employee + 1	$1,144	$1,144	$0
Family	$1,608	$1,608	$0
HD HSA Plan Open Access	FY21	FY22	Change
Employee	$605	$605	$0

Employee + 1	$1,028	$1,028	$0
Family	$1,446	$1,446	$0
Smart Care HD HSA Care Lane	FY21	FY22	Change
Employee	$547	$547	$0
Employee + 1	$929	$929	$0
Family	$1,306	$1,306	$0

Looking forward to FY22 for the Dental Insurance Plan, applying dental trend rates of 2.6% as projected by the Segal Health Trend Cost Survey (a widely used projection by actuaries for developing dental insurance premiums), and 3% historical inflation rates to administrative costs results in total expected expenses for the Dental Insurance Plan in FY22 of $1,158,746.82. District alternative projections indicate that a 2.6% rate increase would result in FY22 Dental Insurance Plan revenues equaling expenses. This would be an increase that would be rounded to $2 per month for both Employee and Family monthly premiums.

CBIZ Actuaries have calculated that to have revenues equal expenses for the Health Insurance Plan in FY22, a premium increase of 0.98% would achieve that balance. This would be an increase rounded to $1 per month for both Employee and Family Premiums.

The Self-Insurance Advisory Committee had discussion about the proposed $1 per month dental premium increase, taking into consideration state of the overall balance of the Self-Insurance Fund and the cash-balance of the Dental Insurance Plan. Projections by the District show that for FY22, if rates were held flat in the Dental Fund, the Dental Insurance Plan would use a projected $26,154.35, leaving the ending FY22 cash balance at $266,606.10, or 23.0% of projected expenses.

Given that the Dental Insurance Plan is projected to have a sturdy cash balance at the end of FY21 even if dental premiums are not increased, after discussion the Self-Insurance Advisory Committee voted by a unanimous vote of 13-0 to recommend to the School Board that Dental Premiums stay at the current rates for FY22.

Suggested Dental Insurance Plan premiums for FY22 are as follows:

Dental Plan	FY21	FY22	Change
Employee	$43	$43	$0
Family	$106	$106	$0

Health and Dental Insurance premium rates for FY22 need to be set at the March 4, 2021 meeting so that they can be communicated to employees and plan members 90 days before they become effective, as required by the Affordable Care Act.

It is recommended that the School Board set the Health Insurance premium rates and Dental Insurance premium rates for fiscal year 2022 at the same level as fiscal year 2021.

LeSage moved, Ritchie seconded, that the Board approve the following resolution:

BE IT RESOLVED, that the School Board of Minnetonka Independent School District 276 does hereby set Health Insurance Premium rates and Dental Insurance Premium rates for the Self-Insurance Trust Fund for fiscal year 2022 at the same level as fiscal year 2021.

Upon vote being taken thereon, the motion carried unanimously.

7. **APPROVAL OF SELF-INSURANCE PLAN THIRD PARTY ADMINISTRATOR**

Mr. Bourgeois presented this item to the Board. He explained that the Self-Insurance Fund is required by Minnesota statute to request proposals for Third-Party Administrator (TPA) services every two years, or after three years with the approval of the largest bargaining unit.

It is important to note that requesting proposals for Third Party Administrator services is a solicitation for professional services, rather than asking for bids on an identical product. With a bid process, the bid solicitor is required to take the low bid meeting specifications. With a request for professional services, each professional organization's service is considered a unique product, so the solicitor may select the service provider based on the whole of factors considered, and not just the price quoted.

Third Party Administrator Services make up a very small part of the overall expenses of the Self Insurance Fund, typically accounting for less than 1% of annual expenses. TPA fees are one component of the analysis but are actually the smallest component.

In addition to administering claims, the Self-Insurance Fund will typically overlay its plan onto existing networks of the Third-Party Administrator, so the networks available to accommodate the Self-Insurance Fund's Plans are a very critical component to the overall evaluation process in selecting a Third-Party Administrator.

Another important factor is discount levels for services. Third Party Administrators can provide deeper discounts to for claims at health facilities owned by the Third-Party Administrator. Accordingly, employee choice in selection of primary care facilities and hospital care facilities are very important because the deeper discounts at Third Party Administrator-owned facilities will result in the lowest overall cost of care to the Self Insurance Fund. Inherent within this component is the analysis of provider disruption to members.

Before discussing an analysis of the proposals, it is important to discuss a bit of history of the plan.

Prior to FY13, most of the plan members were enrolled in the Base Plan, which had open access to all providers. This plan was a very good plan for the member, but it is also the most expensive plan. A relative few were enrolled in the VEBA-HRA plan with a high deductible. In FY13 there was a spike in high-dollar-claims (such as cancers). This necessitated a mid-year 15% premium increase to ensure the fund had a positive Unassigned Fund Balance at the end of the year.

After that year, many changes have been recommended to the Self-Insurance Committee and enacted by the School Board that made the VEBA-HRA plan more attractive to members and added two HSA high-deductible plan options. Included in those changes were one that made the Base Plan no longer open access by moving Mayo Clinic and Hazelden Clinic out of the Base Plan network.

The various changes have moved enrollment to 55% in the VEBA-HRA and HSA plans, and 45% remaining in the Base Plan. As the Base Plan typically has a loss ratio at-or-above 100% of the premium contributions of the members choosing the base plan, and the VEBA-HRA and HSA plans typically have a loss ratio low enough to cover their costs, cover the plan administrative costs, and cover any Base Plan expenses over a 100% Base Plan loss ratio, the fund has been very stable.

Continuing to make the VEBA-HRA and HSA plans more attractive to District employees by having lower premium and open access compared to the Base Plan is a critical component of the future financial success of the Self-Insurance Fund. The variety of plan offerings enable it to continue forward with average premium increases in the 3.5% range as has been its history because it incents staff to move to the lower cost plans over time.

In Minnesota, there are five entities that make up the Third-Party Administrator Market:

Blue Cross Blue Shield of Minnesota
HealthPartners
Medica
Preferred One
United Healthcare

Of these providers, all but United Healthcare have served for periods of time as the Third-Party Administrator for the Self-Insurance Fund, with HealthPartners being the current TPA provider.

Quote packets were received from Blue Cross Blue Shield of Minnesota, Health Partners, and United Health Care.

The District works with CBIZ Consulting as advisors to the Self Insurance Fund and for all other insurance work such as long-term disability and group life insurance. CBIZ assisted the District with the analysis of the three proposals.

A summary of the results of the three key factors for the proposals is as follows:

<u>Estimated Fee Proposal</u>

- United Healthcare proposed the lowest fees of the three, with an estimate of $34,033 per year.
- Blue Cross Blue Shield proposed a fee with an estimate of $59,431 per year

- HealthPartners proposed a fee estimated at $118,862 per year.

Overlaying Current Plan Offerings on Proposed TPA Networks

- United Health Care's proposal would place the restricted-access Base Plan, open access VEBA-HRA and open access HSA into the UHC Open Access network - it would move the high-cost Base Plan into open access, which would disincentivize the use of VEBA-HRA plan and HSA Plans
    - The lowest cost limited primary care access network (Core ACO) for the $3,000 limited primary care access HSA is competitive in terms of locations (3)
- Blue Cross Blue Shields's proposal would place the restricted-access Base Plan, open access VEBA-HRA and open access HSA into the BCBS Aware Open Access network - it would move the high-cost Base Plan into open access, which would disincentivize the use of VEBA-HRA plans and HSA Plans
    - The lowest cost limited primary care access network (High Value Network) for the $3,000 limited primary care access HSA is competitive in terms of locations (6)
- Health Partners' proposal would keep all plans in their current categories regarding open access, with the Base Plan continuing as restricted access and the VEBA-HRA plan and HSA plans continuing as open access – this would allow for continuing the incentivizing of movement to the lower cost plan to increase those percentages above 55% over time
    - The lowest cost limited primary care access network (SmartCare) for the $3,000 limited primary care access HSA is competitive in terms of locations (4)

Service Discounts

- As previously stated, Third Party Administrators will offer deeper discounts on health care prices for claims that come through the facilities that they own. These can run in the high-six-figure range and possibly more during the year. The largest provider of primary care and additional care to members of the Self Insurance Fund, out of 42 total providers used by plan members over the last 18 months, is Park Nicollet, which handles 52% of all claims of the Self Insurance Fund.
    - The next largest provider is Ridgeview Clinics, which handles 10% of all claims
    - The remaining 38% of claims are divided among the remaining 40 providers
- Health Partners owns Park Nicollet facilities. Health Partners gives discounts on claims of services from Park Nicollet facilities, which typically are running $125,000-$135,000 per year. These discounts, termed Shared Savings by HealthPartners, are greater than the total amount of Third-Party Administrator fees charged by HealthPartners, in effect resulting in the Self-Insurance Fund receiving Third Party Administrator Services from HealthPartners at no cost.to the fund after each factor is considered.

After analyzing all the factors, the Self-Insurance Advisory Committee on a vote of 13-0 is recommending to the School Board that the School Board retain HealthPartners as the Third-Party Administrator for the Self-Insurance Fund for fiscal years 2022 and 2023.

Ambrosen moved, Becker seconded, that the Board approve the following motion:

BE IT RESOLVED, that the School Board of Minnetonka Independent School District 276 does hereby approve HealthPartners as the Third-Party Administrator for the Self-Insurance Fund for fiscal years 2022 and 2023.

Upon vote being taken thereon, the motion carried unanimously.

8. **APPROVAL OF SALE OF 2021B CERTIFICATES OF PARTICIPATION REFUNDING BONDS**

Mr. Bourgeois presented this item to the Board. By way of background, he noted that on January 7, 2021, the Board had approved the purchase of the building at 19685 Highway 7 in Shorewood and conversion of that building into an educational facility to house the Transition to Adult Program. The purchase of that building for $1,700,000 and conversion at a cost of $500,000 will require the issuance of the $2,200,000 2021C Certificates of Participation. It is financially advantageous for the approximately $138,900 estimated annual 2021C payments to be paid for out of Operating Capital funds, because that will in turn free up approximately $131,632 in General Fund revenues to be used to cover other costs in the General Fund.

In order to make the 2021C payments out of Operating Capital, it is necessary to refund and restructure the 2013A Certificates of Participation that were issued to fund the construction of the Excelsior Elementary School multipurpose room and kitchen addition. The estimate of the refunding transaction calculated by the District financial advisory R. W. Baird is that the 2013A COP Bond refunding transaction will result in annual payments being lowered from an average of approximately $243,095 down to an average of approximately $151,539 for the new 2021B COP Refunding Bonds, or a reduction of approximately $89,556. This is sufficient to be able to layer the 2021C COP payments into the annual Operating Capital Budget. In addition, the transaction will lower the interest rate from the current 2.97% down to an estimated 2.17% and produce a modest net present value of savings estimated at $7,072.63.

The School Board authorized the sale of the 2021B COP Refunding Bonds on February 4, 2021. The 2021B COP Bonds were sold on Wednesday, February 10, 2021. There was significant interest in the COP Bonds from the market, with subscriptions for the bonds in excess of 100% of the bonds being offered. The bonds were sold at a total interest cost of 2.21% with a net present value savings of $24,023.36, while reducing annual payments by an average of $88,402.34.

The resolution approving the sale of the 2021B COP Refunding Bonds was prepared by the District's bond counsel, Dorsey & Whitney, LLP. Mr. Bourgeois recommended that the Board approve the resolution.

Holcomb moved, Wagner seconded, that the Board approve the resolution as presented. Upon vote being taken thereon, the motion carried unanimously.

9. CONSENT AGENDA

Wagner, moved, Becker seconded, that the School Board approve the following recommendations included within the following Consent Agenda items:

- Minutes of February 4, 2021 Regular Meeting and February 18, 2021 Closed Session
- Study Session Summary of February 18, 2021
- Payment of Bills – in the sum of $13,103,230.17.
- Recommended Personnel Items – carry-in item as shown in Addendum A.
- Gifts and Donations for February 2021: $5,000.00 from the MHS Soccer Booster Club to be placed in the MHS Upper Field South Turf Account. $200.00 from the Minnetonka Skipper Booster Club to be placed in the MHS Bunny Besties Service Club Account. $4,267.46 from the Skipperettes Booster Club to be placed in the MHS Assistant Coach Stipend Fund. $400.00 from the Skipperettes Booster Club to be placed in the MHS Student Clubs. $100.00 from Parent Booster USA, Inc. to be placed in the MHS Orchestra Boosters Club. $400.00 from the Blackbaud Giving Fund to be placed in the MHS Student Needs Fund. $18.00 from the Blackbaud Giving Fund to be placed in the MMW Principal Discretionary Fund. $1,350.00 from the Blackbaud Giving Fund to be placed in the Deephaven Elementary Student Need Fund. $100.00 from the Blackbaud Giving Fund to be placed in the Excelsior Elementary School Principal Discretionary Fund. $14.00 from the Blackbaud Giving Fund to be placed in the Groveland Elementary School Principal Discretionary Fund. $105.00 from the Blackbaud Giving Fund, $367.94 from the Benevity Fund, and $500.00 from Kowalski's Market; all to be placed in the Minnewashta Elementary School Principal Discretionary Fund. $50.00 from Anonymous to be placed in the Scenic Heights Elementary School Principal Discretionary Fund. $75.00 from Apple Automatic to be placed in the MCEC General Scholarship Fund. Total Gifts and Donations thus far for 2020-21: $138,319.74.
- Electronic Fund Transfers - as shown in Addendum B.
- Approval of Underground Easement for CenterPoint Energy at MCEC
- Approval of UNUM Insurance Proposal for Ancillary Insurance for Employees in FY22 and FY23

Upon vote being taken on the foregoing Consent Agenda items, the motion carried unanimously.

10. BOARD REPORTS

There were no Board reports this evening.

11. **SUPERINTENDENT'S REPORT**

Dr. Peterson spoke about the elementary in-person learning model and shared that it has been going well in the past five weeks. The middle school and high school hybrid models have also been going well.

12. **ANNOUNCEMENTS**

Chairperson Vitale read the following statement on behalf of the Board:

This past week, the School Board received several emails from parents, students and community members, many referencing School Board Goal #2: Excellence and Belonging - Diversity. Equity. Inclusion., and most of which asked the Board to intervene and address an issue involving the middle school morning show.

On behalf of the Board, I would like to express our deep appreciation to everyone who reached out to us, and, in particular, to the students who did so.

Let me say emphatically that the School Board is unwavering in its support of our teachers, staff and school leaders and the important work they are all doing. We are also unwavering in our pursuit of excellence for all. We believe the work of Goal #2 is critical. It may take time and energy to accomplish all aspects of it in a meaningful way, but we are pleased with the District's progress thus far, this year.

Regarding the recent issue involving the middle school morning show, it is not our place to manage day-to-day operations, issues or situations or to manage personnel matters. That is the role of District administrators, including our principals. They have our full support in running their buildings without interference from the Board. The role of the Board is to set the District goals for the year and to oversee the Superintendent in accomplishing those goals and in managing the operations of the District.

That does not mean we do not care or that we do not want to hear from you. Again, thank you for connecting.

As we look ahead, I think we all know there will be times where we as a community do not all agree. There will be times when things do not move as quickly as some in our community may want things to move—or when things move faster than some in our community want things to happen.

We are evolving together as a school community, and as we do this, let's do our best to honor everyone's journey, to move forward together, to assume positive intent, to open our minds to others' perspectives ... to listen and learn from each other. The Board is committed to this, and we hope that each person hearing this will commit to it, as well. Together, we are Minnetonka. Thank you.

13. **ADJOURNMENT**

Wagner moved, Ambrosen seconded, adjournment at 8:50 p.m. Upon vote being taken thereon, the motion carried unanimously.

John P. Holcomb

John Holcomb, Clerk