

CITY OF MINNEAPOLIS

# Health Department

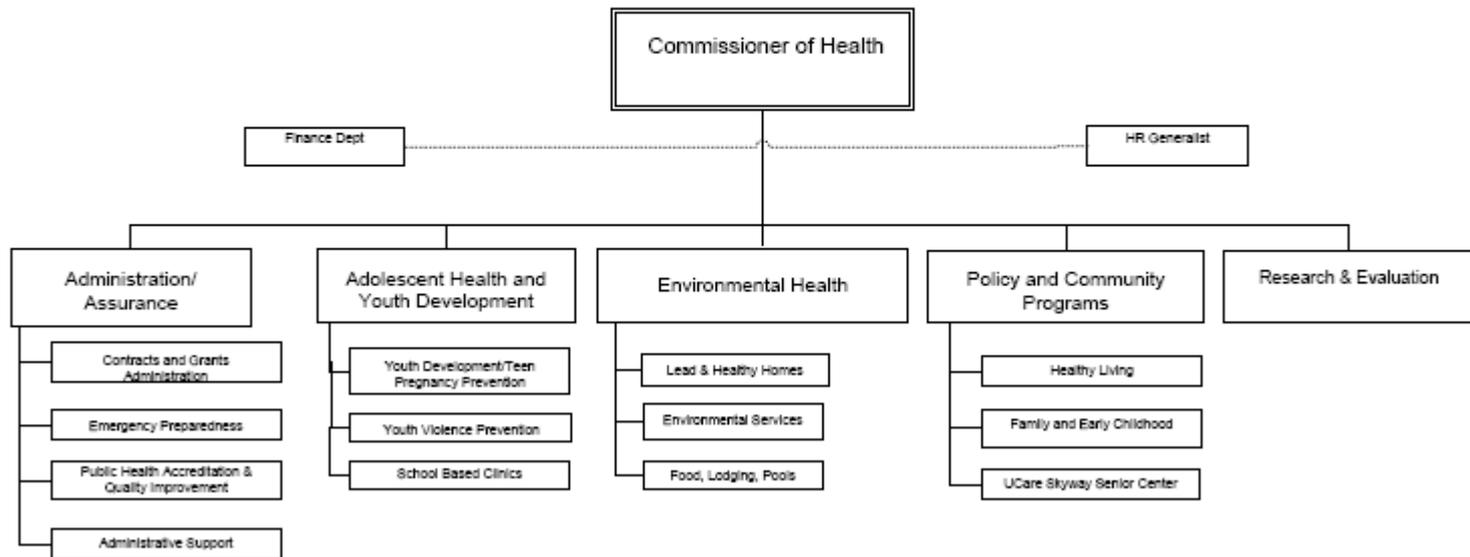
2016 Mayor recommended budget

September 18, 2015

Budget Book Pages F151-F162

# Department Organizational Chart

Minneapolis Health Department  
Organizational Chart – May 2015



# Budget Summary

| Program name                        | 2015 adopted |                  | 2016 recommended funding |                  | Enhancements (new dollars) |                  | FTEs    |            | Select type of funding |
|-------------------------------------|--------------|------------------|--------------------------|------------------|----------------------------|------------------|---------|------------|------------------------|
|                                     | General fund | Non-general fund | General fund             | Non-general fund | General fund               | Non-general fund | Current | Additional | One time               |
| Family & Early Childhood            | \$481,930    | \$2,781,492      | \$511,930                | \$2,385,348      | \$30,000                   |                  | 2.55    |            | No                     |
| School Based Clinics                | \$275,184    | \$2,596,985      | \$287,015                | \$2,681,363      |                            |                  | 23.38   |            |                        |
| Youth Development                   | \$425,914    | \$968,464        | \$609,034                | \$1,033,194      | \$75,000<br>\$50,000       |                  | .9      |            | No<br>Yes              |
| Youth Violence Prevention           | \$223,062    | \$434,666        | \$244,603                | \$628,322        | \$25,000                   |                  | 3.55    |            | Yes                    |
| Healthy Living                      | \$72,000     | \$843,209        | \$0                      | \$1,371,972      |                            |                  | 8.63    |            |                        |
| Lead Hazard Control & Healthy Homes | \$440,414    | \$882,434        | \$580,673                | \$1,255,906      | \$40,000<br>\$114,000      |                  | 9.0     | -<br>1.0   | No<br>Yes              |
|                                     |              |                  |                          |                  |                            |                  |         |            |                        |

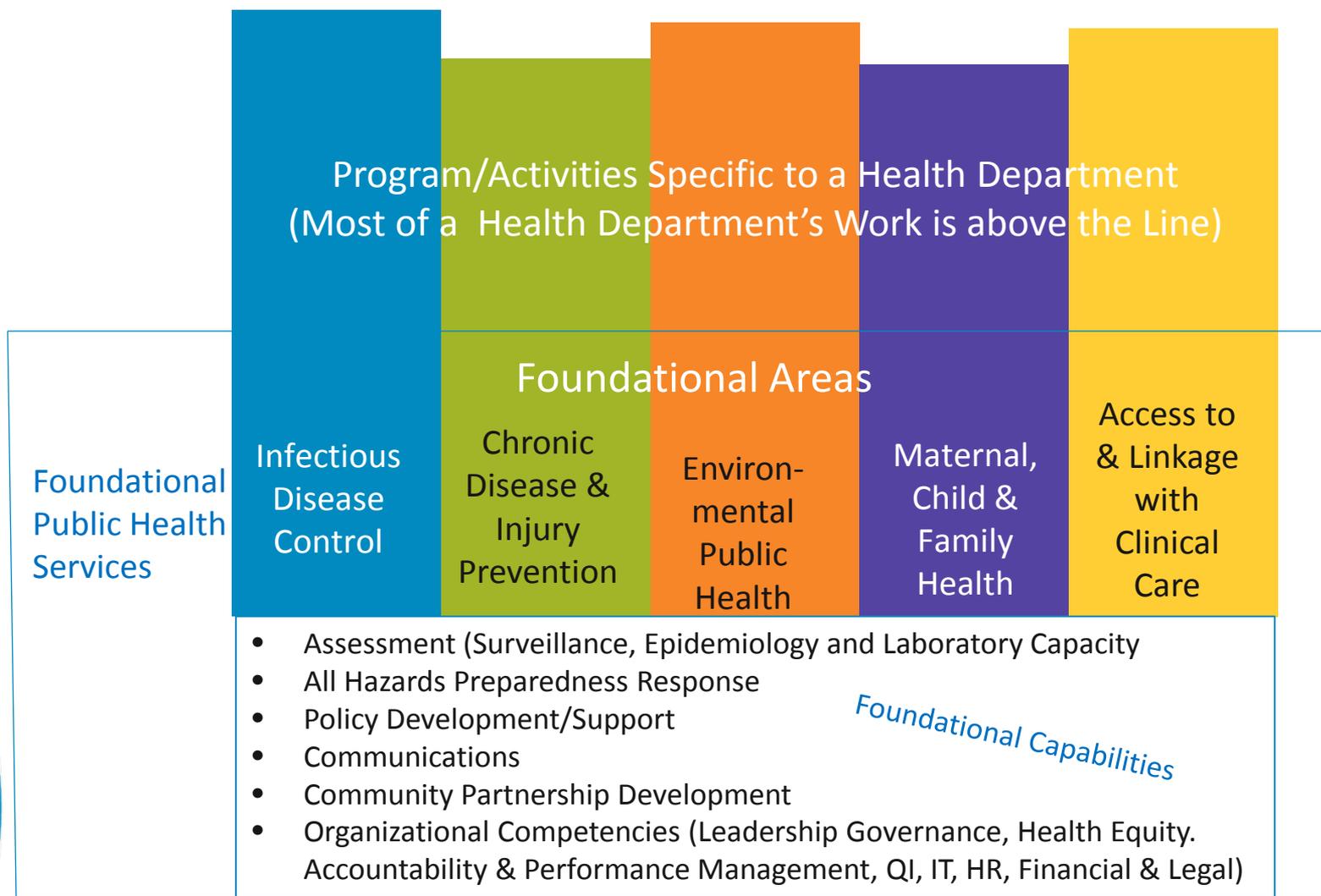
# Budget Summary

| Program name                                | 2015 adopted       |                     | 2016 recommended funding |                     | Enhancements (new dollars) |                  | FTEs        |             | Select type of funding |
|---|--------------------|---------------------|--------------------------|---------------------|----------------------------|------------------|-------------|-------------|------------------------|
|   | General fund       | Non-general fund    | General fund             | Non-general fund    | General fund               | Non-general fund | Current     | Additional  | One time               |
| Food Lodging & Pools                        | \$2,443,223        | \$0                 | \$2,655,306              | \$0                 | \$135,000                  |                  | 22.0        | 1.0         | No                     |
| Environmental Services                      | \$1,530,627        | \$0                 | \$1,374,913              | \$0                 | \$109,000                  |                  | 10.5        | .25         | No                     |
| Seniors                                     | \$70,000           | \$201,256           | \$82,500                 | \$187,800           |                            |                  | 1.0         |             | No                     |
| Emergency Preparedness & Infectious Disease | \$37,700           | \$465,268           | \$38,419                 | \$453,073           |                            |                  | 2.7         |             |                        |
| Core Public Health Infrastructure           | \$2,438,728        | \$923,857           | \$2,466,950              | \$1,088,321         |                            |                  | 15.09       |             |                        |
| <b>Total</b>                                | <b>\$8,438,782</b> | <b>\$10,097,631</b> | <b>\$8,851,343</b>       | <b>\$11,085,299</b> | <b>\$578,000</b>           |                  | <b>99.3</b> | <b>2.25</b> |                        |



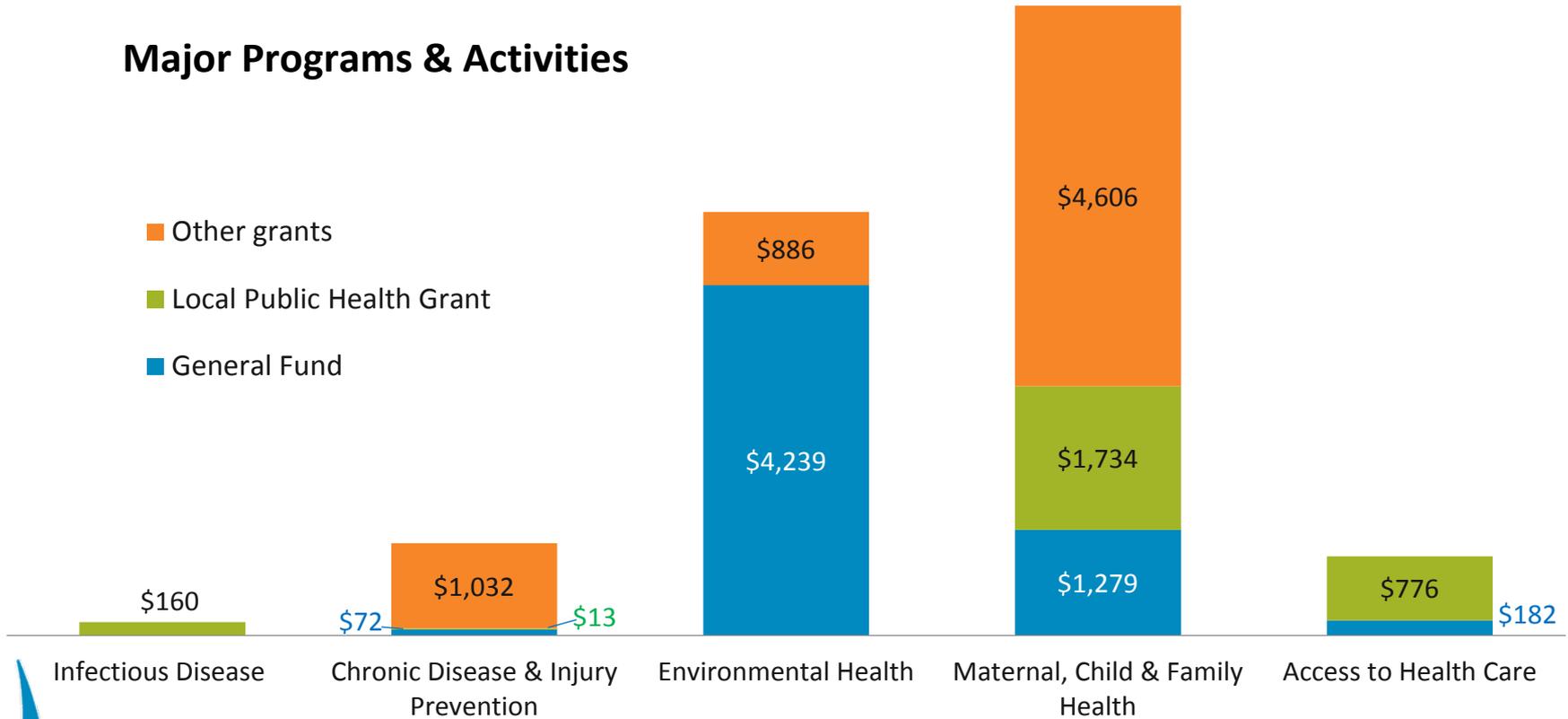
# Foundational Public Health Services

A new national model for local public health funding

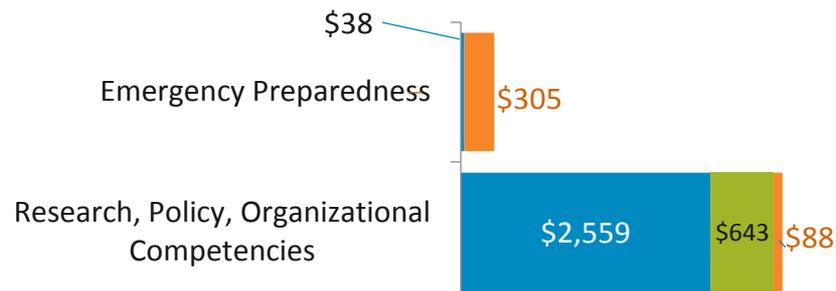


# Funding for Public Health Services, 2015 (in \$ Thousands)

## Major Programs & Activities



## Foundational Capabilities



# Core Programs



# Family and Early Childhood

## Purpose and Context

**The Department's investments in fostering a Healthy Start to Life and Learning include:**

**Maternal and Child Health home visiting programs** (including Healthy Start) promotes healthy birth outcomes, positive parent-child interaction, child growth and development, family self-sufficiency, nutrition education, family planning, and connection to early childhood education.

**Promoting school-ready children** focuses on early childhood screening programs, increasing school readiness by partnering with Way to Grow and Minneapolis Public Schools; and the Teen Hope project (formerly MFIP Innovations pilot), serving pregnant and parenting teens on MFIP with project goals of academic achievement.

**Funding safety net services** for parents and children such as WIC, children's dental care, STI prevention, and immunizations, culturally specific prenatal and postpartum support and education.

## Services Provided

- 16,484 evidence based home visits were provided to 3,443 families in 2014.
- From Sept. 2014 – Jan. 2015, 260 Healthy Start families received intensive case management to improve perinatal health outcomes and reduce disparities in infant mortality.
- 1,272 Minneapolis 3-year-old children were screened in 2014; 1,332 children under age 3 years were referred to early intervention at Minneapolis Public Schools.
- School readiness support provided to 590 families with children through age 6.
- Dental services to 675 uninsured, low income children.
- Case management support for 150 teen parents.
- Preventative outreach and health education and Sexually Transmitted screening for 750 young males ages 15-26.
- Active participation in Cradle to K, County, State and Federal maternal and child health committees.

# Family and Early Childhood

| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$481,930           | \$2,781,492      | \$511,930                | \$2,385,348      | 2.55    | No                   |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
|             | X               |                                     |              |                   |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           |                 | X                                   |              |                   |        |

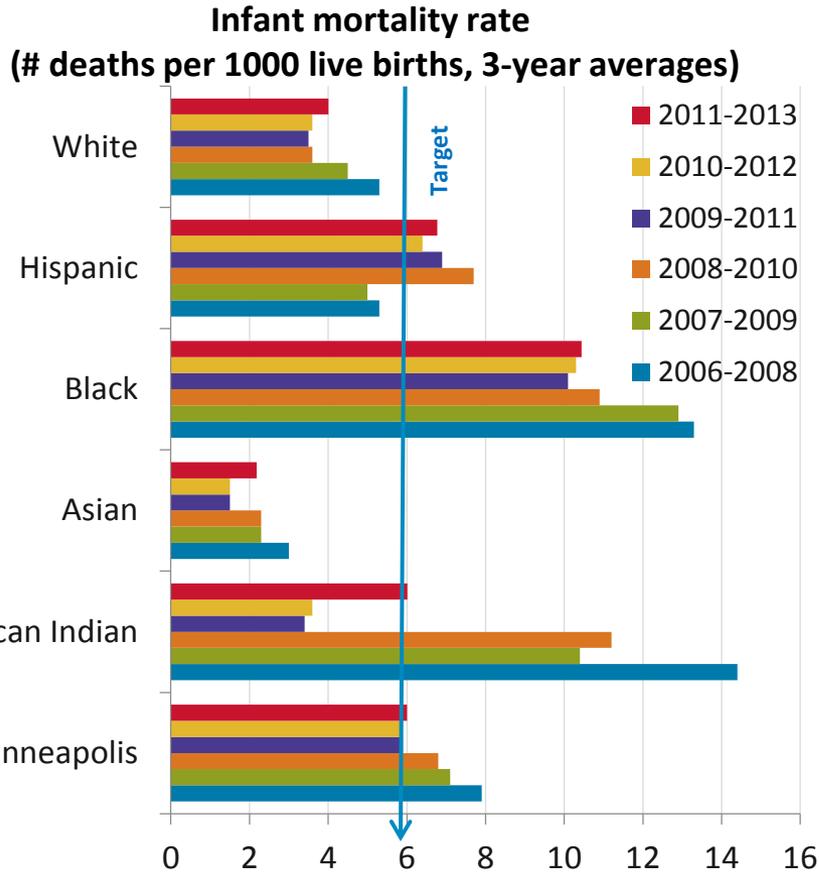
# Family and Early Childhood enhancements

## Mayor's Recommendations:

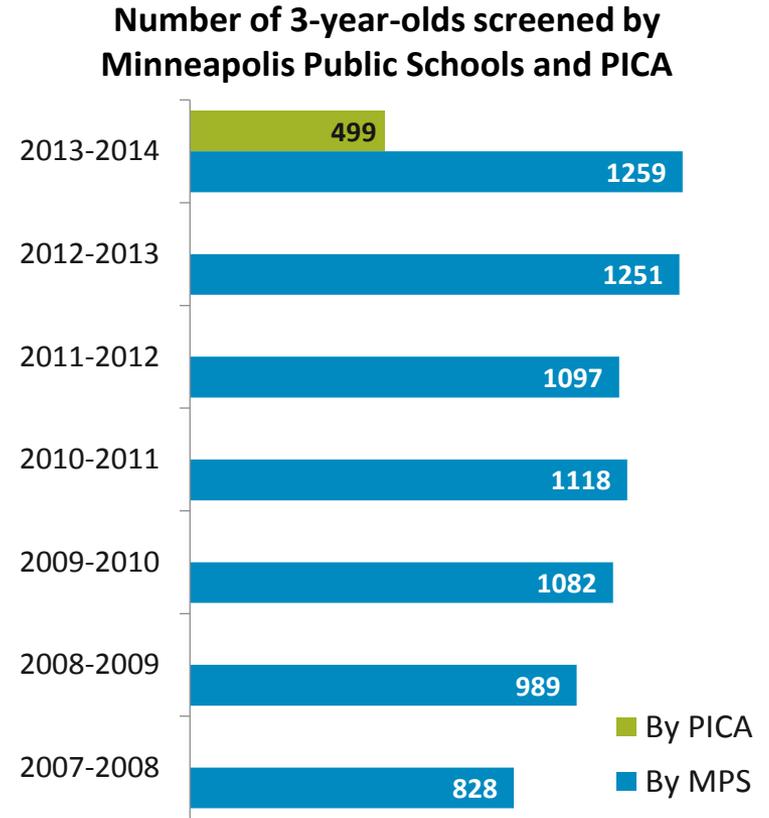
- **\$30,000 on-going** funding to invest in Cradle-to-K to expand targeted home visiting services  
**Rationale:** a recommendation of the Cradle to K Cabinet Plan Goal 1: “All Children 0 to 3 will receive a healthy start rich with early experiences that will prepare them for successful early education and literacy”.



# Family and Early Childhood



The 2020 Healthy People Infant Mortality objective is 6.0. Data for 2011-13 may contain errors in categorizations by race.



An estimated 5,177 children age 3 years of age reside in the City each year based on the 2010 U.S. Census.

# School Based Clinics

## **Purpose and Context**

Minneapolis school based clinics (SBCs) provide preventive and primary medical and behavior health services to students at 7 Minneapolis Public High schools. During the 2013-2014 school year, 2,304 students generated 11,806 patient visits. According to a 2008 report from the National Vaccine Advisory Committee, many adolescents do not receive the recommended immunizations or preventive care required. This is especially true for youth of color who experience health disparities (such as teen pregnancy, asthma, obesity) at higher rates. SBCs provide convenient, youth-friendly services in a familiar environment. SBC services are available to all students, with a focus on those who are uninsured and underinsured.

## **Services Provided**

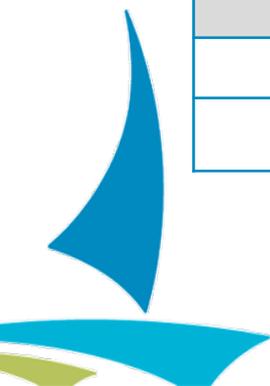
- Physical health, including acute care, physical exams, immunizations, reproductive health, and nutrition.
- Mental health, including screening, diagnostic assessments, and counseling.
- Health promotion and education services.

Particular attention is paid to mental and reproductive health because of their critical importance during adolescent development. Signed parental consent forms are required before most services can be provided. Minor consent can be sufficient for certain confidential services. SBC staff work cooperatively with school nurses, coaches, counselors, teachers, and school principals and their staff members to assure that the clinics are an integral part of the life of the school.

# School Based Clinics

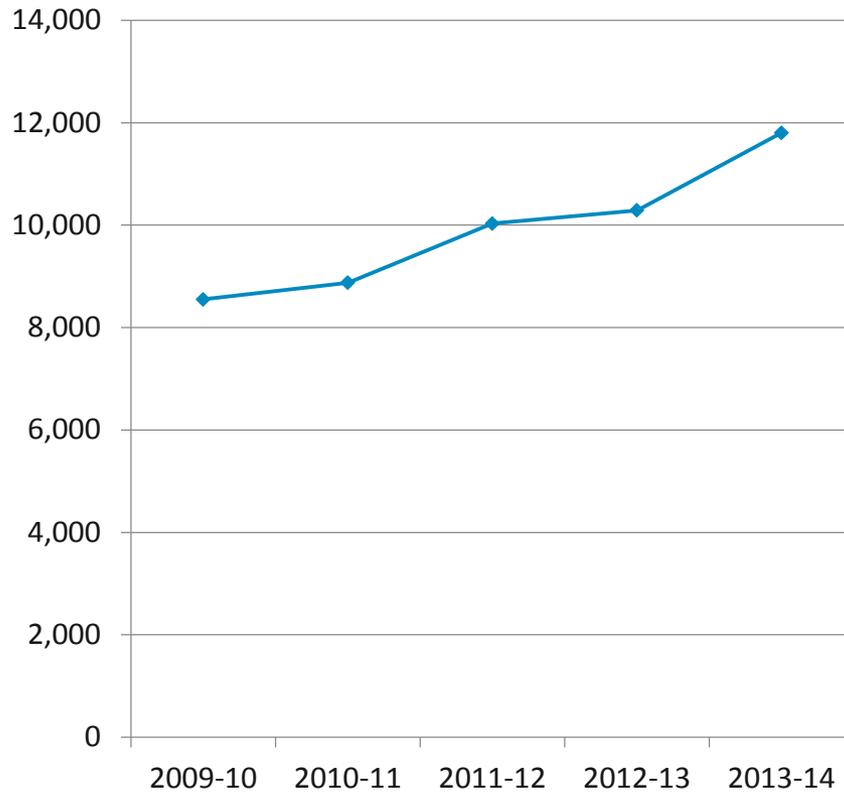
| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$275,184           | \$2,596,985      | \$287,015                | \$2,681,363      | 23.38   |                      |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
|             | X               |                                     |              | X                 |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           |                 | X                                   |              |                   |        |

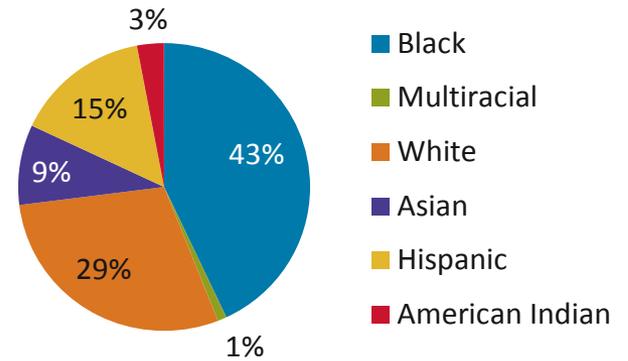


# School Based Clinics

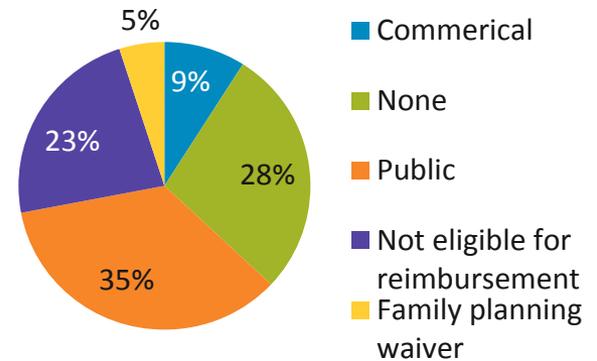
**Student visits 2009-2014**



**Visits by race/ethnicity**



**Visits by insurance**



# Youth Development

## Purpose and Context

This program includes policy work and out-of-school time services for low income youth; collaborative partnerships with schools, county, and community based agencies; technical assistance and training to youth workers, teachers, and volunteers; culturally competent sexuality education; and coordination of the City's prevention response to the Safe Harbors Act. Much work is needed to ensure that American Indian, Black, and Hispanic students graduate at rates similar to Asians and Whites. Investing in supports to keep young people healthy and in school prepares them to contribute to their communities in the future.

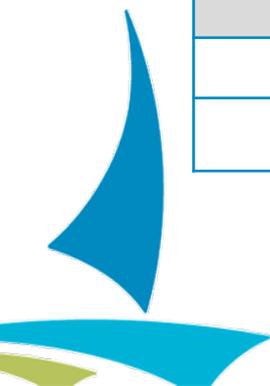
## Services Provided

- Community outreach and technical support to youth-serving agencies in Minneapolis.
- Collaboration with the Youth Violence Prevention initiative and the Youth Coordinating Board on identifying service needs for youth most at risk for truancy, poor academic performance, violence, homelessness, gangs, teen pregnancy, substance abuse, and other negative influences that prevent or interfere with youth being healthy and staying connected to school.
- Strategic planning and development of recommendations on enhancements to existing initiatives as well as planning and development of new programming (such as BUILD Leaders)
- Coordinating training and resource development for schools and community-based organizations for teen pregnancy prevention and healthy sexuality initiatives for young adults.
- Managing contracts for services provided through community based agencies.

# Youth Development

| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$425,914           | \$968,464        | \$609,034                | \$1,033,194      | 0.9     | \$75,000 No          |
|                     |                  |                          |                  |         | \$50,000 Yes         |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
|             | X               |                                     | X            | X                 |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           | X               | X                                   |              |                   |        |



# Youth Development enhancements

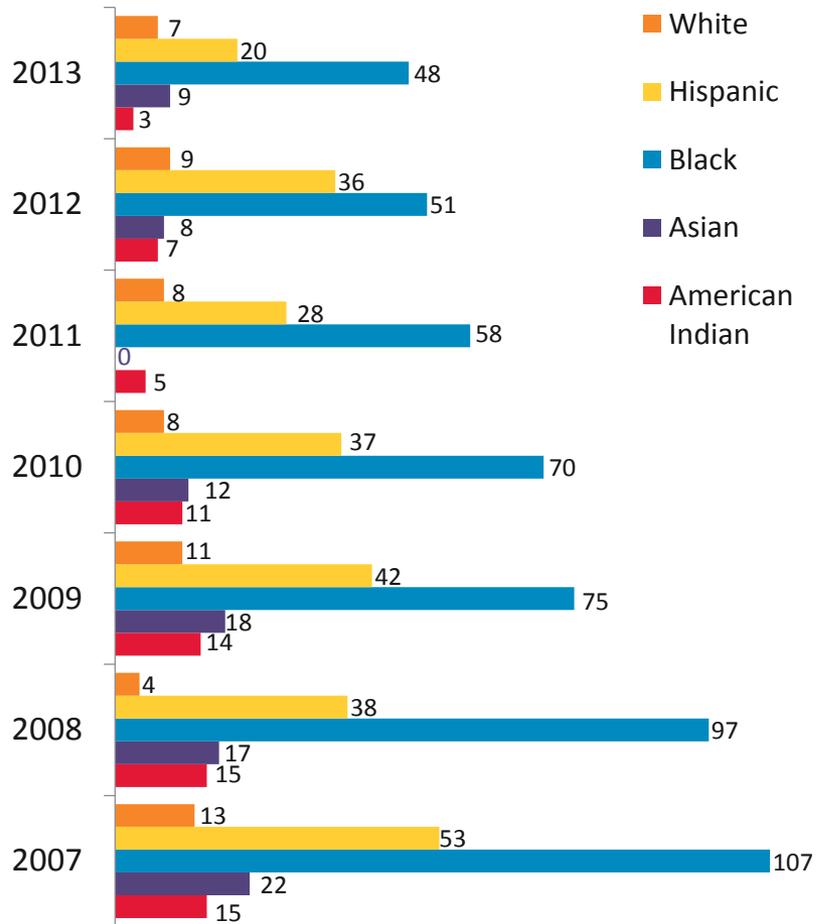
## Mayor's Recommendations:

- **\$75,000 ongoing funding** to expand an existing support program for parents of adolescents to serve an additional 50 families through a contract with a community-based organization using a proven best practice curriculum.  
**Rationale:** Improving skills and behaviors of parents and other caregivers positively impacts adolescent behavior (decreasing violence, substance abuse, and risky sexual behavior). Community engagement identified support for parents as a youth violence prevention service gap. Current funding serves 50 parents, far from the unmet need for culturally appropriate parenting programs. In 2014, 77% of participants who completed the program reported that it helped “a great deal” in dealing more effectively with their child’s behavior. This proposal is consistent with MBK and YVP goals.
- **\$50,000 in one time funding** to support creation of a 4H program for the Somali community  
**Rationale:** A University of Minnesota Extension 4-H program for urban youth that focuses on science, technology engineering, arts and math is currently being offered to Somali youth outside of Minneapolis. Expanding this program and offering it to Somali youth in Minneapolis in partnership with a community based organization will address school success and build youth leadership in the community of East Africans living in Minneapolis. Participants in similar programs have graduated on time and enrolled in post secondary education.

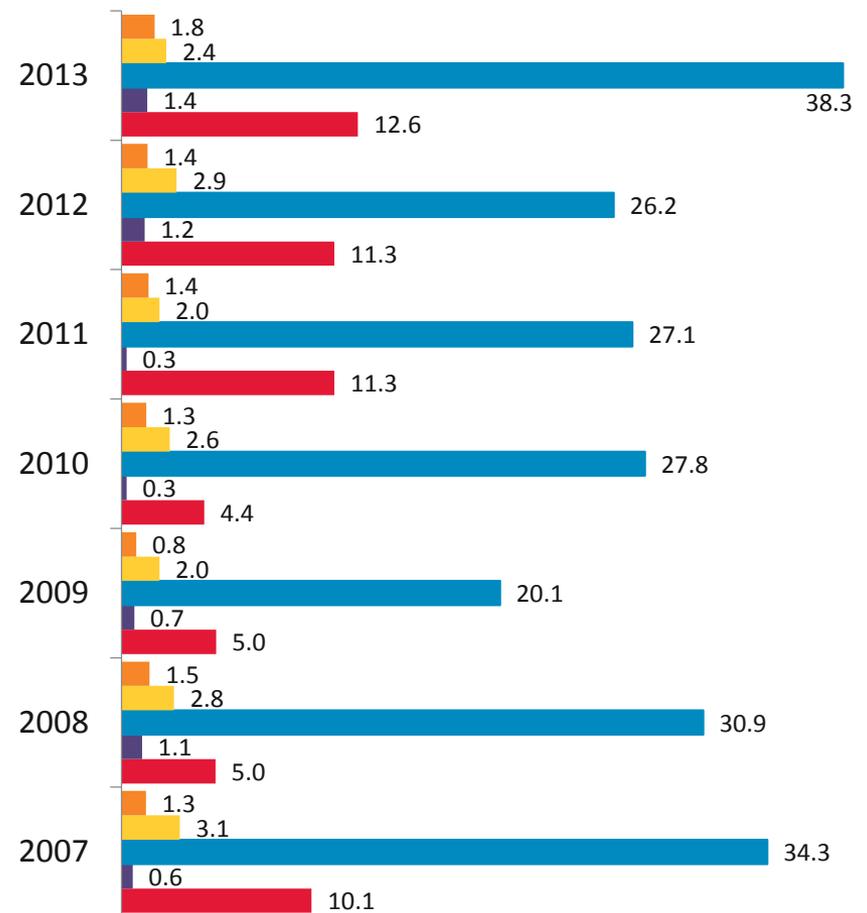


# Youth Development

**Number of births to mothers ages 15 – 17**



**Gonorrhea rate per 1,000 youth age 15-24**



# Youth Violence Prevention

## Purpose and Context

The Health Department leads and coordinates citywide efforts to implement the *Blueprint for Action to Prevent Youth Violence* through policy, planning, community support, and programming. Youth from marginalized communities are overrepresented among victims and perpetrators of youth violence. Department programming and the work of supported partners aim to eliminate disparities and ensure opportunities for all. Preventing youth violence contributes to a City where people feel safe and are safe. The Health Department works strategically with other departments, jurisdictions, and the community, promoting efficiency, strong collective impact, and public trust.

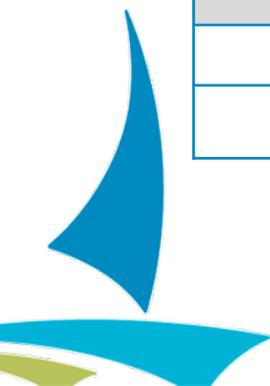
## Services Provided

- Planning and service coordination with jurisdictional partners.
- Technical assistance to community-based agencies.
- Community engagement events and programs.
- Oversight of the Juvenile Supervision Center for curfew, truancy, and other low-level offenders.
- Individualized case management and mentoring for youth at risk of involvement with violence.
- Culturally appropriate parent support programming for parents of adolescents

# Youth Violence Prevention

| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$223,062           | \$434,666        | \$244,603                | \$628,322        | 3.55    | Yes                  |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
| X           | X               |                                     |              | X                 |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           | X               | X                                   |              | X                 | X      |



# Youth Violence Prevention enhancements

## Mayor's Recommendation:

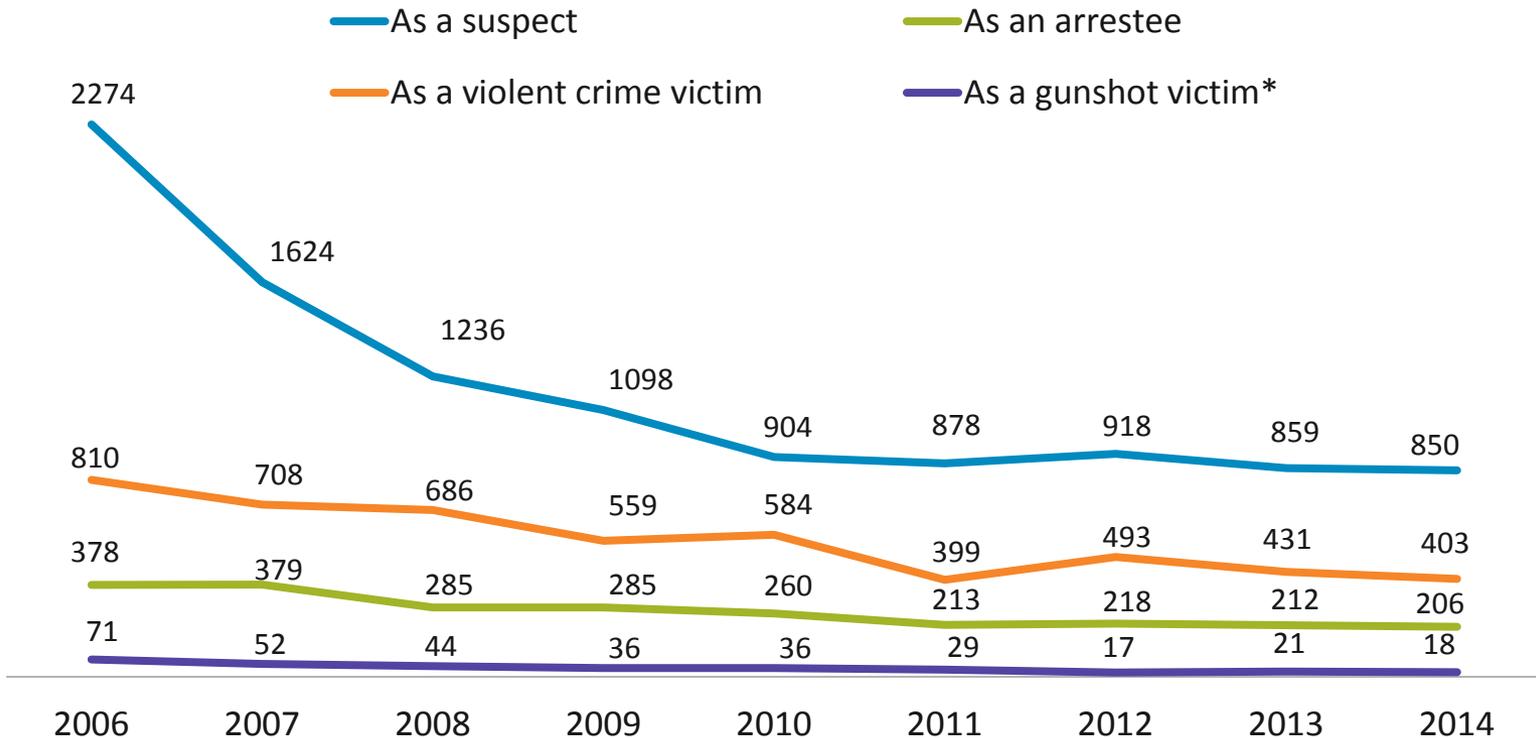
- **\$25,000 in one-time funding** to implement a pilot project of a hospital-based violence intervention program to serve 120 young people ages 14-24 who present to Hennepin County Medical Center for a firearm-related assault, a stab wound, or other assault-related injury. The Health Department will partner with HCMC to train and contract with culturally competent providers to implement a brief bedside violence intervention to capitalize on the “teachable moment,” discuss potential effects of trauma, interrupt retaliatory violence, and make referrals for immediate community-based needs.

**Rationale.** A brief bedside intervention is one of four components of a national model for hospital-based violence intervention programs designed to have an impact on preventing retaliation and repeat victimization. Currently very little programming exists in Minneapolis, young people are often “stitched up” and sent home in a matter of hours without attention given to their other non-physical needs. During the course of the project, the Health Department will work with the hospital and other funders to identify sustainable funding.



# Youth Violence Prevention

## Numbers of juveniles involved in violent crime



\*Gunshot victims are a subset of violent crime victims (excludes accidents and suicides)

# Healthy Living

## Purpose and Context

The primary goal of the Healthy Living program is to prevent obesity, tobacco use, and the chronic diseases they cause such as diabetes and heart disease.

- The initiative pursues the Health Department's goal, "Healthy weight and smoke-free living."
- Most projects and partnerships are designed to improve health in low-income populations and communities of color, which experience chronic diseases at higher rates.
- Some activities target broader populations, including activities in Minneapolis Public Schools, restrictions on e-cigarette use in indoor public places, and healthy worksite initiatives.

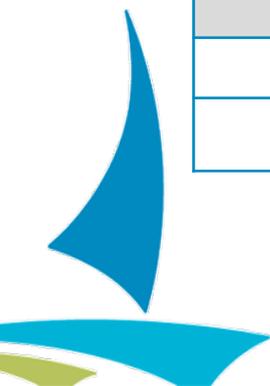
## Services Provided

- The Healthy Living program works with community partners to create opportunities for everyone to eat healthy, be physically active, and live tobacco-free in over 124 places in Minneapolis.
- Over 25 projects focus on creating healthier environments and improving City and institutional policies and practices to create healthier options in various settings. Specific activities include:
  - Increasing access to healthy food in corner and convenience stores, child care programs, emergency meal programs, food shelves, public housing properties.
  - Implementing policies to reduce exposure to secondhand smoke and youth tobacco use
  - Engaging residents to identify and advocate for biking and walking opportunities in north Minneapolis, along Franklin Avenue, and in the Phillips neighborhood.
  - Initiating youth-driven projects with the Youth Congress and community-based organizations.
  - Improving clinical care and linkages to community resources to quit smoking and achieve healthy weight.

# Healthy Living

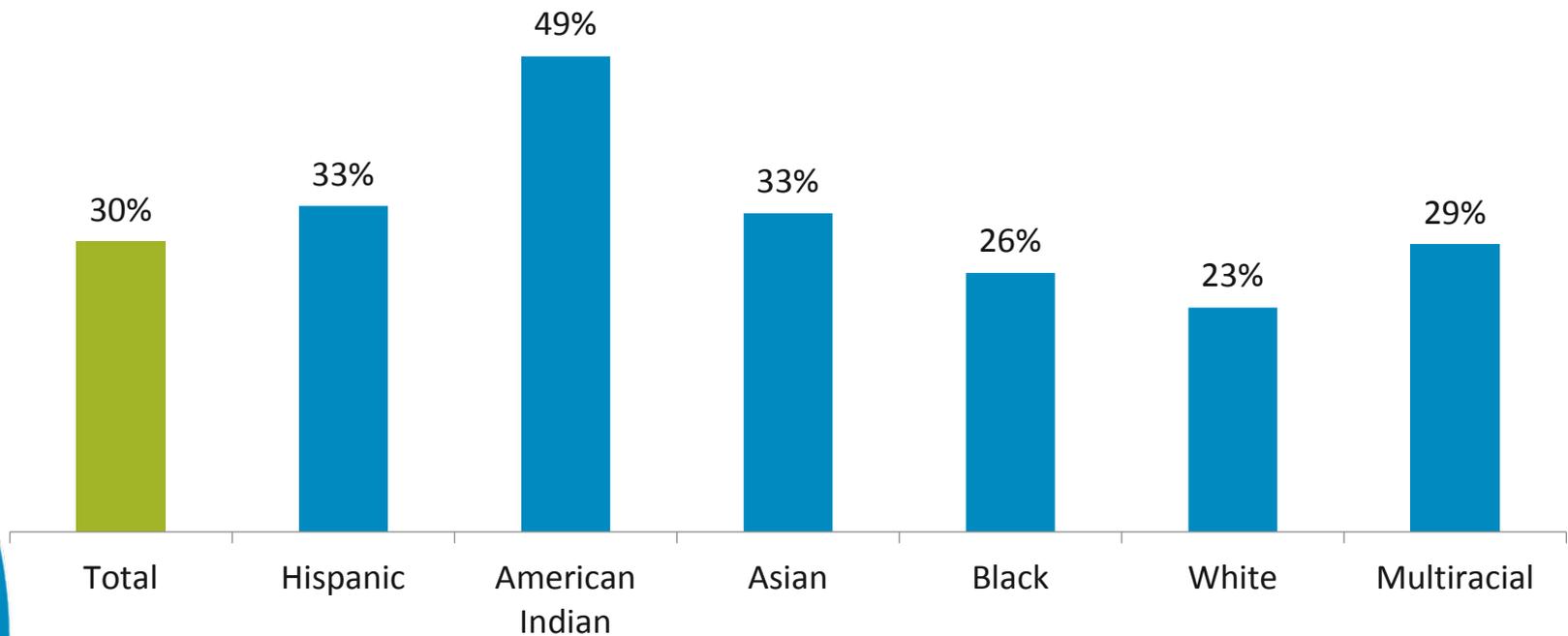
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| \$72,000            | \$843,209        | \$0                      | \$1,371,971      | 8.63    |                      |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
| X           |                 |                                     |              |                   |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           |                 | X                                   |              |                   |        |



# Healthy Living

**Percentage of children receiving WIC services in 2013 who were overweight or obese (BMI > 85<sup>th</sup> percentile)**



# Lead Hazard Control and Healthy Homes

## Purpose and Context

Minneapolis is mandated by the State to perform lead risk assessments and write enforcement orders on the homes of all lead-poisoned children. Lead poisoning has occurred in every neighborhood in Minneapolis but it disproportionately strikes children of color, those in low-income families, and those residing in rental housing. Lead poisoning causes permanent brain damage resulting in learning difficulties and a reduced earning ability in adulthood. “Lifetime earnings lost due to lead poisoning for the 2004 birth cohort in Minnesota is \$1.9 billion in 2014 dollars.” from the Economic Burden of the environment on Two Childhood Diseases: Asthma and Lead Poisoning in Minnesota December 2014. Concern over lead paint hazards is part of the Minneapolis Comprehensive Plan Housing element 3.7.9: “Reduce exposure to environmental health hazards such as lead-based paint and asthma triggers through enforcement of the property maintenance codes, and programmatic initiatives and partnerships.”

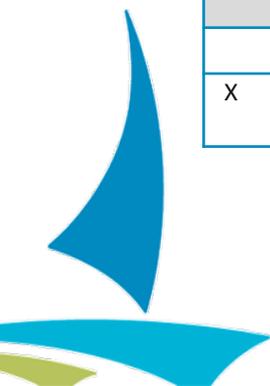
## Services Provided

Lead Risk Assessments are conducted on the home of all children with diagnosed lead poisoning level of  $\geq 5$  ug of lead per liter of blood. 2016 will be the second year responding at that level. By April 2015, the caseload had increased 146% in comparison to the same period a year earlier. Risk Assessments identify all lead hazards at the property; owners are required to complete repairs. Funds to repair lead hazards to protect children from current and future lead exposure come from HUD grants. The CDBG and general funds allow the Lead and Healthy Homes unit to provide matching funds to successfully compete for these grants. The HUD grant supports efforts to address other home based hazards such as mold, radon, tripping and safety hazards. Health Inspectors monitor the project until all lead hazards have been repaired and clearance dust samples meet state requirements.

# Lead Hazard Control and Healthy Homes

| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$440,414           | \$882,434        | \$580,673                | \$1,255,906      | 10.0    | \$40,000 No          |
|                     |                  |                          |                  |         | \$114,000 Yes        |

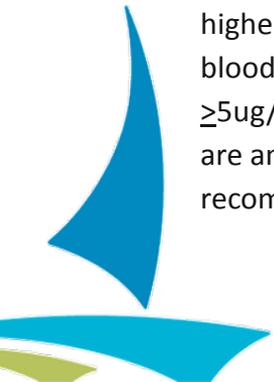
| Goals       |                 |                                  |              |                   |        |
|-------------|-----------------|----------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of Innovation and Activity | Great Places | A City that Works |        |
| x           | x               |                                  | x            | x                 |        |
| Values      |                 |                                  |              |                   |        |
| Equity      | Safety          | Health                           | Vitality     | Connectedness     | Growth |
| X           | X               | X                                |              |                   |        |



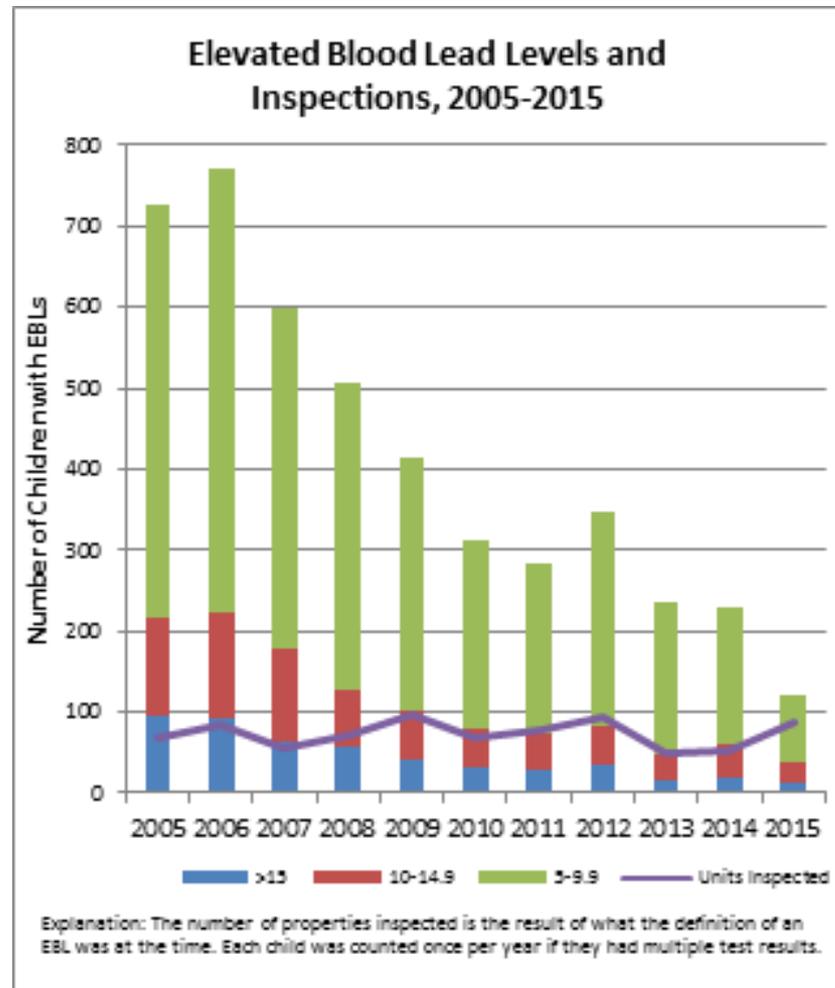
# Lead Hazard Control and Healthy Homes enhancements

## Mayor's Recommendations:

- **\$110,000 in one-time funding** for one additional year of a 1.0 FTE Lead Risk Assessor, and \$4,000 for blood lead testing.  
**Rationale:** In 2014, the Health Department began inspecting all homes of children poisoned at a blood lead level of 5ug/dl – a lower level than in previous years. This immediately increased the work load by 146% (as of April 2014), and a 1.0 FTE position was approved on a one-time basis for 2015. The continuation of this staff resource as one-time funding for 2016, in combination with grant resources, will allow the Lead & Healthy Homes unit to meet the goal of home inspections for all lead-poisoned children in Minneapolis while maintaining caseloads that allow for effective enforcement. In addition, funds are requested to pay for blood lead tests for children not currently covered by health insurance plans and for outreach to increase the number of at risk children tested.
- **\$40,000 in ongoing funding** to contract with the Minnesota Visiting Nurse Agency to provide home visits for developmental screening and case management for families with children with an elevated blood lead level, and to assure medical follow-up.  
**Rationale:** Lead is a brain neurotoxin that is present in over 70% of the City's housing stock; lead poisoning rates are higher among disadvantaged children and children of color. Current resources pay for MVNA to visit children with a blood lead level of  $\geq 10\text{ug/dl}$ . Additional funds would provide visits to all children considered poisoned at a level of  $\geq 5\text{ug/dl}$ . The Minnesota Department of Health reports that medical case management follow-up rates in Minneapolis are among the lowest in the state. Many families need additional support to ensure their child receives the additional recommended medical testing. It is anticipated that an additional 150 families will receive services.



# Lead Hazard Control and Healthy Homes



# Food, Lodging, and Pools

## Purpose and Context

Health Inspectors protect public health and serve a thriving hospitality industry by assuring commercial and institutional foods, lodging and pools are safe and in compliance with state and local health codes. These efforts protect the integrity of Minneapolis' hospitality industry which provided over 25,000 jobs and contributed \$24.8 million in direct sales tax revenue and \$7.3 million in license fees to the City in 2014.

**Growing the City:** The food and lodging industry is a growing and vibrant part of Minneapolis' economy and contributes to Minneapolis as a destination city. In 2014, Food Lodging and Pools staff hosted 14 business forums attended by over 400 industry representatives and provided multiple online resources and in-person consultations to support this important economic engine. Businesses meeting health safety standards increased by 3% in 2014 over the previous year.

**Running the City Well:** Paid for by license fees from local businesses, an efficient and effective health inspections program meets requirements set forth in state delegation agreements, protects residents and guests from disease and injury, and maintains the public's trust in the Minneapolis hospitality industry.

## Services Provided

Health Inspectors perform over 8,100 inspections a year of over 5,000 facilities, a 20% increase from 2012. These include restaurants, schools, board and lodging facilities, hotels, pools, tanning and body arts establishments, day care centers, farmers markets, groceries, and food vendors.

# Food, Lodging, and Pools

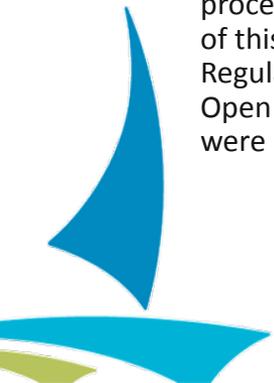
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|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$2,443,223         | \$0              | \$2,655,306              | \$0              | 23.0    | No                   |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
| X           |                 | X                                   |              | X                 |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           | X               | X                                   | X            |                   | X      |

# Food Lodging and Pools enhancements

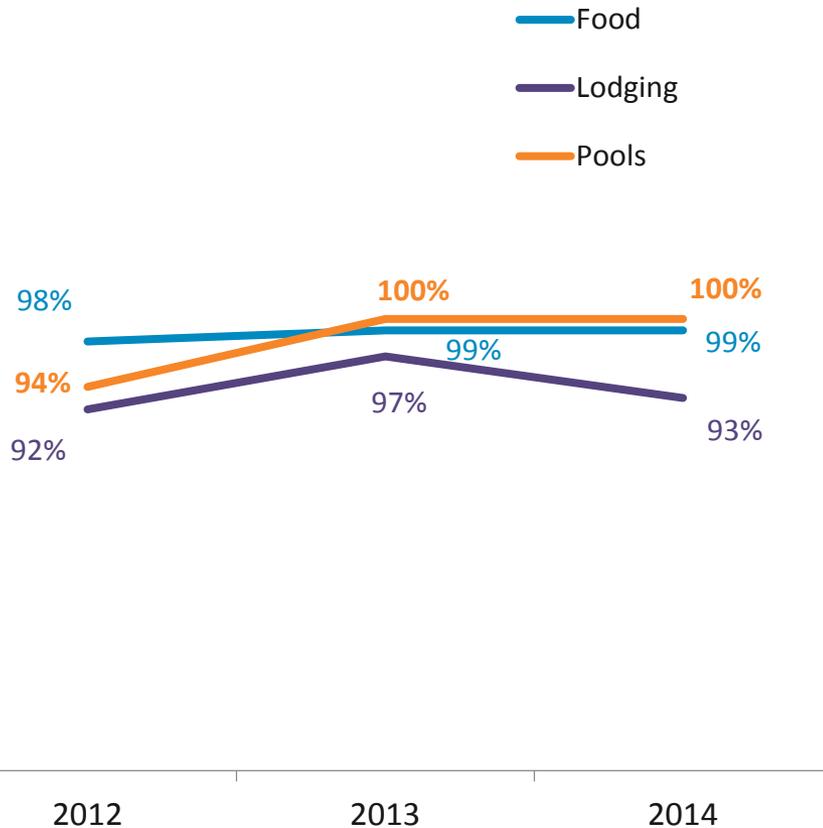
## Mayor's Recommendations:

- **\$75,000 in ongoing** funding to expand training and outreach to licensed businesses with a focus on locally owned, small businesses and immigrant-owned businesses. This will support the continuation of Somali training and additional training in Spanish and English. Training resources will be optimized through a combination of direct and contracted services.  
**Rationale:** The 2015 budget provided an Environmental Health Community Liaison position to assist small businesses in complying with a changing and complex regulatory environment. However, no additional resources were provided in support of the program. Only 64% of inspected businesses meet health-safety standards. Even fewer Somali-owned businesses meet these standards. While Certified Food Manager certification is required of all Minnesota food businesses, there are no current curricula in Somali. When businesses do not meet health-safety standards, customers and employees are at risk. By providing training that is appropriate for Minneapolis' community, the Health Department can better support this important economic sector.
- **\$60,000 in ongoing** funding for 1.0 FTE Customer Service Representative II position in support of permitting, licensure, citation and annual registration activities, and the processing of \$2,506,000 in projected general fund revenue.  
**Rationale:** This position will allow for the efficient and proper processing of environmental permits, pollution control annual registrations, board and lodging licenses, re-inspection invoices, administrative citations, and short-term food permits as part of Environmental Services and Food, Lodging and Pools ongoing operations. Without this position, we estimate a loss in \$160,000 of revenue due to lack of tracking of unpaid citations, invoices and registrations. Additionally this position is needed to ensure compliance with Cash Handling Standards and Procedures as outlined by Minneapolis Treasury operations. The need for this position was identified in early 2015, and due to the urgency to protect city processes, one existing position is being redirected and one temp position hired to dedicate to this work for the balance of this year. This solution is unsustainable without funding in 2016. \$0 to work in conjunction with Public Works, Regulatory Services and the Police Department to provide services to support up to eight events associated with the Open Streets program within existing budgetary resources. Our cost estimates for similar 2015 Open Streets events were \$9,048 for food inspections and \$2,400 for Environmental Services oversight.



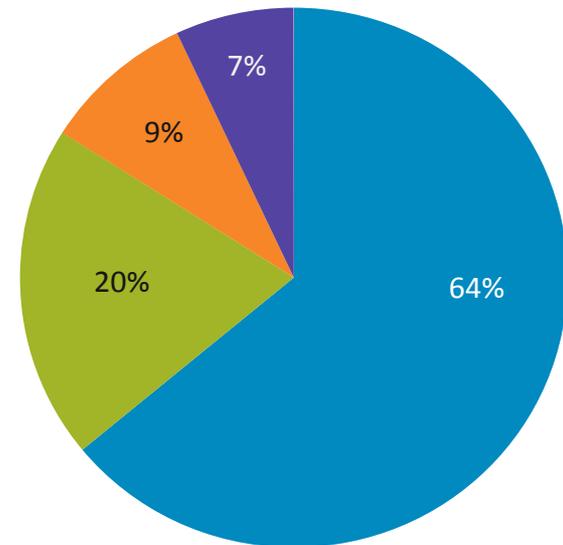
# Food, Lodging, and Pools

Percent of Food, Lodging, and Pools inspections completed on time



Routine health inspections in 2014  
(Businesses with 10+ points do not meet Health Safety Standards)

0-9 points (n=2,475) 10-19 points (n=764)  
20-29 points (n=330) 30+ points (n=262)



# Environmental Services

## **Purpose and Context**

Environmental Services protects environmental and public health from the adverse effects of pollution through two state-delegated well programs, one federally mandated storm water program, nine local environmental permits, and immediate response to spills and citizen concerns. The Health Department has become a progressive leader in local environmental work with one of the most comprehensive air quality studies of any major city, managing the Midwest's first energy disclosure policy, and the most aggressive partnership programs with local businesses to improve neighborhood environmental quality in the country.

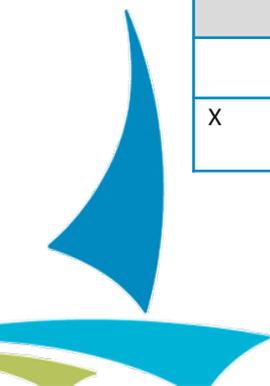
## **Services Provided**

Environmental Services conducts over 9,000 inspections annually (up 300% since 2010) including spill response, erosion control, rock crushing, well testing and noise monitoring. These regulatory activities contribute to overall environmental quality within the city and help ensure Minneapolis continues to meet environmental standards for water and air quality. Additionally, Environmental Services processes over \$2.0 million in permit and impact fees for the general fund.

# Environmental Services

| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$1,530,627         | \$0              | \$1,374,913              | \$0              | 10.75   | No                   |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
| X           | X               | X                                   | X            | X                 |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           | X               | X                                   | X            |                   | X      |



# Environmental Services enhancements

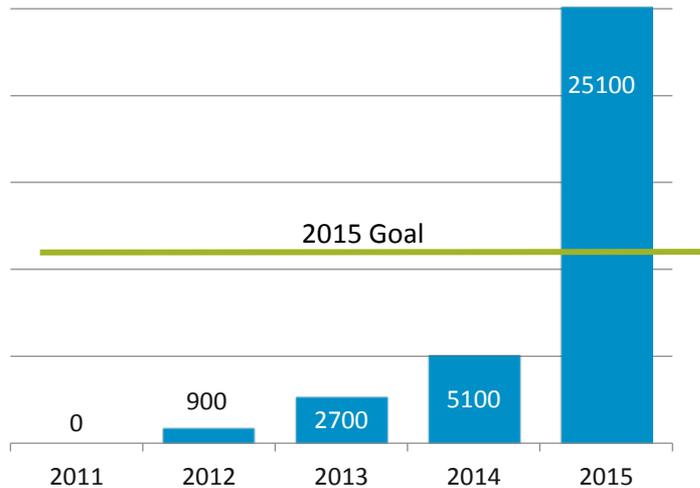
## Mayor's Recommendations:

- **\$34,000 in ongoing funding** to provide community outreach, collaborative work, and additional prioritized sampling around results of the City's just completed two-year air quality study. This will increase a half time position to .75 FTE (\$15,000) to conduct community outreach and leverage a significant amount of outside assistance. It also supports focused sampling (\$15,000) around areas found to be over Health Risk Values in our original air quality study and work with local schools to do professional level science with teachers and students (\$4,000).  
**Rationale:** This funding efficiently leverages many partnerships and resources to protect people from air toxics and other harmful pollutants. Collaborative efforts are underway with Waite House, Anderson School, Clean Air Minnesota, the U of M Technical Assistance Program, U of M School of Public Health, U of M Department of Civil Engineering, Minnesota Pollution Control Agency, the Mille Lacs Band of Ojibwa, and PACE labs.
- **\$75,000 in ongoing funding** to continue the Green Business Matching Grant Program, supporting businesses' efforts to improve local air quality. This funding is used as a 1:3 or to 2:3 match for businesses to invest in cleaner practices.  
**Rationale:** Air quality is an important health and economic issue for Minneapolis. In 2015, The Green Business Matching Grant Program reduced 26,000 lbs. of volatile organic compounds and hazardous air pollutants in local neighborhoods while supporting local businesses. This is leveraged with additional direct outside funding and in-kind staff resources from the University of Minnesota Technical Assistance Program and Environmental Initiative. Other partners include the Minnesota Pollution Control Agency, Mdewakanton Sioux Community, American Lung Association, Minnesota Chamber of Commerce, and the Center for Earth Energy and Democracy. Without this General Fund match the contributions of partner organizations are not likely to materialize. Not including partner in-kind support, this funding leverages a total of \$500,000 annually in matching investment in clean air. As was the case with contamination from a dry cleaner affecting a Somali day care.

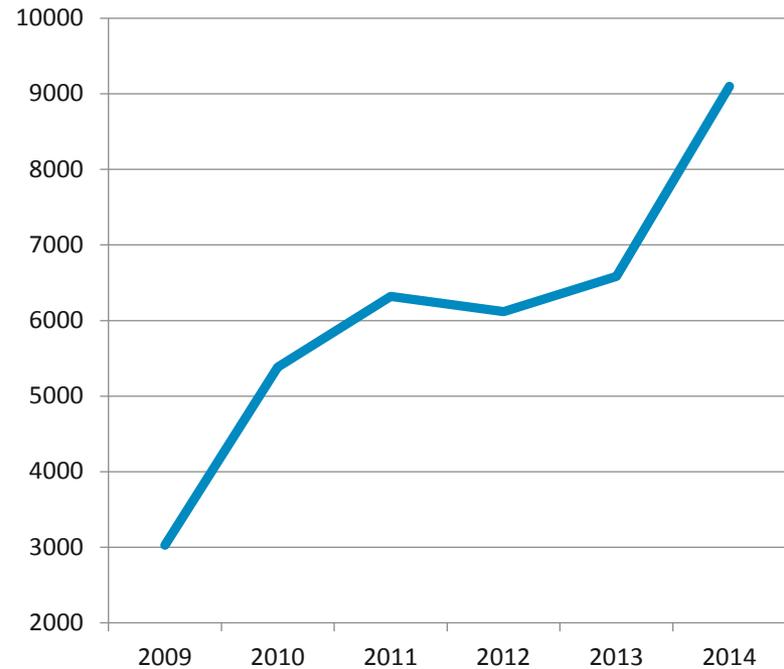


# Environmental Services

**Green Business Pollution Reduction**  
(Lbs. of emission reduction)  
*Volatile Organic Compounds*



**Inspection Workload**



Inspections on tank removal, spill response, well sealing erosion control, noise enforcement, dewatering of construction sites, land contamination, chemical emission concerns, illegal dumping and other enforcement Related issues that protect public health and our natural environment.

# Seniors

## Purpose and Context

The UCare Skyway Senior Center provides a safe, friendly, and comfortable place for people age 50 and over to gather in downtown Minneapolis to participate in a variety of activities such as physical fitness, health and wellness, learning opportunities and socialization events. The Center also connects seniors community resources and community service opportunities and offers a warm, welcoming place where seniors can meet and socialize with other seniors to keep from isolation. Senior visitors tend to live alone, are low income and sometimes experience homelessness. The Skyway Senior Center was founded in 2001 by a partnership of the City of Minneapolis, the Minneapolis Senior Citizen Advisory Committee to the Mayor and City Council, and Ryan Companies with support from the University of St. Thomas and Target Corporation. In 2010, The City of Minneapolis and UCare established a partnership with financial support from UCare. The Minneapolis Health Department provides oversight for the Center. In addition, the Friends of the Skyway Senior Center an incorporated 501(c) (3) organization was established in 2003 to build relationships to help support the Center.

In addition, MHD contracts with MVNA to provide home health care/therapeutic services for eligible, high-risk and low-income seniors age 60 and older who lack medical reimbursement.

## Services Provided

From April 1, 2014 through March 31, 2015, the Skyway Senior Center logged 19,165 visits on 249 days. The average number of daily visits was 77 senior guests per day. In 2014 over **600** structured activities and programs offered annually = average 2.5 per day.

In 2014 MVNA provided 1,007 visits to eligible seniors which included 718 visits for skilled nursing, 134 for therapeutic treatments, 102 for home health aide/homemaker services, and 53 interpreter visits.

# Seniors

| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$70,000            | \$201,256        | \$82,500                 | \$187,801        | 1.0     | No                   |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
| X           | X               |                                     |              | X                 |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           |                 | X                                   |              | X                 | X      |

# Seniors

## UCare Skyway Senior Center

April 1, 2014 – March 31, 2015

- 19,165 visits (average unduplicated visits of 77 per day)
- Over **600** structured activities and programs offered annually = average 2.5 per day, including 49 classes held (average 4 per month)
- 2,884 volunteer hours (average 4-hour shifts) by 25+ volunteers
- 3,785 active mailing list contacts for the Chatter Newsletter (plus approximately 1000 electronic subscribers)



# Emergency Preparedness and Infectious Disease

## Purpose and Context

The Health Department is required by Minnesota statute and City Charter to assure the health and safety of residents and visitors from infectious disease. The Department does so through collaboration, contracts, and participation in a community-wide continuum of care. That response includes routine prevention and intervention activities (provided through contract by Hennepin County); responses to small events, such as tuberculosis and food-borne illness; support for residents affected by natural or other disasters, such as the Northside tornado; and responses to large public health emergencies such as a flu epidemic.

The Department is one of the City's four emergency response departments and has an integral role in the City emergency response system. Planning and response are coordinated and integrated with City Emergency Management, Hennepin County, other metro health departments, the state health department, and the federal public health system. Since 2001, the program has been funded almost exclusively by federal funds. Despite increased demands and expansion of duties, federal funding levels have decreased 57% in ten years.

## Services Provided

Planning & Response: Provide leadership for planning and response in mass dispensing, mass care/shelters, assistance centers, extreme weather, medical surge, health care coalitions, volunteer management, radiological events, fatality management. Ensure a equipped, trained and ready workforce for response 24-7.

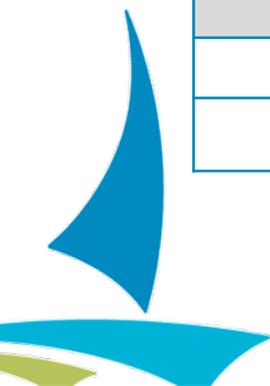
Community Preparedness: Partner with and involve diverse community groups and resources to plan for and improve mitigation, response and recovery, with particular focus on the most vulnerable populations. Engage and educate community to increase resilience; partner with NCR.

Preparedness: Complete surveillance for hazards, vulnerabilities, incidents; monitor for situational awareness. Coordinate with partners for public information and warning; emergency operations; isolation and quarantine; medical materiel management; laboratory testing; and epidemiological investigations. Track financial resources (including grants) and systems; manage quality assurance.

# Emergency Preparedness and Infectious Disease

| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$37,700            | \$465,268        | \$38,419                 | \$453,073        | 2.7     |                      |

| Goals       |                 |                                  |              |                   |        |
|-------------|-----------------|----------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of Innovation and Activity | Great Places | A City that Works |        |
| X           | X               |                                  |              | X                 |        |
| Values      |                 |                                  |              |                   |        |
| Equity      | Safety          | Health                           | Vitality     | Connectedness     | Growth |
| X           | X               | X                                |              | X                 |        |



# Emergency Preparedness

## Health Department Disaster Response History and Level of Staff Involvement

| Year | Incident  | Type and # of staff |       |
|------|---|---------------------|-------|
| 2003 | Smallpox Vaccination  | IMT                 | 5-15  |
|      | SARS  | IMT                 |       |
| 2004 | Polio in the Somali Refugee Community                       | IMT                 | 5-15  |
| 2005 | Hurricane Katrina "Operation Northern Comfort"              | IMT                 |       |
| 2007 | 35W Bridge Collapse   | ALL                 | 1-5   |
|      | SE MN Flooding  | EPS                 |       |
| 2008 | TB Outbreak in City Homeless Shelters                       | SSS                 | 15-30 |
|      | Republican National Convention                              | IMT                 | 5-15  |
| 2009 | H1N1 Influenza-Community Vaccination Clinics                | ALL                 | 5-15  |
| 2010 | H1N1 Influenza--Targeted Vaccination Clinics                | IMT                 |       |
| 2011 | Measles Outbreak  | EPS                 | 1-5   |
|      | Fukushima Nuclear Incident                                  | EPS                 |       |
|      | Northside Tornado   | ALL                 | 1-5   |
| 2012 | 4th of July Extreme Heat Event                              | EPS                 |       |
|      | H3N2 Influenza Hospital and Clinic Surge                    | EPS                 |       |
| 2013 | Downtown Water Main Break                                   | IMT                 | 5-15  |
|      | South Minneapolis Gas Main Leak                             | EPS                 | 1-5   |
|      | June Severe Storms & Extreme Heat                           | IMT                 | 5-15  |
| 2014 | West Bank Cedar Avenue Fire                                 | EPS                 | 1-5   |
|      | Extreme Cold and State-Wide Propane Shortage                | EPS                 |       |
|      | U of M Glucose Testing Protocol Problem in Somali Community | EPS                 |       |
|      | Excessive Rains and Flooding                                | EPS                 | 15-30 |
|      | MLB All-Star Game   | SSS                 |       |
|      | Ebola   | IMT                 | 5-15  |
| 2015 | H7N9 Avian Influenza  | EPS                 | 1-5   |

EPS MHD Emergency Preparedness Staff Only

IMT MHD Incident Management Team

SSS MHD Select Skilled Staff

ALL All MHD Staff

# Core Public Health Infrastructure

## **Purpose and Context**

As a local public health entity operating under a Community Health Board (City Council), the department is mandated by Minnesota Statutes, chapter 145A, to provide directly or contract for essential public health services for Minneapolis residents. The essential services are to assure an adequate local public health infrastructure; promote healthy communities and healthy behaviors; prevent the spread of infectious disease; protect against environmental health hazards; prepared for and respond to disasters and assist communities in recovery; and, assure the quality and accessibility of health services.

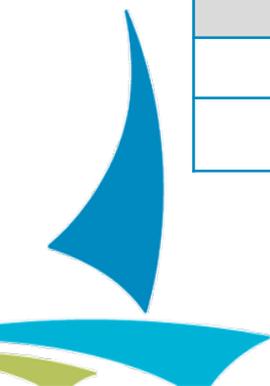
## **Services Provided**

An adequate public health infrastructure includes a governance structure, assessing community health needs, setting health priorities, meeting state reporting requirements, engaging the community, advocating for policy changes, fostering healthy environments, and ensuring that staffing reflects the diversity of the Minneapolis community. In Minneapolis, grant writing to address priority needs is also an essential component of the public health infrastructure.

# Core Public Health Infrastructure

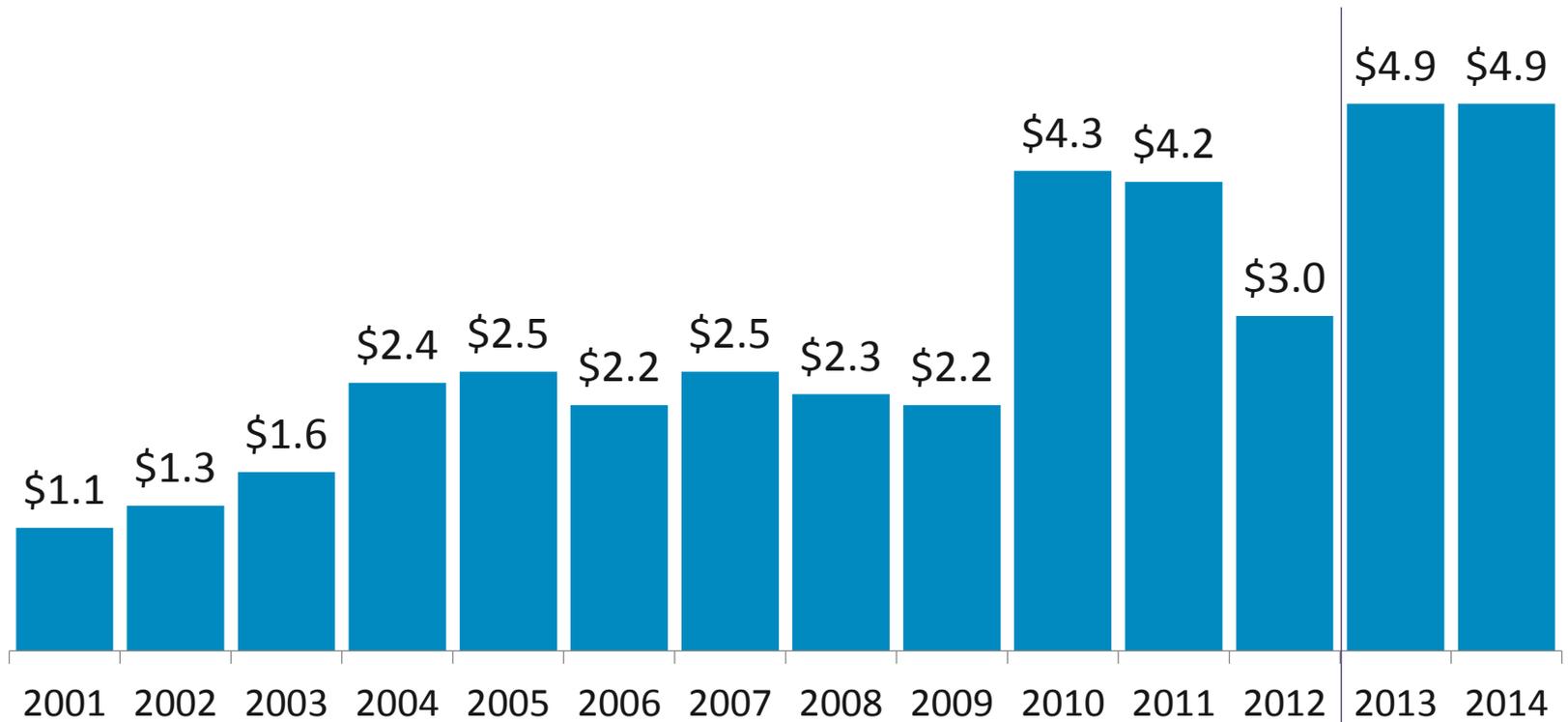
| 2015 Adopted Budget |                  | 2016 Recommended Funding |                  | FTEs    | Funding              |
|---------------------|------------------|--------------------------|------------------|---------|----------------------|
| General Fund        | Non-General Fund | General Fund             | Non-General Fund | Current | One-Time<br>(Yes/No) |
| \$2,438,728         | \$923,857        | \$2,466,950              | \$1,088,321      | 15.09   |                      |

| Goals       |                 |                                     |              |                   |        |
|-------------|-----------------|-------------------------------------|--------------|-------------------|--------|
| Living Well | One Minneapolis | A Hub of<br>Innovation and Activity | Great Places | A City that Works |        |
|             |                 |                                     |              | X                 |        |
| Values      |                 |                                     |              |                   |        |
| Equity      | Safety          | Health                              | Vitality     | Connectedness     | Growth |
| X           |                 | X                                   |              |                   |        |



# Core infrastructure

**Discretionary Grant Funds Awarded (in \$ millions)**



Environmental Health merger occurred in 2013

# Operating Capital Request - CARS



# Operating capital request - CARS

- **Items recommended for 2016 through the CARS program**

- The Skyway Senior Center opened in 2001 and has used the same furniture for the past 14 years. We have residential-grade furniture (two 3-seat sofas and 4 club chairs) that is in dire need of replacement due to wear and tear, general cleanliness, and risk of injury. With over 15,000 visitors per year, the furniture gets heavy daily usage. Due to the non-commercial quality of the upholstery, this furniture needs to be replaced with commercial-grade, cleanable, sanitary upholstery:
  - -Over the years, there has been hundreds of coffee spills and other fluids spilled on and into the upholstery.
  - -The current furniture is susceptible to infestation, and the Center has a pest control company do bed bug inspections (many Center visitors are transient or live in circumstances that may contribute to the risk of infestation).
  - -The current furniture is very heavy and taxing for senior volunteers and staff to move to accommodate all the varying activities occurring daily.
- Our request for 10 appropriate chairs will make this heavily-used seating area more flexible, safer to use and move, easier to keep clean, and more
- comfortable for our many senior visitors.
- 
- **Total Budget price - \$12,500**
- Includes (10) new club chairs, delivery charges, project manager time and removal of the existing furniture to the City disposal site.



CITY OF MINNEAPOLIS

Questions?

THANK YOU

