HEALTH AND FAMILY SUPPORT

MISSION

To provide leadership in meeting the unique needs of our urban population and eliminating disparities by engaging partners in promoting individual and community health.

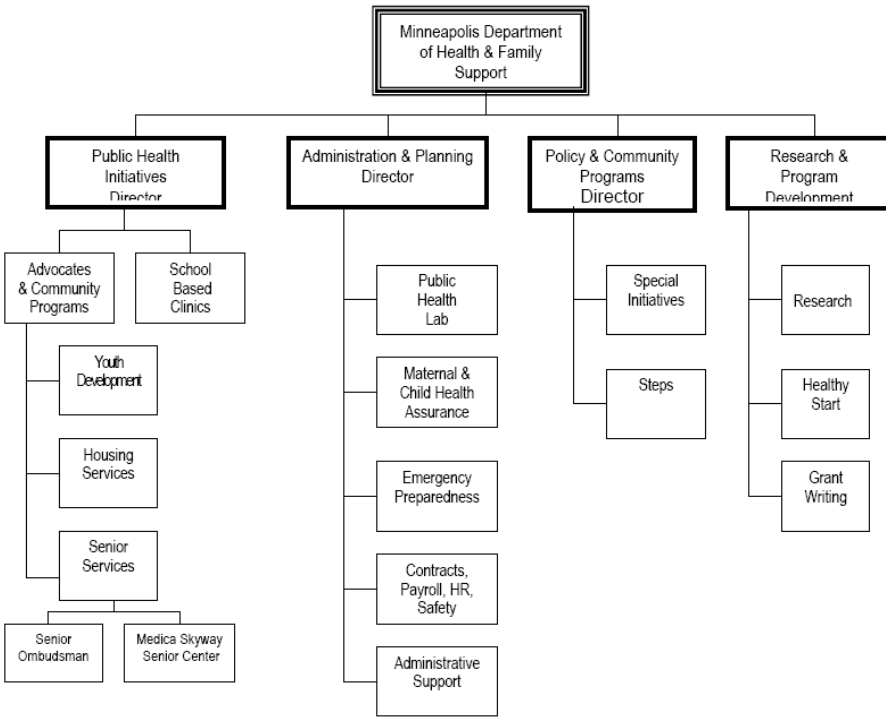
BUSINESS LINES

Promote health: healthy residents, communities, and environments: To create and support healthy community norms and environments, to ensure access for all residents to health care and health-related services and activities, and to promote healthy individual decision-making and behavior.

Address factors affecting health: social conditions and physical environment: To reduce disparities by improving the social and environmental conditions which contribute to racial, ethnic, and socioeconomic disparities to a greater degree than individual behaviors or genetics. Social conditions include educational and employment opportunities, housing, community connectedness, civic engagement, and community violence. Environmental factors include amenities such as parks, walking trails, and recreational facilities; air and water quality; and exposure to toxins in homes or neighborhoods.

Protect the Public's health: disease prevention and control and emergency preparedness: maintaining the infrastructure essential to public health functions including public health emergency preparedness and the prevention and control of infectious diseases.

ORGANIZATION CHART



FIVE –YEAR DEPARTMENTAL GOALS, OBJECTIVES, AND PERFORMANCE MEASURES (ALIGNED WITH CITY GOALS AND STRATEGIC DIRECTIONS)

Note: Activities described under business lines more fully reflect the entire scope of Department activities. The goals described below are the areas of focus for the next five years based on an assessment of the greatest needs and the potential for greatest overall impact on population health in Minneapolis within this timeframe and resources.

City Goal (1-6)	City Strategic Direction (A-Z)	Department Goal	Objective	Measure
2 – One Minneapolis 3 – Lifelong learning second to none	a. Close race & class gaps: housing, educational attainment, health a. All kids ready-to-learn by kindergarten	Improve infant & child health	A. Improve case coordination for pregnant women and young families to decrease infant mortality B. Through community outreach efforts, increase proportion of children between the ages of 3 and 5 who have received preschool screening by age 3	Infant mortality by race # of 3-year-olds screened
1 - A safe place to call home	e. Youth: valued, challenged & engaged	Youth development and violence prevention	A. Establish community agreement on priority investment in youth violence prevention; monitor progress B. Engage disaffiliated youth in productive activities to reduce youth violence. C. Advocate for policy changes to increase state and national funding for youth development	Youth and young adult homicides Hospital-based reports of assault-related injury
2 – One Minneapolis	a. Close race & class gaps: housing, educational attainment, health	Improve teen & young adult sexual health	A. Increase testing and treatment for sexually-transmitted infections (STIs) through community and clinic outreach and education for adolescents and young adults B. Provide education, access to adolescent health services, and contraception through School Based Clinics at City high schools C. Foster continued education and healthy parenting through coordinated health and social services	Teen pregnancy rate by race STI rate by race
1 - A safe place to call home 4 – Connected communities	d. "Get fit" and make healthy choices b. Walkable, bikable, swimmable!	Increase exercise & healthy nutrition	A. Identify and support promising community strategies to improve access to healthy foods and increase exercise B. Increase community awareness and institutionalize dietary and behavior change	Percent of population at healthy weight
2 – One Minneapolis	a. Close race & class gaps: housing, educational attainment, health	Assure maintenance of healthcare safety net for underserved populations	A. Advocate for and support community clinics and public heath nursing to maintain services for the uninsured B. Identify gaps and support service providers addressing unmet needs of underserved and/or new populations	Potential measures are being evaluated for validity and availability

City Goal (1-6)	City Strategic Direction (A-Z)	Department Goal	Objective	Measure
1 - A safe place to call home 2 – One Minneapolis	a. Close race & class gaps: housing, educational attainment, health c. Equitable City Services & geographically placed amenities	Assure preparedness for public health emergencies – today and into the future	A. Develop formalized relationships with community partners to address vulnerable population needs B. Formalize regional relationships to streamline coordination and planning C. Maintain and update plans D. Provide training and technical assistance to community agencies to develop and test their emergency plans	# of formalized relationships with community-based agencies # of community agencies with continuity of operations plans for emergencies

MEASURES, DATA AND TARGETS TABLE

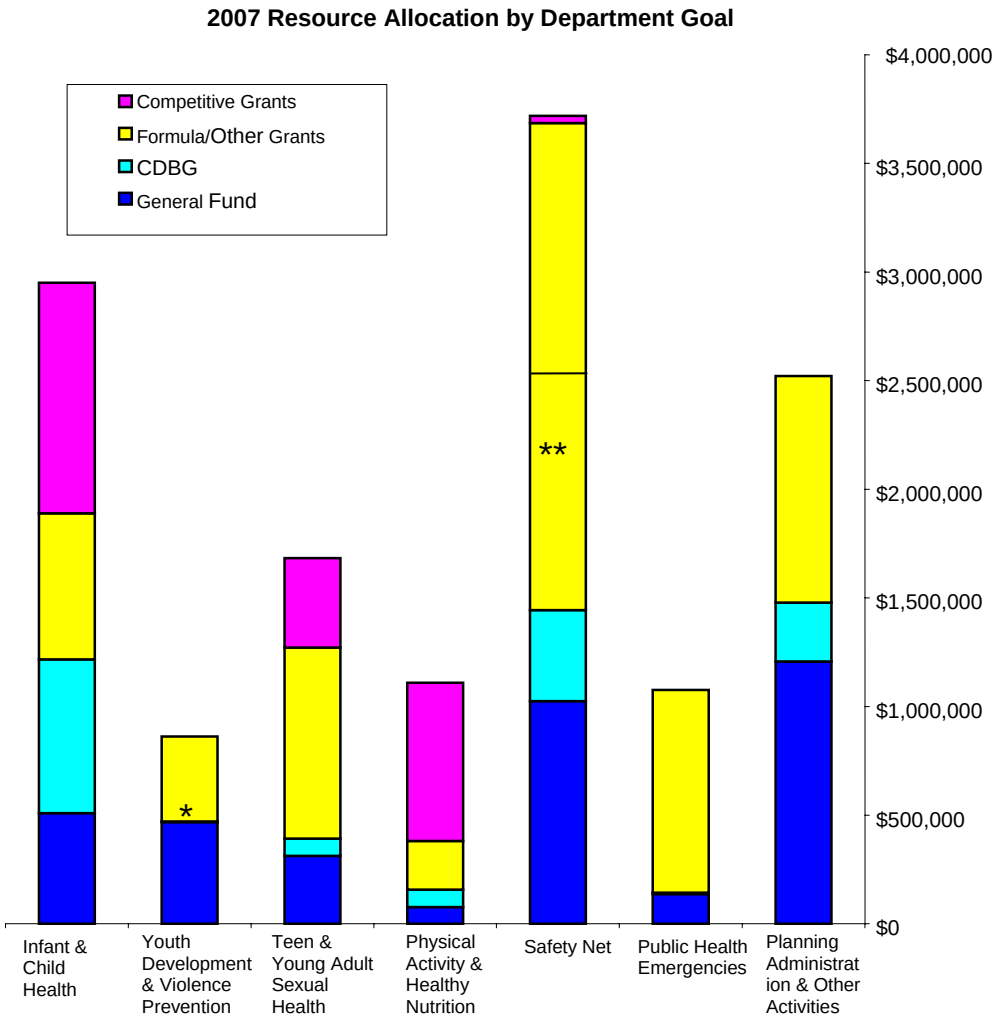
Measure Name	2003 Data	2004 Data	2005 Data	2006 Data	2007 Target	2011 Target
Teen pregnancy rate defined as number of teen pregnancies per 1000 population aged 15-17 years.(Source: Vital Records, MN Dept. of Health)	53.2	49.9	N/A[1]	N/A	47.9	46.0 by 2010 (Source: Healthy People 2010)
STI rate defined as Gonorrhea rate per 100,000 people (Source: Hennepin County Department of Human Services and Public Health)	360	264	N/A	N/A	213	161 by 2010. (Source: Minneapolis Sustainability Indicators)
Percentage of population at healthy weight as defined by Body Mass Index among adults age 18 years and older (Source: SHAPE surveys)	52.1% (1998 data)	46.8% (2002 data)	N/A	N/A	49.4%	52.1% by 2010 (City of Minneapolis Sustainability Indicators)
Infant mortality defined as number of deaths in the first year of life per 1000 live births (Source: Vital Records, MN Dept. of Health)[2]	6.4 (1999-2001)	6.2 (2002-2004)	N/A	N/A	5.3 (2005-2007)	4.5 (Source: Healthy People 2010)
For whites (non-Hispanic)	3.8	3.4	N/A	N/A	3.4	3.4
For Blacks (non-Hispanic)	11.4	9.8	N/A	N/A	7.6	5.4
For American Indians	7.0	9.2	N/A	N/A	7.3	5.4
For Asian/Pacific Islanders	7.9	2.9	N/A	N/A	5.4	5.4
For Hispanics	4.8	7.5	N/A	N/A	6.5	5.4

[1] N/A = Not Available.
[2] Infant mortality is reported as 3-year average rates because of low incidence.
Note: Measure for hospital-based reports of assault-related injuries to Minneapolis residents will be used for baseline data and targets when available.

Measure Name	2003 Data	2004 Data	2005 Data	2006 Data	2007 Target	2011 Target
# of 3-year-olds screened by Minneapolis Public Schools	195	601	647	740	850	1,000
# of homicide deaths among individuals aged 15-24 years (Source: Vital Records, MN Dept. of Health)	25	21	N/A	N/A	20	10
# of formalized relationships with community-based agencies to address the needs of vulnerable populations in emergencies	N/A	N/A	N/A	10	15	20
# of community agencies with emergency continuity of operations plans	N/A	N/A	N/A	2	21	65

CONTEXT FOR THE DEPARTMENT'S WORK

The following graph identifies 2007 resource allocations by category of funding, and by the six department goals and the other department activities that are outside of the goals.



* Local public health carryover funds allocated for the two year youth violence prevention grants.

** Local public health carryover funds allocated for one year of support for the safety net (Neighborhood Health Care Network) and to cover shifts in costs for the housing advocates and the Domestic Abuse Project

Key to Graph
In developing the graph, all the projected 2007 department resources were categorized by one of the six department goals. Because the goals do not encompass all of the department's activities, most administrative, planning, policy, and research activities are included under Other Activities, Planning and Administration. Personnel were allocated based on function, and not limited to time reimbursed by specific grants. Department contracts were also allocated to one of the seven areas based on the services to be provided. General administrative costs for the department were allocated across each category based on the time allocations of the Commissioner. All other division costs were spread across the seven categories based on the time allocations of the staff in the division.

General Fund support provides an anchor for each of the goals and activity areas.

Competitive grants provide important additional resources to three of the goal areas: Infant and Child Health, Teen and Young Adult Sexual Health, and Physical Activity and Healthy Nutrition. Youth Development and Violence Prevention may be an area for future competitive grants.

The Safety Net is a major area of investment for the department. Assuring access and quality in health services is one of the six essential local public health activities that have been defined by the Minnesota Department of Health. In an environment of state and federal cutbacks in health programs and eligibility, a growing immigrant population, and state and federal restrictions on adolescent reproductive health options, the need for consistent local support of the health care safety net is essential.

The goals of Physical Activity and Healthy Nutrition and Youth Development and Violence Prevention are both relatively new areas of focus for the Department. Both areas were identified as priorities in the community assessment completed in 2004. The Department has begun to increase activity in these goal areas and will continue to do so in 2007.

Description of funding categories in graph

General Fund: Reflects the 2007 allocation from the Five Year Plan.

CDBG: Reflects a 15% reduction in Year 33 funding from HUD.

Formula Grants/Other: Includes state and federal grants received based on Minnesota Department of Health formulas – Local Public Health, Maternal/Child Health, TANF, Emergency Preparedness. "Other" revenues include patient revenue from the School Based Clinics and New Families Center, Minneapolis Family Fund/Charitable Gambling, Skyway Senior Center grants, and payments from Hennepin County and Minneapolis Public Schools to the City as fiscal agent for the Curfew Truancy Center joint powers agreement.

Competitive Grants: Includes federal funding for Healthy Start, Male Reproductive Health Research, Lead Education/Outreach, and Steps to a Healthier Minneapolis.

Resources Supporting Department Goals

Infant & Child Health (21% of department budget): Includes contracts for services (e.g. preschool screening, Way to Grow, child care services), portions of two federal grants (Healthy Start and Lead Education/Outreach), and allocations of associated planning and administrative costs.

Youth Development and Violence Prevention (6% of department budget): Includes funding for a youth development planner, YMAP after school activities, $250,000 in funds for youth violence prevention grants, and allocations of associated administrative costs.

Teen & Young Adult Sexual Health (12% of department budget): Includes portion of the School Based Clinic program, portions of the lab, portions of federal grants (Healthy Start, Male Reproductive Health), contracts for related services, and allocations of associated planning and administrative costs.

Physical Activity & Healthy Nutrition (8% of department budget): Includes the federally funded Steps to a Healthier Minneapolis grant and portions of Healthy Start, portions of the School Based Clinic program, contracts for services, and allocations of associated planning and administrative costs.

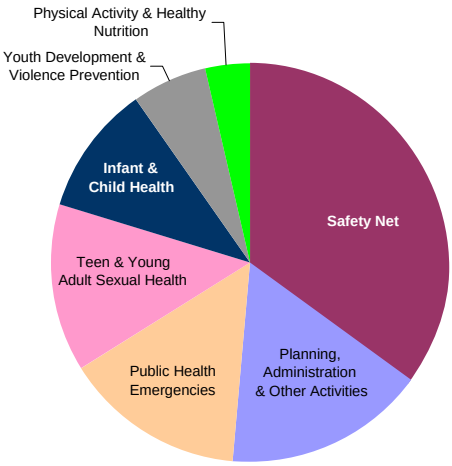
Safety Net (27% of department budget): Includes contracts for community based services, portions of the School Based Clinic program, portions of the lab, portion of Healthy Start, and allocations of associated planning and administrative costs.

Public Health Emergencies (8% of department budget): Primarily includes federal grants for public health emergency preparedness planning in the areas of pandemic influenza and all other hazards, with a particular focus on vulnerable populations, and allocations of other associated planning and administrative costs.

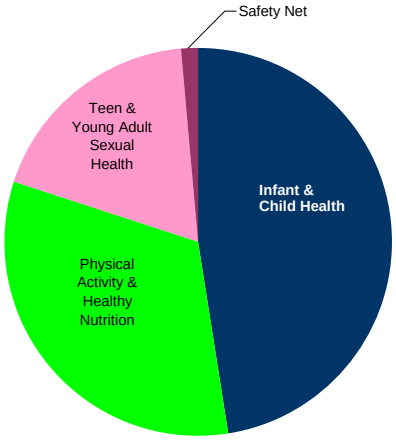
Planning and Administration & Other Activities (18% of department budget): This includes all other department activities that are not specifically tied to one of the six goals. Portions of this category are public health related activities, and portions are "Family Support" programs that do not meet state criteria as public health. The "Family Support" services provided by the department include the Senior Ombudsman's office, Skyway Senior Center, Housing Advocates, and management of human services contracts. Public health services include significant amounts of research, policy, planning, contract management, and general operations.

The pie charts below illustrate how each funding source is allocated across major department activities.

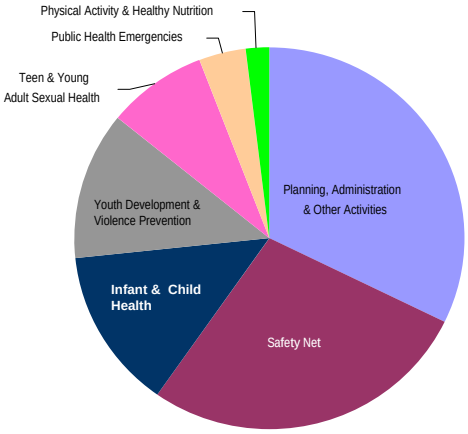
Formula/Other Grants
$6,384,890, 46% of Department Budget



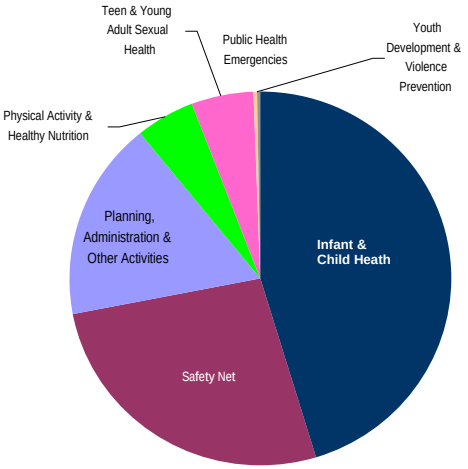
Competitive Grants
$2,234,858, 16% of Department Budget



General Fund
$3,734,244, 27% of Department Budget



CDBG
$1,567,444, 11% of Department Budget



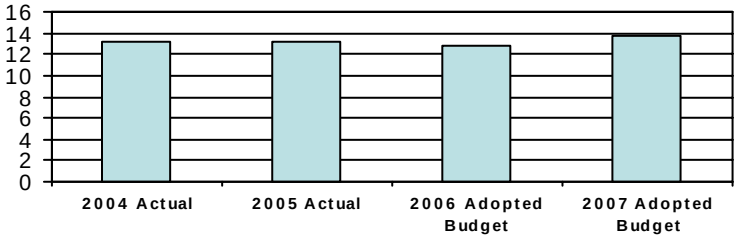
FINANCIAL ANALYSIS

EXPENDITURE

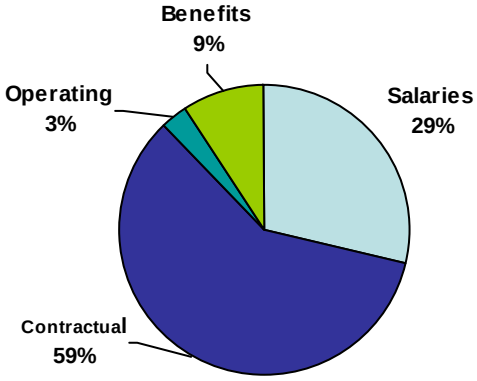
For 2007, MDHFS' total budget is approximately $13.6 million, a 5.6% increase from the 2006 Adopted Budget. Personnel expense increases 3.8% and non-personnel expense increases 8.5% over 2006. Based on the State requirements, the City needs to maintain a minimum of $2.2 million as local match to qualify for the available Local Public Health grants.

The Department has a total decrease of 0.7 positions in 2007.

Expenditures 2004-2007 (In millions)



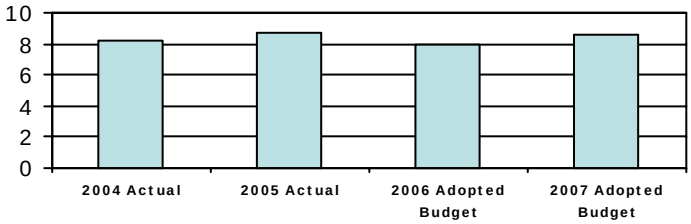
Expenditures by Type ($13.6 million)



REVENUE

There is an overall 8.4% revenue increase. In 2007, the largest revenue source, federal grant fund availability, increases by $876,536 or 25.4% over the 2006 level, primarily due to grants carryover and accounting shifts. The second largest revenue source, charges for services, also increases by $185,380 or 14.7% over the prior year.

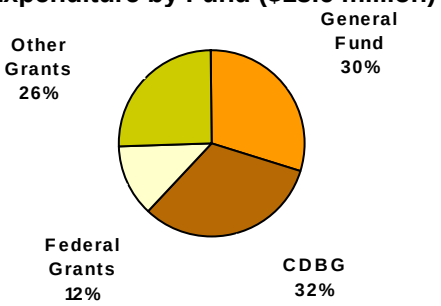
Revenues 2004-2007 (In millions)



FUND ALLOCATION

MDHFS' expense budget for the year 2007 is derived from the General Fund (29%), CDBG (12%), Federal funds (33%), and State and other local funds (26%). $75,000 of the Minnesota Visiting Nurses Agency (MVNA) General Fund support and $45,000 of the Neighborhood Health Care Network (NHCN) General Fund support will be shifted to the Local Public Health Grant funds in 2007.

Expenditure by Fund ($13.6 million)



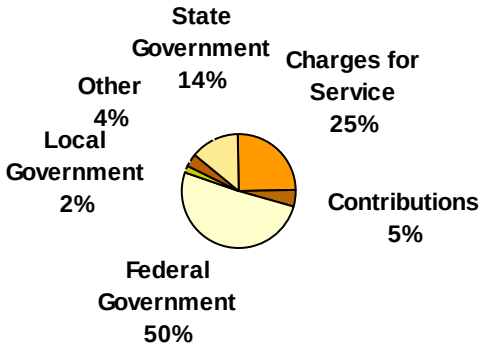
MAYOR'S RECOMMENDED BUDGET

Additional one-time funding for domestic violence efforts was recommended by the Mayor ($50,000). The Mayor also recommended an additional $125,000 in one-time funding for Youth Violence Prevention efforts. The Mayor recommended $80,000 in one-time funding for safe routes to school efforts, with the department working with Public Works Department.

COUNCIL ADOPTED BUDGET

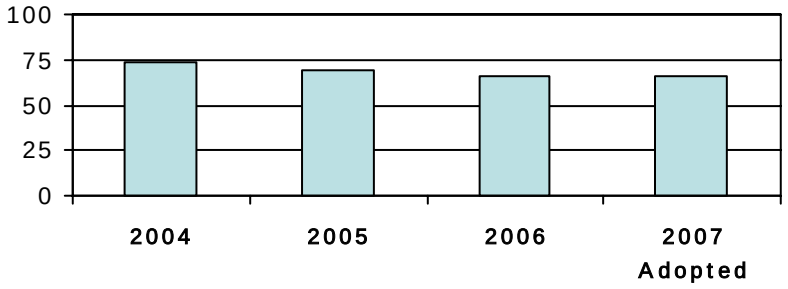
The Council concurred with the Mayor's recommendation.

Direct Revenue by Type ($8.6 million)



HEALTH AND FAMILY SUPPORT						
Staffing Information						
	2004 Adopted Budget	2005 Adopted Budget	2006 Adopted Budget	2007 Adopted Budget	% Change	Change
Total FTE's	73.90	69.00	66.30	65.80	-0.75%	(0.50)

Staffing Summary 3004-2007



HEALTH AND FAMILY SUPPORT
EXPENDITURE AND REVENUE INFORMATION

	2004 Actual	2005 Actual	2006 Adopted Budget	2007 Adopted Budget	Percent Change	Change
Total Expenditure - All Funds	13,215,420	13,258,386	12,870,103	13,551,971	5.3%	681,868
Total Revenues - All Funds	8,191,926	8,723,909	7,887,858	8,552,742	8.4%	664,884
General Fund - City						
Salaries and Wages	864,083	892,258	920,777	960,524	4.3%	39,747
Contractual Services	2,130,716	2,333,162	2,378,285	2,488,696	4.6%	110,411
Operating Costs	202,129	171,691	109,762	308,995	181.5%	199,233
Fringe Benefits	219,259	251,174	289,588	317,902	9.8%	28,314
Equipment	29,540	1,067			0.0%	0
Capital Outlay			2,833	0	-100.0%	-2,833
Total Expenditure	3,445,727	3,649,351	3,701,245	4,076,117	10.1%	374,872
Charges for Service	583,584	689,436	650,000	650,000	0.0%	0
Total Revenues	583,584	689,436	650,000	650,000	0.0%	0
Special Revenue Funds						
Salaries and Wages	2,603,668	2,485,746	2,861,246	2,986,331	4.4%	125,085
Contractual Services	6,217,217	6,181,463	5,330,733	5,455,565	2.3%	124,832
Operating Costs	219,088	265,860	82,166	100,318	22.1%	18,152
Fringe Benefits	680,369	670,379	894,713	933,640	4.4%	38,927
Equipment	45,000	5,587	0	0	0.0%	0
Transfers	4,351				0.0%	0
Total Expenditure	9,769,693	9,609,035	9,168,858	9,475,854	3.3%	306,996
Sales and Other Taxes	11,375	13,000	45,900	54,640	19.0%	8,740
Federal Government	4,010,388	4,320,981	3,456,062	4,332,598	25.4%	876,536
State Government	2,730,558	2,767,555	1,265,259	1,240,000	-2.0%	-25,259
Local Government	432,692	411,122	204,000	196,000	-3.9%	-8,000
Charges for Service	97,048	189,432	1,264,124	1,449,504	14.7%	185,380
Contributions	238,147	299,037	848,052	430,000	-49.3%	-418,052
Other Misc Revenues	28,865	12,250	154,461	200,000	29.5%	45,539
Operating Transfers In	59,270	21,095			0.0%	0
Total Revenues	7,608,342	8,034,473	7,237,858	7,902,742	9.2%	664,884