Public Health Advisory Committee

September 24, 2013, 6:00 – 8:00 pm

Minneapolis City Hall, Room 132

AGENDA

Agenda Item	Presenter	Time	Committee Action
Welcome and Introductions	Tara Jensen, co-chair	6:00-6:05	Approve agenda
PHAC Logistics and Updates: Approve Minutes Reports from Sub-committees: *Communications/Operations* *(Date change for November)* *Policy & Planning* *Collaboration & Engagement*	Tara Jensen *Karen Soderberg* *Rebecca Thoman* *Autumn Chmielewski*	6:05-6:30	Approve Minutes
Presentation: Prezi *Department Goals, Updated Vision-Mission-Values, Strategic Priorities*	*Gretchen Musicant*	6:30-7:05	Informational session Questions/discussion
Prioritizing Activity: *Determine PHAC work priorities in relation to Dept. goals*	*Rebecca Thoman*	7:05 – 7:30	Facilitated exercise
Department Updates: *Budget presentation to Ways & Means Committee*	Gretchen Musicant	7:35-7:45	Discussion
Information Sharing	All	7:45-8:00	Discussion

Next Sub-committee meeting: October 22, 2013, Minneapolis City Hall, Rooms 132 & 333

Next Meeting of the Full Committee: November 26, 2013, Minneapolis City Hall, Room 132

If there are any problems/changes the night of the meeting, please call (612) 919-3855.

Public Health Advisory Committee (PHAC)
Minutes

September 24, 2013

Members Present: Julie Ring, Robin Schow, Patricia Hillmeyer, Saeng Kue , Tara Jenson, Karen Soderberg, Linda Welter, Birdie Cunningham, Autumn Chmielewski, Dr. Rebecca Thoman, Silvia Perez, Julie Young-Burns, Linda Brandt, Jennifer Pelletier, Daniel Brady

Members Unexcused: Dr. Happy Reynolds-Cook, Abdullahi Sheikh, John Schrom

MHD Staff Present: Gretchen Musicant, Margaret Schuster, Don Moody

Guests: Tamara Ward (Member At-Large, pending Council approval); Anthony Nixon, CDC Associate (Public Health Associate Program)

Tara Jenson called the meeting to order at 6:02 p.m. at City Hall.

Item	Discussion	Outcome
Introduction	Members and guests introduced themselves. Anthony Nixon discussed the Environmental Health Air Quality study. One hundred air quality monitoring stations will be placed at various locations in Minneapolis. MHD looking for volunteers to place small round canister in yard with appropriate signage to explain its purpose. Launch date: November 4; collect air samples through November 7. City staff place & remove canister for you.	Sign-up sheet to volunteer to host a monitoring canister for Nov 4-7 was passed around
Agenda/Min Approval	Minutes from July reviewed; Members had no changes to the minutes or to tonight's meeting agenda.	Motion to approve minutes carried by unanimous consent
Sub-committee reports: *Operations / Communication* *Karen Soderberg*	**Reminder:** A Yahoo! group mailing list has been set-up for the committee to post notes, questions, etc. Let Tara know if you need to be added to that group. Also, Karen & Tara will summarize full committee meetings into a short blurb that can be shared with your council member or representative agency/office.	
Annual report presentation to Council Committee	Tara Jenson and Karen Soderberg (PHAC co-chairs) will present to the PSCR&H Committee regarding the PHAC 2012 annual report and a review of activities so far in 2013 with ideas for 2014. Presentation is September 25 at 1:30 p.m., City Hall, Room 317.	
Meeting Dates	Committee suggested re-scheduling November meeting: November meeting would fall in same week as a national holiday. Schedule for 2014 meetings presented and discussed. PHAC member terms, aspects of Council Member appointments, and City Council approval were also discussed based on questions from committee members.	Motion to move meeting date to November 19; no meeting in December; Patty Hillmeyer, motion; Linda Welter second. Motion approved by voice vote. Motion to accept 2014 meeting schedule approved by voice vote.
Policy & Planning *Rebecca Thoman*	A Prioritizing Activity is on the agenda – and will be conducted by this committee. This group activity designed to help PHAC prioritize its activities and align them with Department goals.	
Collaboration & Engagement *Autumn Chmielewski*	Howard Blin, Neighborhood and Community Relations (NCR), presented to the sub-committee in August. Sub-committee is working to define "How do we engage?", "What is the role of our sub-committee?" and is discussing which avenues work best for connecting with various communities, neighborhoods, ethnic/cultural groups. The sub-committee found it very helpful to hear the breadth of work NCR does. Howard will send Margaret a list of organizations they work with which will inform our activities moving forward.	

Public Health Advisory Committee (PHAC)
Minutes

City of Minneapolis
Health Department

Department Presentation Department Goals, Updated Vision-Mission-Values, Strategic Priorities (using Prezi) *Gretchen Musicant*	Gretchen presented the finalized version of MHD's goals, new vision, mission and value statements, and the department's strategic priorities. A PDF of this presentation is found on the website: http://www.minneapolismn.gov/www/groups/public/@health/documents/webcontent/wcms1p-115332.pdf Gretchen gave an overview of the accreditation process MHD is working through. The Public Health Accreditation Board (PHAB) has a voluntary national accreditation program, developed in 2011, for state, territorial, tribal, and local health departments. The State of Minnesota and Hennepin County have submitted their applications and are awaiting their site visits. MHD is learning from them and utilizing their assistance as needed. PHAC member question following the department overview of goals: Where is Mental Health in all this? What are the department's proactive activities around mental health? Gretchen's response: We are working to include Mental Health (MH) aspects: MH is an overriding need of many families; about one-third of our School Based Clinics staff work in MH; our Youth Violence Prevention efforts include MH and grieving work. Your question makes me think our efforts and focus should be more visible.	Questions and discussion
Prioritizing Activity: Determine PHAC work priorities in relation to Department goals *Rebecca Thoman*	Group activity for prioritizing PHAC activities. Information and requests for action come to us from Council, the community, from MHD, and through our own vested interests. How do we focus our efforts? We previously set criteria that included: items/requests need to be actionable, have appropriate scope for PHAC involvement; reflect a genuine need; and, be concrete and data-driven. Post it easel sheets were hung around the room with areas of interest (as voiced in earlier PHAC meetings coupled with health department goals. Committee members added several areas of interest that were not reflected. Once lists finalized, committee members reflected preferences by 'starring' items (each member allowed three 'stars' which could be placed on a single item or on multiple items). Comment from PHAC member: Integrating this information into an action plan will help us determine the primary advocates // opponents // partners and ways to integrate with what the City is working on. It will help identify groups / individuals / organizations in those identified (prioritized) areas, provide focus to the engagement efforts of the Collaboration & Engagement sub-committee and inform the actions & activities of this committee.	Information gathered will be summarized by Margaret, sent to Rebecca, and the focus of this sub-committees' discussions at the October meeting.
Department Updates- *Gretchen Musicant Budget review*	Gretchen reviewed the 2014 Budget as presented to the Ways & Means Committee. (Power Point presentation). Current timeline: Council Members send follow-up questions to department and receive reply; Council then votes on budget December 2013.	
Information Sharing – *Red Fountain Inc.*	Multi-cultural Career Fair and Community Expo will be held on Saturday, October 12 (associated flyer passed around)	

Meeting adjourned at 7:36 p.m.
Minutes submitted by Don Moody and Margaret Schuster

Next Sub-Committee Meeting: October 22, 2013, Minneapolis City Hall, Room 132 & 333, 6:00-8:00 p.m.
Next Full Committee Meeting: November 19, 2013, Minneapolis City Hall, Room 132, 6:00-8:00 p.m.

Our Vision…

Healthy lives and healthy environments are the foundation of a vibrant Minneapolis now and into the future.

Our Mission…

The Minneapolis Health Department improves the quality of life for all people in the city by protecting the environment, preventing disease and injury, promoting healthy behaviors, and creating a city that is a healthy place to live, work, and play.

Our Values…and the Way We Work

Our values provide the foundation for the work we do, how we work together as a department, within city government, and with the community. They inspire and challenge us, and set forth the principles by which we hold ourselves accountable.

Invest in a healthier community

- *We support a holistic sense of health within the context of families and communities across the life span.*
- *We work for sustainable changes to ensure a return on our investment in health outcomes for the most at risk and the community at large.*
- *We bring people and resources together to achieve our common goals and address conditions that influence health.*

Exercise leadership in public health

- *We use sound research, promising strategies, and community input to inform our activities and decisions.*
- *We encourage our mission-focused, passionate staff to be proactive, innovative and flexible, and to share their knowledge with our local community and beyond.*

Quality inspires our work

- *We strive for excellence in our work by being accountable to the public for consistent standards resulting in measurable progress towards desired outcomes.*

Engage with communities

- *We build on our urban community's cultural diversity, wisdom, strengths, and resilience and are directed by the community's voice.*

Protect from harm

- *We protect residents and guests of Minneapolis from disease and injury; assist them in recovery from disaster; and, protect the environment from degradation.*

Minneapolis Health Department

Minneapolis City of Lakes

Our Goals…

A Healthy Start to Life and Learning

- Thriving babies
- School-ready children

Thriving Youth and Young Adults

- Prevent teen pregnancy
- Reduce sexually transmitted infections/HIV rates through targeted services to youth and young adults most at risk.
- Reduce violence among youth
- Invest in activities that promote: mental and physical health; social, emotional and life skill learning; and, positive development for all youth.

Healthy Weight and Smoke-Free Living

- Affordable and accessible opportunities for healthy eating, physical activity and smoke-free living for all ages and abilities
- Communities expect healthier environments

A Healthy Place to Live

- Healthy indoor environment for everyone

Safe places to eat, swim, and stay

- Minimize the risk of disease and injury from food, lodging and swimming establishments

A Healthy Environment

- Clean, healthy natural environment (air, soil, water) free of environmental hazards and pollution
- Environmental nuisances (noise, odor) are minimized

A Strong Urban Public Health Infrastructure

- City and community prepared for emergencies – now and into the future
- Health care safety net for everyone who needs it
- Diverse, engaged, and skilled staff
- State-of-the art implementation of programs and procedures to improve population and environmental health
- Research and policy-related activities that improve population and environmental health

Minneapolis Health Department

Minneapolis
City of Lakes

Our Strategic Priorities…to Strengthen our Department…

We determined that, over the next two years, particular emphasis would be placed on creating our workforce and communications plans. The last three strategic priorities cut across all facets of our goals; provide the foundation for sustained, secure programs, services, and staff; and, emphasize the necessity for strategic alignment of resources, whether those resources are people, organizations, partnerships, or funding.

Create a workforce plan

- Hiring practices: streamlined, consistent, diverse workforce
- Orientation: cultural competency, performance management
- Perform Minneapolis: goal setting, measure performance and results, training & development
- Upstream activities: promote public health as career

Create a communications plan

- Key messages / intended audiences / effective tools
- Inform / educate public
- Articulate value, measures, and impact of our work

Secure(d) funding for prioritized activities

- Research, evaluate, recommend new funding opportunities
- Prioritize funding sources - align with department goals
- Determine process to develop funding security

Increase & strengthen strategic partnerships

- Identify existing external partners – align with department goals
- Identify other strategic partners – align with department goals
    - initiate / nurture / sustain partnership

Collect meaningful data

- Identify existing / available data used to address public health issues
- Prioritize what data would be most important / relevant / useful
- Determine best method to collect / obtain additional data
- Analyze / disseminate / use data
    - Meaningful statistics linked to funding, linked to department goals / programs
    - Meaningful statistics linked to performance measures
        - identifies gaps & successes
        - identifies potential program development

Minneapolis Health Department

Minneapolis City of Lakes

City of Minneapolis
Health Department

Public Health Advisory Committee

2014 Meeting Dates

FYI: Meetings are the 4th Tuesday of each month and run from 6:00-8:00 PM in City Hall; exact room locations are indicated on the monthly agenda; a light supper is served at 5:45 PM in Room 132 City Hall.
Additionally, the full Committee of the PHAC meets *every other month* beginning **January 2014**.
Sub-committees meet every other month independent of the full committee beginning **February 2014**.

KEY: **Full Committee meeting** dates are **RED**; **Sub Committee meeting dates** are **GREEN.**

January 28, 2014

February 25, 2014

March 25, 2014

April 22, 2014

May 27, 2014

June 24, 2014

July 22, 2014

August 26, 2014

September 23, 2014

October 28, 2014

November 25, 2014

December 2013—No meeting unless determined by sub-committee.

If unable to attend, please contact Don Moody by email at Don.Moody@minneapolismn.gov or by phone (612) 673-2907

Minneapolis Health Department
2014 Budget Hearing

Department found on pages E128 – E136 in budget book
Presentation to Ways and Means/Budget Committee

2014 Funding Initiatives

- 11 Ongoing Programs
- 3 Mayor-recommended New Initiatives
- 1 Operational Capitol request

Health Department Programs – Many People, One Minneapolis

Youth Development and Teen Pregnancy Prevention

- Ensures policy and programs for youth are aligned with positive youth development theory and are evidence-based;
- Creating / maintaining collaborative partnerships to address disparities in youth development; and,
- Prevent Teen pregnancy through program development

Benefit to the City: Improve school attendance, prevent school drop-out, and reduce teen pregnancies. Partnerships with community based agencies, jurisdictional partners, and schools allow us to work more efficiently in developing evidence based services for youth with multiple challenges/barriers and help them improve their soft skills to become college or job ready.

Senior Services

- UCare Skyway Senior Center; and,
- Home health care visits provided by the Minnesota Visiting Nurse Agency

Benefit to the City: For ten years the Senior Center has provided drop-in services that focus on wellness, social connection, linking to community resources, helping seniors avoid isolation, staying healthy and in their homes. In 2013, an average of 1,440 unduplicated seniors drop-in every month; a total of 15,555 visits in the first 10 months. Over 500 home health visits provided annually to low income, at-risk, and under/ uninsured Minneapolis seniors who are not yet Medicare eligible to help maintain them safely in their own homes.

Perinatal, Early Childhood and Family Health

- Promotes maternal, paternal, child and infant and health through a range of coordinated, complementary services; and,
- A major marker for broader societal well-being is the rate of infant mortality

Benefit to the City: Investments in healthy pregnancies, healthy births, and early child development activities promote desirable long-term outcomes such as academic success, gainful employment, and healthy families.

School Based Clinic Programs

- In six Minneapolis public high schools and the Broadway Teen Parent Program alternative school at Longfellow;
- Adolescent focused health services are provided by medical and behavioral health professionals and include acute illness care, well teen exams, reproductive care, nutrition education, immunizations, and mental health screenings, diagnostic assessments and therapy

Benefit to the City: Reduce absenteeism by providing in-school medical and mental health services; Connect youth to caring adults and teach adolescents the importance of routine health screens and check-ups; Provides services to uninsured and underinsured adolescents enrolled in Minneapolis Public Schools; Helps prevent unwanted teen pregnancies.

Health Department Programs – A Safe Place to Call Home

Youth Violence Prevention

- Provide citywide leadership and coordination to implement the Youth Violence Prevention Blueprint for Action in partnership with government and community partners

Minneapolis was one of 4 cities added to the National Forum to Prevent Youth Violence and has revised the Blueprint for Action with input from law enforcement, juvenile corrections, youth programs, education, public health, social services, community residents, and youth.

Benefit to the City: This collective framework impacts the juvenile crime rate in Minneapolis by keeping youth out of the juvenile justice system, connecting them to school, addressing the impact of repetitive violence on communities, developing youth as leaders focused on unlearning the culture of violence, and increasing community pride. Investments in youth and families before youth get caught up in gangs or criminal behavior is less expensive than incarceration.

Lead Poisoning and Healthy Homes

- Eliminate elevated lead levels in Minneapolis children under age six;
- Reduce indoor environmental hazards that contribute to asthma, lung cancer and other chronic conditions; and,
- Provide outreach, education, home visiting, and referrals to lead remediation and healthy homes services

Benefit to the City: Focus on healthy homes issues (lead, asthma, radon, etc.) can prevent death and disability for Minneapolis residents *(children being most susceptible)*. Elevated blood lead levels in children have been associated with violence, learning disabilities, decreased IQ, decreased growth, hyperactivity, hearing impairment, brain damage and, at very high levels, death. Childhood asthma is a leading cause of school absenteeism and can lead to death if not managed. Changes made to homes improve the City's housing stock.

Public Health Emergency Preparedness and Infectious Disease Prevention

- Required by statute - and the Commissioner of Health by Minneapolis charter - to prevent the spread of infectious disease; and,
- Required by statute to prepare for and respond to disasters and assist the community in recovery

Benefit to the City: Prepares the City for a quick, effective response to infectious disease outbreaks and emergency situations; ensures a proactive, coordinated effort that supports stability; enhances safety; and, builds community resilience.

Food Lodging and Pools

- Ensures commercial and institutional food offerings are safe and in compliance with state and local health codes; and,
- Conducts more than 7,000 inspections a year of restaurants, schools, board & lodging facilities, hotels, pools, tanning & body art establishments, daycares, farmers markets, grocery stores, and food vendors

Benefit to the City: Health inspectors protect the public from disease and injury. Successful regulation helps businesses thrive. Balancing the use of tools such as education, technical assistance and enforcement allow health inspectors to partner with local businesses, reduce health and safety risks, and ensure fair enforcement of health laws.

Health Department Programs – Eco-Focused

Environmental Services and Initiatives

- Protects our air, water and land from pollutants and toxins
- Enforces state and local environmental laws, provides technical assistance, and operates the state well-monitoring program under delegation from the state

Initiatives program designed to proactively address pollution in a way that is a win-win for our area businesses, our residents, and the environment.

Benefits to the City: A healthy environment is foundational to healthy people, a healthy economy, and a healthy community. Minneapolis ranks as one of the greenest cities in the world, a key contributor to quality of life.

Health Department Programs – Livable Communities, Healthy Lives

Minneapolis Healthy Living Initiative

- Department and its partners primarily use policy, systems, and environmental approaches with a population focus;
- Efforts concentrated in low income communities across the City with highest rates of obesity, tobacco use and chronic disease; and,
- Healthy Living Minneapolis initiative = 14 strategies aimed at decreasing obesity and tobacco use and the chronic diseases caused by them

Benefit to the City: Both smoking and obesity are leading causes of preventable chronic disease which impact health care costs and productivity. Increased access to health-enhancing amenities and infrastructure lead to a more livable city.

Health Department Programs – A City that Works

Public Health Core Infrastructure

- Assessment of community health needs, setting health priorities
- Engaging the community to address health-related issues
- Advocating for policy changes
- Evaluating programs, developing and evaluating innovative tools and programs, and
- Fostering healthy environments

Benefit to the City: Provides administrative platform for the provision, oversight, and assessment of public health services. Includes contract management and grant writing necessary to maintaining progress toward City and Department goals. Promotes policy development (such as, the Urban Agriculture plan and policy and Minneapolis Public Housing Authority's smoke-free multi-unit housing policy).

New Initiatives

The Mayor is recommending three new/continuing initiatives requiring additional resources:

- Preventing High-Risk Youth from Becoming Victims of Violence
- Parents of Adolescents Support Groups
- Air Quality Monitoring

New Initiatives – A Safe Place to Call Home

Preventing High-Risk Youth from Becoming Victims of Violence

- Lead by the Health Department--a data-informed approach to identifying and providing services for youth who are most at risk of becoming victims of violent crime;
- Requests $75,000 in one-time funding to contract with 1-2 agencies to provide outreach and case management services to identified youth; and,
- Designed as a voluntary prevention and early intervention program; Services will focus on positive modeling, pro-social behavior and academic success

New Initiatives – Many People, One Minneapolis

Youth Violence Prevention – Parents of Adolescent Support Groups

- One-time allocation of $150,000 to implement support groups for parents of adolescents to support citywide efforts to prevent youth violence
- The program funds 2-5 projects ranging from $30,000-$75,000, serving 150-200 total families

Research has shown that evidence-based parenting programs have positive impact on youth academic performance, self-esteem, resiliency, and mental well-being, as well as reduction in youth involvement in violence and teen pregnancy.

Air Quality: A Neighborhood Approach

The *Air Quality in Minneapolis: A Neighborhood Approach* project will expand on the *Minneapolis Air Quality Study* published in 2007, which provided a more extensive look at air quality in Minneapolis. The first half of this study was initiated in 2013 and requires funding through 2014 to be completed.

- One-time allocation of $125,000 to support air quality testing in 2014;
- Air monitors will be placed in transects across the city as well as locations of potential concern identified in the first study; and
- Looks at sources of pollution and at affected populations and issues related to environmental justice: $30,000 of this request is to conduct cross cultural outreach work with minority communities and business owners

Operating Capital Request

The department made one request through the CARS process for $50,000 in 2014 to leverage existing IT resources for the development and the enhancement of an IT infrastructure for the One-Touch Minneapolis project.

- Aims to create tools designed to generate a common healthy homes, health and energy assessment intake and referral system;
- Tracks how families access services and documents unmet community needs
- End goal is to create a unified effort across City and non-profit agencies so one application and intake process would suffice.

Impact of Recommended Budget on Key Results

- No change in the department's ability to achieve its Results measures;
- Mayor's recommended funding level: a modest increase from 2013 with cost of living increases for staff and with adjustments for health insurance;
- Stable funding in 2014 gives us the base upon which to continue to seek additional outside competitive funding;
- Proposed General Fund allocation to the department is 31% of the budget. *There is concern about federal funding uncertainty and the significant cuts in the Department's federal funding that may occur.*

Recent or Planned Efficiencies

- Merger of Health with Environmental Health
- Used BPI to analyze the department's hiring processes, improve efficiencies and timeliness in hiring
- Utilization of School Based Clinic (SBC) staff by the lead and healthy homes program over summer break
- Developing *One Touch Minneapolis* - designed to streamline intake and referral systems for city residents seeking help with a variety of healthy homes issues.

Technology Initiatives

- Continuing implementation of Electronic Health Records (EHR) for the School Based Clinics (SBC). Set up costs for EHR have been covered, on-going expenses will be managed within existing patient revenue resources and with anticipated federal funding incentives; and,
- Wireless communications: particularly important for web based training; may be an emergency preparedness resource for City response

Racial Equity Impact

- Our values statements include focusing our efforts on investing in health outcomes for the most at-risk;
- Mission includes the statement "improve the quality of life for all people in the city";
- When possible, our health data analysis includes comparisons by race;
- We work with community–based organizations to support their work ;
    - as part of the city's infrastructure
    - because of their relationships with communities affected by health disparities, and
- As we work with regulated parties we pay attention to cultural and linguistic issues so that our interactions are more effective and the end result is healthier businesses

Workforce Planning

- Department's Strategic Plan includes a Workforce Plan with the goal of "Developing and Supporting a Competent, Stable, and Diverse Workforce";
    - assessing and streamlining current hiring practices including current and future workforce needs;
    - initiating and implementing Perform Minneapolis;
    - maintaining upstream activities to promote public health as a career and to diversity the public health workforce; and,
    - updating orientation processes to include more cultural competence training

Major Contracts in Departments

- Over 90% of department contracts are with community based not-for-profits, governmental units, and independent contractors;
- Met with Civil Rights on opportunities to increase the use of Women or Minority Business Enterprise (W/MBE) contractors; with a primary focus on identifying opportunities to use W/MBE vendors for services.

How is the Department Doing?

- Revised mission, vision, values, and department goals, staff aligned with new goals;
- Timeliness of state mandated health inspections significantly improved: from 27.6% of health inspections overdue in 2010 to 1.5 % of inspections overdue in 2013;
- One of 4 cities joining the National Forum to Prevent Youth Violence which led to engaging the community in refreshing the Blueprint to Prevent Youth Violence;
- One of 6 inaugural cities to receive the Road Maps to Health Award from the Robert Wood Johnson Foundation for our Healthy Living work and partnerships;
- Mentoring an unprecedented number of CDC staff: 2 Prevention Specialists and 3 Associates. *They are each with us for 2 years and are working in the areas of emergency preparedness, healthy living, youth development/sexual health, environmental services, men's health and Homegrown Minneapolis.*