

Meeting Location:

North Regional Library | 1315 Lowry Ave N.

Next Meeting:

September 13th at 4:30p-6:30p Location: TBD

Members Attendees:

Andre Bornhoft

Annie Krapek

Adam Spees

Gail Brottman

Melissa Newman

Meilsa Illes

Anita Urvina-Davis

Roxxanne O'Brien

John Hemp

Rules of engagement for group

- Honesty and respect
- No condescending language
- Giving everyone an opportunity to speak
- Not being afraid to ask for clarification
- Be mindful of time
- Don't take information personal

Lisa Smestad PP

- Asthma data from 2011-2015
- 1/3 of hospital visits in zip code 55411 from 9-11 are for asthma equaling about 500 per year

Anita: Can you forward map to be forward to CM?

Dr. Gail Brottman

- We need to identify and educate at-risk residents on asthma triggers
- Enroll family with children suffering from poorly controlled asthma in new asthma trigger mitigation to proper resources
- One issue with making diagnosis common symptoms can be confused with simple colds
- Parents at times have issues determining between colds and asthma
- asthma is the most common reason children miss school in Mpls area
- Hennepin County utilize stop light model assist with asthma management plans

- utilizes validated tool for patientin determine asthma control
- what are risk signs
 - had one hospital past year
 - 2 or more ER visits
 - any ICU admission for asthma
- Challenges
 - How do we honor privacy (personal health info) while id children who are at risk and who have poorly controlled asthma?

Lafayette (Community) *Information given may been not be factual based.*

- Her family has lived over north for the last 25 years
- Asthma has affected family for two generation
- Previously worked with MPLS public schools, while being there noticed asthma is affected
- Personally, taught King about his allergy and asthma triggers so he is prepared for any potential attacks.
- Most parents in the North areas doing have close relationship with
- Believes grant money should be used to get more home care education for families who are affected by asthma.
- We need to make sure people who are doing outreach are culturally sensitive
- Also want doctors and families to be upfront with children about diagnoses so they can also be prepared for any attacks
- Data should also be specific on transplanted families(from one city to another)
- insurance company should be more helpful with resource and process
 - example only allows one neb every 5 years

Roxanne: What helps you the most when you can't breathe?

How much do nebs cost?

- \$170

Do you have the support you need?

- no, no one comes to the community to help educate north Mpls about rights and avenues that can help him.
- Resources, Asthma Camp: 7- teenage

Andrew: have you seen any other info being distributed on the northside been helpful
have you seen any support groups?

Community Responds: I'm sure they do, but they are not accommodating to families lifestyle

Andrew: If funding was used to help with family support do you think that will be beneficial

Community Respond: Suggestions could be the following:

- Fairview, Fowell, North Commons
- Also make sure light snacks are available
- Provide an incentive base that helps them with lifestyle

Andrew: what other than GC or incentive base suggestion can be used to gain family participation?

Annie: would medical incentives be better than monetary incentives?
medical supplies are already provided

Dr. Brottman: How can we better gage the communities trust?

Community: Get someone who looks like me.

James: how to did you build the relationship with a woman who didn't look like you (Dr. Brottman)?

Community Respond: Dr. Brottman built and maintain a trusting relationship by her going above and beyond with communicating with family

Melissa N. Is there other doctors in your network that are in the N Mpls that would be willing to be an asset to the north Mpls community?

Mpls Public schools (*Information given may be not be factual based.*)

- Team consist of licensed school nurses license by nursing and education boards
- Health office staff trained in asthma
 - trained to recognize symptoms
 - educate students on how and why to utilize inhalers
 - schools don't have rescue medication on hand family must provide for treatments
 - only able to give medication from both parent and health care providers instructions.
- Provided a brief screenshot of local high school's students who have been identified for asthma.
- Does not have real numbers of absence for asthmas
- Believes health staff do a good job treating asthma students
- Highschool numbers are lower than elementary
- Potential have families sign to release of information to better get

Cathy Erickson Minnesota Visiting Nurse (MVA)

- MN visiting Nurse group of 4 who are specifically with asthma
- Has found ways to engage with families by building trust with them.
 - Examples such as ask question providing food, clothing etc. to enter home when arriving
- Utilizes referrals from clinics, hospitals and schools to connect with families affected by asthmas
- Typically seeing families from 4-6 months
- Free to the patients as all services are billed directly insurance.
- One advantage providing incentives is a way to acknowledge family suffering

Annie: Is the only way you get cases are by referrals?

A: Yes, however anyone can refer a family

Sam: if we work with parks and rec programs will you be free to assist families in need?

How do you convert referrals?

Eliza Schell City of Mpls(Healthy Home Specialist)

- Today has help over 1000 children with asthma between Ramsey and hpn
- 2003-2009 had federal funding to assist with their work with home visit.
- Average cost per family was 375 compared to Emergency Room visit which was over \$1000
- During funding time they were able to colorate reduce missed school days and found less ER visits and hospitalizations based on work they have done.
- Had been the biggest program in the country for many years
- Funding has been an issue to sustain program
- Wanting to also work with landlords to help eliminate triggers of asthma

Dr. Brotzman: How do we better overcome barriers to reach impacted family?

- Confidentiality, lack of ability to share information
- has tried to partner with a third party to better gain information to get to families however some families were not receptive still.

Reflections of last 3 meetings

Andrew: excited about what they learned

Annie's: Still processing the solutions

John: no reflections

Roxanne: hopes that we invest the most within family pocket, with case advocacy and be creative in our resolution.

**Northern Metals Advisory Committee Meeting
08/16/2018 Meeting Notes**

Compiled by The Public Policy Project

Anita: During presentation some of the information was relatable, one of the biggest barriers were doctors, condescending treatment. doctors need to get rid of biases, Education was the common theme

Adam: a lot of good information but would like some time to think it over

Melissa I: Barriers is a common theme, there are strong component of different things

Katrina: Got a lot out of them meeting, likes community involvement in educating.

Gail: no comments