

2020





DEPARTMENT












results
minneapolis

Health Department





Performance summary










Enterprise priorities (page 4): Workforce diversity, Spending with diverse suppliers
Department priorities (page 5): Supporting non-profit community based organizations; Opioids

Trend Key			
	Year-over-year (YoY) increase by more than 5%		Less than 5% YoY change
	YoY decrease by more than 5%		No trend

Budget program	2019 Budget	Performance measure	2019 performance	Trend from prior year	Trend: Red/yellow/green
Core Public Health Infrastructure	\$4.1M	1. Competitive grant expenditures	1. \$4.5M	1. Decrease	1. 
Family and Early Childhood	\$3.7M	1. Perinatal home visiting funding 2. Individuals served through Family Home Visiting	1. \$3.2M 2. 3178 individuals	1. Stable 2. Stable	1.  2. 
Food Lodging and Pools	\$3.4M	1. Routine inspections and citations 2. Serving Safety trained in languages	1. 4679 inspections \$5220 citations 2. 35 trained in 9 languages	1. Stable 2. Increase	1.  2. 
School Based Clinic Program	\$3.3M	1. Number of clients screened for mental health 2. Number of STI tests conducted	1. 1171 clients 2. 4053 tests	1. Increase 2. Decrease	1.  2. 
Violence Prevention	\$2.3M	1. Shooting and homicide incidents 2. Group Violence Intervention Outcomes	1. 134 incidents 2. 47 intakes	1. Increase 2. Decrease	1.  2. 
Environmental Services	\$1.9M	1. Pollution control registrations and permits 2. Pollution and CO2 reductions	1. 1942 registrations; 5348 permits issued 2. 110,869 millions of pounds of CO2	1. Decrease 2. Increase	1.  2. 

Performance summary (cont.)

Trend Key			
	Year-over-year (YoY) increase by more than 5%		Less than 5% YoY change
	YoY decrease by more than 5%		No trend

Budget program	2019 Budget	Performance measure	2019 performance	Data trend	Status indicator: Red/yellow/green
Youth Development and Sexual Health	\$1.9M	1. Number of individuals tested for STIs during Citywide testing day	1. 2,849 students	1. Increase	1. 
Lead Poisoning and Healthy Homes	\$1.8M	1. Number of lead poisonings 2. Number of prevention inspections	1. 79 lead-poisoned children 2. 314 inspections	1. Decrease 2. Increase	1.  2. 
Minneapolis Healthy Living Initiative	\$1.1M	1. Availability of comprehensive wellness activities in MPHA buildings 2. Proportion of MPHA residents with access to comprehensive wellness activities 3. Compliance with Staple Foods Ordinance	1. 38% 2. 41% 3. 46% at 100% compliance	1. Increase 2. Increase 3. Increase	1.  2.  3. 
Emergency Preparedness and Infectious Disease Prevention	\$0.5M	1. Training hours and average staff per training 2. Program expense and funding sources	1. 157 training hours; 8 staff per training 2. \$467k cost, \$623k funding	1. Decrease 2. Decrease	1.  2. 
Senior Services	\$0.07M	1. N/A: Pass-through program	1. N/A	1. N/A	1. 

Enterprise Priorities

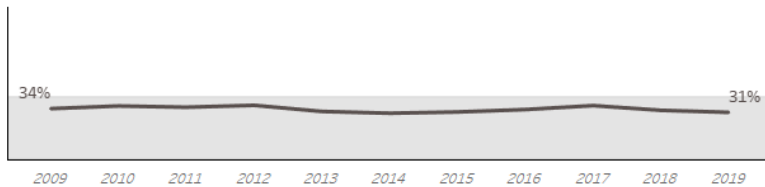
Workforce diversity

- **Does not meet** enterprise goal of 41% people of color
- **Exceeds** enterprise goal of 45% women
- Historically we have sought to hire staff that mirror the community. The pool of candidates is sometimes a limiting factor. Divisions within the Department have restructured positions to allow for more flexibility in qualifying credentials and experience and have created more entry level positions to facilitate more in house training and promotion opportunities.

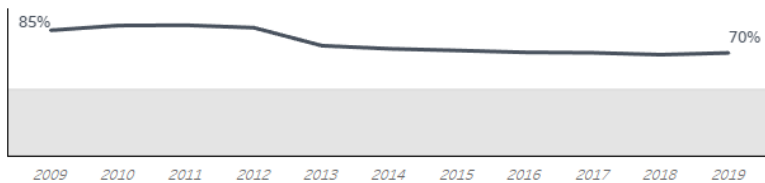
Workforce diversity (2009-2019)

Health

People of color



Women



Notes:

(1) Grey shading indicates enterprise goals (41% people of color and 45% women).

Definition for Regular City Workforce:

(a) Includes: all regular full-time, regular part-time, regular intermittent, and seasonal full-time City employees.

(b) Excludes: ACA seasonal and all temporary City employees including individuals on permit, outside trades, Election Judges, METP Summer Youth, and contractors.

Spending with diverse suppliers

- **Exceeds** Citywide percent diverse spending of 16%
- **Does not meet** Citywide percent spending with minority-owned suppliers of 7%
- **Exceeds** Citywide percent spending with non-minority women-owned suppliers of 9%
- Variations from year to year are related to specific spending needs of programs and initiatives. Targeted outreach into Green Zones for Environmental Programs may help continue the trend of exceeding the Citywide percent of diverse spending.

Summary

Total supplier spending* over selected years

\$3.7M

Amount spent with diverse suppliers over selected years

\$1.2M (34%)

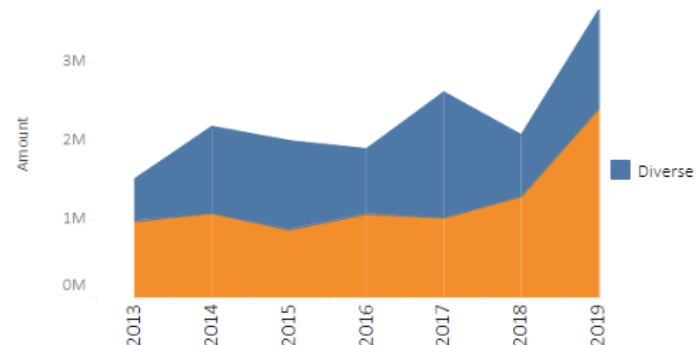
Minority-owned

\$185K (5%)

Non-minority women

\$1.1M (29%)

Share of diverse spending* (all years)

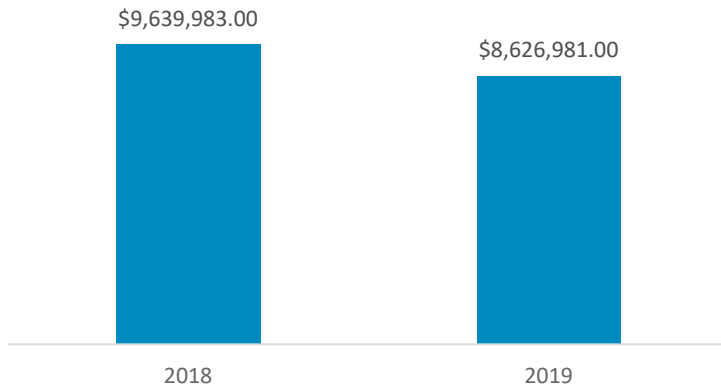


Department Priorities

Priority 1. Supporting non-profit community based organizations

The Health Department has a tradition of taking much of the money it receives through grants and other sources and passing it along to non-profit community based organizations. These organizations use our financial support to help accomplish the goals of the Health Department. While there is some fluctuation, due to the amount of money we are able to raise, it remains a consistently high number.

Funding to non-profit organizations

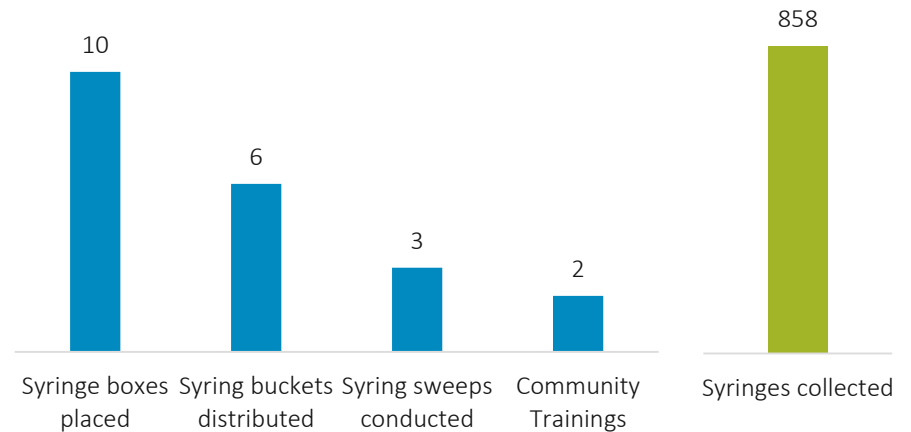


Definition: This data represents the total amount of the contracts we have with non-profit organizations. The actual dollar amount going out the door in any given year may fluctuate depending on the time period of the contract itself.

Priority 2. Opioids

This project is charged with implementing the recommendations of the Mayor’s Multi-jurisdictional Task Force on Opioids. Two-thousand nineteen (2019) was the projects first year of operation and therefore most work was focused on capacity building (i.e. fundraising, hiring staff, relationship building). Programmatically, a Syringe Litter program was developed, community education was designed and implemented and funding was secured.

Syringe Litter Pick Up (2019)



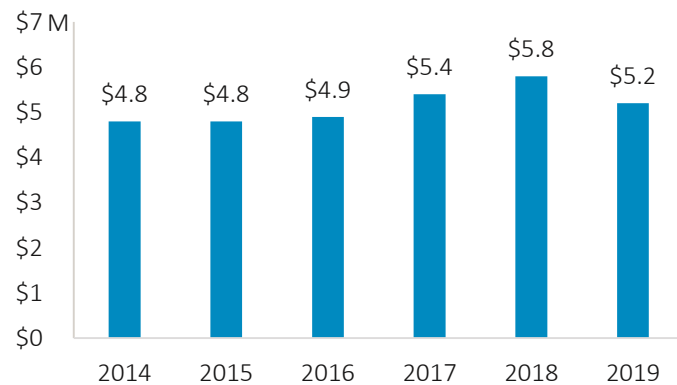
Definition: This is the first year of operation for the Opioid Program. As more programming is developed and implemented more data will become available. The numbers reflected here are related to the Syringe Boxes which were implemented in November of 2019 and some general syringe litter work the department began in the summer of 2019.

Core Public Health Infrastructure

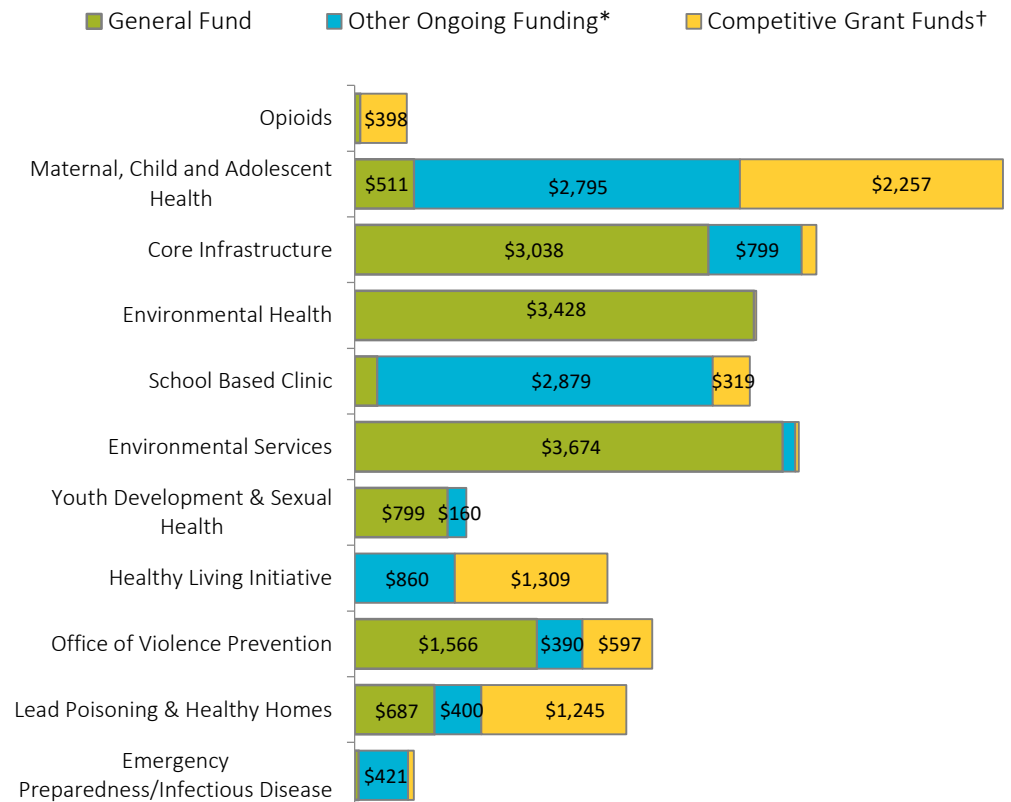
Program description: As a local public health entity operating under a Community Health Board (City Council), the department is mandated by Minnesota Statutes, chapter 145A, to provide directly or contract for essential public health services for Minneapolis residents. An adequate public health infrastructure 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.

Performance measures

Competitive grant expenditures
(in \$ millions)



Competitive Grant Budget for 2019 (in \$ Thousands)



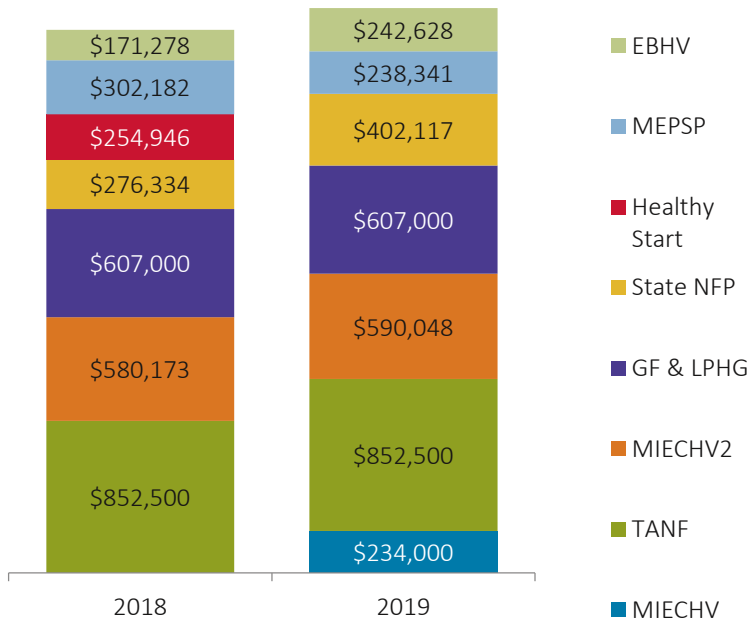
Definition:

- Competitive grant funding decreased slightly in 2019 relative to the two previous years. Large grants are typically funded for 3-5 years. Without these funds, City efforts to reduce racial and socioeconomic health inequities would be severely reduced.

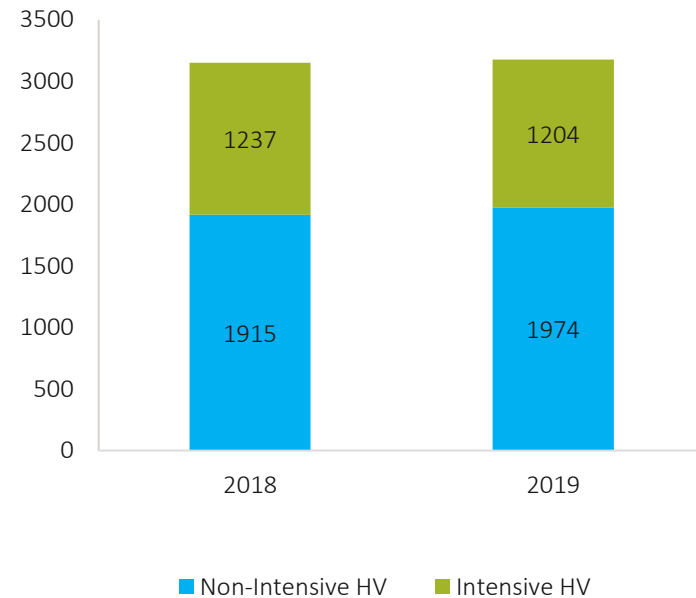
Program description: Targeted and intensive family home visiting promotes healthy birth outcomes, positive parent-child interaction, child growth and development, family self sufficiency, nutrition education, and family planning and connection to early childhood education. Additional programs promote school ready children and children with special health care needs.

Performance measures

Perinatal Home Visiting Funds by Source



Individuals Served by Family Home Visiting



Definition:

- Seven local, state and federal funding sources are combined to fund family home visiting. 75% are competitive grants successfully obtained by the department.

Definition:

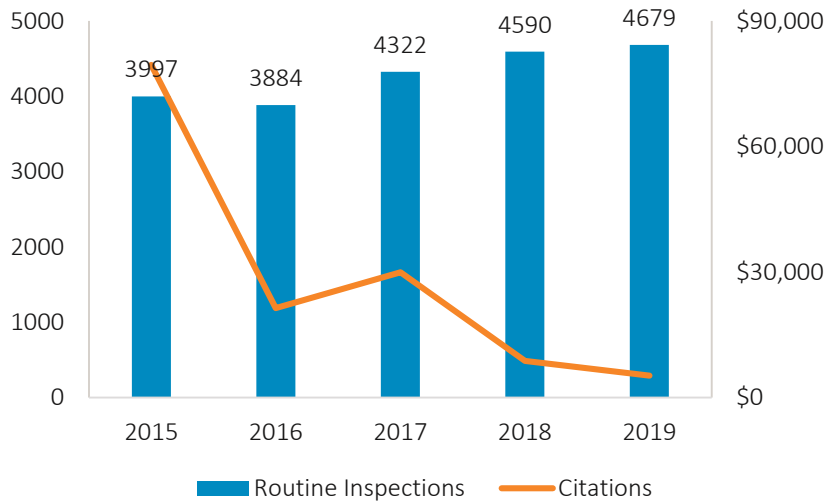
- MHD continues to provide both intensive and non-intensive home visiting to as many low-income, high risk, mothers, fathers, and young children as possible using evidence based and evidence informed approaches. Home visiting helps the city achieve its goal of a healthy start to life.

Food, Lodging and Pools

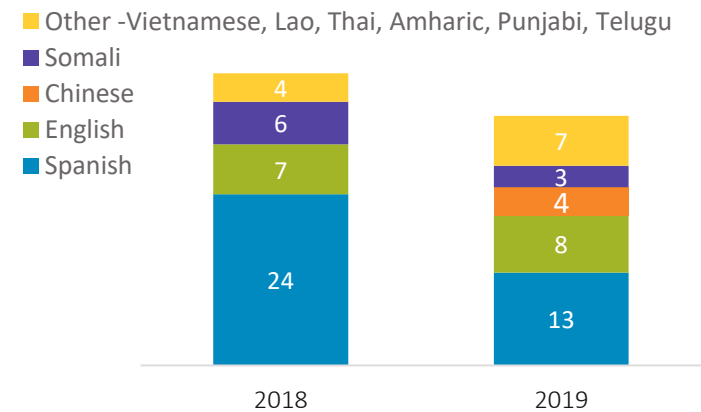
Program description: The Food, Lodging and Pools (FLP) program protects health and safety by ensuring food served to the public is safe and in compliance with state and local health codes. FLP conducts more than 7,000 health inspections a year of over 5,000 facilities including restaurants, food trucks, schools, board and lodging facilities, hotels, pools, tanning and body arts establishments, day care centers, farmers markets, groceries, and food vendors. Dedicated to promoting economic inclusion, the FLP team made a dramatic shift from enforcement to education. Customer surveys sent to businesses after their inspection showed over 98% of respondents were “satisfied with their health inspection.” Serving Safety, a comprehensive educational program developed for food businesses, provides in-house consultancy and hands on training in multiple languages to businesses struggling to meet health codes. Participating food businesses showed a 25% reduction in food safety violations after participating in the program.

Performance measures

Routine Inspections and Citations



Serving Safety In-House Consultancy Training Offered in Multiple Languages



Definition:

- Since 2010, the number of full routine health inspections conducted has steadily increased. In spite of the increase in inspections, revenue from citations have decreased as the department has shifted from strict enforcement to education and consultation to gain compliance.
- Routine inspections do not include re-inspections, complaints, plan review, illness investigations or other categories of inspections.

Definition:

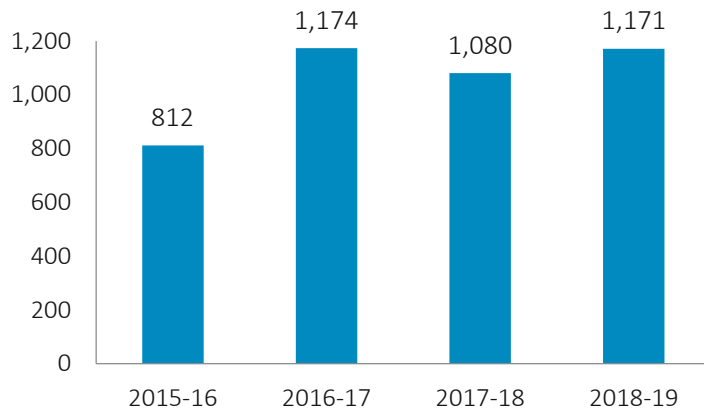
- The Serving Safety educational program includes materials, videos, and web-based and in-house consultancy training for Minneapolis food businesses.
- All educational programs are offered in multiple languages. In-house consultancy training is provided in the language(s) requested by the business. In 2019, trainings were held in 9 different languages, up from 5 languages in 2018.

School Based Clinic Program

Program description: The Department operates School Based Clinics (SBC) in six Minneapolis public high schools and health education and screening services at one alternative school site for pregnant and parenting teens. All clinic services are provided by medical, behavioral health, and health education professionals. The focus is on adolescent health services including acute illness care, well-teen exams, reproductive care, nutrition education, immunizations, individual and group health education, and mental health screenings, diagnostic assessments and counseling.

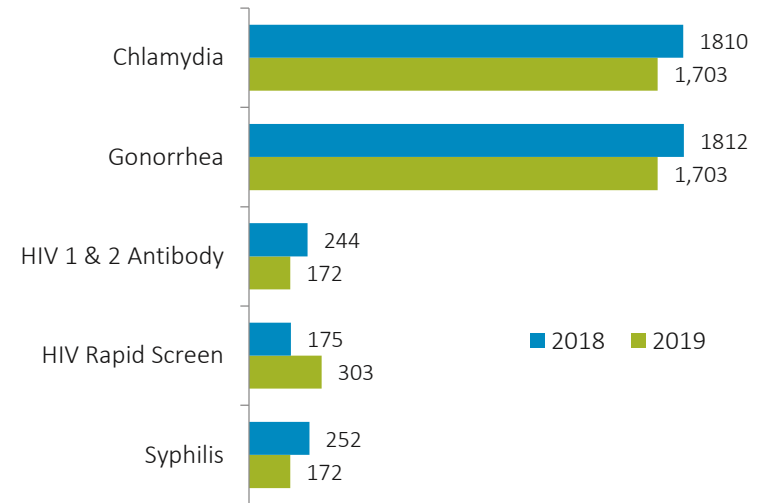
Performance measures

Number of Clients Screened for Mental Health by School Year



Definition: One of the quality improvement clinical performance measures for SBC is the number of clients who receive an annual mental health screen or risk assessment. The number represents the number of clients screened for all sites completed. Currently we are at 92% of all SBC clients who has a visit in 2018-19 school year had a risk assessment screening.

STI Tests Conducted by Calendar Year



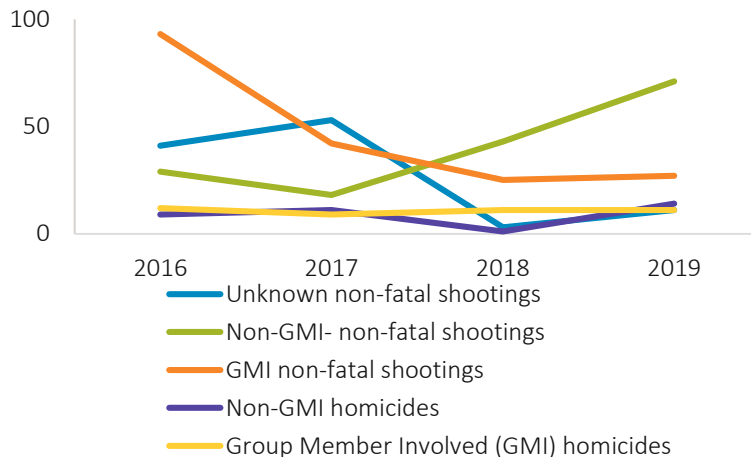
Definition: Healthy Sexuality education includes a variety of clinic and non activities including fast track STI testing events open to all MPS students. 2019 outreach activities were negatively impacted by school lock downs, weather release days and periodic staffing shortages experience last year.

Violence Prevention

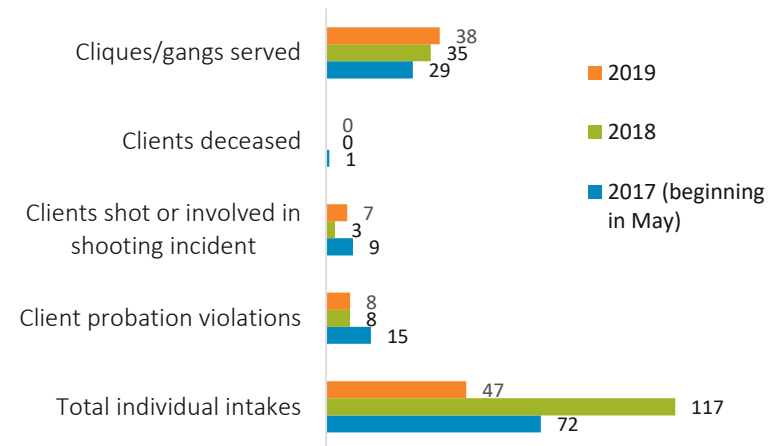
Program description: The Health Department leads and coordinates citywide violence prevention efforts through policy, planning, community support, and programming. Activities include service coordination with jurisdictional partners, program development, capacity building with small community based agencies, technical assistance, outreach, and partnerships on community engagement activities. MHD’s violence prevention initiatives include: partnership with HCMC and North Memorial around hospital-based violence intervention (Next Step); oversight of the Juvenile Supervision Center for curfew, truancy, and low-level offenders; individualized case management and mentoring for youth at risk of involvement with violence (Inspiring Youth); youth outreach and engagement; teen dating violence prevention with high school athletes; collaboration with the Minneapolis Police department in implementing the Minneapolis Group Violence Intervention strategy; and other efforts.

Performance measures

Shooting and Homicide Incidents



Group Violence Intervention Outcomes



Definition:

- Group Violence Intervention (GVI) is an evidence-based approach that relies on a partnership between community members, social service providers, and law enforcement standing and acting together to address the actions of the groups most responsible for driving serious violence in the City. The GVI approach is to identify those and to communicate to them: “you matter, you are important, we want you to survive and flourish, some of what you are doing is wrong, we will help you if you let us, and we will stop you if you make us.”¹
- On the chart, GMI stands for group member involved. “Group” may refer to street groups, cliques, or gangs. A significant amount of serious violence in Minneapolis is driven by groups that are not organized in the way traditional gangs are and that may not consider themselves to be a gang.
- Data for shooting and homicide incidents are for the period May 1 – September 24.

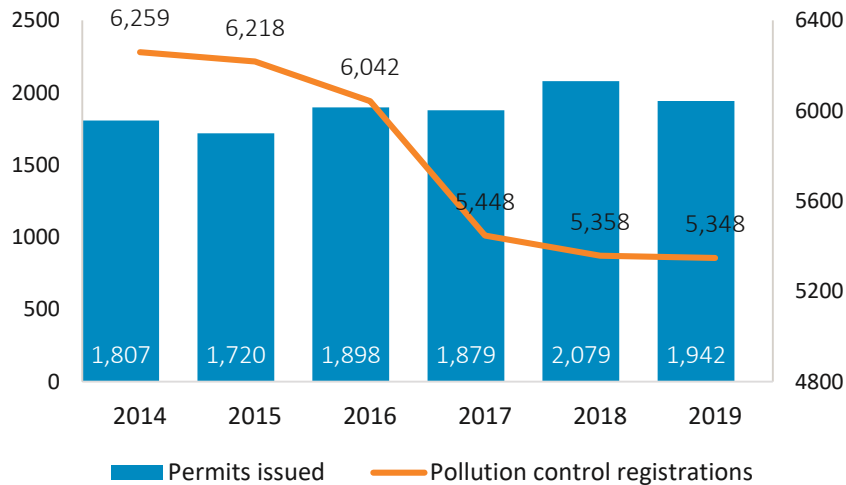
¹: National Network for Safe Communities, Group Violence Intervention: An Implementation Guide. 2013.

Environmental Services

Program description: Environmental Services is the operational arm of much of the city's environmental work. The unit protects environmental and public health from the adverse effects of pollution through two state delegated well programs, a significant part of a federally mandated storm water program, nine local environmental permits, and immediate response to spills and citizen concerns. The group also manages nationally leading programs like the city's tree program, energy benchmarking, biochar carbon sequestration and the Green Cost Share Program to reduce pollution and fight climate change.

Performance measures

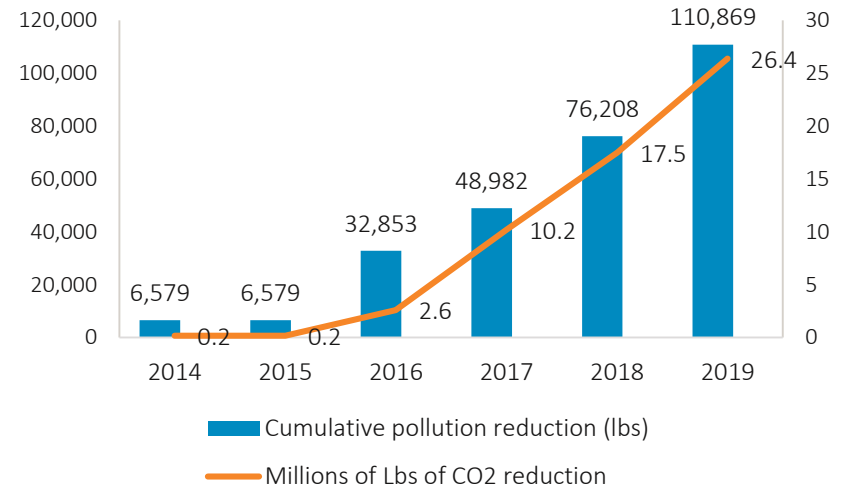
Pollution control registrations and permits



Definition:

- This is a reflection of the base workload and diverse business lines within the Environmental Services group. The charts and lines signify numbers of permits and registrations. Permits have stayed consistently high and are heavily dependent on construction growth in the city. Registrations dropped in 2017 as a result of ordinance changes. They have steadily dropped since from lack of administrative capacity to maintain rates.

Pollution Reduction



Definition:

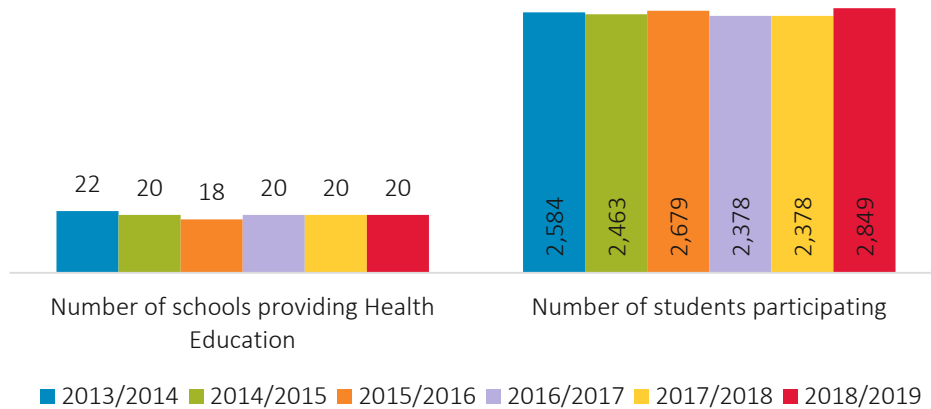
- This is the amount of pollution eliminated through Environmental Services each year in Minneapolis in pounds of criteria pollution as bars and millions of pounds of climate change causing CO2 equivalent, scale as the line. In 2019 we have updated our emission coefficient for CO2 to Xcel Energy reported coefficients to be consistent with the rest of the City of Minneapolis measurements. You may notice a slight difference from last year's report.

Youth Development and Sexual Health

Program description: 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; comprehensive sexual health education; and coordination of the City's prevention response to the Safe Harbors Act.

Performance measures

Middle School Science based sexual health education



Definition:

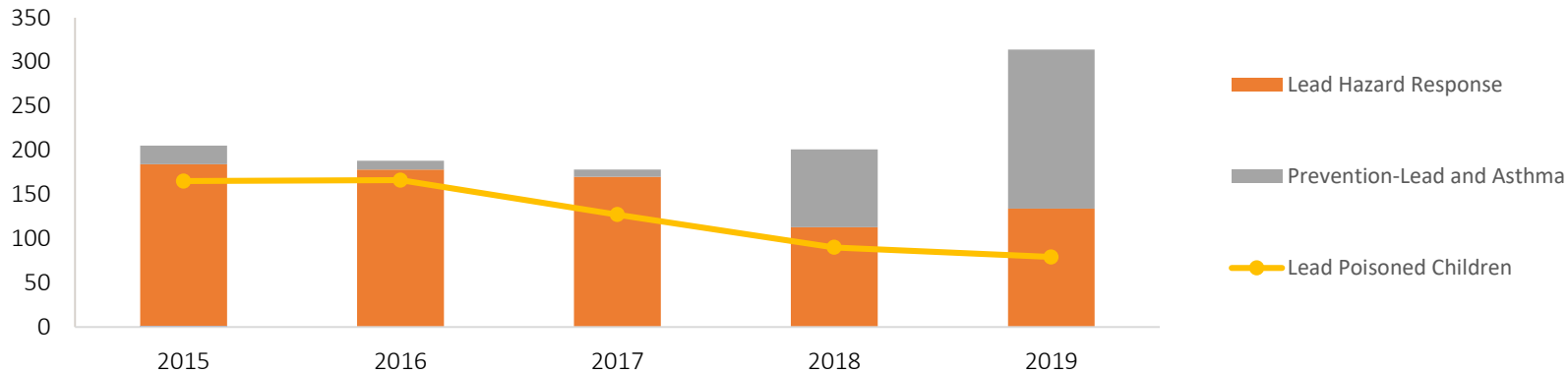
- The City of Minneapolis provides technical assistance to Minneapolis Public Schools to provide science based sexual health education to middle schools (6-8) grade students. Health Education is not a state required course in middle schools in Minnesota. The grid shows the number of schools/classes being offered in the Middle schools and the number of students who were enrolled and participated in the class that school year.

Lead Poisoning and Healthy Homes

Program description: The Lead Poisoning Prevention and Healthy Homes initiative assures residential homes are safe from lead hazards by conducting inspections for children with diagnosed lead poisoning. The program repairs health hazards to protect children from exposure to lead which interferes with brain development during a critical stage. Minneapolis currently inspects homes of children with a blood lead level of 5 ug/dl of blood, among the highest standard in the country. A Federal grant also supports efforts to address other healthy homes concerns such as radon, asthma triggers, and slip/trip/fall hazards. In addition to lead poisoning, the Lead and Healthy Homes Program has been pivoting in three main areas since 2017 preventative hazard inspections across departments, and clinical referral for asthma intervention, **deep energy and weatherization upgrades.**

Performance measures

Properties Inspected



Definition:

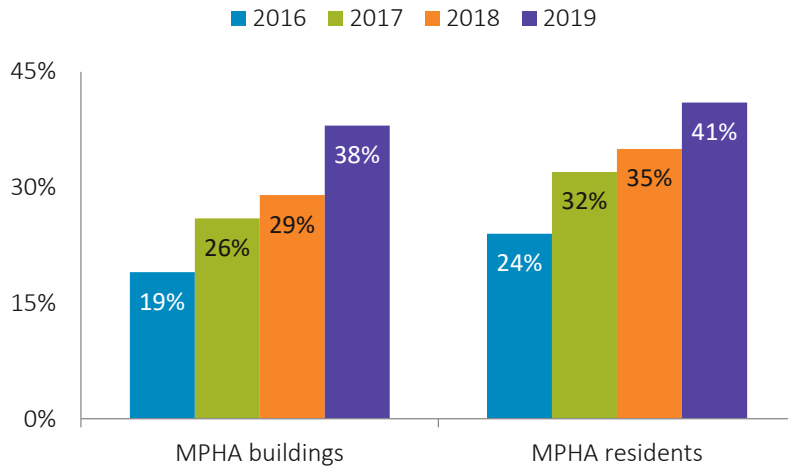
- Continued intervention is resulting in a decline in EBL (lead poisoning) numbers in Minneapolis. With a goal of zero children lead poisoned in Minneapolis, Lead & Healthy Homes is committed to building a model of prevention in addition to the established response model. Properties with old painted building components are in constant need of monitoring or renovation to prevent lead paint from deteriorating and poisoning a child. Historically, lead poisonings have been concentrated in specific neighborhoods disproportionately affecting people of color and low-income households. Evaluating high risk properties with a health-focused lens will ensure that families and owners are educated and resources for fixing problems can be accessed.
- Properties included in the Health program undergo comprehensive renovations to address the most hazardous lead paint and dust hazards. City staff serve in a regulatory and consultative capacity to ensure repairs are completed by licensed professionals and do not harm the occupants of the building. To facilitate this process, more than 1,725 site visits are made by Health Inspectors, including lead inspections, healthy homes inspections, contractor meetings, pre and post-construction evaluations and tracking of families.

Minneapolis Healthy Living Initiative

Program description: The Healthy Living Initiative consists of 32 strategies implemented with community partners to increase opportunities for healthy eating, physical activity and tobacco-free living. The goal of these strategies is to reduce the burden of tobacco- and obesity-related chronic diseases on individuals, communities, employers, and the health care system by facilitating and promoting policy, systems, and environmental change.

Performance measures

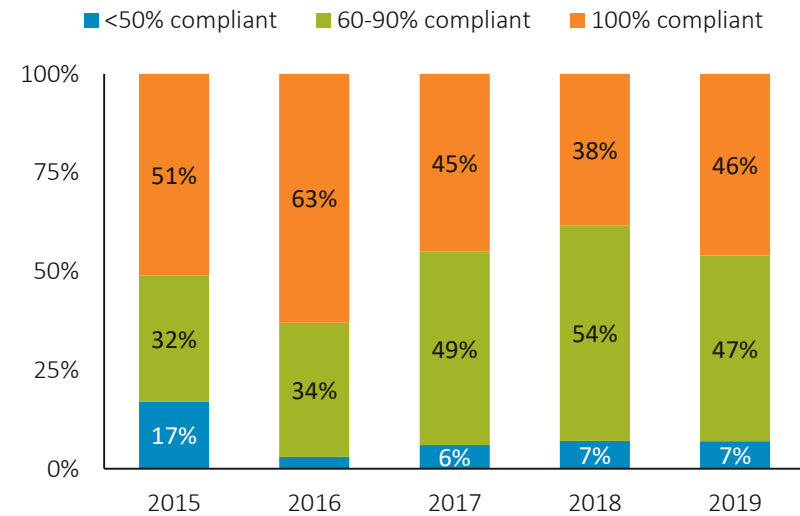
Availability of comprehensive wellness activities in MPHA buildings; proportion of residents with access to them



Definition:

- Beginning in 2013, MHD has worked with Minneapolis Public Housing Authority (MPHA) to connect its 5315 residents to wellness programs and services.
- Partnerships and a resident-centered approach to enhancing wellness has had positive impacts on social norms in the buildings, residents' health behaviors and health conditions, and relationships between the City of Minneapolis and MPHA residents.

Compliance with ordinance requiring minimum amount of healthy foods



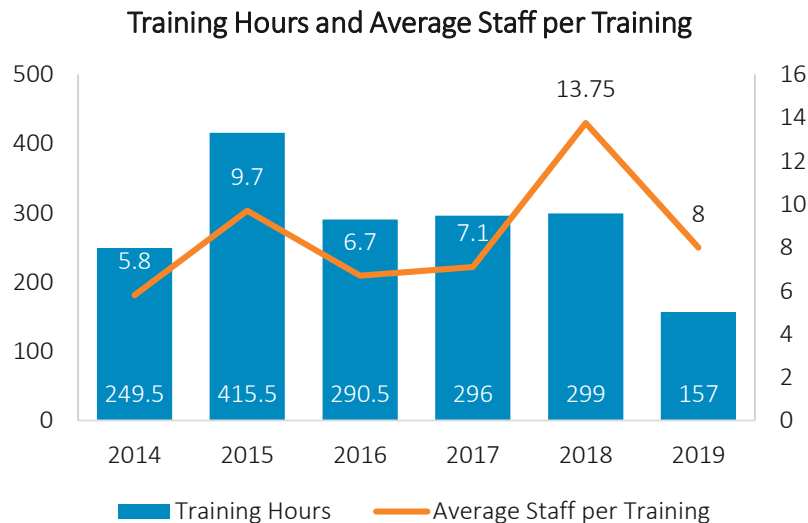
Definition:

- The Staple Foods Ordinance (SFO) requires more than 230 licensed grocery stores (including corner stores, gas stations, dollar stores, and pharmacies) to stock a minimum amount of nutritious foods in 6 categories such as fruits and vegetables, proteins, and whole grains.
- In late 2018, the ordinance was revised to give store owners greater flexibility to stock healthy options that align with their customers' cultural dietary traditions and condensed the categories from 10 to 6.
- This metric captures the share of stores that are compliant with the ordinance. The 2019 data reflect the revisions.

Emergency Preparedness and Infectious Disease Prevention

Program description: The Minneapolis Health Department is required by Minnesota statute and City Charter to assure the health and safety of residents and visitors from infectious disease; to prepare for and respond to emergencies; and assist the community in recovery. The Department does so through collaboration, contracts, and participation in a community-wide continuum of care. Public health response includes: routine prevention and intervention activities (provided through contract with Hennepin County); response to small events such as measles and food borne illness; planning and preparing to host large events such as the Super Bowl and NCAA Final Four; support for residents affected by natural or other disasters such as the Northside tornado; and, response to large public health emergencies such as a flu epidemic or terrorism.

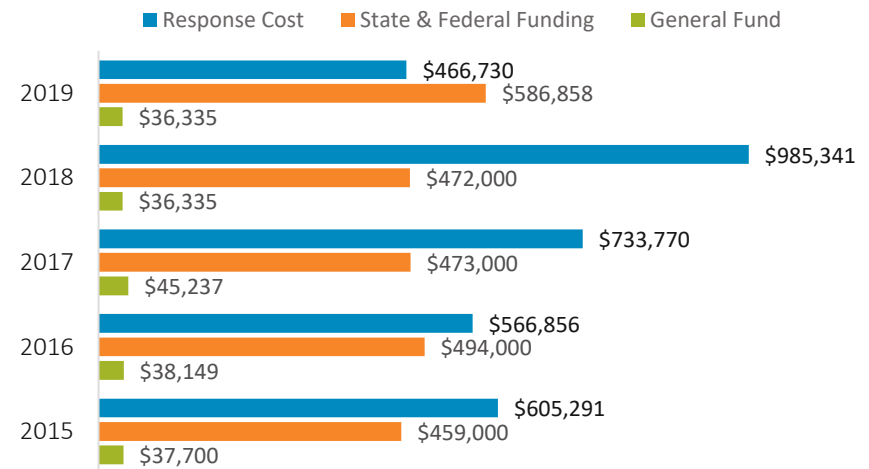
Performance measures



Definition:

- This year EP took a step away from increased training to evaluate the program. EP completed a department assessment of training needs, evaluated and revised current plans for meeting the needs of a department that must retain 24/7 readiness for response. The assessment showed the significant gaps and the need for increased resources and involvement of all levels of the department.

Program Expense and Funding Sources



Definition:

- Results show an increasing demand and cost for department readiness and response while financial support decreases and the City financial contribution remains minimal. Primary external funds come from diminishing State and Federal support.

Senior Services

Program description: The Minnesota Visiting Nurse Agency provides home health care/therapeutic services for eligible high-risk and low-income seniors age 60 and older who lack medical reimbursement. Eligible seniors receive skilled nursing and therapy visits and home health aide/homemaker visits; a significant number require interpreter services.

This budget program area does not have performance metrics because it is a pass-through.