



Public Health Advisory Committee

July 26, 2016, 6:00 – 8:00 pm

Minneapolis City Hall, Room 132

AGENDA

Agenda Item	Presenter	Time	Committee Action
Welcome and Introductions –	<i>Karen Soderberg</i>	6:00 – 6:10	Approve agenda
PHAC Logistics and Updates <i>Review May Minutes</i> <i>Accreditation Site Visit report</i>	<i>Karen Soderberg</i> <i>Margaret Schuster</i>	6:10 – 6:20	Approve Minutes Informational
<i>Nominations for leadership positions</i>	<i>Karen Soderberg & Peggy Reinhardt (comm/ops)</i>		Committee vote to approve
Continued discussion re: PHAC priorities <i>Review: PHAC charge & responsibilities</i>	<i>Group discussion</i>	6:20 – 7:20	Discussion
Commissioner Update	Gretchen Musicant	7:20 – 7:45	Discussion
Information Sharing <i>Announcements, news to share, upcoming events</i>	<i>Optional - if time allows</i>	7:45 – 8:00	Informational

Next Sub-committee meeting: August 23, 2016, Minneapolis City Hall, Room 132

Next Meeting of the Full Committee: September 27, 2016, Minneapolis City Hall, Room 132

For more information on this committee, visit: [Public Health Advisory Committee - City of Minneapolis](#)

If any problems or issues arise on the night of the meeting, please call the cell phone of Gretchen Musicant, Health Commissioner: 612-919-3855

RESOLUTION OF THE CITY OF MINNEAPOLIS
Reestablishing the role and composition of the Public Health Advisory Committee
Approved by Council on May 14, 2010 (*updates noted Feb. 19, 2014*)

Whereas, the Public Health Advisory Committee, a standing advisory committee to the *Minneapolis Health Department* and the Minneapolis City Council, has been in existence through resolution since 1976 in accordance with the provisions of the Community Health Services Act (Minn. Laws 1976, Ch. 9); and

Whereas, changes to the public health system at the state and local levels necessitate that the responsibilities and composition of the Public Health Advisory Committee be updated to allow the committee to most effectively serve the City of Minneapolis;

Whereas, the City Council values the efforts of the Public Health Advisory Committee to provide public health related advice which is representative of and takes into account the viewpoints, concerns and interests of the diverse Minneapolis community;

Whereas, the City of Minneapolis finds the continued existence of the Public Health Advisory Committee benefits the citizens of the City;

Now, Therefore, Be It Resolved by the City Council of the City of Minneapolis:

That the Public Health Advisory Committee (PHAC) for the *Minneapolis Health Department* has the following responsibilities and composition:

A. **Role of the PHAC**

The role of the PHAC is to advise the City Council and the Department on policy matters affecting the health of Minneapolis residents, and to serve as liaisons between the City and the community in addressing health concerns. In this role PHAC shall make every effort to ensure that the concerns represented reflect the diverse viewpoints and interests of the Minneapolis community.

B. **Committee Functions**

The PHAC has responsibility for the following functions:

1. To advise the City Council regarding: a) policy matters affecting health of Minneapolis residents, and b) general roles and functions of the *Minneapolis Health Department*;
2. To review the proposed priorities of the *Minneapolis Health Department* and make recommendations to the City Council;
3. To consider complaints and views expressed by residents affecting delivery of public health services in Minneapolis, forward those concerns, and make recommendations as necessary to the City Council and/or the *Minneapolis Health Department*.

Top priorities earning 5 or more votes: Homelessness and affordable housing; Health disparities and health equity

Priorities earning 4 votes: Mental health

Priorities earning 3 votes: Youth violence prevention; Sex trafficking; Climate change assessment (engagement phase)

Priorities earning 2 votes: Staple foods-corner stores; Urban agriculture; Walkability; ACEs

Health Department GOAL: Healthy Places to Live

Homelessness and affordable housing (8)

Healthy housing policies (for example: building with low-impact carpets to reduce asthma) (0)

Health Dept. GOAL: Thriving Youth & Young Adults

Youth violence prevention (3)

Sex trafficking (3) – especially connected to new stadium and large sporting events

Health Dept. GOAL: Healthy Weight & Smoke-Free Living

Staple foods – corner stores (2) *gets at access to healthy food (food disparities & food equity)*

Urban agriculture (2)

Walkability: access and safety (2)

Health Dept. GOAL: Healthy Start to Life and Learning

Adverse Childhood Experiences (ACEs) (2)

Breastfeeding recommendations from PHAC-commissioned report (0)

Health Dept. GOAL: Healthy Environment(s)

Air Quality at the neighborhood level (0)

Noise Pollution (0)

Water testing – water quality (0)

Health Dept. GOAL: A Strong Public Infrastructure

Climate change assessment community engagement phase (3)

Emergency Preparedness (1)

Additional PHAC Priorities:

Health disparities and health equity (6)

Mental Health (4)

Building Safety & Public Trust

Substance Abuse

Other ideas:

Health in all policies: very local actions on what works or is needed for that neighborhood

Zoning – create a framework of decision-making / policy formation and process

Discussion notes from 6/28/16 meeting

Guiding questions for each presenter

1. Have each speaker address health disparities / health equity as part of their presentation AND,
2. How we, as an advisory committee, can push/pull policies/recommendations to make a difference?

HOUSING / HOMELESSNESS

Guiding discussion questions for this topic area

1. What about housing is within the grasp/charge of the health dept. and this advisory committee?
2. What systemic & institutional policies are impacting homelessness?

Possible agenda suggestions

- **Mikkel Beckmen** – Heading Home Hennepin Annual report out recently, plus he serves on the Cradle to K cabinet and chairs the Housing committee for C2K) **Scheduled August 23**
- **Alex Vollmer, MHD staff**, sits on the City's Comprehensive plan housing chapter. Question from group: who else sits on this committee? (*Margaret to ask Gretchen re: more info*)
- **Someone from NACA (Neighborhood Assistance Corporation of America)** – non-profit, community advocacy and homeownership organization, started in 1998. Has a successful track record of advocacy against predatory and discriminatory lenders; sub-prime borrowers also effected by health disparities / health equity
 - **Northside Home Fund Board** – Gretchen sits on as does CPED's director Andrea Brennan—these topics are discussed there
- **Senta Leff** – MN Coalition of Homeless; worked previously with Wilder Foundation Family Supportive Housing Services division. MCH started 30 years ago; leads state advocacy efforts and includes service providers, civic leaders, faith community members, and people experiencing homelessness.
- **Richard Amos** – Project Homeless Connect; he was with St. Stephen's; practiced looking at the whole picture of a person who is experiencing homelessness. Project Homeless Connect is a "one stop shop" model of delivering services to persons experiencing homelessness, and includes housing referrals/placement, employment services, education, medical care, benefits advice, haircuts, food & clothing, veterans services, legal advice, and more.
- **Community Hub Pathway Model (developed in OHIO)** – could be replicated here in Minneapolis; work is done using culturally connected community health workers and evidence-based community care coordination approach. Comprehensive assessment connects persons to interventions needed; the housing pathway is complete when the homeless individual is confirmed to reside in safe housing. HUB model used from infancy to adulthood pathways shown to diminish disparities.

HEALTH DISPARITIES/HEALTH EQUITY

Guiding questions for each presenter

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Possible agenda suggestions

- **\$15/Hour minimum wage** – How does this impact health/equity/disparities? ***Who's driving this issue on City Council?***
 - MDH published a white paper on Income & Health (March 3, 2014)
 - Minimum wage presentation given to Minneapolis City Council on September 22, 2015; City Council approved a contract to study minimum wage increase (February 2016); and results of study presented
- **Yolonda Adams-Lee**, PHAC member, sits on the City's Green Zone workgroup. Have her report out on their work, which includes these topic areas.
- **Dr. Crutchfield** – Board certified dermatologist and Clinical Professor of Dermatology at the Univ. of MN Medical School; active member of MN Assoc. of Black Physicians (**suggested by Yolonda**)
- **Huda Ahmed** – Community Program Manager at the University of MN Center for Cancer Collaboration re: Clipper clinics that are offered to offset / address fear of medical care. Each clinic is conducted in partnership with a local barbershop / beauty salon and provides free preventive health care services for anyone in the community.
- **Community – capacity building:** Often there is an injection of \$ which may help the community in the short run, but the momentum is NOT sustained and community is NOT accompanied in actually building community capacity to sustain.
 - **The Result?** Community slides back and any positive changes are lost
 - **Follow up question:** What would the community tell us?