

THE WEEK'S TOP STORIES

HEALTH LICENSING BOARDS IMPLEMENT CRIMINAL BACKGROUND CHECK PROGRAM

The Minnesota Health Licensing Boards have cooperatively established the Criminal Background Check Program to help new applicants for licensure efficiently complete the mandatory fingerprint-based criminal background check now required by Minnesota law.

Mandatory criminal background checks for professionals regulated by the Minnesota Board of Medical Practice will be implemented in phases—on Nov. 10 for acupuncturists, traditional midwives, and respiratory therapists; on Nov. 17 for physician assistants; and Dec. 1 for physicians, surgeons, and genetic counselors.

After applicants have applied for licensure and paid all the required fees, they will be mailed a packet containing additional information from the Criminal Background Check Program. It is then their responsibility to have their fingerprints taken and to complete all required paperwork.

HEALTH DEPARTMENTS URGE AWARENESS OF SAFE INFANT SLEEP PRACTICES

New data from the Minnesota Department of Health (MDH) shows that unsafe sleep environments account for nearly all unexpected infant deaths in Minnesota. MDH and the Minnesota Department of Human Services (DHS) are encouraging parents to know safe sleep practices and hospitals to become safe sleep certified during Infant Safe Sleep Week to help address the issue.

In 2015, 53 of the 54 deaths that occurred while infants were sleeping happened in unsafe sleep environments. In addition, about 9 percent of new mothers report that their health care providers did not talk to them about how to lay their babies down to sleep, according to 2012–2014 data from the Minnesota Pregnancy Risk Assessment Monitoring System. The health departments recommend the ABCs of safe sleep—Alone: Infants should always sleep alone; Back: Always put a baby on their back to sleep; and Crib: babies should always sleep in a safety-approved crib or play yard.

“While many providers are doing a lot to inform parents about safe sleep for their

NEWS IN BRIEF

CITY COUNCILS APPROVE TOBACCO RESTRICTIONS

The Bloomington and St. Cloud City Councils have passed policies that would raise the city tobacco sales age from 18 to 21. In addition, the St. Paul City Council passed a policy that will limit where menthol tobacco products can be sold.

The St. Cloud City Council final vote was four members in favor and three opposed. However, soon after the vote, St. Cloud Mayor Dave Kleis said he would veto the measure. Minnesotans for a Smoke Free Generation, a coalition of health organizations associated with ClearWay Minnesota, will support local advocates' efforts to override the Mayor's veto. The Bloomington City Council final vote was six members in favor and none opposed. City administrators will announce the effective date for the new policy soon. Edina and St. Louis Park passed similar measures earlier this year.

“We are encouraged by the decisions of the St. Cloud and Bloomington City Councils,” said Molly Moilanen, director of public affairs at ClearWay

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infants, we want to applaud those hospitals that go the extra mile to train staff and make sure all parents know the ABCs of safe sleep before they take their babies home,” said Ed Ehlinger, MD, Minnesota commissioner of health.

DHS has implemented efforts to increase safe sleep practices in licensed child care facilities that have shown awareness creates better outcomes.

“Infant deaths from unsafe sleep practices are preventable and we know training is critical,” said Emily Piper, Minnesota human services commissioner. “Since we implemented new safe sleep standards for providers in 2013, infant deaths in licensed child settings have dropped significantly. Child care providers have also played a key role in reducing infant deaths by educating parents about infant safe sleep practices.”

The analysis also showed several notable factors involved in the 53 sleep-related infant deaths in Minnesota in 2015—93 percent had loose objects around them, such as pillows or blankets, or were not placed on a firm surface to sleep; 49 percent were sharing a sleep surface with another person; and 27 percent were in an unsafe sleep position, such as being placed on their side or belly. In addition, the rate of sudden unexpected infant deaths is twice as high for infants born to African American and American Indian mothers compared to infants born to white mothers. Rates are lowest among infants born to Asian/Pacific Islander and Hispanic mothers. According to MDH, these findings track with other data that indicates the rates of infant deaths are strongly influenced by social and economic factors such as income, education, and housing.

UNIVERSITY OF MINNESOTA LAUNCHES MEMORY KEEPERS MEDICAL DISCOVERY TEAM TO ADDRESS HEALTH DISPARITIES

The University of Minnesota Medical School has opened its new Memory Keepers Medical Discovery Team (MDT), a space designed to research health disparities affecting Native American and rural communities, particularly the prevalence of dementia and diabetes among Native Americans. The team is based at the University of Minnesota’s Duluth campus, but is located in the city’s medical district due to space constraints on the campus.

The state-funded initiative is the first project launched by the Medical School after an investment by the state Legislature in 2014 to increase the prestige of the medical school. It aims to develop interventions and research to meet the challenges of health disparities among people who live in rural areas, and is focused specifically on vascular dementia in tribal communities and preserving brain health by the improved understanding of dementia and diabetes. Because rural populations are also plagued by dementia and diabetes, the team will develop interventions and research to meet the challenges of health disparities among people living far from the resources of urban population centers.

“This is our way of addressing the health disparities in our state,” said Jakub Tolar, MD, PhD, dean of the Medical School. “Health care access is a fundamental human right, and this is our way of trying to improve those health care experiences.”

Minnesota and co-chair of the Minnesota for a Smoke-Free Generation coalition. “However, we are deeply disappointed in the St. Cloud Mayor’s pledge to veto this measure. Raising the tobacco age to 21 helps stop kids from trying tobacco before they can understand the long-term consequences. We support local central Minnesota public health experts, youth advocates, and others in continuing the fight for raising the tobacco sale age in St. Cloud.”

Mankato and North Mankato are currently in discussions about the decision to become the next cities to restrict tobacco sales to those under 21. No recommendations were made at a meeting in early November, but both councils will meet in January when a public hearing will take place.

The St. Paul City Council final vote was six members in favor and one opposed to limit the places where menthol tobacco products can be sold after weeks of debating the issue. The ordinance requires Mayor Chris Coleman’s signature, and he is expected to sign it. The final ordinance will take menthol tobacco products out of kid-friendly stores and limit their sale to liquor stores and adult-only tobacco stores. It goes into effect in November 2018. Minneapolis passed a similar ordinance in August.

“We thank the members of the St. Paul City Council for taking this step to protect our young people from menthol tobacco. Menthol tobacco is

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The name was chosen because in Native American culture, memory keepers are traditionally elders of the tribe who preserve sacred songs and stories. By preventing and helping people manage diabetes, the risk of vascular and other dementias that rob people of their memory can be reduced. It also features culturally related items and symbolism, including a medicine wheel table and a separately ventilated ceremonial room where sage can be burned safely.

“We’re not finished,” said Neil Henderson, PhD, executive director of Memory Keepers MDT and a member of the Choctaw Nation of Oklahoma. “This is just the start, and we look forward to developing connections with the native populations here through this unique opportunity to improve rural health.”

LEADER OF CENTER FOR RURAL POLICY AND DEVELOPMENT RESIGNS FOR STATE USDA POSITION

The president and CEO of the Center for Rural Policy and Development, Brad Finstad, has announced his resignation effective Nov. 24 to receive a presidential appointment as the Minnesota State Director of USDA Rural Development. He has led the organization since 2008.

“I’m sad to leave the center at this time as we have become an increasingly trusted source of information for policymakers around the state on issues of key importance to Greater Minnesota, and I do so only because of the honor of being selected by the President to serve our country in this new capacity,” said Finstad. “I’m excited about the potential in this new role, but I also remain very optimistic about the future of the Center and am proud that I am leaving it strong and growing.”

“Brad’s departure is a significant loss for the Center,” said Tim Houle, chair of the board of directors for the Center for Rural Policy and Development. “He has been instrumental in making strategic realignments in the organization’s research approach that keep the Center’s work crisp and relevant in today’s very busy political landscape. He has brought the Center forward not only in our research but also by leaving the Center on a solid financial foundation for the future. He has worked tirelessly with our generous funding partners at the State of Minnesota, the McKnight Foundation, and the Blandin Foundation to secure a bright future for the Center and our work. I want to express our sincere appreciation on behalf of the Board of Directors for his service to our organization and to Greater Minnesota. We are excited to see how Brad will continue that service in his new role at USDA Rural Development. We know he will do a great job.”

The center’s executive committee will meet later this month to determine a search process for a new president and CEO. Meanwhile, Marnie Warner, vice president for research and operations at the center, will serve as interim executive director. She has been with the center since 2000.

marketed to women, African Americans, Latinos, the LGBTQ community, and young people, and as a result those groups are more likely to smoke menthol,” said Moilanen. “The tobacco industry knows that menthol masks the harshness of their deadly product, making it easier to start and harder to quit. Thank you, St. Paul leaders, for listening to your community and taking steps to ensure a healthier future generation by restricting access to menthol-flavored products.”

ST. CLOUD VA NAMES NEW CHIEF OF STAFF

Scott Bartley, MD, a board-certified nuclear medicine physician, has been appointed as chief of staff at the St. Cloud VA Health Care System. He has been serving as the acting chief of staff since mid-June. Before stepping into that role, he served as associate chief of staff/education and chief of imaging.

Bartley’s previous experience includes acting chief of staff and deputy chief of staff at the VA Tennessee Valley Health Care System and a detail to the assistant deputy undersecretary for health operations and management, clinical operations in Washington DC. He earned his medical degree from St. George’s University School of Medicine in Grenada, West Indies. He remains an active professional member of the Society of Nuclear Medicine and Molecular Imaging, the American College of Nuclear Medicine, and the AMA CPT and RUC Committees.

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