

PRELIMINARY SUMMARY OF APPLICATIONS FOR BOARD APPROVAL

To: Board of Health
From: Jim Diamond
Date: December 9, 2021
Re: Summary of applications presented for Board approval

1. NACCHO Implementing Overdose Prevention Strategies at the Local Level (IOPSL)

A grant application to the National Association of County and City Health Officials to create a project to reduce overdose deaths in vulnerable communities of color, specifically, the Coptic Egyptian and black communities.

Term: January 1, 2022 – June 30, 2023
Amount: \$375,000
Program Manager: Angie Thompson
Bureau: Fonda Harris

2. SAMSHA GAINS Sequential Intercept Model (SIM) Mapping Workshop

This is an application to the Substance Abuse and Mental Health Services Agency GAINS Center for Behavioral Health and Justice Transformation to receive technical assistance. The facilitated workshops with collaborators will use the SIM approach to identify and discuss ways in which barriers between the criminal justice and behavioral systems can be reduced through the development of integrated local strategic action plans.

Term: March 2022- August 2022
Amount: NA
Program Manager: Angie Thompson
Bureau: Fonda Harris

PRELIMINARY SUMMARY OF GRANTS & CONTRACTS FOR BOARD APPROVAL

To: Board of Health
From: Jim Diamond
Date: December 9, 2021
Re: Summary of grants & contracts presented for Board approval

1. Friends of Metro Animal Care & Control Medical Emergency & Safety Net Fund

This grant from Friends of MACC is to provide funds for the Medical Emergency program (\$12,500) and the Safety Net program (\$2,000).

Term: NA
Amount: \$14,500
Program Manager: Stacy Cannon
Bureau: Hugh Atkins

Name of Grant or Contract: SAMSHA GAINS Sequential Intercept Model (SIM) Mapping Workshop: SUD

MPHD PRE-APPLICATION TO SUBMIT A NEW GRANT OR ESTABLISH A NEW CONTRACT

Approved-Director of Health *Gill C. Wright III, MD* *Signatures*
DocuSigned by: 0460AC21E1CC408...

Approved-Bureau Director *Ponda Harris*
DocuSigned by: A2637227621148E...

Approved Grant Review Team *Brad Thompson* Date 12/3/2021
DocuSigned by: EBE55A41DAB34BD...

Not Approved-Justification _____

Proposal Data

Date 11/19/21 Contact Person Trevor Henderson Phone 629-395-0380

Bureau/Division Behavioral Health and Wellness Division

Is this a grant application where the partner is the lead applicant and requests MPHD to be a subrecipient?
 no yes If yes, describe _____

Funder/Agency

Federal Name of Funder/Agency SAMHSAs GAINS Center CFDA# _____

State – Name of Funder/Agency _____

Local – Name of Funder/Agency _____

Other – Name of Funder/Agency _____

Letter of Intent Required? no yes If yes, date due _____

Proposal Due Date 11/19/21 Date of Grant Award 12/17/21

Funding available per award N/A Number of Awards 1 Years funded N/A

Funding amount requested N/A Start Date March 2022 End Date: August 2022

Type of Award

- Demonstration (to establish or demonstrate the feasibility of new methods or delivery of services)
- Research/ Translation (to develop new knowledge or to evaluate existing knowledge in new settings)
- Service (to support the development, organizing, establishing, providing or expanding delivery of services)
- Training (to support training of individuals in fields important to the mission of the agency -- institutional/individual)
- Conference (to support a meeting relevant to advance knowledge/understanding of a public health topic)
- Technical Assistance (to support development, consultation, advisement to advance capabilities of an organization)
- Other _____

Finance

Is there a cap on indirect rate? no yes If yes, what is the indirect rate required?

N/A

Will the proposed project require in-kind or cash matching? no yes _____%

Do you anticipate contracting with an outside institution or organization? no yes, If yes in what capacity?

N/A

What process process do you anticipate using to select this contractor? [Describe]

Will the proposed project involve multiple bureaus? no yes [Specify]

Personnel and Staffing

Who, if known, is intended to manage this program if funded?

Trevor Henderson

Has this person previously managed a grant? no yes, what type of grant and when?

COSSAP DOJ & TDH/CDC HIA current

new hires ⁰ _____ # existing positions ⁴ _____ Total # of positions (FTEs) ⁴ _____

What type of staff are needed (skills, education level)?

N/A

Is evaluation or epidemiology support required? no yes

if yes % of budget and or time N/A

Additional Support

Will the project require additional physical space? no yes If yes explain:

Possible meeting space for facilitated workshops.

Describe any other needs that should be considered.

At the end of the project period, the proposed project will:

Be completed (one-time only effort)

Require additional funding to sustain/institutionalize the program/project.

If yes, describe the sustainability plan:

Proposal Abstract

Project Description: Include Purpose, Objectives, Target Population, Anticipated Strategies, Outcomes
Add attachment if needed.

This project will bring technical assistance from the SAMSHA's GAINS Center for Behavioral Health and Justice Transformation to Metro Nashville for guided facilitated Sequential Intercept Model workshops to develop comprehensive, community-wide strategic plans for addressing substance use, and better identifying and responding to the needs of adults with substance use disorders who are involved or at risk for involvement in the criminal justice system. The solicitation targets communities that are particularly interested in developing comprehensive, community-wide strategic plans for addressing substance use and overdose deaths, and better identifying and responding to the needs of adults with substance used disorders who are involved with or at risk for involvement in the criminal justice system. The SIM workshops emphasize identification of the resources, gaps and opportunities and commitment among key stakeholders to address these needs.

The SIM Workshops will focus specifically on identifying and treating individuals with substance use disorders across all the intercepts of Sequential Intercept Model, including screening and assessment, diverting individuals out of the criminal justice system and into appropriate community-based treatment programs, access to medications for Opioid Use Disorder, and maintaining continuity of care through transitions in and out of custody. SIM Workshop participants are expected to be drawn, in large part, from criminal justice and behavioral health agencies and organizations. 911 dispatch, crisis services, law enforcement and other first responders, hospitals, jails, courts (particularly drug courts and other treatment/problem-solving/specialty courts), reentry services, probation and parole, and community-based behavioral health treatment providers, are all essential participants in these workshops.

Having a comprehensive community plan will provide Metro departments and community agencies with a foundational document to guide future grant applications and projects.

Readiness Checklist:

- THE PROPOSED APPLICATION BUILDS ON EXISTING MPHD ACTIVITIES**
- THE GOALS AND OBJECTIVES ARE CLOSELY ALIGNED WITH STRATEGIC PRIORITY AREAS AS DEFINED IN THE STRATEGIC PLAN**
- THE ONGOING OR SUSTAINED PUBLIC HEALTH BENEFIT IS CONSISTENT WITH MPHD'S MISSION**
- COMMUNITY ORGANIZATIONS THAT PERFORM SIMILAR ACTIVITIES HAVE BEEN IDENTIFIED OR ENGAGED**

MPHD Strategic Plan Priorities to be addressed: Using line of sight, describe how program aligns with strategic plan. "Line of sight" refers to a worker or team member's ability to identify their work with the overall objectives of the organization -- to "see" the organization's goal at the end of their work, see following link for example: [templates and examples](#)

Describe in space below or add attachment.

Line of Sight Attachment

This project aligns with the following:

MPHD Vision, Mission and Values

Equity Statement

Assessment: #1. Assess and monitor population health status, factors that influence health, and community needs and assets. #2. Investigate, diagnose, and address health problems and hazards affecting the population

Policy Development: #3. Communicate effectively to inform and educate people about health, factors that influence it and how to improve it. #4. Strengthen, support, and mobilize communities and partnerships to improve health. 5. # Create, champion, and implement policies, plans and laws the impact health

Assurance: #7. Assure and effective system that enables equitable access to the individual services and care needed to be healthy. #9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.

Foundational Health Goals

Promote and Support Healthier Living: Reduced Substance Misuse and negative health consequences.

Prevent and Control Epidemics and Respond to Public Health Emergencies: Strong, swift, credible, and effective responses by Department to outbreaks and public health emergencies. In 2017 HHS declared a public health emergency to combat the overdose crisis, renewed in 2021.

Increase Access and Connection to Clinical Care: Strengthen safety net systems for primary care, behavioral health and oral health through advocacy and collaboration.

Strategic Lens of Diversity, Equity and Inclusion

Issue 1: How can MPHD effectively address social determinants of health to improve health and well being

Goal 1: Identify and prioritize social determinants of health (SDOH) issues and evidence informed solutions. SIM workshop seeks to identify both gaps in system but also potential SDOH that play a role in the failure or success of linkage and retention in treatment

Issue 3. How will MPHD strengthen our effectiveness as a trusted partner in collaborative efforts to improve health?

Goal 1: enhance coordination and integration of clinical, behavioral and complementary strategies while increasing and maintaining internal and external collaboration efforts including the lived experience. Going beyond the scope of this goal in order to adequately respond to the foundational goal regarding addressing public health emergencies. Existing goals, objectives and strategies are not adequate for the overdose public health emergency. Broadening partnerships to include public safety and others (per National Drug Control Strategy). This brings new territory for defining what public health means by "trusted partner".

Objective 3: establish process for including persons with lived experience as members of MPHD's community coalitions. This project will seek to include the voice of those with lived experience to inform gaps and barriers in the SIM model where appropriate.

Revisions or Comments (if applicable) To be completed by Bureau Director or Director of Health:

Name of Grant/Contract: SAMSHA GAINS Sequential Intercept Model (SIM) Mapping Workshop: SUD

MPHD NEW GRANT/CONTRACT APPLICATION RISK ASSESSMENT

This assessment will indicate the risks the agency faces from both external and internal sources. "Yes" indicates risk.

Recommendation to Prepare Grant Application: Yes No

Comments: _____

Total Risk Score (Total number of "yes" answers below): _____ Date: _____

General Assessment

1. Is the department new to operating or managing state and/or federal funds in the specific area of grant funding?

YES NO Not Applicable

Comments: _____

2. Is the person who is considered for providing supervision or management new to management, i.e., less than 3 years?

YES NO Not Applicable

Comments: _____

3. Is the person who is considered for providing supervision or management new to grants management, i.e., less than 3 years?

YES NO Not Applicable

Comments: _____

4. Is this program new for the department?

YES NO Not Applicable

Comments: Have not carried out a SIM Workshop with SAMSHA

5. Does the department predict/anticipate that there may be turn-over in management or department that affects the program?

YES NO Not Applicable

Comments: _____

6. Are the managers and staff/or anticipated to be assigned to manage or work in the program inexperienced with the program, i.e., population or intervention?

YES NO Not Applicable

Comments: _____

7. Is the program unusually complex (e.g. complex funding, matching requirements, and high number of deliverables that require reliance on external partners or other factors)?

YES NO Not Applicable

Comments: _____

8. Does the program have high visibility (e.g. political or public interest)?

YES NO Not Applicable

Comments: This relates to the ongoing "Overdose Crisis" and underlying addiction crisis as well as criminalization issues.
Those leaving incarceration are identified as persons at higher risk of overdose on release.

9. Is this grant large?

YES (\$500,000 or more per year) NO (Less than \$500,000 per year)

Comments: No funds are provided - simply technical assistance in the form of facilitated workshops.

10. Is there an unusual level discretion in monetary decisions (e.g. no annual review, little budget detail required)?

YES NO Not Applicable

Comments: _____

11. Are there multiple partners/contractors/sub-awardees involved?

YES NO Not Applicable

Comments: _____

12. Is a sustainability plan lacking?

YES NO Not Applicable

Comments: _____

13. What is the likelihood of failure to achieve the objectives?

High/Probable Medium/Possible Low/Remote Not Applicable

Comments: _____

NOTES:

The goal of this application is to secure a facilitated workshop to help create a strategic plan to address SUD with those engaging with the criminal justice system.

Director's Update to the Board of Health

December, 2021

Protecting Health – Preventing the Spread of Infectious Disease

COVID

Omicron

You have heard of course about the Omicron variant that has arisen, most notably in South Africa. Cases have been identified in several states in the U.S. It is not yet clear whether it is more contagious than previous variants, although it looks as if it may be. Nor is it yet known whether it is controlled by the current vaccinations, or whether it causes more severe illness.

Vaccinations & Cases

As of last week, 65.5 percent of Davidson County residents had received at least one dose of COVID vaccine, and 60.1 percent were fully vaccinated. Our 7-day moving average was still below 13 people per 100,000 population.

FLU

We continue to offer flu vaccines for the 2021-2022 season. Flu vaccines remain free through the remainder of the flu season, typically until April or May. Any individual interested in a flu vaccine is encouraged to call and make an appointment at the preventive clinic that is most convenient for them (Lentz, East or Woodbine).

HIV

Ryan White Part A, STD Outreach, Viral Hepatitis C, and Ending the HIV Epidemic (EHE) Programs collaborated for the World AIDS Day observance on Dec. 2. The event included the "The Red Ribbon Hanging Tribute (in memory of family and friends)" which you may have seen on the handrails of the main staircase in the lobby; HIV testing, education, and awareness information. The plan is to reconvene the internal stakeholders, who have been unable to meet in person during the COVID times, to support the internal and external work to End the HIV Epidemic.

U=U

In your packet (page 26) you will find a ["Dear Colleague" letter](#) encouraging providers to stress the "undetectable=untransmittable" message in their practices. The authority for this letter derives from this Board's 2017 resolution in support of the U=U messaging.

Improving Health – Access & Care Coordination

Vanderbilt OBGYN collaboration

Our Woodbine Clinic serves a population of which 90 percent are uninsured and bilingual. On Aug. 23 we began the OBGYN collaboration clinic with Vanderbilt under the direction of Drs. Christopher Sizemore and Melinda New, and resident Dr. Camille Robinson. We have so far held two OBGYN clinics, and one colposcopy clinic with Dr. New. Every other month we scheduled 6 patients for an afternoon clinic. On Aug. and Oct. 4 we served four patients each day. There were 6 patients for colposcopy on Nov. 19. This clinic has been beneficial to our uninsured patients. It takes three months for a colposcopy appointment from other providers in our area and making scheduled appointments has been problematic for this population. This collaboration helps our patients to return to a provider that they know at a location familiar to them, and at no cost.

We currently have six patients scheduled for our clinic next week and are hoping to have another colposcopy day in January. We have scheduled an OBGYN clinic every other month through June. Dr. Sizemore said that if their schedule allows we may be able to hold monthly clinics thereafter.

We had only one patient with an abnormal biopsy result, and she requires a LEEP procedure. All the other colposcopy biopsy results have been benign. This is the best news, because the patients are aware of findings after an abnormal pap smears within two months.

We currently have six patients we had to refer to other providers because we were not able to see them for colposcopy next month.

The need is certainly there, and we are grateful for providers willing to help our population.

School Health

We still have several vacant school nurse positions and are actively recruiting. The volume of school COVID investigations continues to trend downward, and school nurses are turning their focus back to their pre-COVID work which includes education, promoting healthy choices (such as vaccines) and screenings.

Dental

The school-based dental program has returned to schools and provided 2,582 sealants to Metro students during the first quarter, all while adhering to COVID infection control protocols.

Improving Health – Community Partnerships

A Step Ahead

Starting Dec. 1 all three preventive health clinics began a collaboration with A Step Ahead to reimburse MPH for funding associated with long-acting reversible contraception. Through this program, preventive health hopes to continue to break down barriers and provide patients with the most effective, patient-centered birth control option that the patient chooses.

WIC

WIC participants will continue to receive increased fruit and vegetable benefits through the end of December. Also, Congress is set to vote this month to make the increase permanent through the end of September 2022. Additionally, all WIC clinic sites are seeing our certification appointments face-to-face unless we had all the referral information from a recent doctor visit.

Organizational Updates

Strategic Plan

You received the strategic driver dashboard indicators at the Board retreat last month. The plan is, by January, to bring a preliminary design for the dashboard itself for you to review before we post it on the intranet site.

Recognition

The U.S. Marshal in Nashville, Denny W. King, and deputy marshals Chris Withers and John Shell paid us a visit last week to thank Dr. Wright and Rebecca Moore for their efforts to mitigate COVID infections in the jails, the Marshal's office, the courts and all other federal facilities involved in their operations. Marshal King was very gracious in his appreciation of their efforts to tailor COVID responses to the specifics of the Marshal's office's situation. They gave Gill and Rebecca nice plaques and a "challenge coin," which we're given to understand may come in handy in a bar at some point in the future. Gill also received the annual service award from the Tennessee Association for Children's Early Education in recognition of his efforts to work with the local day-care centers during the pandemic.



December 9, 2021

Dear Colleagues,

I am writing to encourage you to continue your work to spread the word about the power of viral suppression to improve the health of people living with HIV and to prevent the sexual transmission of HIV. This information is important and has the power to change lives. For antiretroviral treatment (ART), the science is strong and clear; the data show that the effectiveness of ART with viral suppression is estimated to be 100% for preventing sexual transmission of HIV. **In other words, for persons taking ART as prescribed and achieving and maintaining viral suppression, there is NO risk of transmitting HIV through sex.**

The Metro Public Health Department of Nashville-Davidson County has taken steps to share this information. In 2017, the Board of Health adopted a [resolution](#) to state its acceptance of the science of U=U (undetectable=untransmittable) as well as the importance of sharing this message with our peers, clients, and the community at large in order to continue the work of decreasing HIV stigma. We urge you to share this groundbreaking science with your communities. In the past we have said there was “effectively no risk” of transmission; our partners with the Prevention Access Campaign have conveyed to us that that language is confusing to our clients. *Is there risk or is there not?*

Clinical research has generated abundant evidence that individuals with undetectable viral loads **do not** sexually transmit HIV. [HPTN 052](#) was the first clinical trial to demonstrate no linked transmissions from people with suppressed viral loads to HIV-negative sexual partners. More recently, two observational cohort studies – [PARTNER](#) and [Opposites Attract](#) – followed male and heterosexual couples in which one partner was receiving antiretroviral treatment for HIV and the other partner was HIV-negative. The Opposites Attract Fact Sheet states: “Between Opposites Attract and the PARTNER Study, there have now been a combined 34,911 acts of condomless anal sex reported in gay couples when the HIV-positive partner had an undetectable viral load and the HIV-negative partner was not taking PrEP. We can now be confident that condomless sex with undetectable viral load is a form of safe sex.” Moreover, heterosexual couples had vaginal or anal sex without condoms [more than 36,000 times](#) with zero linked HIV transmissions documented when the HIV-positive partner was virally suppressed.

In the words of Brady Dale Etzkorn-Morris, a local HIV advocate, podcast host, and long-serving member of the Ryan White Planning Council, understanding the message of U=U is life changing for people living with HIV: “My AIDS diagnosis in 2009 destroyed my self-esteem and my self-worth. Learning about U=U in 2016 helped me shed the heavy weight of the internalized HIV stigma I had carried since my diagnosis, which has led me to be sober for over 5 years and happily married to my husband Joshua for over 2 years. U=U gave me the hope I needed to save me from myself.”

The U=U message is relevant to every audience, and we hope that you will join our effort to broadly disseminate the U=U message, by sharing with the people in your care. People living with HIV who are virally suppressed, those who are newly diagnosed with HIV, people who don’t know their HIV status, and those receiving general health education can all benefit from learning that undetectable=untransmittable.

There are many resources available through the Centers for Disease Control (CDC) as well as materials developed by community groups such as [Prevention Access Campaign](#), the organization responsible for the U=U campaign. The CDC has a number of resources available, including [technical](#) and [consumer](#) fact sheets and the *Let's Stop HIV Together* (formerly Act Against AIDS) campaign. (Please note those fact sheets still use the “effectively no risk” language, though they give explicit permission to adapt language to fit your community). Whatever materials you use, we encourage you to do all you can to share this important information in your communities.

Thank you,

Tené H. Franklin, Chair, Metropolitan Board of Health of Nashville and Davidson County
Calvin M. Smith, III, Vice Chair
Carol Etherington, RN, member
David A. Frederick, member
A. Alex Jahangir, MD, member
Lloyda B. Williamson, MD, member

Overdose Response Program (ORP) | Division of Behavioral Health and Wellness

GRANTS

- U.S. DOJ Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP) Grant
- TDH-CDC High Impact Area (HIA) Grant
- **NACCHO Grant (application submitted and awarded)
- The "Community Overdose Prevention and Empowerment" project will deploy community health educators and enhance surveillance through surveys and listening sessions so authentic community voice is incorporated into overdose prevention strategies, messaging, and materials.
- **SAMHSA GAINS Center Sequential Intercept Model (SIM) Mapping Workshop Grant (application submitted)
- SIM Workshops are designed bring together a local, multidisciplinary group of key stakeholders from a particular jurisdiction to facilitate cross-system collaboration and to identify and discuss ways in which barriers in and between the criminal justice and behavioral health systems can be reduced through the development of integrated local strategic action plans.

INTERVENTIONS AND ACTIVITIES

Overdose Fatality Review (OFR) Panel

- Seeks to examine and understand the circumstances surrounding fatal drug overdoses occurring in Davidson County. **Meetings occur monthly with the next scheduled for mid-December.**

ED Post-Overdose Discharge Protocol

- Initiative seeks to improve care through the use of peer recovery navigators, naloxone distribution, harm reduction strategies, and medically-assisted treatment (MAT).

Nashville Fire Department EMS Post-Overdose Follow-Up

- Implementation began in early January 2021.

Substance Use Linkage by ORP Social Worker

- Implementation began in November 2020. Activities include linking MPHD clinic patients with substance use disorder to available resources.

Data-to-Action with Local Prevention/Public Safety Partners

- Collaborating with prevention partners/public safety for targeted response to high-activity areas.

Data-to-Action with Local Homeless/Housing Partners

- Currently collaborating and implementing data-to-action activities with local homeless/housing partners surrounding the overdose crisis.

HIA Multidisciplinary Stakeholder Group

- Inaugural quarterly meeting held in July involving stakeholders from multiple sectors aimed at mitigating the local drug overdose crisis.

**U.S. DOJ 2021 Virtual COSSAP National Forum

- ORP epidemiologists presented on how to leverage multiple data systems to conduct drug overdose surveillance, acute response, and targeted interventions in the middle TN region.

**Intrastate Collaboration with Hamilton County Overdose Response Team

- ORP epidemiologists held meeting to discuss methodologies and mitigation strategies.

Public Health Emergency - Drug/Opioid Overdose Crisis in the U.S.

On October 26, 2017, the drug overdose crisis was officially declared to be a public health emergency by President Trump. This determination was renewed by the Secretary of Health and Human Services, effective July 7, 2021.
<https://www.phe.gov/emergency/news/healthactions/phe/Pages/opioids-7July2021.aspx>

MEDIA

Tennessean "Tennessee's drug crisis has no end in sight, and fentanyl is making it far deadlier" - November 21, 2021
<https://www.tennessean.com/story/news/local/2021/11/22/tennessee-drug-epidemic-fentanyl-killing-thousands-each-year/6291174001/>

Nashville Demystified "Steven Hale on Nashville's Record Number of Overdoses" - November 19, 2021
<https://weownthistown.net/shows/nashville-demystified/steven-hale-on-nashvilles-record-number-of-overdoses/>

90.3 WPLN News "For the first time, drug overdose deaths have surpassed 100,000 in a 12-month period" - November 17, 2021
<https://www.npr.org/2021/11/17/1056646768/for-the-first-time-drug-overdose-deaths-have-surpassed-100-000-in-a-12-month-per>

News Channel 5 "Opioid deaths surge amid low supply of affordable naloxone available" - November 9, 2021
<https://www.newschannel5.com/news/opioid-deaths-surge-amid-low-supply-of-affordable-naloxone-available>

Nashville Scene "The Other Epidemic: Fentanyl is Killing People in Nashville at a Staggering Rate" - November 4, 2021
https://www.nashvillescene.com/news/coverstory/the-other-epidemic-fentanyl-is-killing-people-in-nashville-at-a-staggering-rate/article_55ab975c-3b5f-11ec-a9fc-fb2cf034c0e1.html

Tennessean "Tennessee Voices, Episode 230: Sam Quinones, author of 'Dreamland' and 'The Least of Us'" - November 3, 2021
<https://www.tennessean.com/story/opinion/columnists/david-plazas/2021/11/03/tennessee-voices-sam-quinones-author-dreamland-the-least-of-us/6254201001/>

SPIKE ALERTS

- Since implementation in June 2021, the SPIKE Auto Text Program has been utilized 5 times (June 9, July 16, August 13, September 2, and October 4).

Update: Drug Overdose Epidemic in Davidson County, TN December 2021

Data and Surveillance

Suspected Fatal Drug Overdoses

- Through November 20, there have been 658 drug overdose deaths (confirmed and suspected) in 2021, representing a 14% increase compared to the same time period last year.
- Fentanyl has been detected in 75% of overdose-related toxicology reports in 2021 (78% in 2020).
- Monthly Average
 - 2020: 51.8 suspected overdose deaths
 - 2021: 62.8 suspected overdose deaths**

Suspected Nonfatal Drug Overdose-related Emergency Department (ED) Visits

- Through November 20, there have been 2,362 overdose-related ED visits at local hospitals in 2021, representing a 1% increase compared to the same time period last year.
- Monthly Average
 - 2020: 213.8 overdose-related ED visits
 - 2021: 222.2 overdose-related ED visits

Suspected Drug Overdoses Requiring NFD-EMS Response

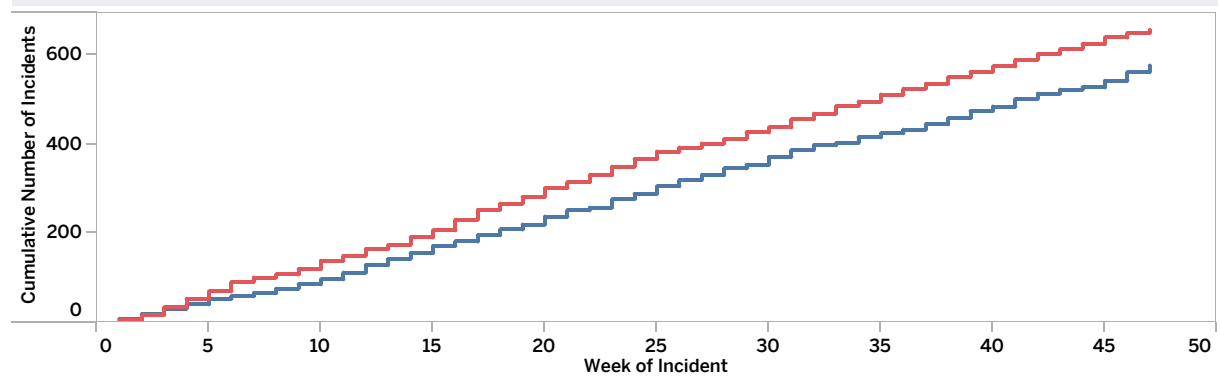
- Through November 20, there have been 5,211 suspected overdoses requiring NFD-EMS response in 2021, representing a 2% decrease compared to the same time period last year.
- Monthly Average
 - 2020: 484.9 suspected overdoses
 - 2021: 490.7 suspected overdoses

Syringe Containers Collected in the Community

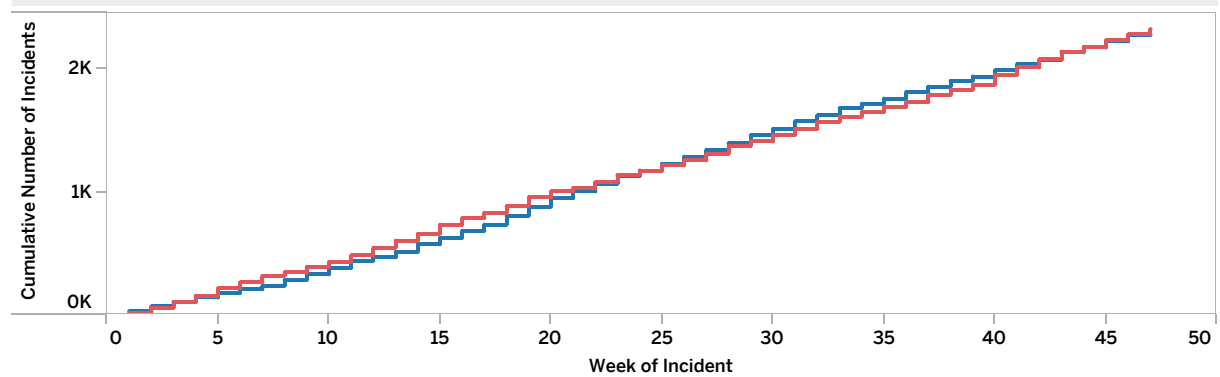
- Through September, there have been 1,410 syringe containers collected by the Metro Public Health Department in 2021, representing an 83% increase compared to the same time last year (each syringe container is estimated to collect between 400 and 430 1cc syringes).
- Monthly Average
 - 2020: 88.7 containers
 - 2021: 156.7 containers

Cumulative, Year-to-Date Drug Overdose Activity, 2020-2021
[2020=BLUE, 2021=RED]

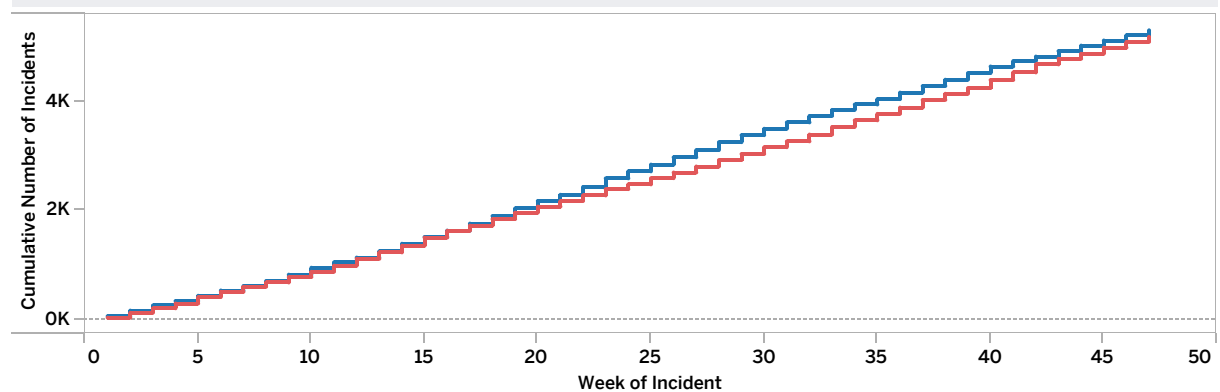
Suspected Fatal Drug Overdoses



Suspected Nonfatal Drug Overdose-related ED Visits



Suspected Drug Overdoses Requiring NFD-EMS Response



Prevention Categories for Activities/Interventions Implemented or Supported by ORP

The Overdose Response Program is involved in both actively implementing and supporting a multitude of community activities and interventions aimed at addressing all levels of prevention (primary, secondary, and tertiary). This ensures our program is applying a comprehensive approach which involves mitigating the currently burgeoning local drug overdose crisis while aiming to prevent substance use/addiction before it ever occurs.

Implemented by ORP

Overdose Fatality Review (OFR) Panel - primary, secondary, tertiary

ED Post-Overdose Discharge Protocol - primary, secondary, tertiary

HIA Multidisciplinary Stakeholder Group - primary, secondary, tertiary

Nashville Fire Department Emergency Medical Services Post-Overdose Follow-Up - primary, secondary, tertiary

Substance Use Linkage by ORP Social Worker - primary, secondary, tertiary

Data-to-Action with Local Prevention Partners - primary

Data-to-Action with Public Safety Partners - primary

Data-to-Action with Local Homeless/Housing Partners - primary

SPIKE Auto Text Program - primary, secondary

Drug Overdose Monitoring and Surveillance - primary, secondary, tertiary

Syringe Services Program (SSP) - primary, secondary

(Note: MPHD receives syringe containers from organization implemented the SSP for disposal as medical waste)

Supported by ORP

Fentanyl Test Strip Distribution (as a means of harm reduction) - primary, secondary

Definitions

Primary Prevention: "upstream" measures that prevent the onset of illness before the disease process begins. Immunization against infectious disease is a good example.

Secondary Prevention: measures that lead to early diagnosis and prompt treatment of a disease. Breast self-examination is a good example of secondary prevention.

Tertiary Prevention: involves the rehabilitation of people who have already been affected by a disease, or activities to prevent an established disease from becoming worse.

Update: Drug Overdose Epidemic in Davidson County, TN December 2021

Overdose Response Program

Trevor Henderson | Director

Email: trevor.henderson@nashville.gov

Bridget Del Boccio | Coordinator

Email: bridget.delboccio@nashville.gov

Madelynne Myers, MPH | Coordinator

Email: madelynne.myers@nashville.gov

Brigid Vingan, LMSW | Social Worker

Email: brigid.vingan@nashville.gov

Josh Love, MPH | Epidemiologist

Email: josh.love@nashville.gov

Haley Hershey, MPH | Epidemiologist

Email: haley.hershey@nashville.gov

Metro Public Health Department Website

Drug Overdose Information

<https://www.nashville.gov/departments/health/drug-overdose-information>

Data Sources

Suspected Fatal Drug Overdoses

Death Investigation and Decedent Information (DIDI) Database (maintained by the Davidson County Medical Examiner (DCME))

Suspected Nonfatal Drug Overdose-related ED Visits

ESSENCE-TN

Suspected Drug Overdoses Requiring NFD-EMS Response

Nashville Fire Department Emergency Medical Services (NFD-EMS)

Notes

Data presented in this report were extracted on November 24, 2021 and are provisional. There may be additional fatal/nonfatal drug overdoses reported over this time period in subsequent reports as incidents that occurred from September 2021-November 2021 are not yet finalized. Suspected drug overdose deaths captured in the DIDI database represent deaths under DCME jurisdiction and do not necessarily indicate Davidson County residency status of the decedent.

If you have information on unusual overdose activity, please contact the Overdose Response Program:

Opioid.Response@nashville.gov | 615-340-0498



SPIKE Alerts by Text
Information that can save lives
Get alerts about overdoses in your community



FG Trade/Getty Images

Partnership to End Addiction is working with organizations in your community to alert you when spikes in drug overdoses occur locally. This knowledge can help you take action to engage and protect your loved ones struggling with addiction.

Why it matters: Spike alerts can prompt families and community members to:

- 1 Have discussions about seeking treatment and/or using substances more safely
- 2 Protect people you care about by getting naloxone and learning how to use it
- 3 Talk to friends or loved ones who are not using substances about the risks of use
- 4 Advocate for and support efforts in your community to prevent overdoses

Text SPIKE to
855-9-OD-KNOW
(855-963-5669)

and follow the steps to
get messages on your
phone when overdose
spikes occur.

How it works: Health and law enforcement officials can release a "spike alert" to the media in response to a pattern of drug overdoses within a community. Partnership to End Addiction's SPIKE Alerts by Text program informs you when these alerts are issued.



Learn more:
drugfree.org/spike
or scan QR code to sign up now

Partnership to End Addiction is a nonprofit working to transform how our nation addresses addiction. Learn more at drugfree.org.



08/021



Metro **Public Health Dept**

Nashville / Davidson County

Protecting, Improving, and Sustaining Health

Board of Health Request Tracking Form

Meeting Date: _____

Request(s):

- _____
- _____
- _____
- _____
- _____

Assignments & Due Dates per each request:

- _____
- _____
- _____
- _____
- _____

Outcomes:

- _____
- _____
- _____
- _____
- _____

Response Filed in Board packet of _____ (date)

Summary of Proposed Changes to Job Descriptions and Pay Plan of the Metro Public Health Department – For Consideration at December 2021 Civil Service Board of Health Meeting

1. Create Position of [Engineer in Training – Health](#) at Salary Grade OR04 and remove Environmental Engineer 1

Action Requested: Create new position of Engineer in Training – Health and add it to the Pay Plan at Pay Grade OR04. Transition employees currently in the Environmental Engineer 1 classification into the Engineer in Training classification.

Justification: To mirror Metro’s Engineering series more closely.

Impact: The Department currently has three employees in the Environmental Engineer classification who would be moved into the Engineer in Training – Health classification. There is no financial impact at this time.

2. Create [Engineer 1 – Health](#) at Salary Grade OR06 and remove Environmental Engineer 2

Actions Requested: Create new position of Engineer 1 – Health and add it to the Pay Plan at Pay Grade OR06. Transition employees currently in the Environmental Engineer 2 classification into the Engineer 1 – Health classification.

Justification: To mirror Metro’s Engineering series more closely.

Impact: The Department currently has one employee in the Environmental Engineer 2 classification who would be moved into the Engineer 1 – Health classification. There is no financial impact at this time.

3. Create [Engineer 2 - Health](#) at Salary Grade OR07 and remove Environmental Engineer 3

Actions Requested: Create new position of Engineer 2 – Health and add it to the Pay Plan at Pay Grade OR07.

Justification: To mirror Metro’s Engineering series more closely.

Impact: No immediate impact. MPHID does not current have any employees in the Environmental Engineer 3 classification

4. Create Engineer 3 - Health Classification

Actions Requested: Create new position of Engineer 3 and add it to the Pay Plan at Pay Grade OR09

Justification: To mirror Metro's Engineering series more closely.

Impact: No immediate impact.

Engineer in Training - Health

Salary Grade:
OR04

METRO PUBLIC HEALTH DEPARTMENT OF NASHVILLE & DAVIDSON COUNTY

Established Date:

Revision Date:

FLSA:

Exempt

JOB OBJECTIVE:

Performs entry level professional engineering duties in design, construction and inspection of onsite sewage disposal systems; commercial, institutional and industrial source of air pollution; and public facilities; or in planning, installation, and maintenance of equipment, facilities, or various control systems. Performs related duties as required.

JOB DESCRIPTION:

MAJOR JOB RESPONSIBILITIES

Assists with preparation of and reviews plans, specifications and cost estimates for onsite sewage disposal systems; commercial, institutional and industrial sources of air pollution; and public facilities, including hotels and public swimming pools.

- Prepares and reviews fee estimates for project applications.

- Prepares, reviews, and details working drawings.

- Plots profiles and cross sections for various engineering projects from field notes.

- Conducts field surveys to verify collected data.

- Prepares and reviews engineering computations.

- Review all designs and applications to ensure legal compliance with regulatory requirements.

- Collects engineering data.

- Analyzes design sketches for installation of control devices.

Performs engineering related duties.

- Determines site grade, site lines, and property lines.

- Performs research studies for project analysis.

- Conducts on-site inspections of sewage disposal systems, public facilities, air pollution sources, and other public health-related projects.

- Investigates construction and design problems.

- Performs and oversees quality control tests on construction materials, absorption qualities of soil, and regulated air pollution sources.

- Analyzes technical data and prepares technical reports.

- Makes engineering calculations, including projection of wastewater flows and air pollution emission rates.

SUPERVISION EXERCISED/SUPERVISION RECEIVED

May coordinate activities of sub-professional engineering personnel.

Receives general supervision and reports from an Engineer 2 or designated supervisor, who assigns and reviews all projects and is consulted on complex matters.

WORKING ENVIRONMENT/PHYSICAL DEMANDS

Employee works in an office setting under generally favorable working conditions and in the field with possible exposure to weather extremes and hazardous conditions around construction sites. There may be some walking, standing, bending, carrying light items, etc. No special physical demands are required to perform the work.

Work involves everyday risks or discomforts that require normal safety precautions typical of such places as offices, meeting and training rooms, etc. Work area is adequately lighted, heated, and ventilated.

EMPLOYMENT STANDARDS:

EDUCATION AND EXPERIENCE

Bachelor's Degree in Engineering from an accredited college or university.

PERFORMANCE STANDARDS

Basic knowledge of local and federal laws, rules, and regulations affecting area of specialization. Working knowledge of the current principles used in the area of specialization such as, industrial processes, pollution control methodologies and equipment, fluid dynamics and wastewater collection and treatment.

Working knowledge of estimating, surveying, mechanical, electrical, and structural engineering.

Skill in the use of drafting and/or surveying instruments and equipment.

Ability to perform technical and statistical analysis.

Ability to analyze engineering data.

Ability to read and interpret plans and specifications.

Ability to perform accurate engineering computations.

Ability to interact with the public.

Ability to write detailed technical reports.

Ability to communicate effectively both orally and in writing.

Ability to perform basic computer applications and programs related to the area of specialization.

Ability to establish and maintain effective working relationships.

LICENSES REQUIRED

Valid Driver License

Engineer in Training (EIT) Certificate.

Engineer 1 - Health

Salary Grade:
OR06

METRO PUBLIC HEALTH DEPARTMENT OF NASHVILLE & DAVIDSON COUNTY
Established Date:
Revision Date:

FLSA:

Exempt

JOB OBJECTIVE:

Performs activities involved in development of plans, specifications, construction, and cost estimates of onsite sewage disposal systems; commercial, institutional, and industrial sources of air pollution; and public facilities; or in planning, installation, and maintenance of equipment, facilities, or various control systems. Performs related duties as required.

JOB DESCRIPTION:

MAJOR JOB RESPONSIBILITIES

Designs, prepares, reviews, and/or revises plans and specifications for: onsite sewage disposal systems; commercial, institutional, and industrial sources of air pollution; public facilities and other public health-related sources, such as cooling towers and HVAC systems.

- Prepares and reviews cost estimates for projects.

- Compiles and analyzes data for project feasibility studies.

- Performs on-site inspections of projects.

- Reviews and may approve final "as-built" plans and specifications.

- Maintains records and prepares reports.

- Issues or oversees issuance of operational permits.

Oversees the completion of projects with minimal supervision.

- Compiles, prepares, and analyzes data for compliance with local, state, and federal regulations.

- Oversees acquisition and easements of property for projects.

- Consults and advises professional engineers and contractors on interpretation of plans and regulations applicable to onsite sewage disposal systems; commercial, institutional, and industrial sources of air pollution; and public facilities.

- Confers with contractors and facilities on project progress.

- Oversees required regulatory testing.

- Makes final inspections of project.

- Approves final permitting requirements.

Performs administrative and other engineer-related duties.

- Coordinates activities with other departments, government agencies, or private firms concerning various projects.

- Directs, oversees, analyzes, and approves proposed maintenance, modifications, or construction of facility processes and equipment.

Reviews and provides input on development of or revisions of rules, regulations, ordinances, and correspondence.

Reviews monitoring and regulatory test reports to ensure compliance with local, state, and federal regulations.

Plans, develops, and coordinates implementation of various control systems.

Prepares and reviews technical reports and correspondences.

Attends various meetings.

SUPERVISION EXERCISED/SUPERVISION RECEIVED

May review the work of professional and sub-professional engineering personnel assigned to section.

Receives direction and reports to a higher graded engineer, who is consulted on unusual or complex matters.

WORKING ENVIRONMENT/PHYSICAL DEMANDS

Work involves everyday risks or discomforts that require normal safety precautions typical of such places as offices, meeting and training rooms, etc. Work area is adequately lighted, heated, and ventilated.

Employee works in an office setting under generally favorable working conditions and in the field with possible exposure to weather extremes and hazardous conditions around construction sites. There may be some walking, standing, bending, carrying light items, etc. No special physical demands are required to perform the work.

EMPLOYMENT STANDARDS:

EDUCATION AND EXPERIENCE

Bachelor's Degree in Engineering from an accredited college or university, Professional Engineering License, and four (4) years of post-degree engineering experience.

OR

Professional Engineering License and four (4) years of engineering experience.

PERFORMANCE STANDARDS

Working knowledge of the current principles used in the area of specialization such as industrial processes, pollution control methodologies and equipment, fluid dynamics, and wastewater collection and treatment.

Working knowledge of local, state, and federal regulations affecting public health.

Working knowledge of engineering terminology and principles.

Working knowledge of legal terminology used in construction documents.

Working knowledge of construction estimating and surveying procedures.

Working knowledge of construction contract administration.

Working knowledge of new trends, procedures, materials, or regulations in area of specialization.

Skill in the use of engineering instruments and equipment.

Ability to perform complex problem analysis.

Ability to analyze difficult engineering data.
Ability to read and interpret engineering plans and specifications.
Ability to make accurate engineering computations.
Ability to direct and coordinate the work of engineering personnel.
Ability to oversee various projects from conception to completion.
Ability to interact with the public.
Ability to write detailed technical reports.
Ability to communicate effectively both orally and in writing.
Ability to establish and maintain effective working relationships.

LICENSES REQUIRED

Valid Driver License

A Professional Engineering License from any state is required to apply for this position; however, the Tennessee Professional Engineering License must be obtained prior to completion of the probationary period.

Engineer 2 – Health

Salary Grade:
OR07

METRO PUBLIC HEALTH DEPARTMENT OF NASHVILLE & DAVIDSON COUNTY
Established Date:
Revision Date:

FLSA:

Exempt

JOB OBJECTIVE:

Coordinates and performs activities involved in development of complex plans, specifications, construction, and cost estimates of: onsite sewage disposal systems; commercial, institutional, and industrial sources of air pollution; and public facilities; or in planning, installation, and maintenance of equipment, facilities, or various control systems. Performs related duties as required.

JOB DESCRIPTION:

MAJOR JOB RESPONSIBILITIES

Performs complex administrative/engineering duties

- Interprets local, state, and federal regulations affecting public health-related projects.

- Coordinates, reviews, and analyzes data prior to project construction or modifications.

- Oversees all phases of application review and permit development.

- Coordinates activities with other departments, government agencies, or private firms concerning projects.

- Recommends solutions to complex design problems or system modifications, regulations, and correspondence.

- Prepares and reviews specifications, technical reports, and correspondence.

- Performs complex emissions modeling analysis of various projects and facilities.

- Represents department at various meetings.

Designs, prepares, reviews, and/or revises plans and specifications for projects.

- Prepares and reviews cost estimates for projects.

- Compiles and analyzes data for project feasibility studies.

- Performs on-site inspections of projects.

- Reviews and may approve final "as-built" plans and specifications.

- Maintains records and prepares reports.

- Issues or oversees issuance of operational permits.

Oversees the completion of projects with little to no supervision.

- Ensure local, state, and federal requirements are being met.

Consults and advises professional engineers and contractors on interpretation of plans and regulations applicable to onsite sewage disposal systems; commercial, institutional, and industrial sources of air pollution; and public facilities.
Confers with contractors and facilities on project progress.
Oversees and advises on required regulatory testing.
Makes final inspections of project.
Approves final permitting requirements.
May supervise employees.
Assigns and reviews work.
Evaluates employee performance.
Counsels with and corrects employees as needed.
Trains and/or establishes training requirements for employees.

SUPERVISION EXERCISED/SUPERVISION RECEIVED

May supervise or coordinate work of professional and sub-professional engineering personnel assigned to their section.

Receives direction and reports to Engineer Manager or Engineer 3, who is consulted on unusual or complex matters.

WORKING ENVIRONMENT/PHYSICAL DEMANDS

Work involves everyday risks or discomforts that require normal safety precautions typical of such places as offices, meeting and training rooms, etc. Work area is adequately lighted, heated, and ventilated.

Employee works in an office setting under generally favorable working conditions and in the field with possible exposure to weather extremes and hazardous conditions around construction sites. There may be some walking, standing, bending, carrying light items, etc. No special physical demands are required to perform the work.

EMPLOYMENT STANDARDS:

EDUCATION AND EXPERIENCE

Bachelor's Degree in Engineering from an accredited college or university, Professional Engineering License and six (6) years of post-degree engineering experience, including two (2) years as a professional engineer.

OR

Professional Engineering License and six (6) years of engineering experience, including two (2) years as a professional engineer.

More specific education, experience or certification requirements may be included in the position announcement as vacancies occur.

PERFORMANCE STANDARDS

Thorough knowledge of the current principles used in the area of specialization such as industrial processes, pollution control methodologies and equipment, fluid dynamics, and wastewater collection and treatment.

Thorough knowledge of local, state, and federal regulations affecting public health.

Thorough knowledge of engineering terminology and principles.

Thorough knowledge of legal terminology used in construction documents.

Thorough knowledge of construction estimating and surveying procedures.

Working knowledge of new trends, procedures, materials, or regulations in area of specialization.

Skill in the use of engineering instruments and equipment.

Ability to perform complex problem analysis.

Ability to analyze difficult engineering data.

Ability to read and interpret engineering plans and specifications.

Ability to make accurate engineering computations.

Ability to direct and coordinate the work of engineering personnel.

Ability to oversee an environmental project from conception to completion.

Ability to interact with the public.

Ability to write detailed technical reports.

Ability to communicate effectively both orally and in writing.

Ability to establish and maintain effective working relationships.

LICENSES REQUIRED

Valid Driver License

A Professional Engineering License from any state is required to apply for this position; however, the Tennessee Professional Engineering License must be obtained prior to completion of the probationary period.

Engineer 3 - Health

Salary Grade:
OR09

METRO PUBLIC HEALTH DEPARTMENT OF NASHVILLE & DAVIDSON COUNTY
Established Date:
Revision Date:

FLSA:

Exempt

JOB OBJECTIVE:

Plans, coordinates, supervises, and performs activities involved in development of all plans, specifications, construction, and cost estimates for: onsite sewage disposal systems; commercial, institutional, and industrial sources of air pollution; and public facilities. Employees in this classification may serve as specialist in a recognized branch of engineering, and are responsible for handling, in a largely independent manner, all complexities and facets of their assigned work, including providing answers to sensitive and controversial issues involving media relations. May serve as supervisor in absence of Engineer Manager. Performs related duties as required.

JOB DESCRIPTION:

MAJOR JOB RESPONSIBILITIES

May supervise employees.

- Assigns duties to employees.

- Ensures employees perform work in a correct and efficient manner.

- Evaluates employee performance and productivity.

- Corrects employees as needed.

- Trains employees.

May oversee administrative operations of more complex functions within their field of expertise.

- Assists with developing short- and long-range goals.

- Oversees and participates in selection and assignment of employees.

- Interprets and enforces local, state, and federal regulations affecting various projects in field of expertise.

- Prepares or oversees preparation of various reports.

- Represents department at various meetings as needed.

May serve as recognized specialist in a recognized branch of engineering.

Develops standards, criteria, policies, and overall long-range plans for specialized area of engineering.

Provides advice and problem-solving expertise on especially difficult and unique engineering problems in area of specialty.

Performs complex engineering duties.

Recommends solutions to complex design problems or systems modifications.
Performs air dispersion modeling to ensure compliance with National Ambient Air Quality Standards.

Supervises design and construction of onsite sewage disposal systems; commercial, institutional, and industrial sources of air pollution; and public facilities.

Oversees and gives direction on all permit requirements.

Approves acquisition and easements of property for various projects.

Confers with contractors on project progress.

Oversees all field inspections.

Gives direction and supervises other departments, government agencies, and private firms concerning public health-related projects.

Reviews and approves all emissions modeling.

Oversees and gives direction on installation plans for public health-related projects and facilities.

Keeps abreast of current trends in the engineering area.

SUPERVISION EXERCISED/SUPERVISION RECEIVED

May supervise work of all professional and sub-professional engineering personnel.

Receives general direction and reports to Engineering Manager, who informs the Engineer 3 of projects needing to be done and/or overall goals for the department. Employees in this classification are expected to work independently and exercise discretion and judgment.

Employees in these classifications who are in supervisory positions must register for Metro Human Resources Supervisory Training Program prior to completion of the work test and must complete all coursework within a 12-month period.

WORKING ENVIRONMENT/PHYSICAL DEMANDS

Work involves everyday risks or discomforts that require normal safety precautions typical of such places as offices, meeting and training rooms, etc. Work area is adequately lighted, heated, and ventilated.

Employee works primarily in an office setting under generally favorable working conditions; however, some positions may be required to perform tasks in the field. There may be some walking, standing, bending, carrying light items, etc. No special physical demands are required to perform the work.

EMPLOYMENT STANDARDS:

EDUCATION AND EXPERIENCE

Bachelor's Degree in Engineering from an accredited college or university and eight (8) years of progressively responsible post degree engineering experience, including four (4) years as a licensed Professional Engineer.

OR

Professional Engineering License and eight (8) years of engineering experience, including two (2) years as a professional engineer.

For supervisory positions, two (2) years of lead or supervisory experience is required.

Employees in supervisory positions must complete the in-service supervisory training prior to completion of the work test.

PERFORMANCE STANDARDS

Thorough knowledge of the current principles used in the area of specialization such as industrial processes, pollution control methodologies and equipment, fluid dynamics, and wastewater collection and treatment.

Thorough knowledge of local, state, and federal regulations affecting public health.

Thorough knowledge of engineering terminology and principles.

Thorough knowledge of legal terminology used in construction documents.

Thorough knowledge of estimating and surveying procedures.

Knowledge of new trends, procedures, materials, or regulations in area of specialization.

Knowledge of planning, forecasting, and budgeting techniques.

Knowledge of supervisory practices.

Knowledge of Civil Service and departmental rules, policies, and procedures.

Skill in the use of engineering instruments and equipment.

Skill in setting goals.

Ability to perform complex problem analysis.

Ability to analyze difficult engineering data.

Ability to read and interpret engineering plans and specifications.

Ability to perform cost/benefit, usage and other kinds of analyses.

Ability to make recommendations involving system planning, engineering design and construction.

Ability to make accurate engineering computations.

Ability to direct and coordinate the work of engineering personnel.

Ability to oversee public health-related projects from conception to completion.

Ability to interact with the public.

Ability to write detailed technical reports.

Ability to communicate effectively both orally and in writing.

Ability to establish and maintain effective working relationships.

LICENSES REQUIRED

Valid Driver License

A Professional Engineering License from any state is required to apply for this position; however, the Tennessee Professional Engineering License must be obtained prior to completion of the probationary period.

An employee assigned to a step (ST) pay grade will have their increment date adjusted for leave without pay in excess of 20 work days in a calendar year.

4.5 PROMOTION, RECLASSIFICATION, DEMOTION, VOLUNTARY REDUCTION IN GRADE, AND TRANSFER

A. PROMOTION AND RECLASSIFICATION

When an employee is promoted, the employee's rate of pay will be increased to reflect the additional duties and responsibilities of the new classification. Employees who are promoted within the open range (OR and HD) salary grades will receive a five percent (5%) to seven and one-half percent (7.5 %) increase in pay or the minimum salary of the new classification, whichever is greater. Employees on a step (ST) salary grade will be promoted by first determining the employee's promotional step by moving forward two steps in the current range. The new pay rate is established by slotting the employee into the step in the new range that is closest to, but not less than, the employee's promotional step. If an employee is promoted to a higher classification within ninety (90) calendar days of his or her increment, the employee shall receive the one step increase plus the promotional increase. Employees on a step (ST) salary grade being promoted to an open range (OR and HD) salary grade will receive the promotional step or the minimum salary of the new classification, whichever is greater. An employee may be promoted to a supervisory position and be compensated at a lesser rate than a direct subordinate, if the maximum salary in the subordinate's classification overlaps the minimum salary in the supervisor's classification. When this situation occurs, it shall not be grounds to request a salary adjustment for the supervising employee. Reclassifications normally do not result in an increase in pay unless the nature of the reclassification and any changes in duties warrant an increase (as provided by the Reclassification policy approved by the Board).

B. DEMOTION AND VOLUNTARY REDUCTION IN GRADE

When an employee in one classification is demoted for cause to another classification, his/her rate of pay shall be reduced within the range of the new classification as recommended by the Director or designee.

The rate of pay for a voluntary reduction in grade will normally be the employee's current salary provided it falls within the salary range of the lower classification. An employee may be redlined at his/her current pay rate if recommended by the Director, in accordance with the Red-lining Employee Salary policy. If the voluntary reduction in grade is in lieu of layoff, the Director may designate any lower rate in the new salary range as a condition of the voluntary reduction in grade or may utilize the Red-lining Employee Salary Policy. An employee will acknowledge in writing that he/she is accepting a voluntary reduction in grade in lieu of layoff.

PERSONNEL CHANGES

November 2021

NEW HIRES

Christy Burney, Seasonal/Part-time/Temporary, 11/13/2021, \$31.77 per hour (School Health)
Gabriella Collier, Nutritionist 1, 11/13/2021, \$45,547.49 (WIC)
Autumn Ganis, Program Specialist 2, 11/13/2021, \$41,767.04 (Epidemiology)
Tammie Gutschall, Dental Hygienist 1, 11/13/2021, \$50,310.64 (Oral Health)
Catherine Bowen, AC&C Kennel Assistant 1, 11/20/2021, \$32,206.37 (MACC)

TERMINATIONS (VOLUNTARY)

Erin Gibson, Seasonal/Part-time/Temporary, 11/01/21, resigned (School Health)
Jalesia Nichols, Seasonal/Part-time/Temporary, 11/01/21, resigned (School Health)
Anna Pease, Office Support Rep. Senior, 11/01/21, resigned (TB Elimination)
Kyra Hood, Nutritionist 2, 11/03/2021, resigned (WIC)
Nina McGlother, Program Specialist 1, 11/05/21, Dept. transfer to Sheriff's Office (Health Care Access)
Chiquita Hines, Program Specialist 1, 11/10/21, resigned (STD/HIV/Sexual Health)
Alissa Pitman, AC&C Kennel Assistant 1, 11/12/21, resigned (MACC)
Baker Bachman, Environmental Health Specialist 1, 11/26/21, resigned (FPFP)
Maria Bascetta, AC&C Program Coordinator, 11/26/21, resigned (MACC)
Sarah Rice, Public Health Nurse 1, 11/26/21, resigned (School Health)
Brenda Lyle, Office Support Rep. Senior, 11/29/21, early service pension (FPFP)

TERMINATION (INVOLUNTARY)

Sir Louis Lawson, Program Specialist 2, 11/24/2021, discharged (Nashville Strong Babies)

PROMOTIONS

Jovian Hudson, Environmental Health Specialist 1 – FPFP, promoted to Environmental Health Specialist 2 effective 11/05/2021
Jenny Avedisian, Environmental Health Specialist 1 – FPFP, promoted to Finance Officer 2 – Finance & Administration effective 11/13/2021
Regina Smotherman, Finance Officer 1 – Finance & Administration, promoted to Finance Officer 2 effective 11/13/2021