

Metropolitan Board of Health of Nashville and Davidson County September 26, 2016 Meeting Minutes

The meeting of the Metropolitan Board of Health of Nashville and Davidson County was called to order by Chairman Sam Felker at 4:00 p.m. in the Board Room, on the third floor of the Lentz Public Health Center, 2500 Charlotte Avenue, Nashville TN 37209. The meeting was rescheduled from September 8, 2016, due to a lack of quorum.

Present

Sam Felker, JD, Chair
Carol Etherington, Vice Chair
Henry Foster, MD, Member
Francisca Guzman, Member
Margreete Johnston, MD, MPH, Member
William S. Paul, MD, MPH, FACP, Director of Health
Tarah Amling, RN, Immunization Program Director
Peter Fontaine, Director of Administration and Finance Bureau
Josh Lee, JD, Metropolitan Department of Law

BOARD OF HEALTH

Communicable Disease and Public Health Emergency Preparedness Bureau Presentation: Immunization Update

Tarah Amling presented a PowerPoint on the Immunization program (Attachment I).

Approval of Grant Applications

Peter Fontaine presented one grant application for approval:

1. National Association of City and County Health Officials Accreditation Support Initiative for Local Public Health Departments
Term: October 1, 2016 through June 10, 2017
Amount: up to \$15,000

Dr. Foster made a motion to approve the grant application as presented. Ms. Guzman seconded the motion, which passed unanimously.

Approval of Grants and Contracts

Peter Fontaine presented four items for approval:

1. Grant Amendment from the State of Tennessee, Department of Health – Women, Infants and Children (WIC)
Term: May 31, 2015 through September 30, 2019
Amount: \$20,501,600 (\$231,600 decrease)
2. Amendment 1 Contract with Vanderbilt University TB Trials Consortium Studies (TBTC)
Term: October 1, 2015 through September 30, 2016
Amount: \$21,272 (\$1,013 increase)
3. Contract with Nashville Academy of Medicine for Purchase of Services
Term: July 1, 2016 through June 30, 2017
Amount: \$3,300

4. Grant Amendment from the State of Tennessee, Department of Health – Public Health Emergency Preparedness (PHEP)

Term: July 1, 2016 through June 30, 2017

Amount: \$800,904 (\$25,104 increase)

Ms. Guzman made a motion to approve the grants and contracts as presented. Ms. Etherington seconded the motion, which passed unanimously.

Approval of August 11, 2016 Meeting Minutes

Dr. Johnston made a motion to approve the minutes of the August 11, 2016 meeting minutes with correction as noted. Ms. Etherington seconded the motion, which passed unanimously.

Report on NALBOH Conference

Ms. Guzman presented an overview of her attendance at the National Association of Local Boards of Health annual conference August 9-12, 2016 (Attachment II).

Report of the Chair

Chairman Felker asked Ms. Guzman to develop the agenda for the Board of Health retreat scheduled on November 21, 2016. He invited Board members to let her know if there were topics they'd like addressed at the retreat. The retreat will be held at Metro Park and Recreation's Headquarters.

Chairman Felker noted that the search for a Deputy Director was ongoing and that the field of candidates had been narrowed to two.

Chairman Felker noted that the Mayor's office has posted a Health Policy staff position that will serve as liaison to the Health Department and also promote Health in All Policies. Dr. Paul added that the Mayor hopes to have impact on health equity.

Chairman Felker asked for a presentation on how the euthanasia rate achieved in July compares to the euthanasia rates of comparably-sized cities. Dr. Johnston requested that Dr. Cannon appear at a future Board meeting to share more information about the Shelter Population Data matrix that had been presented at the June 9, 2016 meeting.

Chairman Felker asked for an update on the gas compressor station in Joelton, which Dr. Paul and Josh Lee provided. They also provided information on a request for a permit for a quarry.

Report of the Director

Dr. Paul referred to the Director's Update provided in the Board packet (Attachment III) and gave a brief summary of the report.

CIVIL SERVICE BOARD

Personnel Changes

Peter Fontaine presented the personnel changes.

Next Regular Meeting

The next regular meeting of the Board of Health is scheduled to be held at 4:00 p.m. on Thursday, October 13, 2016, in the Board Room (third floor) at 2500 Charlotte Avenue, Nashville TN 37209.

The meeting adjourned at 5:35 p.m.

Respectfully submitted,

Samuel L. Felker, J.D.
Chairman

IMMUNIZATION PROGRAM

Tarah Amling, RN, BSN

Update to the Board of Health
September 26, 2016



Metro Public Health Dept
Nashville / Davidson County
Protecting, Improving, and Sustaining Health

Staff and Funding

Staff Members

- 9 staff: RNs (3), Clerks (2), Supervisors (1), Outreach Workers (3)

Funding

Federal funding: \$354,600

State funding: \$157,800

Background



Metro Public Health Dept
Nashville / Davidson County
Protecting, Improving, and Sustaining Health

ACIP

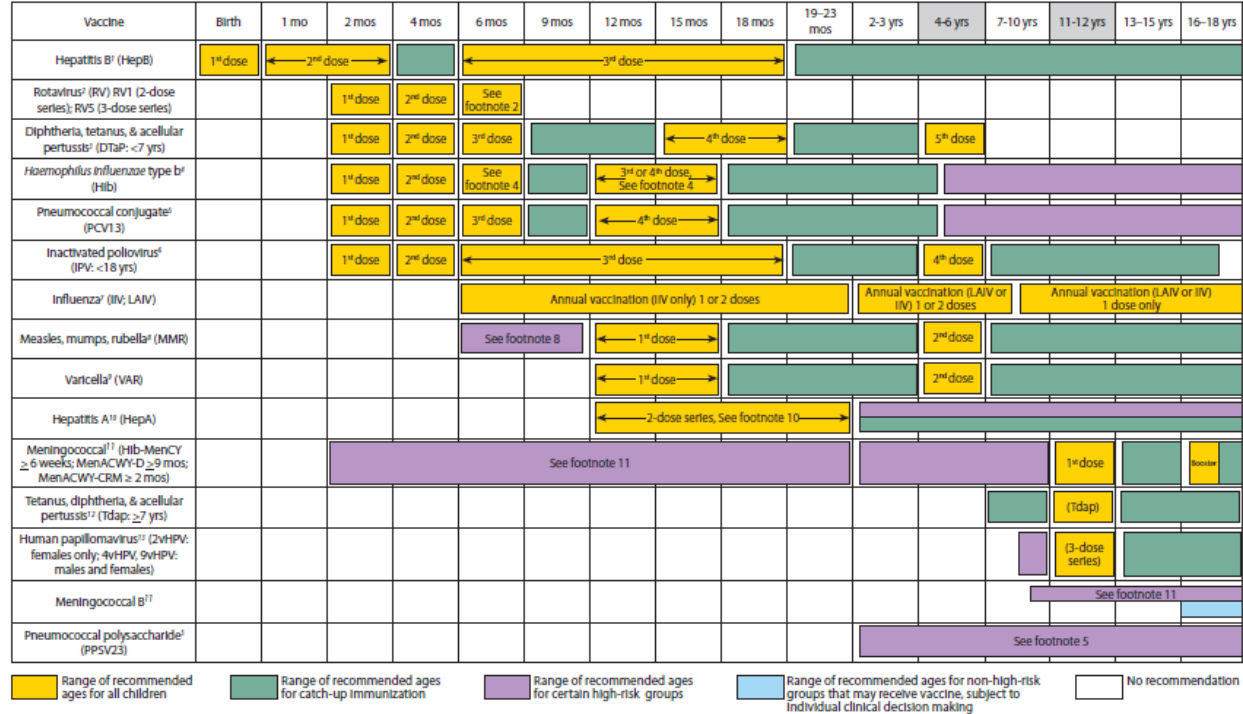
Advisory Committee on Immunization Practices (ACIP)

- 10 recommended vaccines from birth to 6 years of age
- 4 recommended vaccines 7-18 years of age

Figure 1. Recommended immunization schedule for persons aged 0 through 18 years – United States, 2016.

(FOR THOSE WHO FALL BEHIND OR START LATE, SEE THE CATCH-UP SCHEDULE [FIGURE 2]).

These recommendations must be read with the footnotes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars in Figure 1. To determine minimum intervals between doses, see the catch-up schedule (Figure 2). School entry and adolescent vaccine age groups are shaded.



This schedule includes recommendations in effect as of January 1, 2016. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines. Vaccination providers should consult the relevant Advisory Committee on Immunization Practices (ACIP) statement for detailed recommendations, available online at <http://www.cdc.gov/vaccines/hcp/acip-recs/index.html>. Clinically significant adverse events that follow vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) online (<http://www.vaers.hhs.gov>) or by telephone (800-822-7967). Suspected cases of vaccine-preventable diseases should be reported to the state or local health department. Additional information, including precautions and contraindications for vaccination, is available from CDC online (<http://www.cdc.gov/vaccines/recs/vac-admin/contraindications.htm>) or by telephone (800-CDC-INFO [800-232-4636]).

This schedule is approved by the Advisory Committee on Immunization Practices (<http://www.cdc.gov/vaccines/acip>), the American Academy of Pediatrics (<http://www.aap.org>), the American Academy of Family Physicians (<http://www.aafp.org>), and the American College of Obstetricians and Gynecologists (<http://www.acog.org>).

NOTE: The above recommendations must be read along with the footnotes of this schedule.

TN School Requirements

Disease	Child Care	Kindergarten	New students, Grades 1-12	All incoming 7 th graders	College
H. flu type B (Hib)	Up to date/ complete	-	-	-	-
Pneumococcus (PCV)	Up to date/ complete	-	-	-	-
Diphtheria, Tetanus, Pertussis	Up to date (no 4y dose)	Complete (incl. 4y dose)	Same as K. <small>Tdap req'd only for 7th gr.</small>	Tdap booster	-
Measles, Mumps, Rubella	1 dose	2 dose	2 dose	-	2 dose
Polio	Up to date (no 4y dose)	Complete (incl. 4y dose)	Complete (incl. 4y dose)	-	-
Hepatitis B	Up to date/ complete	Complete	Complete	-	If training incl. direct pt. care
Hepatitis A	1 dose	2 dose	-	-	-
Meningococcal disease (MenACWY)	-	-	-	-	1 dose for some (see school)
Varicella (or disease history)	1 dose or disease	2 dose or disease	2 dose or disease	2 dose or disease	2 dose or disease

Tennessee does allow medical and religious exceptions from vaccination

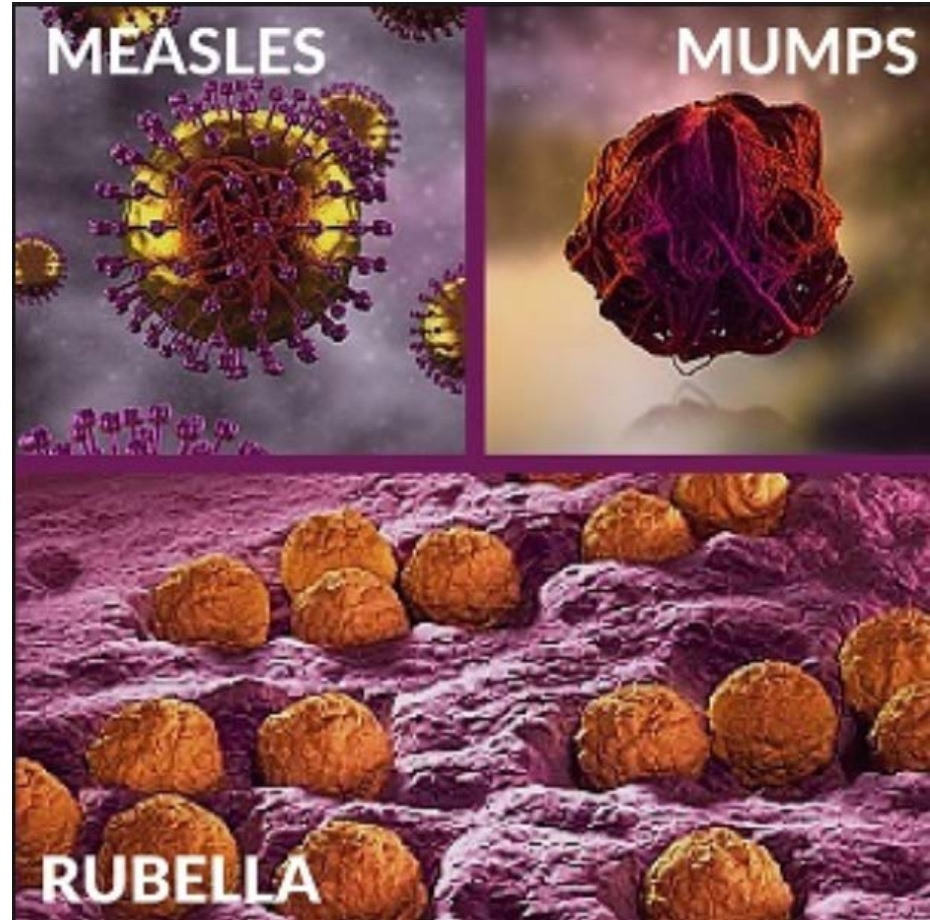




- TennIIS is a statewide immunization registry
- Data sharing from electronic medical records or direct data entry
- While reporting is not currently required in Tennessee, VFC providers will be required to report beginning in 2017

What do we do?

Protect, improve, and sustain community wellness through a variety of immunization centered activities



How do we do it?



Vaccines for Children

The Vaccines for Children (VFC) program was established in 1994 to make vaccines available to uninsured children. VFC has helped prevent disease and save lives... big time!

The CDC estimates that vaccination of children born between 1994 and 2013 will:

- Prevent 322 million illnesses
- Help avoid 732,000 deaths
- Save nearly \$1.4 trillion in total societal costs
(that includes \$295 billion in direct costs)

In 2016, MPHD has:

- 55 active providers
- Conducted 26 site audits
- Conducted 25 educational visits



Perinatal Hepatitis B Prevention Program

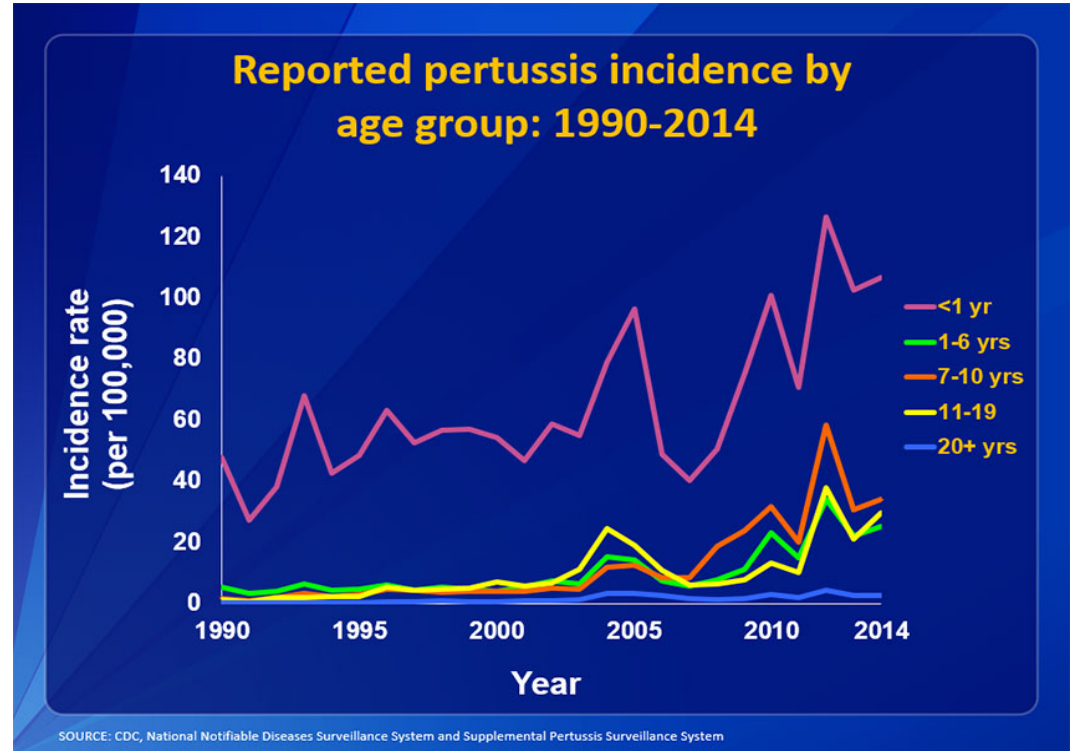
Identification of pregnant women infected with HBV and case management of infants born to those women up to 24 months of age

- 39 identified in 2014; 36 infant cases closed
- 40 identified in 2015
- 35 already identified in 2016



Vaccine Preventable Diseases

Identification and management of notifiable vaccine-preventable diseases



Immunization Records Window

Provides clients with immunization records and school certificates

Outreach

Improve vaccine coverage levels by reviewing records and outreaching those at risk for delayed or incomplete immunization



Metro Public Health Dept
Nashville/Davidson County
Protecting, Improving, and Sustaining Health

Immunization Compliance in Daycares and Kindergartens



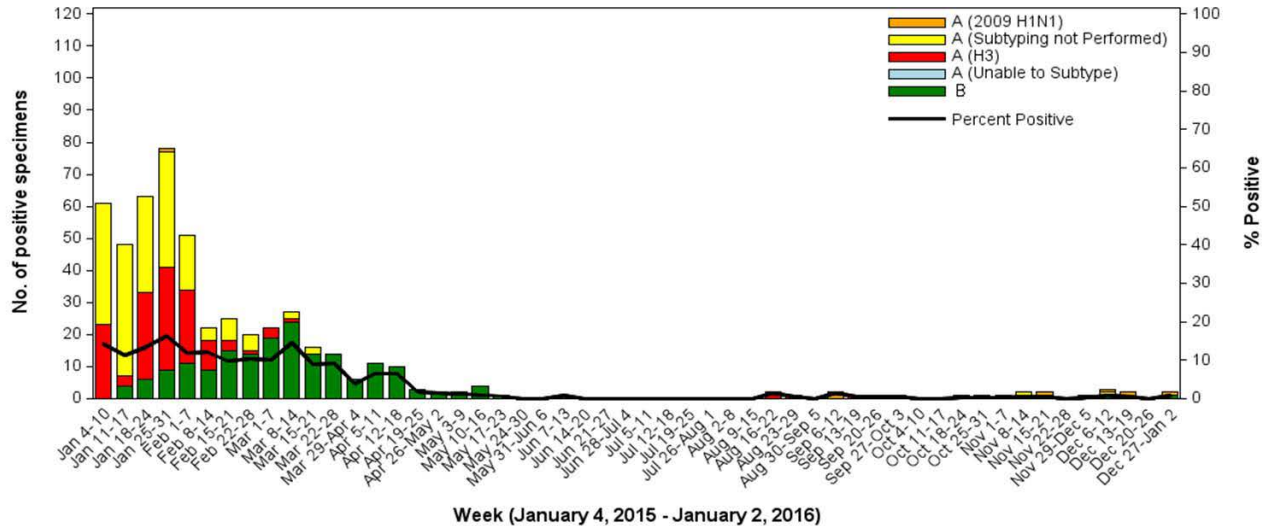
- Assess records of nearly 188 daycare centers annually
- Work with the state to validate Kindergarten Immunization Surveys

Sentinel Provider Network

Recruiting and training of providers to report and test Influenza-like Illness

Influenza Positive Tests Submitted to TN Dept. of Health Laboratory Services
Tennessee, 2014-2015

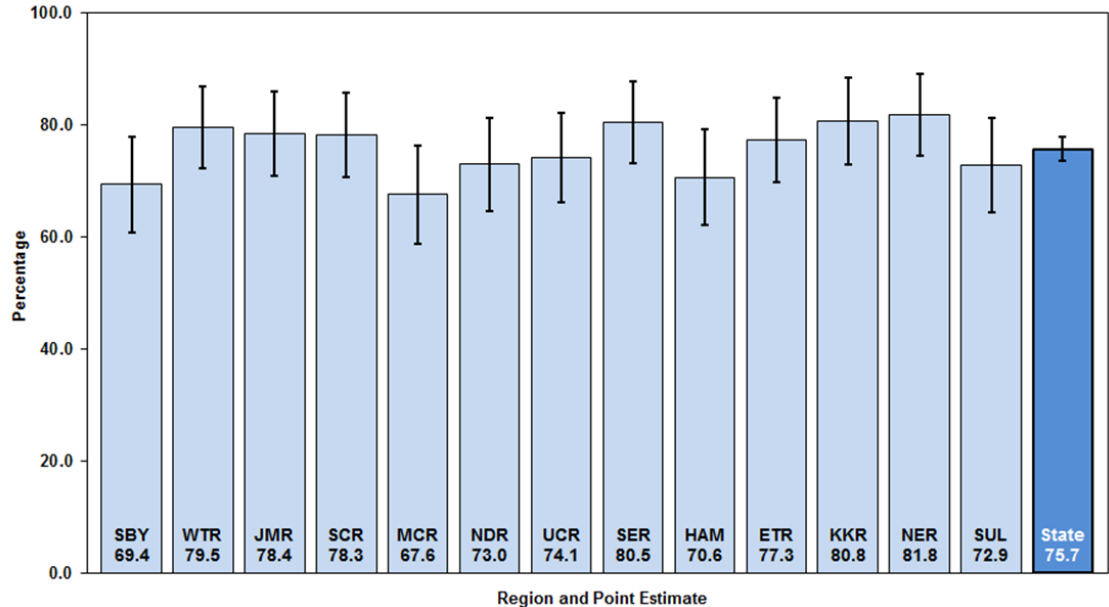
Updated: January 8, 2016



24 Month Survey

Intensive survey coordinated by the State to assess immunization coverage levels and track progress towards Healthy People 2020 goal

2015 Immunization Status Survey of 24-Month-Old Children in Tennessee:
Percentage of 24-month-old children with on-time immunization (4:3:1:3*:3:1:4)
by health department region
(point estimates and 95% confidence intervals, n=1451)



Challenges

- Short staffing
 - Program went <75% staffing in the past 6 months
 - Program currently has one major vacancy
- Vaccine hesitancy



Successes and Opportunities

- HPV coverage rates for 2015 for females aged 13-17 years was 38.9%
 - Up from 20.1% in 2014
- Implementing a Teletask system to enhance outreach activities



Thank you

Questions?

NALBOH 2016

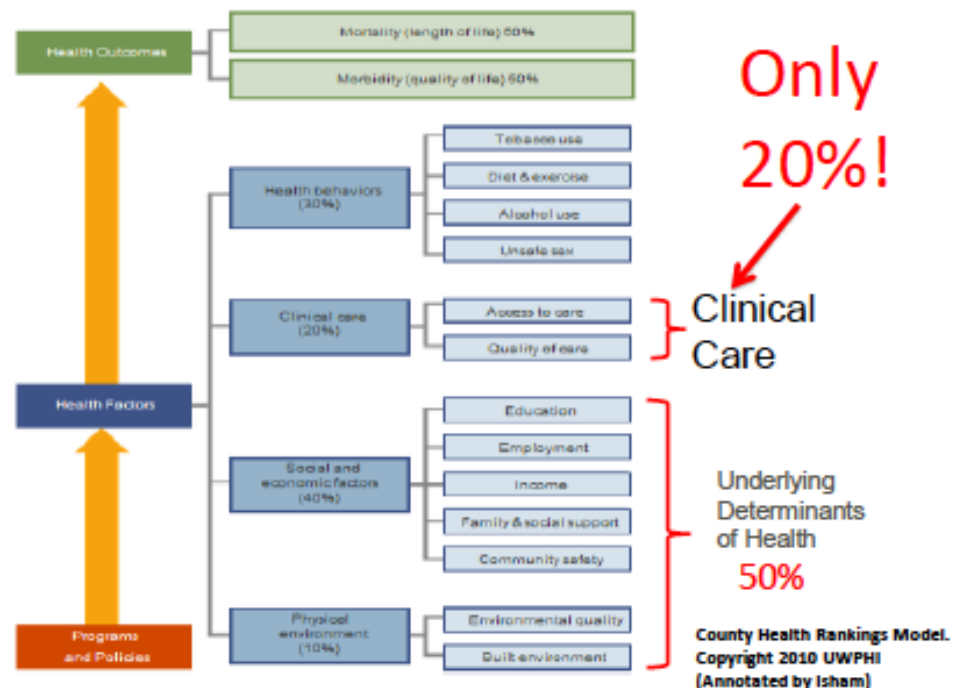
Key Highlights

Board of Health Presentation
September 26, 2016

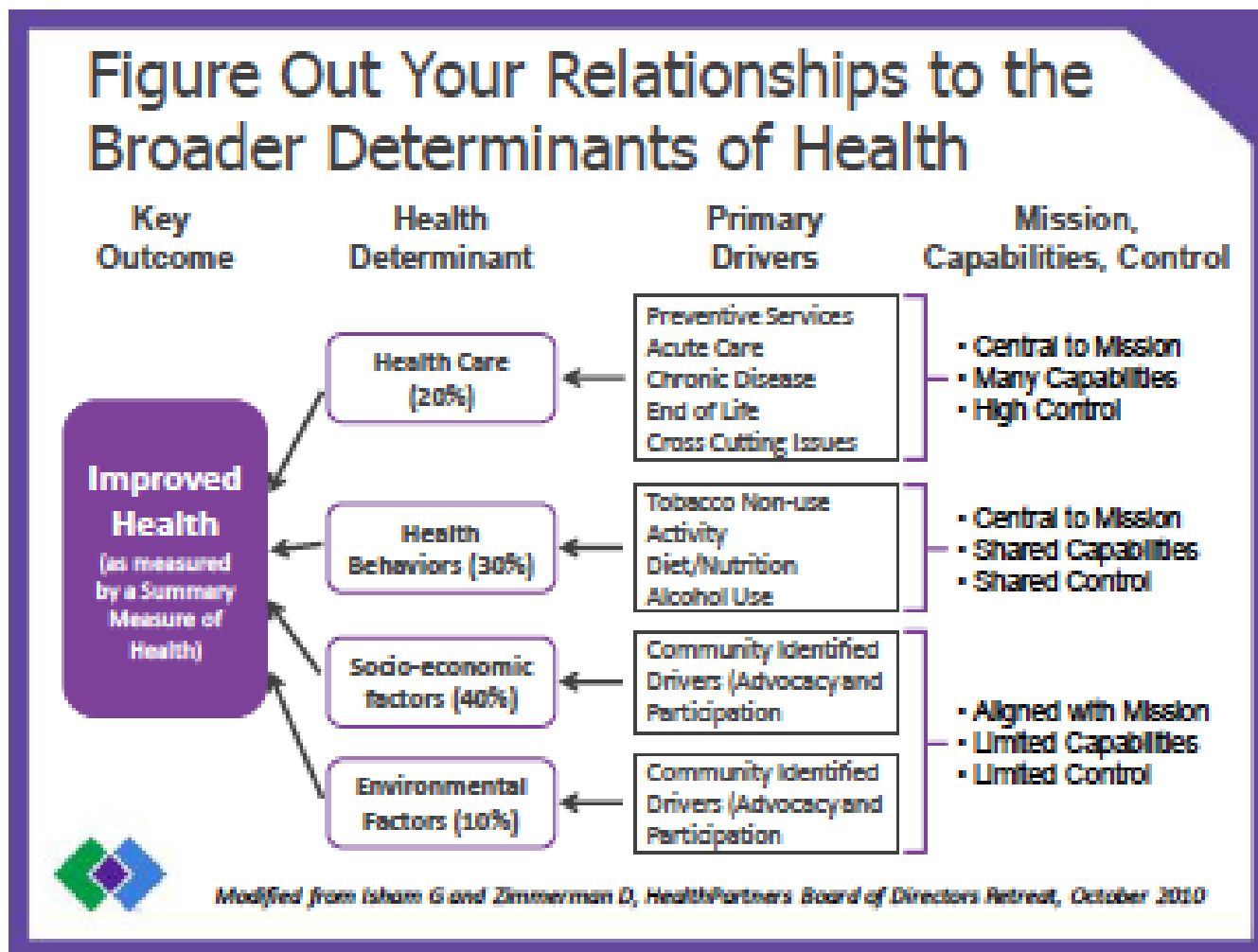
Six BOH Governing Principles

- Policy Development
- Resource Stewardship
- Legal Authority
- Partner Engagement
- Continuous Improvement
- Oversight

Clinical Care - Not the Primary Determinants of Health

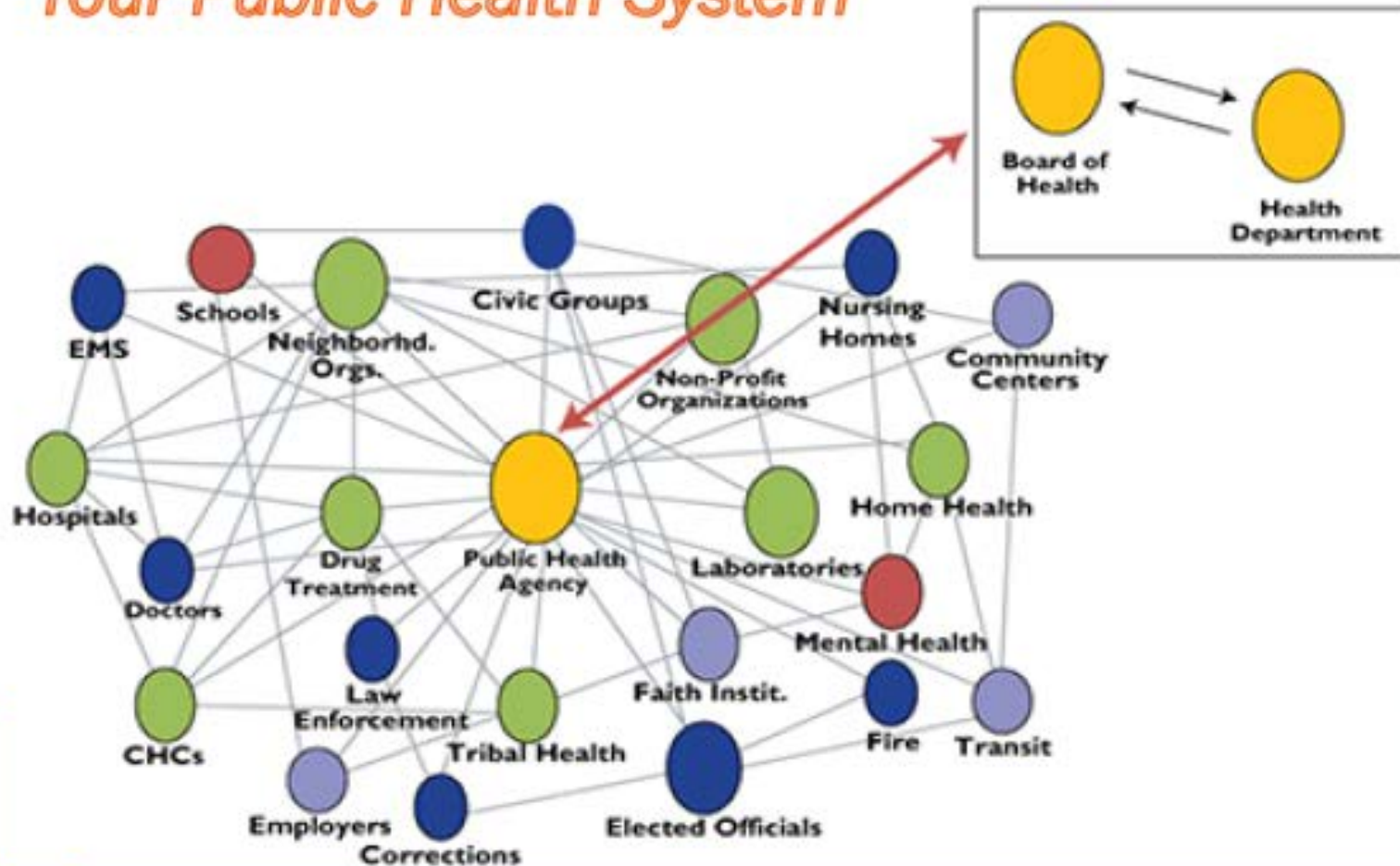


Relationship with Governing Principles



Policy Development

Your Public Health System



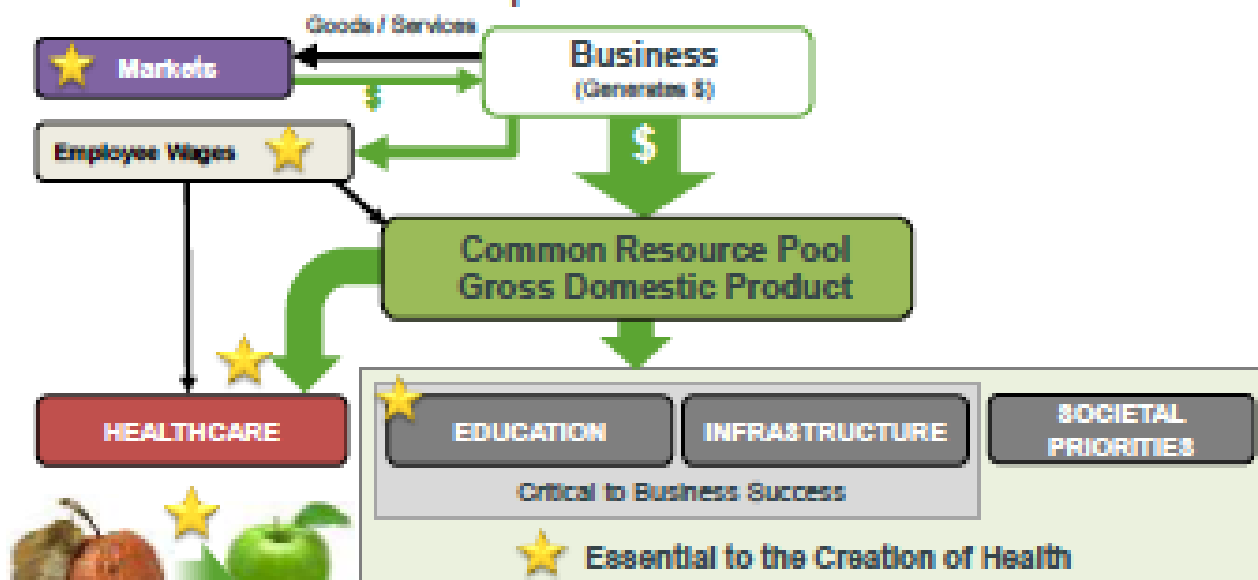
Policy Development

- Engage early and often with elected officials
 - Look at non-health partnerships that connect elected officials—what value can BOH/PHD add?
 - Connect Health to Economic Development
 - Goal of interactions is to educate and empower elected officials to be active participants in public health discussions.
 - Elected Officials connect the Public Health System to their local constituents
- It's not just about advocacy with elected officials/government
 - Business and Health Care Organizations—look at ways to engage in public health advocate role

Policy Development

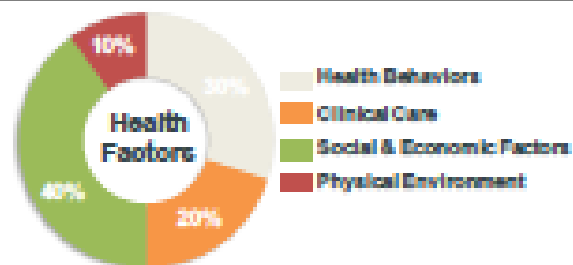
Macro Economic Concept Model

Catherine Basso, M.D.



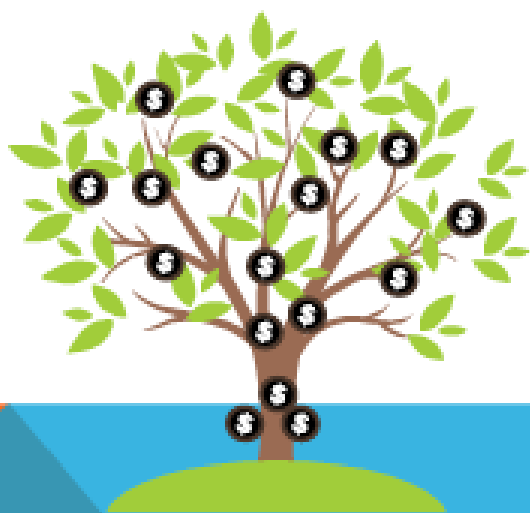
Positive Health Outcomes

- Performance and Productivity
- Safety
- Attract and Retain Talent
- Engagement and Satisfaction



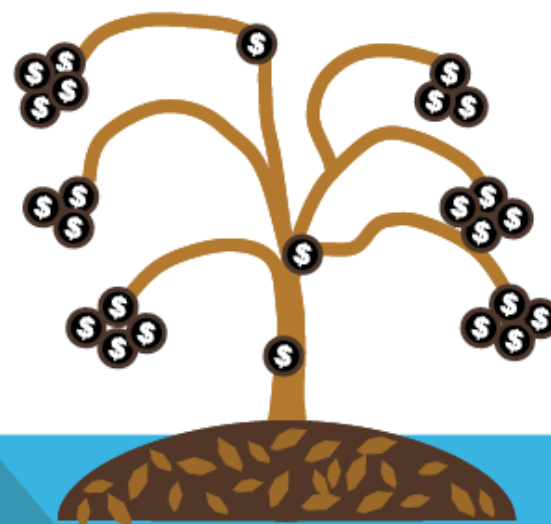
Resource Stewardship

Ideal Public Health Department



DAVID FLEMING, WASHINGTON STATE

Actual Public Health Department



DAVID FLEMING, WASHINGTON STATE

Legal Authority

- Important for BOHs to understand their legal authority and what actions they can/cannot take
 - Flint Water Crisis:
 - Implementing Collaborative Relationships
- NALBOH encourages this be a topic covered annually for Board members. Do not wait until there is an emergency to understand legal authority.

Partner Engagement

- Summit County Public Health Department, Utah
 - Focus on Public/Private Partnerships: Office Space, Program, Service Delivery
 - Ex: Failed Septic Systems—partnership with Habitat for Humanity
 - Ex: Substandard Housing—partnered with facility managements and local university.
- Faith-based organizations most untapped resource

Sources of Wisdom ?



Partner Engagement

- **BACKBONE:** Biggest area of reported need to implement effective collaborations.
 - Meeting facilitation and Consensus Building
 - Technology and Communications Support
 - Data Collection & Reporting
 - Synthesizing Research
 - Drafting & Management of Documents
 - Overseeing Implementation of Projects
 - Seeking Funding
 - Building & Maintaining Relationships with Stakeholders
 - Logistical and Administrative Details

Continuous Improvement

Creating Total Health Impact By Addressing Health With All Resources

Leveraging Kaiser Permanente's multiple assets as a total health organization



Oversight

Do we have a balance in day-to-day activities v. mission/vision activities?

Are we engaging in promoting a vision of public health in Nashville?

Director's Update to the Board of Health

September 26, 2016

Improve and Sustain Family and Child Well-Being

Dental

Dr. Michelle Pardue and the Oral Health staff at the Lentz Health Center are using a new treatment using silver diamine fluoride in the fight against tooth decay. It is a brush-on treatment that slows and even stops cavities. The product became available last year and is covered by TennCare. Silver diamine fluoride works by killing bacteria and deactivating enzymes that break down tooth structure. It also helps protect the pulp of teeth which decreases pain.

Breastfeeding

August was National Breastfeeding Month. Nearly 100 people signed in for the WIC Breastfeeding Celebration at the Fairgrounds, and the Big Latch On was held at the pavilion at Centennial Park, where 21 new moms successfully participated. Also, Kelly Whipker received WIC's recent "Loving Support of Excellence" award from the USDA for her group's innovative and intuitive ways of connecting with breastfeeding mothers.

Promote and Support Healthier Living

Mental Health

The workgroup on the Mental Health PIP is reconvening. We received support to convene during this year to conduct a more thorough assessment of system gaps leading to incarceration people needing treatment for Mental Illness. We reconvened an expanded workgroup here last week.

Prevent and Control Epidemics and Respond to Public Health Emergencies

CDC

We were pleased to host John Auerbach, the CDC's Associate Director of Policy and Acting Director, Office of State, Tribal, Local and Territorial Support, who joined us for a full day of events last month. We began with a breakfast meeting with me (Dr. Paul), former Mayor Bill Purcell, Consuelo Wilkins from the Meharry/Vanderbilt Alliance, and June Manning from the NCHC Fellows Program. Mr. Auerbach attended the NashvilleHealth meeting on hypertension, where he presented some of CDC's pertinent background. He greeted a stakeholders' meeting for our Food Systems Development Public Investment Plan, and sat in on a tabletop exercise on HIV/Hepatitis C outbreak response by the state. His day included lunch with Dr. Dreyzehner and Dr. Paul and ended with a round table discussion with the MPHD's Executive Leadership Team.

Ryan White

Our Ryan White staff attended the 2016 Ryan White National Conference on HIV Care and Treatment in Washington along with about 1,400 other program workers from around the country. Keynote speakers included HHS Secretary Sylvia Burwell, high ranking program officials, and Ryan White's mother, Jeanne Hale. Also, last week the Ryan White Planning Council held its annual meeting to allocate \$3.9 million to HIV medical and support services in our area for the upcoming grant year. Funding decisions are based

on data from the Ryan White needs assessment. Also during that meeting the council elected a new co-chair, and is now headed for the first time by two people living with HIV disease.

Organizational Updates

Deputy Director

The interview process for Deputy Director is underway. Dr. Areola, Tina Lester and Shoana Anderson are participating on the interview panel. We will reach out to the Board to see if you are available to engage with us in the second round of interviews.

Employee Recognition

We recognized 62 employees for their service at our annual Service Awards. Employees are recognized for their work based on five-year increments of employment, and received a paid day off. This group represented a total of 815 years of work for the department. The longevity champions were Carol Cowart of Community Development & Planning, and Dianne Harden in Financial Management, with 35 years apiece.

Schools

I met last month with Dr. Shawn Joseph, the new director of the Metro Nashville Public Schools. We discussed the potential expansion of school nursing, among other topics. Regarding the expansion, in collaboration with Metro Schools and with support from Metro Finance we are hiring a consultant to assess models and sources of payment in peer districts around the country.

Lentz

This building continues to attract interest. We hosted Pramod Dwivedi, a former employee here and now director of the Linn County Health Department in Cedar Rapids, Iowa, and some members of his team who were looking for ideas and options as they plan a replacement headquarters there.

Metro Animal Care and Control

Monthly Report
August 2016



METRO NASHVILLE
ANIMAL CARE & CONTROL

August 2016 Intakes

	Kitten	Adult Cat	Puppy	Adult Dog	Other	Wildlife	Total
Owner Surrender	107	62	26	141	9	0	345
Request for Humane Euthanasia	0	19	3	43	2	0	67
Stray	121	26	52	158	4	5	366
Total	228	107	81	342	15	5	778

Kitten/Puppy: 6 weeks old to 11 months old

Adult Cat/Dog: 1 year or older

Other: Includes Livestock, small animals

August 2015 to August 2016 Intakes

	2015				2016			
	Cats	Dogs	Other	Total	Cats	Dogs	Other	Total
Owner Surrender	125	114	9	248	169	167	9	345
Request for Humane Euthanasia (Owner Surrender)	34	11	0	45	19	46	2	67
Stray	104	173	21	298	147	210	9	366
Total	263	298	30	591	335	423	20	778

Other: Includes Livestock, small animals and wildlife

August 2016 Outcomes*

	Kitten	Adult Cat	Puppy	Adult Dog	Other	Wildlife	Total
Adopted	49	38	27	138	4	0	256
Transferred to Rescue Agency	14	2	37	73	6	3	135
Returned to Owner	1	3	6	48	0	0	58
Community Cats Program	54	28	0	0	0	0	82
Humanely Euthanized	17	22	2	65	0	1	107
Total	135	93	72	324	10	4	638

Kitten/Puppy: 6 weeks old to 12 months old

Adult Cat/Dog: 1 year or older

Other: Includes Livestock, small animals and wildlife

August 2015 to August 2016 Outcomes

	2015				2016			
	Cats	Dogs	Other	Total	Cats	Dogs	Other	Total
Adopted	144	136	6	286	87	165	4	256
Transferred to Rescue Agency	4	32	17	53	16	110	9	135
Returned to Owner	4	34	0	38	4	54	0	58
Community Cat Program	0	0	0	0	82	0	0	82
Humanely Euthanized	119	79	7	205	39	67	1	107
Total	271	281	30	582	228	396	14	638

*Outcome Data will rarely match Intake Data due to the fluidity of the shelter census. Animals are constantly being moved through the "Animal Flow Through" process.

Metro Animal Care and Control

Trailing 12 Month - Data Report

		Trailing 12 Month Average	
		Aug-16	Ending Aug 31, 2016
A	Intake Total	778	555
B	Stray	366	253
C	Owner Surrender	345	243
D	Owner Req. Euth	67	37
E	Wildlife	5	10
F	Other	13	15
G	Adopted	256	206
H	Transfer	97	103
I	RTO	58	55
J	ORE Euthanized	37	32
K	Wildlife Euthanized	1	5
L	Euth Total	107	127
M	Euth %	9%	16%

Data Report Key

Intakes

Outcomes



METRO NASHVILLE
ANIMAL CARE & CONTROL

Metro Animal Care and Control

Data Report – Summary

Metro Animal Care and Control uses the National Federation of Humane Societies – Basic Animal Stats Matrix as a tool for data collection.

This basic matrix was designed to serve as a tool for data collection. It is a simple matrix containing what many (including Asilomar, ASPCA, National Federation, American Humane, UC Davis, Maddies Fund, PetSmart Charities and HSUS) have agreed are the minimum data points (along with definitions) an organization should gather. By using the basic matrix - we will have the opportunity to benchmark the work at MACC against similar agencies around the region or the nation.

Additionally, MACC prepares a Trailing 12-Month Report monthly. This reports includes the monthly Euthanasia Percentage. The Euthanasia Percentage is calculated using the recommended standards for an animal shelter.

Euthanasia Percentage Formula –

$$\frac{L - (J+K)}{A}$$



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