### Metropolitan Board of Health of Nashville and Davidson County October 11, 2018 Meeting Minutes

The regular meeting of the Metropolitan Board of Health of Nashville and Davidson County was called to order by Chair Carol Etherington 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.

#### **Present**

Carol Etherington, RN, MSN, Chair
Samuel Felker, JD, Member
Margreete Johnston, M.D., MPH, Member
Thomas Campbell, M.D., Member
Alex Jahangir, M.D., Member
William S. Paul, M.D., MPH, Director of Health
Tom Sharp, Director of Policy and Governmental Liaison
Jim Diamond, MBA, Assistant Director, Administration and Finance Bureau
Billy Reagon, RN, BSN, DIS, TB Elimination Program Director
Joanna Shaw-KaiKai, M.D., Infectious Diseases Physician
Les Bowron, Esq., Director of Human Resources
Quan Poole, JD, Metropolitan Department of Law
Jane Madden, Metro Human Resources
Wanda Hadley, Metro Human Resources

#### **Update from Metro Human Resources**

Ms. Madden gave a brief update regarding the process for recruitment of a new Director of Health.

#### **Culture of Health Update**

Dr. Paul shared a presentation about the Robert Wood Johnson Foundation's Culture of Health Prize process (Attachment I). He credited Dr. Celia Larson for shepherding the process of application.

Chair Etherington asked that an event be planned to thank those who had partnered in the application.

Chair Etherington thanked Dr. Larson for her efforts.

#### Approval of the Metro Animal Care and Control Donation Thank You Letter

Tom Sharp requested Board approval of a proposed letter of thanks for MACC donors from the Board of Health (Attachment II).

Dr. Jahangir made a motion to approve the minutes of the Metro Animal Care and Control Thank You Letter for donations of \$1,000 and greater within a fiscal year, as written. Mr. Felker seconded the motion, which passed unanimously.

#### **Approval of Grant Applications**

There were no grant applications.

#### **Approval of Grants and Contracts**

Jim Diamond presented seven items for approval:

#### 1. Women, Infants and Children Contract Revision

Term: October 1, 2018-September 30, 2021

Amount: \$14,150,400

#### 2. Food & Drug Administration Data Sharing Agreement

Term: 5 years Amount: NA

#### 3. CDC Public Health Associate Agreement to Detail

Term: October 1, 2018-October 11, 2020

Amount: NA

#### 4. Metropolitan Board of Public Education Memorandum of Understanding

Term: October 1, 2018-June 30, 2020

Amount: \$265,930.58

#### 5. Friends of Metro Animal Care and Control

Term: NA Amount: \$500

#### 6. Child Fatality Review Services Contract Revision

Term: September 30, 2018-September 29, 2023

Amount: \$28,000

#### 7. Friends of Metro Animal Care & Control Microchip Fund

Term: NA Amount: \$300

Dr. Jahangir made a motion to approve the grants and contracts as presented. Mr. Felker seconded the motion, which passed unanimously.

#### Approval of the September 13, 2018 Meeting Minutes

Dr. Johnston made a motion to approve the minutes of the September 13, 2018 Board of Health meeting as written. Dr. Campbell seconded the motion, which passed unanimously.

#### **Director's Report**

Dr. Paul referred to his update provided in the Board packet (Attachment III).

Dr. Paul and Tina Lester introduced the Department's newly hired Director of Nursing, Laura Varnier.

#### Report of the Chair

Chair Etherington reiterated that Kristen Zak, the Mayor's Senior Advisor on Health and Wellness Policy, is resigning from Metro and will be joining the Tennessee Department of Health (TDH) as a Statewide Opioid Coordinator. She noted that Shoana Anderson, formerly the Department's director of the Communicable Disease and Public Health Emergency Preparedness bureau, has already joined TDH as a Statewide Opioid Coordinator.

Chair Etherington announced the retirement of Denise Stratz, whose employment at MPHD had spanned more than 30 years, and whose tenure included serving most recently as Interim Director of Nursing.

Chair Etherington also noted the passing of Dr. Roland Gray, who had chaired the Davidson County Drug Court, and provided drug counseling to many physicians.

Chair Etherington shared with Board members that she had met with members of the Department's senior management earlier in the day about issues related to transitions in the Department.

Chair Etherington reminded Board members that the annual Board Retreat would be held Thursday, November 15, 2018, in the Board room at Lentz from 8:00am-2:00pm, and would include a working lunch.

#### **Review of Board Requests**

- A request to organize a recognition of the partners in the Robert Wood Johnson Culture of Health prize application
- A reminder to share the September Statistics Report from MACC.

#### **Election of Chair and Vice Chair**

Chair Etherington asked Mr. Felker to conduct the election for Chair and Board Chair positions. She left the room and Mr. Felker opened the call for nominations.

Dr. Jahangir made a motion that Carol Etherington be re-elected Board Chair. Dr. Campbell seconded the motion. The motion passed unanimously.

Ms. Etherington returned to the meeting.

Dr. Jahangir made a motion that Ms. Guzmán be re-elected Board Vice Chair. The motion passed unanimously.

#### **Other Business**

Tom Sharp presented a draft of a resolution that the Board might consider in the future. Dr. Paul offered to send additional information about the proposal.

Dr. Paul introduced Amber Coyne, who, with Dr. Joanna Shaw-KaiKai's assistance, shared a live demonstration of eDOT (electronic Direct Observation Therapy), which the department has been approved to utilize. Ms. Coyne advised that participants must meet certain criteria to participate.

#### **CIVIL SERVICE BOARD**

Les Bowron provided an impromptu update on Human Resources and the transition to NEOGOV for the Department's hiring processes.

#### **Approval of Extension of Administrative Leave**

Les Bowron requested the Board approve an extension of administrative leave for Pam Sylakowski until the November 8, 2018, Board meeting, while an agreement is reached.

Dr. Johnston made a motion to extend administrative leave for Pam Sylakowski until the November 8, 2018 Board meeting. Mr. Felker seconded the motion, which passed unanimously.

#### **Personnel Changes**

Les Bowron 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, November 8, 2018, in the Board Room (third floor) at 2500 Charlotte Avenue, Nashville TN 37209.

The meeting adjourned at 5:38 p.m.

Respectfully submitted,

Carol Etherington, MSN, RN Chair

## **RWJ Culture of Health Prize**

October 11, 2018

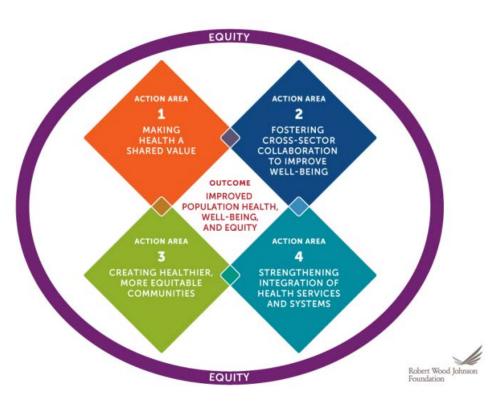
Bill Paul, MD, MPH Celia Larson, Ph.D.



People creating healthy conditions everywhere.

### RWJF Culture of Health Action Framework

- Making Health a Shared Value
- Fostering Cross-Sector Collaboration
- 3. Creating Healthier, More Equitable Communities
- Strengthening Integration of Health Services & Systems
- Outcome: Improved Health, Well-Being, and Equity



## Culture of Health Prize

**Purpose:** To recognize *communities* that have come together around a commitment to health, opportunity, and equity through collaboration and inclusion.

### **Application Process:**

- Six Criteria
- Three competitive phases (nine months) including site visit
- 200 applications

Nashville was selected as a finalist (10 communities)

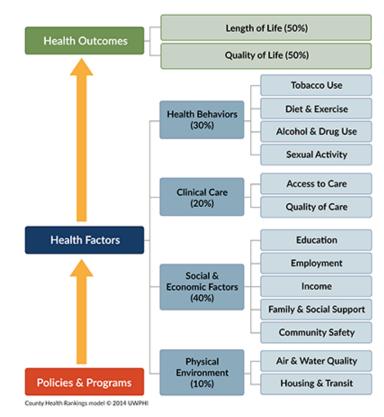
Four communities are awarded the prize

# Six Prize Criteria & Nashville's Strengths

## 1. Defining health in the broadest possible terms

Building a Culture of Health means using diverse strategies to address the many things that influence health in our communities. This includes all of the factors in the <a href="County Health">County Health</a>
<a href="Rankings model">Rankings model</a> of health: health behaviors, clinical care, social and economic factors, and the physical environment.

Given the importance of social and economic factors in influencing health outcomes, strategies addressing education, employment/income, family and social support, and community safety are considered crucial elements to achieving a Culture of Health.



## Defining health in the broadest possible terms



#### Site visitors were inspired by ACEs work

Schools, Juvenile Courts, ACE Nashville

#### Innovative Clinical Service, Training & Employment

- Neighborhood Health & Sanderling Renal Services at Preston Taylor Homes
- Residents trained and hired to work as dialysis techs

#### **Built Environment**

Engaging Youth in Park Design

#### **Health Behaviors**

Breast Feeding, infant mortality, food access

#### Structures that address community need

 Government leadership & Community Advisory Groups energize community efforts

# 2. Committing to sustainable systems changes and policy oriented long-term solutions

Building a Culture of Health means making thoughtful, datainformed, policy, programmatic, and systems changes that are designed to last. This involves having a strategic approach to problem-solving that recognizes the value of evidence and the promise of innovation. Communities are encouraged to demonstrate how residents, leaders, and organizations are collectively identifying priorities and taking coordinated action to implement sustainable solutions to the health challenges they face

# Committing to sustainable systems changes and policy oriented long-term solutions

#### **Organizational Practices**

 Juvenile Justice System, Courts, Schools advancing traumainformed practices

#### **Police Changes**

- "Handle with Care" Notification of schools about trauma in child's home
- Track and Share Data to increase service delivery and outcomes e.g. CMHSI

#### **Innovations**

- Metro Arts employing artists from neighborhoods— Community engagement
- Hospitals support breastfeeding
- Metro government Health in All Policies
- Ways to engage residents MDHA Gathering broad input from community through training and involvement in survey data collection



# 3. Creating conditions that give everyone a fair and just opportunity to reach their best possible health

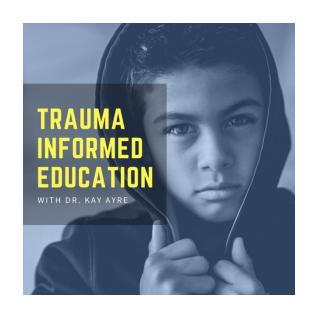
Building a Culture of Health means intentionally working to identify, reduce, and ultimately eliminate disparities in health, in partnership with those most affected by poor health outcomes. This includes cultivating a shared commitment to equity across the community; valuing diverse perspectives; and fostering a sense of security, belonging, and trust among all residents.

Communities are encouraged to demonstrate:

- 1) how they are engaging in collective problem solving, including full participation by excluded or marginalized groups and those most affected by poor health in making decisions and driving solutions; and
- 2) what actions they are taking to remove obstacles and increase opportunities for all to be healthy.

# Creating conditions that give everyone a fair and just opportunity to reach their best possible health

- Healthy Nashville Leadership Council
  - Engaged in candid conversations that address effects of racism
  - "Moving from largesse to justice" (Leadership conversation)
- Equity as criterion in capital budget scoring process (HiAP)
- Service delivery improvement in neighborhoods
- > Involved in health improvement
  - Fall Hamilton Elementary School as an example of Trauma Informed Education



# 4. Harnessing the collective power of leaders, partners, and community members

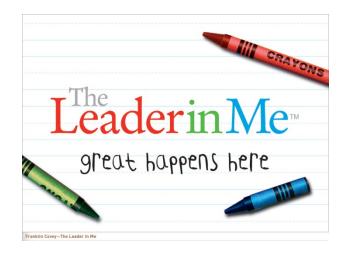
Building a Culture of Health means individuals and organizations across sectors and disciplines are all working together to provide everyone with the opportunity for better health. This includes building diverse and robust partnerships across business, government, residents, and nonprofit organizations. Communities are encouraged to demonstrate how they are developing methods for buy-in, decision-making, and coordinated action; building a shared sense of accountability; continuously communicating about health improvement efforts; and developing leadership skills and capacity among all community members.

# Harnessing the collective power of leaders, partners, and community members

Robust partnerships to improve outcomes

- ACE Nashville; Restorative justice; infant vitality collaborative; Jobs Plus; CMHSI; SPAAFC; Safety Net Consortium)
- ACEs great example for collective impact; "buy-in"; sharing accountability (300 members)
- Next generation of leaders through cultivating leadership skills – ART; Civic Design; "the leader in me" at Fall Hamilton Elementary





## 5. Securing & making the most of available resources

Building a Culture of Health means adopting an enterprising spirit toward health improvement. This includes critically examining existing and potential resources to maximize value, with a focus on leveraging existing assets; prioritizing upstream investments that address social and economic factors that influence health; and cultivating a strong belief that everyone in the community can be a force to improve health. Communities are encouraged to demonstrate how they are creatively approaching the generation, allocation, and mobilization of diverse financial and non-financial resources to improve health.

### Securing and making the most of available resources



- New investments (state and local funding for CMHSI/Mental Health Cooperative pre-arrest diversion)
- Investing in training (facilitation skills) for existing staff
- Investing MPHD staff time in collective impact to leverage resources across organizations
- Grants: Promise Neighborhood; Jobs Plus (MDHA)

## 6. Measuring and sharing progress & results

Building a Culture of Health means beginning with the destination in mind and a commitment to measuring the quality and impact of coordinated efforts. This includes:

- 1) establishing shared goals across sectors and partners;
- 2) agreeing on definitions of success, with attention to reducing disparities;
- 3) identifying measureable indicators of progress; and
- 4) continuously using data to improve processes, track outcomes, and change course when necessary.

Communities are encouraged to demonstrate how they are developing systems for collecting and sharing information, determining impacts across efforts, and communicating and celebrating successes when goals are achieved.

# Measuring and sharing progress and results

- Decrease in infant mortality
- Measuring impact of mental health crisis services
- > Decrease in disciplinary actions in trauma informed schools
- > Healthy Nashville data portal Helps ground, track and trend results
- > Celebrating success e.g. Infant Vitality Collaborative birthday party



# **Opportunities to Grow & Advance**

### Defining Health Broadly:

 Larger scale efforts in affordable housing, transportation, employment

### Policy & Systems

- More coordinated multisector effort; less government-centric
- MPHD as key connector/facilitator

### Equity

Full participation of residents & marginalized groups

# **Opportunities to Grow & Advance**

#### Collective Power

- We have a long way to go on race
- More coordination across sectors
- More driven by resident leaders

#### Resources

Where are philanthropy and business sectors?

#### Data & Measurement

- Need more consistent focus and practice
- Line of sight from efforts to results (both data and stories)

# Health Equity Mental Health Built & Natural (Health for Everyone) & Well-Being Environment

**ACE Nashville** 

**Communities** 

Hospital CHIP

Health Equity Committee

Infant Vitality Collaborative

Safety Net Consortium

Ending the Epidemic

Hospital CHIP

(Healthy Brains)

**Behavioral Health & Wellness** 

**Community MH Systems** 

**Advisory Committee** 

**Opioid Working Group** 

Health in All Policies—Metro Govt

**Suicide Prevention AA Faith** 

(Healthy Places)

**Active Transportation** 

Committee

Bicycle Pedestrian

**Advisory Committee** 

**Healthy Nashville** 

# **Action Opportunities**

- Current CHA/CHIP Cycle
  - More players significantly engaged & higher profile
  - HNLC will find Action Framework and prize feedback helpful
- Advancing Equity Practices—from grass tops to grass roots
  - Department and Board plans & advancing our organization's practices
  - CHIP, EtE, youth violence are opportunities
- Elevate Health as a shared priority
  - Advocate for MNPS Social & Emotional Learning and nurse funding

Selected from nearly 200 applicants, the RWJF Culture of Health Prize finalists recognize what it takes to build a healthy community. They have set themselves apart with innovation grounded in evidence; partnerships across non-profit, education, business, and local government sectors, among others; and an unrelenting commitment to all residents having an opportunity to lead their healthiest lives.

--Richard Besser, M.D., RWJF president and CEO

# Thank You!

People creating healthy conditions everywhere.



David Briley, Mayor

William S. Paul, MD, MPH, FACP Director of Health

**Board of Health** 

Carol Etherington, MSN, RN, Chair Francisca Guzmán, Vice Chair Thomas W. Campbell, MD Samuel L. Felker, JD A. Alex Jahangir, MD, MMHC, FACS Margreete G. Johnston, MD, MPH

**DATE, 2018** 

Name Address1 Address2 City, ST ZIP

Dear Name,

On behalf of the citizens of Nashville and Davidson County, please accept our sincere appreciation for your kind gift to Metro Animal Care and Control.

We know there are many worthy causes, and many appeals to the kindness of our citizens; we are gratified to have been chosen as the beneficiary of yours. We will do our best to merit your faith in us, to use your generous gift wisely and humanely.

The support of individuals like you improves what we do. We know better than to pretend to speak for the animals – they do that quite well for themselves – but for our part, we say:

Thank you.		
Carol Etherington, MSN, R.N., Chair	Date	

On behalf of the Metropolitan Board of Health for Nashville and Davidson County

# Director's Update to the Board of Health October, 2018

#### **Promote and Support Healthier Living**

#### **TB: Electronic Directly Observed Therapy**

In August we started electronic directly observed therapy for some of our tuberculosis patients. Directly observed therapy is a legal requirement for confirmed TB cases, and we do it for those who have been clinically indicated to have the disease as well. We are hopeful this tool will increase treatment compliance; we are targeting it initially to those who cannot meet with us during normal business hours. The public health official watches the client take his or her TB medications in real time using VSee and a pair of smartphones, one on each end of the transaction. VSee is a HIPAA compliant computer software program, akin to a more secure version of Face Time. It affords us a clear visual as the client takes the TB medications, eliminating the need for us to be physically present. It will save us time in the field, make stretches of inclement weather easier to work around and, hopefully, increase compliance. We are excited about its potential. By today we expected to have four clients using this method, although there is no cap on the number.

#### Flu

We have entered flu season. Our in-house team made the rounds in Lentz with their flu 'truck' two weeks ago and vaccinated 135 employees. The Mayor got his shot last week when we were at the courthouse. We have gone or will go to other Metro venues as well, per our annual routine, and the vaccine is available at all three main clinics for the general public.

Also, we will participate in this year's "Statewide Influenza Vaccination Initiative" during the National Influenza Vaccine Week. On Dec. 5 the Emergency Preparedness division will open five flu vaccine points of dispensing (PODs) where the public can receive a free flu vaccination. The PODs will be here at Lentz, East, South Nashville WIC Nutrition Center, Woodbine, and the Metro Southeast facility. The PODs are our part of a coordinated statewide effort to offer free flu vaccine in all 95 Tennessee counties on the same day.

#### **Addiction Summit**

The Nashville Addiction Summit was held Sept. 25. Some key takeaways were the role played by adverse childhood experiences in addiction; the speaker, Dr. Daniel Sumrok from the U.T. College of Medicine's Center for Addiction Science, said the way to minimize that is to take better care of the parents. Dr. Sumrok made the observation that each of the top ten causes of death in the United States, which account for 80 percent of all deaths, has links to trauma at some level. The keynote speaker was former U.S. Rep. Patrick Kennedy, who spoke candidly about his own (and his family's) struggles with substance abuse. He encouraged coordinated efforts among the groups assembled there to push for enforcement of the Mental Health Parity and Addiction Equity Act, which he sponsored and passed into law in 2008. That Act generally prevents group health plans and health insurance companies from imposing less favorable benefit limitations on those benefits than on medical/surgical benefits. We checked, and Metro's plans conform to the Act.

#### **Create Healthier Community Environments**

#### **CHA/CHIP**

The joint Community Health Assessment work is in the stretch run. The Local Public Health Systems Assessment will be on Oct. 22 here at Lentz. The Forces of Change assessment will be Oct. 26 at Matthew Walker. The Healthy Nashville Summit has been rescheduled for Jan. 11 at West End Community Church. That will be the day we and our community partners assess all the data collected in the four assessments and establish the strategic priorities for the Community Health Assessment.

#### **Prevent and Control Epidemics and Respond to Public Health Emergencies**

#### **Hepatitis A**

As of last week our confirmed hepatitis A cases reached 114. We continue working with the homeless shelters and others to reach the target populations. We will increase our presence at Room in the Inn to twice a month as they move into the winter season, when their population grows as the weather cools. Our most difficult to reach population appears to be people who use drugs, so we have extended our outreach to various organizations that might be able to help us make better connections there.

#### **Increase Access and Connection to Clinical Care**

#### **NGH Models of Care**

The Meharry Stakeholders Group and the Metro Council's Nashville General Hospital Strategic Planning Committee both have reporting deadlines coming up by the end of the year, although the Council group may extend its deadline slightly. Neither can go past January if their recommendations need to be reflected in Metro's upcoming budget. We continue working with the Models of Care subcommittee (of the Meharry group) to inform both of those efforts.

#### **Organizational Updates**

#### **Health and Well-Being Survey**

The Nashville Community Health and Well-Being survey kick-off event was held last month, with remarks by the Mayor, former Senator Frist and me. The survey itself is expected to be released to 12,000 households by the middle of this month. If you get one please fill it out!

#### **Mayor's Office Position**

Kristen Zak has agreed to take a job at the Tennessee Department of Health later this month. That position, though it has been in the Mayor's office during Kristen's tenure, is funded in our budget.