

Metropolitan Board of Health of Nashville and Davidson County August 8, 2019 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, MSN, RN, Chair
Alex Jahangir, MD, Vice Chair
Thomas Campbell, MD, Member
Margreete Johnston, MD, MPH, Member
David Frederick, MS, Member
Wendy J. Long, MD, MPH, Director of Health
Sanmi Areola, PhD, Deputy Director
Jim Diamond, MBA, Director, Finance and Administration Bureau
Lisa Nistler, BSN, RN, NCSN, School Health Program Manager
Laura Varnier, MNsc, APRN, FNP-BC, CEN
Alex Dickerson, JD, Metropolitan Department of Law

At Dr. Johnston's suggestion, Chair Etherington requested a moment of silence for the recent victims of gun violence.

Director's Report

Dr. Long referred to her update provided in the Board packet (Attachment I).

Chair Etherington asked for additional information on the Red Sand Project, which Laura Varnier and Dr. Long provided. David Frederick asked if any response had been received regarding the recent Board resolution regarding Immunization. Dr. Long said that all the news channels and Nashville Public Radio had aired stories on the resolution.

School Health Program Update

Lisa Nistler presented an overview of the School Health program (Attachments II).

Approval of Grant Applications

Jim Diamond presented one item for approval:

Air Pollution Control 105

Term: October 1, 2019-September 30, 2021

Amount: \$882,178 (Fed.); \$588,118 (Match); \$1,470,296 (Total)

Mr. Frederick made a motion to approve the grant application as presented. Dr. Jahangir seconded the motion, which passed unanimously.

Approval of Grants and Contracts

Jim Diamond presented six items for approval:

1. Business Associate Agreement with Evaluation Design

Term: NA

Amount: NA

2. Contract with St. Thomas Health – Mobile WIC

Term: Execution +5 years

Amount: \$NA

3. Contract Amendment #4 - TB Trials Consortium

Term: October 1, 2018-September 30, 2019

Amount: \$13,295

4. Contract with Tennessee Department of Health – Opioid Overdose Data Sharing Agreement

Term: April 1, 2019-March 31, 2022

Amount: NA

5. Grant from Tennessee Department of Health – Chronic Disease Prevention Amendment #1

Term: August 1, 2019-June 30, 2023

Amount: NA

6. Memorandum of Understanding – Metropolitan Community Oversight Board (COB)

Term: NA

Amount: NA

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

Approval of the July 11, 2019 Meeting Minutes

Dr. Campbell made a motion to approve the minutes of the July 11, 2019 Board of Health meeting as written. Dr. Johnston seconded the motion, which passed unanimously.

Report of the Chair

Chair Etherington advised Board members that Alex Dickerson would communicate about officer elections, which would be held during the September 12 meeting.

Review of Board Requests

- The Board will discuss at its fall Retreat how to interact with medical professionals regarding increasing immunization compliance.
- Potential topics for the Board's fall Retreat would be discussed at the September meeting.
- Ms. Franklin's report on the National Association of Local Boards of Health's annual conference would be on the September 12, 2019 Board agenda. [Recorder's note: Ms. Franklin's presentation was subsequently postponed to a later date.]

CIVIL SERVICE BOARD

Approval of Changes to Nursing Series Job Descriptions

Jim Diamond presented proposed revisions to the Public Health Nurse Series and the Licensed Practical Nurse Job Descriptions.

Dr. Jahangir made a motion to approve the Public Health Nurse Series and the Licensed Practical Nurse Job Descriptions as presented. Mr. Frederick seconded the motion, which passed unanimously.

Personnel Changes

Jim Diamond 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, September 12, 2019, in the Board Room (third floor) at 2500 Charlotte Avenue, Nashville TN 37209.

The meeting adjourned at 4:52 p.m.

Respectfully submitted,

Carol Etherington, MSN, RN
Chair

Director's Update to the Board of Health August, 2019

Protecting Health – Preventing the Spread of Infectious Disease

Back-to-School Immunizations

Our three weeks of extended hours for back-to-school immunizations will conclude over the next week. With the start of school last Monday MNPS will have informed incoming kindergarteners and seventh-graders who had not gotten the message previously that they have to get their shots or records in order to continue classes, so we expect the annual large influx of students over the next week or so. We gave 48 vaccines at the first Saturday clinic at Lentz on July 27. Clinic hours are being extended here, Woodbine and East on different days of the week through Aug. 15.

Immunizations II

Also, on July 16 the Metro Council unanimously approved Resolution 2019-1814 in support of this Board's resolution on immunizations.

Immunizations III

We are also going off site in this effort. Last Saturday we participated in Mt. Zion Baptist Church's Back to School Event at Hadley Community Center. We offered immunizations, and printed shot records for those who needed that. Additionally, information on immunizations and emergency preparedness was made available. Before the event Mt. Zion predicted about 5,000 attendees. (VERBAL UPDATE ON NUMBERS)

Youth Violence

On July 25 we hosted the Youth Violence Prevention Collaborative, the grassroots community group focused on initiating neighborhood-level violence prevention strategies with young people. Marcus Floyd from the mayor's office presented the vision for the Mayor's Youth Violence Prevention Committee. To be established by Executive Order, the Youth Violence Prevention Committee will serve as a high-level executive advisory council to the Mayor's office, responsible for developing the city's strategic plan to address and prevent youth violence. MPH D will provide staff support, facilitate its meetings, and continue to lead the grassroots effort. We are in the process of filing the staff position.

Improving Health - Services to Individuals & Families

WIC Visit

U.S. Rep. Jim Cooper is scheduled to visit the South Nutrition Center (SNC) a week from today at 8:30 a.m. Representative Cooper will be given a tour of the facility, have the opportunity to meet staff, and see firsthand the services provided in our WIC clinics. August is National Breast Feeding Month, so efforts aimed at improving breastfeeding rates in Davidson County will be highlighted.

Improving Health – Access & Care Coordination

Red Sand Project

We participated last week in the Red Sand Project, along with Vanderbilt University and Thistle Farms, to raise awareness of human trafficking. There were events at each of our three preventive health sites last week. Our clinic workers are trained annually on how to respond to suspected cases of trafficking, as

the health system is thought to be one of the most common touchpoints for victims. Our observance was part of a nationwide effort to bring attention to this issue.

Organizational Updates

Health + Well-Being Survey

The Nashville Community Health and Well-being Survey results have been posted for use by the academic community, pending a wider public release this fall. The survey of Davidson County residents over the age of 18 was conducted between October, 2018 and this April. It addresses health behaviors, chronic health conditions, preventive health practices and other factors that impact health and well-being. The survey yielded 1,805 responses.

We initially are making the dataset available to researchers for analysis in an effort to build community knowledge, thus informed decision-making, about the health status of our residents among leaders, practitioners and other stakeholders.

CDEP Director

Rachel Franklin has been confirmed as Director for the Communicable Disease and Emergency Preparedness (CDEP) bureau. Rachel had been interim director since May of 2018. She has been with the bureau for 11 years, the first six as program director for PHEP. Our congratulations to Rachel!

NATIONAL FEDERATION OF HUMANE SOCIETIES
BASIC ANIMAL STATS MATRIX
(vrs 9-2012)

IMPORTANT NOTES FOR THE BASIC DATA MATRIX

Introduction to the Basic Matrix:

This basic matrix was designed to serve as a tool for basic 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. Whether organizations already gather a great deal of data or have only gathered the basics, this matrix should facilitate the roll up or merging of data at the local, regional or national level by providing a common framework. This matrix does not reflect any preference in data analysis or the calculation of rates but is rather simply a tool for data collection.

Tracking by Species and Age:

The risks associated with being an adult dog, puppy, adult cat or kitten (or neonate of any kind) in a shelter environment will vary a great deal. To help shelters assess and understand the differing risks for these populations of animals, this basic animal stats matrix includes a break out by species and age. If tracking statistics broken out by species and age is beyond the capacity of an agency, simply tracking statistics by species would be a place to begin. This document defines puppy and kitten as under 5 months of age (see below: Determining Age). Again – given the differing level of risk – breaking age down further to include a neonate category for both dogs and cats can also be very informative.

Determining Age:

This basic matrix utilizes 5 months as the break point between puppy/kitten and adult. At or near 5 months of age there are changes in the teeth which can help guide trained staff regarding proper categorization of the animal. For cats, at 4-5 months of age permanent canines, premolars and molars are coming in (all in by 6 months of age). For dogs, at 5-7 months of age permanent canines, premolars and molars are coming in (all in by 7 months of age). Source: "How to . . . series" from Animal Sheltering, http://www.animalsheltering.org/resources/magazine/may_jun_1996/how-to-determine-a-dog-or.pdf or contact the National Federation of Humane Societies for a copy of the document.

Beginning and Ending Shelter Counts:

These numbers help frame the population of the animals sheltered and cared for by the organization. We are recommending that a shelter do a walk through – physically counting the animals sheltered within the organization, and not forgetting to count those animals who have been admitted but who are not currently within the shelter (foster care, in the care of a veterinary hospital, etc).

Defining Owner Requested Euthanasia:

Some shelters offer pet euthanasia to the public as a service whose cost may be subsidized and therefore more affordable than local veterinary clinics, thus ensuring access to this service. Defining when euthanasia should be recorded as "at the request of the owner", or not, is the subject of much discussion.

For the purposes of this document, we are choosing to define owner INTENDED euthanasia as the euthanasia of a pet whose owner brought the pet to the shelter for that service. In other words, the owner brought the pet in specifically for that service – it was their intent before arriving.

Any other definition of "owner requested" euthanasia leaves much up to interpretation and therefore a great deal of variation among organizations and their reporting. We believe the simplicity of this definition helps to ensure consistent application and record keeping.

Live Admissions Only

For the purposes of this matrix we are tracking LIVE admissions only, i.e. animals who are alive when they come into an agency's possession. Animals who are dead when taken in to an agency's possession may be a data point to track, but that information is not tracked by this matrix.

What is Possession?

"Adoption" and "Transferred to another Agency" both make reference to possession. The primary concept here is one of ownership. For example, in foster care, the agency still has possession or ownership. If adopted or transferred to another Agency, possession is now with the new owner, or with another Agency.

Where are the "Others"?

This basic data matrix focuses on canines and felines. Many organizations also provide extraordinary services for other pets (pocket pets, rabbits, ferrets) and animals (wildlife), and that good work is not captured here.

Why a Basic Matrix?

This basic matrix was designed to serve as a tool for data collection. It is a simple matrix containing what many have agreed are the minimum data points an organization should consider gathering. By agreeing to this basic matrix - we hope organizations will gather AT LEAST this data, or if an organization all ready gathers a great deal of data, that they will consider rolling up their data into this format to help facilitate (if individual agencies are interested) data collection at a local, regional or national level, which would allow participating agencies to benchmark their work against similar agencies around their region or the nation. This matrix does not reflect any preference for the variety of live release rates used in animal sheltering and welfare. Most rates, other than full Asilomar which requires a conditions matrix, should be able to be calculated from the data points included.

NATIONAL FEDERATION OF HUMANE SOCIETIES
BASIC ANIMAL STATS MATRIX
(vrs 9-2012)

Species By Age	Canine		Feline		Total
	Adult	Up to 5 months	Adult	Up to 5 months	
Beginning Animal Count (date: 7/01/2019)	147	23	37	79	286
Intake					
Stray at large	228	36	43	128	435
Relinquished by owner	54	4	14	20	92
Owner requested euthanasia	10	0	0	0	10
Transferred in from agency	1	0	0	0	1
Other Intakes	11	10	3	0	24
TOTAL INTAKE	304	50	60	148	562
Outcomes					
Adoption	162	23	25	101	311
Returned to owner	98	10	3	0	111
Transferred to another agency	28	7	28	16	79
Other live Outcome	0	0	0	0	0
TOTAL LIVE OUTCOMES	288	40	56	117	501
Died in care	1	0	0	3	4
Lost in care (Physical inventory adjustments)	0	0	0	0	0
Shelter Euthanasia	28	1	5	12	46
Owner requested euthanasia	10	0	0	0	10
TOTAL OUTCOMES	327	41	61	132	561
Ending Shelter Count (date: 7/31/2019)	101	14	45	127	287
SAVE RATE:	90.14%	98.00%	91.67%	89.86%	90.94%

METRO ANIMAL CARE AND CONTROL

Trailing 12 Monthly – Data Report

	July 2019	Trailing 12 Month Average Ending July 31, 2019
Intake Total	605	567
Stray	438	329
Owner Surrender	98	116
Owner Request Euthanasia	10	14
Wildlife	32	39
Other	27	27
Adopted	383	255
Transfer	103	103
RTO	112	105
ORE Euthanized	10	13
Wildlife Euthanized	23	29
Euthanasia Total	82	89
Euthanasia %	8%	8

Data Report Key
Intakes
Outcomes

School Health Program

Board of Health Meeting

August 8, 2019

Lisa M. Nistler BSN, RN, NCSN

School Health Program Manager



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

School Health Program

School nursing, a specialized practice of public health nursing, protects and promotes student health, facilitates normal development, and advances academic success. School nurses, grounded in ethical and evidence-based practice, are the leaders that bridge health care and education, provide care coordination, advocate for quality student-centered care, and collaborate to design systems that allow individuals and communities to develop their full potentials.

National Association of School Nurses 2018

History

- Contract began in 1993
- 2016 Nurse Expansion Plan submitted
- 2017 Funding for first phase of expansion
- 2017 Medicaid reimbursement pilot
- 2019 First year of full Medicaid reimbursement

School Health Program

- Serve 139 traditional schools for MNPS
- Present in 86 schools on a daily basis
- Harris-Hillman School
 - ❖ 125 Exceptional Education students with multiple handicaps and Pre-K classes
 - ❖ 138 scheduled skilled nursing procedures

Personnel Breakdown

- 77 School Nurses
- 16 PRN nurses
- 8 Supervisors
- 1 Office support person

School Health Program

- Primary focus: Provider-ordered skilled nursing services
- Current caseload is about 229 Students
 - ❖ 124 students with Diabetes
 - ❖ 80 student needing tube feedings
 - ❖ 4 students with tracheostomies

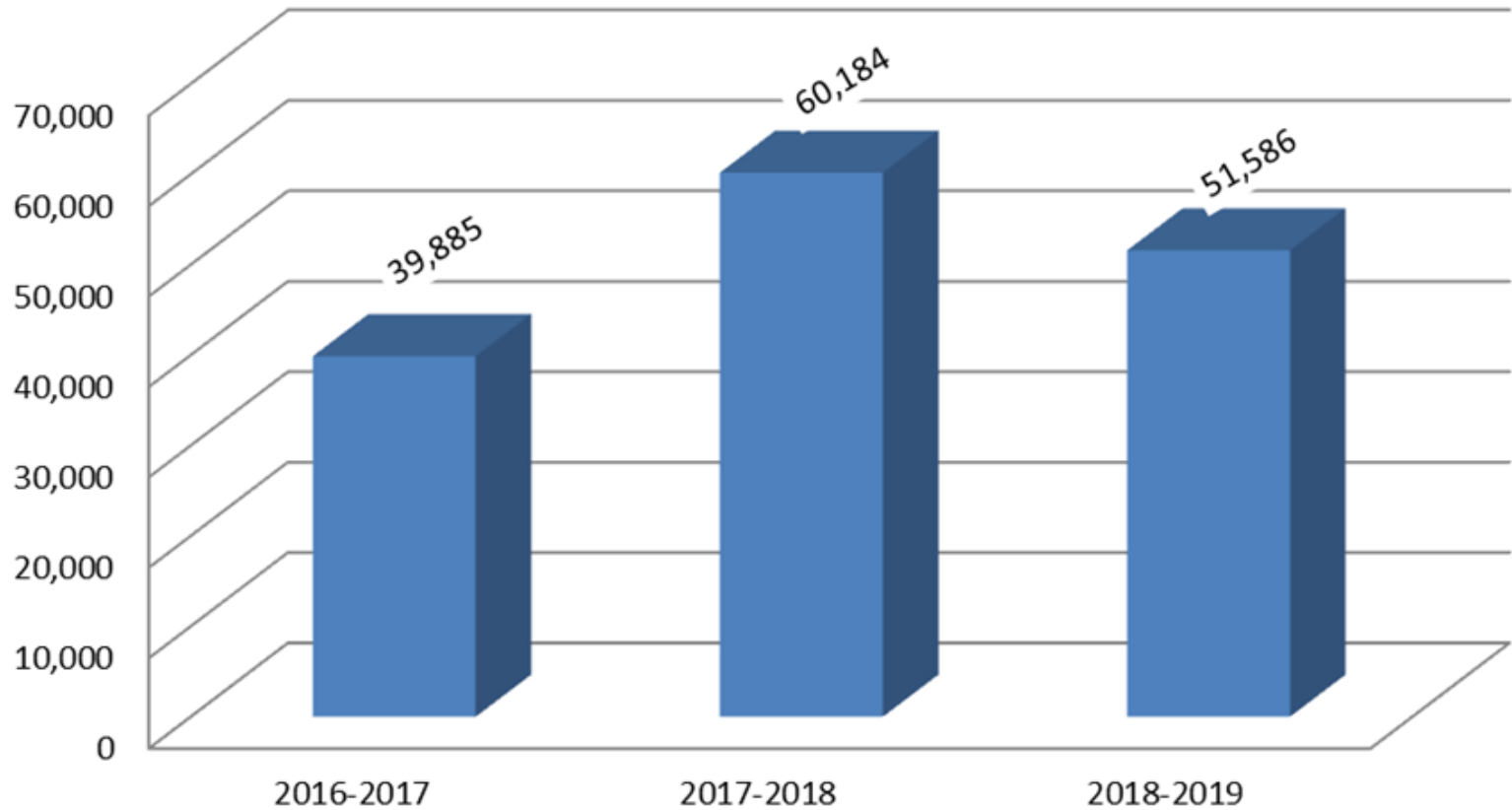
School Health Program

School 1 Student 1	07:35am	07:45am	Tube feeding by gravity
School 1 Student 2	07:45am	8:00am	Tube feeding by gravity
School 2 Student 3	8:40am	8:45am	Blood glucose test with nurse
School 2 Student 3	08:55am	09:05am	Carbohydrate calculations and insulin administration
School 2 Student 3	11:30am	11:35am	Blood glucose test and insulin administration
School 2 Student 3	11:55am	12:00pm	Carbohydrate calculations and insulin administration
School 1 Student 1	12:10pm	12:20pm	Tube feeding by gravity
School 1 Student 2	12:20pm	12:30pm	Tube feeding by gravity
School 1 Student 1	02:30pm	02:40pm	Tube feeding by gravity

School Health Program

- Emergency Care Plans
 - ❖ Nearly 8,500 plans developed in 2018-2019
- Office Visits
 - ❖ Nearly 52,000 office visits completed
 - ❖ Rate of return to class was ~ 85%

Office Visits by School Health Nurses



What else do our nurses do?

- Care coordination/case management
- Eyeglass vouchers
- Education
- First Aid
- Illness Surveillance
- 7th grade immunization initiative
- Screenings
- Medication audits

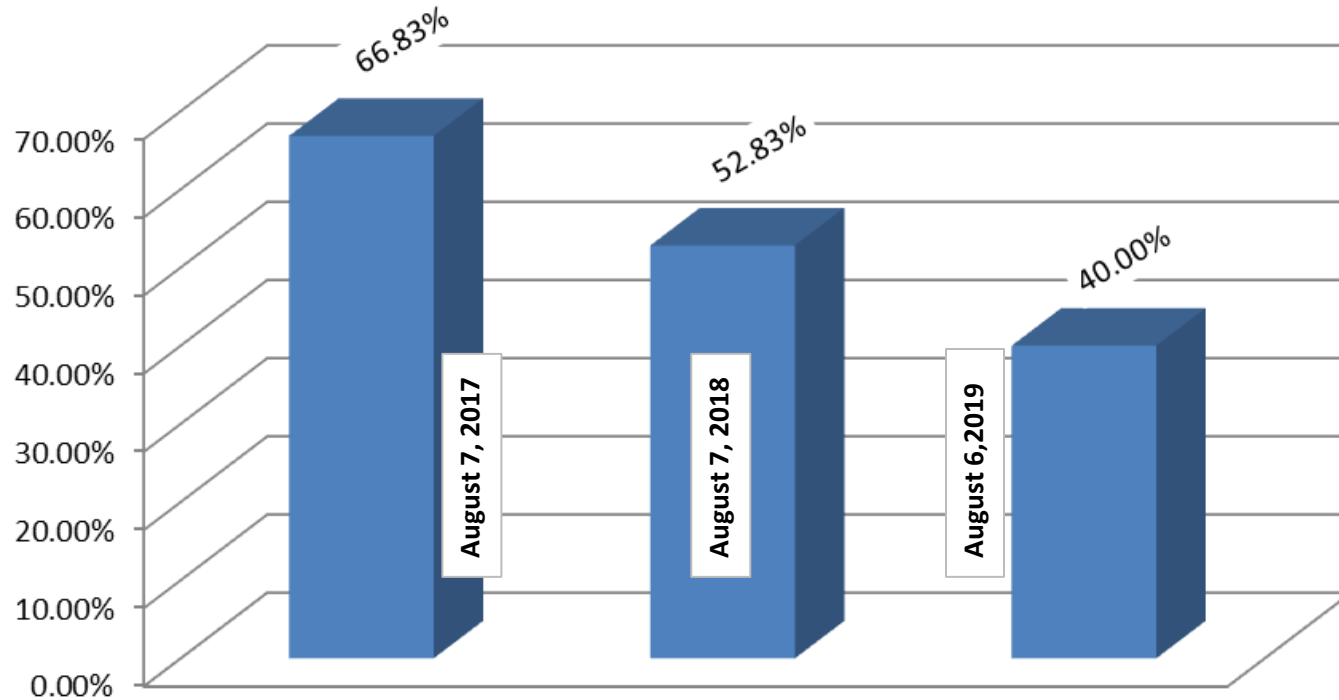
School Health Supervisors

- Medication Training
- Support Team meetings
- SHARE meetings
- Oversight of committees
- Orientation/Training
- Medicaid Reimbursement

Improvement Since the Expansion

- Increased time spent in schools
- Successful 7th grade immunization initiative
- Improved return-to-class rate

7th Grade Immunization Reporting Non-Compliant Students at the Start of the School Year



Goals for the Future

- Resume the remainder of expansion as soon as possible. Benefits will include:
 - ❖ Continued improvement of student access to a school nurse
 - ❖ Achieve a full-time nurse in all High Schools
 - ❖ Expand care coordination and services provided to more students and schools

Keep students healthy so they can come to school and be ready to learn.



**Every child
deserves a
school nurse!**



Thank You!

Lisa.nistler@nashville.gov | 615-340-7784



Metro Public Health Dept

Nashville / Davidson County

Protecting, Improving, and Sustaining Health



Metro Public Health Dept

Nashville / Davidson County

Protecting, Improving, and Sustaining Health

Series Title: Public Health Nurse	Fair Labor Standards Act (FLSA): Non-exempt: PHN1 Exempt: PHN2 – PHN4
Salary Grades: PHN1: OR04; PHN2: OR05; PHN3: OR06; PHN4: OR09	Revision Approval Date: 08/08/2019 Effective Date: 08/09/2019

Series Objective:

Carry out public health nursing services and implement nursing care plans within an assigned area (e.g. homes, schools, clinics, and the community) assuming a team approach. Work with individuals, families and groups to promote health, health maintenance and disease prevention and/or to provide case management. Work includes maintaining medical records, conducting assessments, participating in research and data collection, doing counseling and prevention services, and performing basic nursing services. Regular communication with employees and the general public is expected. The Department seeks to be a socially and culturally responsive organization that acknowledges and addresses historical and current inequities in our public health promotion and practice. Successful candidates will demonstrate the ability to work with multicultural communities.

Major Responsibilities:

- Collaborates with staff, other health care professionals and external partners to provide optimal patient care and health promotion activities.
- Performs basic nursing skills in a variety of work settings including homes, schools, clinics, detention centers and/or community settings.
- Applies public health nursing concepts when working with individuals, families, and community/special populations. This may include, but is not limited to:
 - Assisting diverse communities in evaluating their health needs and resources.
 - Developing or assisting others in developing care and treatment plans based on nursing or medical diagnoses which contain specific goals and nursing interventions.
 - Participating in special studies, projects, health assessments, surveys, patient interviews, patient record reviews and/or research projects.
 - Collecting and analyzing data to plan, implement, evaluate and/or modify performance, treatment programs/plans, databases, health promotion plans and/or to make progress toward population health goals and to make improvements when necessary.
 - Promoting appropriate utilization of central, regional and local health resources to strengthen interagency relationships and services.
- Participates in professional development programs and self-development activities.
- May be assigned to different clinic / work locations as needed.
- Demonstrates MPH’s core values of Professionalism, Respect, Integrity, Dedication, and Equity (P.R.I.D.E.) when interacting with the public and employees of the Metropolitan Government.
- Supports and participates in departmental response to disaster/emergency events.

- Regular, reliable and predictable attendance; and
- Performs other duties as assigned.
- Regular and predictable physical presence at a worksite is an essential function of all Public Health Nursing positions in this series. Many aspects of patient care require face-to-face interaction. Moreover, all MPHD nursing positions require in-person teamwork and a high level of interaction with fellow staff members.

Classification	Distinguishing Characteristics (Responsibilities and Competencies are Cumulative)
<p>Public Health Nurse 1</p>	<p>May provide or assist in providing a variety of nursing services to the community, including to at-risk or high-risk populations or populations with limited access to care. Provides clinical services and focuses on the prevention of illness, injury or disability, as well as the promotion of health and maintenance of the health of populations. Addresses and assists staff in population health community assessments and data collection and analysis; participates in health promotion initiatives, strategies and disease prevention for at-risk population groups; participates in outbreak investigations and surveillance activities; participates or conducts health education instruction and/or classes. Works under the supervision of a clinical nurse supervisor or program manager who defines overall objectives and priorities of the work and is consulted on unusual or complex matters. Excellent oral and written communication skills.</p> <p>Minimum Educational Requirement: Diploma or Associate’s Degree in nursing. Candidates with Diploma or Associate’s Degree in nursing must establish a documented ability to competently perform all functions of this classification to be considered. Bachelor’s degree from a state-approved school of nursing preferred. All public health nurses are required to complete a department approved Certificate in Public Health as a condition of continued employment. Possess required competencies upon hiring.</p> <p>No supervisory duties, but may function as acting team leader in manager’s absence.</p> <p>Required Competencies:</p> <ul style="list-style-type: none"> • Task-Relevant Knowledge: Knowledge of standard practices and procedures necessary to accomplish tasks. • Problem Identification: Pinpointing the actual nature and cause of problems and the dynamics that underlie them. • Organization Skills: Organizing one’s responsibilities and performing them in an efficient manner. • Work Ethic: Being diligent to support the successful completion of tasks related to one’s job as a leader. • Valuing Diversity and Equity: Encouraging a wide range of viewpoints among team members in order to avoid groupthink and create more

	<p>culturally sensitive and equitable solutions.</p> <ul style="list-style-type: none"> • Service Orientation: Actively seeking out ways to assist people. • Nurturing Relationships: Building positive and cooperative working relationships with others. Maintaining relationships over time. • Continuous Learning: Seeking and taking advantage of opportunities for continuing education; remaining up-to-date on licensure requirements (nursing, APRN, BLS, etc.) Keeping informed on updates to one’s profession and leadership in general.
<p>Public Health Nurse 2</p>	<p>In addition to the previous responsibilities and competencies:</p> <p>Applies a variety of technical, interpersonal, analytical, and organizational skills to problems of health, as they affect clients, families, and the community. Conducts investigations for the purpose of preventing and controlling diseases and disabling conditions. Participates in the development or refinement of policies, plans or protocols. As related to public health nursing, assists with patient problem-solving and instructs, advises and mentors new staff in the practices and procedures of the department. Identifies factors that impact delivery of services and develops and implements plans for improvement. Works under the supervision of a division director who defines the overall objectives and priorities of the work and is consulted on unusual or complex matters.</p> <p>Minimum Educational/Experience Requirement: Diploma or Associate’s Degree in nursing and one (1) year of nursing experience preferably in the field of public health. Candidates with Diploma or Associate’s Degree in nursing must establish a documented ability to competently perform all functions of this classification to be considered. Bachelor’s degree from a state-approved school of nursing preferred. All public health nurses are required to complete a department approved Certificate in Public Health as a condition of continued employment. Possess required competencies upon hiring.</p> <p>May supervise multidisciplinary staff that includes professional, clerical, and non-professional support staff. Supervisory duties may include:</p> <ul style="list-style-type: none"> • Assessing staff performance or program needs. • Identifying areas of performance or program improvement. • Developing performance or program goals and a plan for improvement with employees. • Monitoring performance or program progress. • Coordinating the activities of the work unit or program. • Determining resource needs of the work unit or program. • Supporting a culture in the work unit that values and promotes equity. <p>Required Competencies:</p>

	<ul style="list-style-type: none"> • Coordinating Work Activities: Coordinate the work-related activities necessary for task completion of all relevant constituents (both inside and outside of the group/organization). Adjusting one’s own plans in light of how others are acting or how the environment is changing. • Coaching, Developing, Instructing: Coaching, teaching, and advising others to help them develop their knowledge and skills. Creating individual development plans. Selecting appropriate training courses to address developmental needs. • Decision Making: Quickly prioritizing and evaluating the relative costs and benefits of potential actions needed to complete a task. • Delegating: Assigning tasks to the appropriate people based on knowledge of individuals, work processes, organizational planning and work group flow. • Analytic Thinking: Using existing information to logically evaluate situations and solve problems. Utilizing inductive and deductive logic to make inferences. • Multi-Tasking: Working on a variety of tasks simultaneously and shifting one’s resources between multiple systems when needed. • Developing External Contacts: Developing portfolio of external contacts within the professional community.
<p>Public Health Nurse 3</p>	<p>In addition to the previous responsibilities and competencies:</p> <p>Performs management functions that include interpreting, translating, planning and implementing service delivery guidelines into the delivery of services and oversight of public health programs. Interprets specific standards and monitors compliance with policies, procedures, protocols and the requirements of regulatory agencies. Participates in the structuring of services for the work unit or program(s) and engages in project management. Interprets job expectations and lines of authority to staff. Assumes leadership roles on committees; Analyzes health status assessments and participates in the development of policies and continuous review of plans to prioritize and address the health services and program needs. Utilizes information systems to retrieve, implement, and retain essential records and services; Serves as a member or officer of community groups and agencies. Prepares reports and proposals and may prepare budgets.</p> <p>Minimum Educational/Experience Requirements: Bachelor’s degree from a state-approved school of nursing and two (2) years of nursing experience. One year of supervisory nursing experience preferred. All public health nurses are required to complete a department approved Certificate in Public Health as a condition of continued employment. Possess required competencies upon hiring.</p> <p>Supervises multidisciplinary staff that includes professional, clerical, and non-</p>

	<p>professional support staff. Plans, directs, and supervises nursing and other public health services for the work unit or program(s) and utilizes quality improvement procedures to evaluate the quality of care provided.</p> <p>Provides appropriate orientation and development of staff and students.</p> <ul style="list-style-type: none"> • Identifies learning needs of staff and self. • Schedules learning opportunities for staff. • Serves as a role model for staff and students. • Provides for clinical experiences for students. • Participates and involves staff in the research process and the application of findings. • Explains the concept of equity and can direct staff and students to additional equity-related training and resources. <p>Required Competencies:</p> <ul style="list-style-type: none"> • Setting Goals for Others: Setting challenging but attainable goals for individuals and groups. Specifying actions, strategies and timelines necessary for goal attainment. • Maintaining Quality: Evaluating materials and information produced against a set of standards through the use of measures of quality in order to track system and/or group progress. • Developing and Building Teams: Managing inertia and conflict during the formative stages of group functioning. Enhancing the performance of a group and the satisfaction of its members by promoting cooperation, trust, and confidence in the group. • Analyzing Data: Summarizing and making inferences from information through the application of statistics and qualitative analyses. • Enhancing Task Knowledge: Involving the group in discovering methods to enhance task performance and redirecting the group to achieve better task completion. • Supporting Ethical Behavior of Direct Reports: Instituting, training, and reinforcing policies to support that subordinates treat each other and the organization fairly and with respect and dignity. Disseminating information about laws and regulations to subordinates and make sure that they follow laws and regulations by overseeing, monitoring, and auditing behavior. Disciplinary action should be taken against those who do not comply with laws and regulations.
<p>Public Health Nurse 4</p>	<p>In addition to the previous responsibilities and competencies:</p> <p>Functions with a high degree of independence and responsibility. Provides continuous quality improvement processes in public health programs and activities such as: medical record review, on-site inspections, and monitoring; development</p>

of monitoring tools; collection and interpretation of data and contract monitoring. Utilizes the nursing processes (assessment, planning, implementation, and evaluation) to provide program specific and/or population-based services and for continuity of care. Uses research and findings for evidence-based decision making. Participates in decision making for the division and for nursing services. Prepares reports, proposals, and grant applications. May plan and provide for cost-effective use of resources and participate in budget preparation.

Minimum Educational/Experience Requirements: Bachelor's degree from a state-approved school of nursing and four (4) years of nursing experience. Two (2) years of supervisory nursing experience. All public health nurses are required to complete a department approved Certificate in Public Health as a condition of continued employment. Possess required competencies upon hiring.

Provides direct supervision to clinical nursing supervisors or program managers. This classification works under the supervision of the Bureau Director who defines overall objectives and priorities of the work and is consulted on unusual or complex matters.

Required Competencies:

- **Strategic Task Management:** Matching the appropriate people and resources in the organization to maximize task performance. Maintaining task performance through times of turbulence.
- **Managing Personnel Policies:** Developing and monitoring policies, programs, and procedures related to work practices and compensation.
- **Instituting and Following Fair Procedures:** Instituting and applying rules and procedures in a consistent, unbiased, accurate, and correctable fashion to support that subordinates know that fair rules are being used.
- **Reinforcing Success:** Measuring and tracking progress toward goals to evaluate individual and group performance and provide feedback. Rewarding positive work behavior to reinforce activities that are aligned with the goals of the work group and the organization.
- **Financial Ethics:** Understanding and following ethical financial management and accounting principles.
- **Eliminating Barriers to Performance:** Identifying roadblocks and redundancies in work processes. Promoting improvements in task performance.

Minimum Qualifications:

LICENSURE

- Licensed as a Registered Nurse in the State of Tennessee. Applicants holding a Registered Nurse license from a state that participates in the “Enhanced Nurse Licensure Compact” may be hired, but must obtain their Tennessee license within thirty (30) days of hire.
- Cardiopulmonary Resuscitation (CPR) Certification.
- Valid class “D” driver’s license, use of personal vehicle, and maintenance of valid personal vehicle insurance as required by Tennessee Law.

Working Environment/Physical Demands:

- The work environment involves the everyday risks or discomforts that require normal safety precautions typical of such places as offices, clinics, meeting and training rooms, etc.
- The work environment may also involve moderate risks or discomforts, which require special safety precautions, e.g., , exposure to contagious diseases, etc.
- Employees are required to have current MMR, Hep B and varicella immunizations or immunities.
- Employees working in TB Control are required to pass a respiratory (N-95) mask fit test.
- Employees may be required to use protective clothing or gear such as masks, coats, or gloves.
- Errors in judgment and performance of work could have extensive consequence.
- The work of this classification requires some walking, standing, lifting and carrying of light-to-moderately heavy items, and/or driving an automobile.
- This position may require irregular hours. It may also require travel by the employee in his/her own vehicle.

NOTE: This job description is not intended to be all-inclusive. This job description has been designed to indicate the general nature and level of work performed by employees within this classification series. Employee may perform other related duties as needed to meet the ongoing needs of the department.



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

Position Title: Public Health Licensed Practical Nurse (LPN)	Fair Labor Standards Act (FLSA): Non-Exempt EEO Category: Technicians
Salary Grades: Public Health LPN - ST07	Revision Date: 08/08/2019 Effective Date: 08/09/2019

Position Objective:

Performs the more responsible non-professional nursing duties; and performs related duties as required.

Major Responsibilities:

- Provides nursing care to patients in a home or clinic.
- Performs procedures and nursing care under the supervision of an RN including giving injections and other simple treatments as ordered.
- Prepares patients for examinations.
- Records observations of symptoms, reactions, and care and treatment given.
- Performs various screening tests.
- Prepares and cares for equipment used by physicians or other professional workers.
- May be assigned to different clinic / work locations as needed.
- Keeps records and prepares reports.
- Responds and reports to the directives of the Director of Health in case of emergency or disasters.
- Demonstrates MPH D’s core values of Professionalism, Respect, Integrity, Dedication, and Equity (P.R.I.D.E.) when interacting with the public and employees of the Metropolitan Government.
- Performs other related duties as assigned.
- Regular and predictable physical presence at a worksite is an essential function of all Public Health Nursing positions in this series. Many aspects of patient care require face-to-face interaction. Moreover, all MPH D nursing positions require in-person teamwork and a high level of interaction with fellow staff members.

Classification	Distinguishing Characteristics (Responsibilities and Competencies are Cumulative)
Public Health LPN	<u>Supervision Exercised/Supervision Received</u> : Not a supervisory position. Supervised by the clinical nurse or program supervisor who defines overall objective and priorities of the work and is consulted on unusual or complex matters.

	<p><u>Education and Experience:</u> Graduation from a state approved school of practical nursing; and one (1) year of experience as a licensed practical nurse.</p> <p><u>Competencies:</u> Knowledge of the basic principles and practices of non-professional nursing and personal hygiene. Ability to meet and work with the public. Ability to exercise good judgment in evaluating situations and making decisions. Ability to establish and maintain effective working relationships.</p> <p><u>Legal Regulations:</u> Awareness of local, state, and federal laws and regulations and abiding by these regulations at all times.</p> <p><u>Sensitivity to Situations:</u> Assessing situational forces that are promoting and inhibiting an idea for change.</p> <p><u>Multi-Tasking:</u> Working on a variety of tasks simultaneously and shifting one’s resources between multiple systems when needed.</p> <p><u>Organizational Skills:</u> Organizing one’s responsibilities and performing them in an efficient manner.</p> <p><u>Stress Tolerance:</u> Remaining effective even when situations become stressful.</p>
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Minimum Qualifications:

- Graduation from a state approved school of practical nursing; and one (1) year of experience as a licensed practical nurse.
- Knowledge of the basic principles and practices of non-professional nursing and personal hygiene.
- Ability to meet and work with the public.
- Ability to exercise good judgment in evaluating situations and making decisions.
- Ability to establish and maintain effective working relationships.
- Licensed or eligible for licensure as a Licensed Practical Nurse in the State of Tennessee.
- Cardiopulmonary Resuscitation (CPR) Certification.
- Valid class “D” driver’s license.
- The Department seeks to be a socially and culturally responsive organization that acknowledges and addresses historical and current inequities in our public health promotion and practice. Successful candidates will demonstrate the ability to work with multicultural communities.

Working Environment/Physical Demands:

- The work environment involves the everyday risks or discomforts that require normal safety precautions typical of such places as offices, meeting and training rooms, etc. The work area is adequately lighted, heated, and ventilated.
- The work environment may also involve moderate risks or discomforts, which require special safety precautions, e.g., exposure to contagious diseases, etc. Employees are required to have current MMR and Hep B immunizations and pass a respiratory mask fit test for a position in TB Control. Employees may be required to use protective clothing or gear such as masks, coats, or gloves.
- The work of this classification requires some walking, standing, lifting and carrying of light-to-moderately heavy items, or driving an automobile.

NOTE: This job description is not intended to be all-inclusive. This job description has been designed to indicate the general nature and level of work performed by employees within this classification series. Employee may perform other related duties as needed to meet the ongoing needs of the department.