

**Metropolitan Board of Health of Nashville and Davidson County
July 9, 2020, Meeting Minutes**

Chair Alex Jahangir called the meeting to order at 4:05 p.m. The meeting was held electronically. A recording of the meeting was to be posted at <https://www.nashville.gov/Government/Boards-and-Committees/Committee-information/ID/76/Health-Board-of.aspx>.

Present

A. Alex Jahangir, MD, Chair
Tené H. Franklin, MS, Vice-Chair
Carol Etherington, MSN, RN, Member
Thomas W. Campbell, MD, Member
David Frederick, MS, Member
Michael C. Caldwell, MD, MPH, Director of Health
Hugh Atkins, REHS, Director, Environmental Health Services Bureau
Jim Diamond, MBA, Director, Finance and Administration Bureau
Tom Sharp, Director of Policy and Government Liaison
Katie Stone, JD, Assistant to the Director
Keith Durbin, CMA, MS.PSM, Metro Chief Information Officer and Director of IT Services
Derrick Smith, JD, Metropolitan Department of Law
Amy Richardson, Siloam Health

Motion to Approve Conducting Meeting by Electronic Means

Dr. Jahangir requested a motion to conduct the meeting electronically (Attachment I).

Ms. Etherington made a motion to approve conducting of the meeting by electronic means. Vice-Chair Franklin seconded the motion, which passed unanimously.

Approval of June 11, 2020 Regular Meeting and June 26, 2020 Special Called Meeting Minutes

Mr. Frederick made a motion to approve the June 11, 2020, regular meeting minutes, and the June 26, 2020, special called meeting minutes, with correction to the June 11, 2020 regular meeting minutes:

Ms. Etherington abstained from a vote on the first motion regarding the Data Sharing policy, and did not vote for.

Dr. Campbell seconded the motion, which passed unanimously.

Approval of Thank You Letter to Dr. Margreete Johnston

Mr. Frederick made a motion to approve the letter thanking Dr. Johnston for her five years of service as a Board of Health member, as submitted. Vice-Chair Franklin seconded the motion, which passed unanimously (Attachment II).

Presentation from Siloam Health

Amy Richardson of Siloam Health made a presentation about Siloam Health and its partnership with the Department (Attachments III and IV).

Discussion of Board's Policy Regarding Face Coverings or Masks

Chair Jahangir asked that the Board reconfirm their vote at the June 26, 2020 Special Called meeting, to require a policy regarding face coverings or masks, and which Dr. Caldwell had issued in "Order 8 from the Chief Medical Director, Cloth Face Coverings or Masks Order."

Dr. Campbell made a motion to reconfirm the policy the Board had made at its June 26, 2020, Special Called meeting. Mr. Frederick seconded the motion, which passed unanimously.

Deliberation of End Date of Declaration of Public Health Emergency

Dr. Jahangir proposed extension of the declaration of the public health emergency to August 30, 2020, and invited discussion.

Mr. Frederick asked that the Board be kept informed of orders as they are developing.

Mr. Frederick made a motion to extend the expiration date of the Declaration of Public Health Emergency to August 30, 2020. Ms. Etherington seconded the motion, which passed unanimously.

Deliberation of Data Sharing Policy

Chair Jahangir asked Dr. Campbell to brief the Board on the Data Sharing Policy that the Data Sharing Work Group had drafted. Dr. Campbell stated that the committee had consisted of himself as chair, stakeholder organization representatives, and others:

- Jill Fitchard, Executive Director, Metro Nashville Community Oversight Board
- Dr. Cherae Farmer-Dixon, Head of Meharry Medical College School of Dentistry
- Melody Fowler-Green, Executive Director, Metro Human Relations Commission
- William Swann, Nashville Fire Department Chief
- Keith Durbin, Metro ITS Chief Officer
- Dr. Michael Caldwell, Chief Medical Director of Health
- Tom Sharp, MPH Policy Director and Governmental Liaison

Dr. Campbell read the draft proposal into the record (Attachment V).

The Board asked that the Data Sharing Work Group formulate an Interim Data Sharing Plan, until the particulars of the Data Sharing Plan Dr. Campbell had presented, which the Board identified as the Long-Term Data Sharing Policy, could be implemented by the vendor (Motorola) and Metro, which Mr. Durbin advised could take months.

Mr. Durbin suggested that Stephen Martini, Director of Metro's Department of Emergency Communications, be included in the Data Sharing Work Group to help formulate the Interim Plan.

Dr. Campbell made a motion to accept the Draft Policy as amended, for the Long-Term Data Sharing Policy. Mr. Frederick seconded the motion, which passed.

Approval of Grant Applications

There were no grant applications.

Approval of Grants and Contracts

Jim Diamond presented six items for Board review and approval, and addressed questions.

- 1. Infectious Disease Affiliate Contract with Vanderbilt University Medical Center**
Term: July 1, 2019-June 30, 2024
Amount: \$NA
- 2. Maddie's Fund Grant**
Term: NA
Amount: \$5,000
- 3. School Based Dental Preventive Program Grant from the Tennessee Department of Health**
Term: July 1, 2020-June 30, 2022
Amount: \$1,804,200
- 4. CoverKids DentaQuest Insurance Contract**

Term: July 1, 2020-June 30, 2025

Amount: NA

5. Charisma Salus Contract with Nashville Academy of Medicine

Term: July 1, 2018-June 30, 2021

Amount: \$3,800

6. Baby & Me Tobacco Free Contract with the Tennessee Department of Health

Term: July 1, 2020-June 30, 2023

Amount: NA

Mr. Frederick made a motion to approve the grants and contracts. Ms. Etherington seconded the motion, which passed unanimously.

Ms. Etherington suggested the Board reconsider requiring all materials for grants and contracts rather than a summary. Mr. Frederick asked that particular information be provided in the summaries. Vice-Chair Franklin asked that the Board continue to have access to the full materials but not included in the meeting packets.

Report of Director

Dr. Caldwell referred to his update provided in the Board packet (Attachment VI).

Additionally, Dr. Caldwell:

- Advised that he had reached out to Sheriff Hall to seek assistance with the Department's enforcement compliance program, and he agreed to detail Katie Stone to the MPH, who started full time on Monday July 6. She offered a brief background of her experience in Metro
- Invited Hugh Atkins to provide an update on enforcement of Orders and related challenges
- Advised the Nurse in Every School Plan has been updated and he hopes to make progress this year
- Advised that WIC has been working remotely and continuing to do so until August 31 has been approved.
- Advised that face masks are being distributed at Lentz and via partners.

Report of Chair and Discussion

Chair Jahangir said that as of close of business July 8, 6,200 people have been tested at the three community assessment sites. Nissan Stadium has been augmented with five additional tents, and the National Guard is helping there with the guidance of partners at Meharry Medical College, whom he thanked for their assistance. He noted that morbidity from COVID remains around one per cent, while age of positive tests are trending younger. He reiterated that Davidson County residents over 65 years of age who contract COVID have a 10.5% probability of dying. Hospital volumes have increased to 188 individuals in Nashville, and hospital capacity is about 20%. He and Dr. Caldwell had just toured the Alternative Care Site at Nashville General with Dr. Deana Bullock, and Dr. Morgan McDonald, Deputy Commissioner of the Tennessee Department of Health; the site has 70 beds for COVID patients.

Chair Jahangir announced that Dr. Calvin Smith III of Meharry Medical College has been nominated by the Mayor, is expected to be confirmed by Metro Council, and would join the Board at the August regular meeting.

Ms. Etherington thanked Vice Chair Franklin for participating in the recent seminar held at Vanderbilt on Structural Racism in Health and Healthcare.

Review of Board Requests

- Request to be informed of Orders as they are being developed.
- How is feedback from Siloam's Community Health workers being used to improving processes.

- Interim Policy regarding Data Sharing from the Data Sharing Work Group chaired by Dr. Campbell.
- Provide summary of grants and contracts in packets, and more complete information electronically separate from packets.

CIVIL SERVICE BOARD

Approval of Out-of-Class Pay

In accordance with Civil Service Rule 4.10, Jim Diamond requested approval of extension of out-of-class pay for Chemyeeka Tumblin (Nashville Strong Babies) and Allison Rocus (WIC), whose 100 days of out of class pay would expire prior to the next Board meeting.

Ms. Etherington made a motion to approve the extension of Out-of-Class Pay for Allison Rocus and Chemyeeka Tumblin. Mr. Frederick seconded the motion, which passed unanimously.-

Personnel Changes

Jim Diamond presented the June 2020 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, August 6, 2020 in the Board Room (third floor) at 2500 Charlotte Avenue, Nashville, TN, 37209, if social distance restrictions are not in place. The meeting was rescheduled from the second Thursday of the month due to scheduling issues.

Adjournment

The meeting adjourned at approximately 6:05 p.m.

A. Alex Jahangir, MD, MMHC, FACS
Chair

MOTION TO APPROVE CONDUCTING MEETING BY ELECTRONIC MEANS

I move that the items on the meeting agenda constitute essential business of this Board, meeting electronically is necessary to protect the health, safety, and welfare of Tennesseans considering the COVID-19 outbreak, and any conflicting with the Governor's Executive Order permitting electronic meetings be suspended.



Metro Public Health Dept

Nashville / Davidson County

Protecting, Improving, and Sustaining Health

John Cooper, Mayor

Michael C Caldwell MD MPH
Director of Health

Board of Health

A. Alex Jahangir, MD, MMHC, Chair
Tené Hamilton Franklin, MS, Vice-Chair
Thomas W. Campbell, MD
Carol Etherington, MSN, RN, Member
David A. Frederick, MS

July 9, 2020

Margreete G. Johnston, MD, MPH
56 Old Gun Club Court
Nashville, TN 37215

Dear Dr. Johnston,

The Metropolitan Board of Health of Nashville and Davidson County hereby conveys its heartfelt appreciation for your outstanding and dedicated service on behalf of our community and the citizens we all serve. Your contributions to the Board, the Department, and the city of Nashville have been, and are, greatly appreciated.

During your tenure on the Board you have been engaged, thorough, candid, and conscientious. You have been steady in your insistence on accountability and good management practices in the Department. Your resolute support of Maternal and Child Health, Health Equity, Diversity issues, and your breastfeeding advocacy has been and remains commendable. We also recognize and thank you for your participation since March 2017 on the Child Death Review Team.

Please accept our gratitude for sharing so generously your time, expertise, wisdom, and compassion. You have been a steadfast and beneficial influence for the Health Department, Metro Government, and the community. All of us are the better for your service.

It has been our pleasure to serve with you.

With warmest regards,

A. Alex Jahangir, MD, MMHC
Chair

Tené Hamilton Franklin, MS
Vice Chair

Thomas W. Campbell, MD
Member

Carol Etherington, MSN, RN
Member

David A. Fredrick, MS
Member



MPHD COMMUNITY HEALTH WORKER PROGRAM

GOAL

To help COVID cases and contacts address the social, economic, and health challenges they are experiencing, support investigators and monitors, and share COVID prevention tips to minimize spread.

WHO ARE CHWs AND WHAT DO THEY DO?

Community health workers are trusted frontline workers who come from within the communities they serve.

Community health workers can help to re-open our economy and restore normalcy in our communities through public health messaging, while also addressing broader social, economic, behavioral, and preventive health needs. CHWs connect to COVID positive households to support people's real-life issues that impact their ability to quarantine and/or isolate.



CHWs connect patients to PCPs, food resources, or other non-profit services and support patients' communication with employers.

HOW DOES THE PROGRAM WORK?



Assigned eligible cases by the CHW Coordinator



Call & invite patients to participate



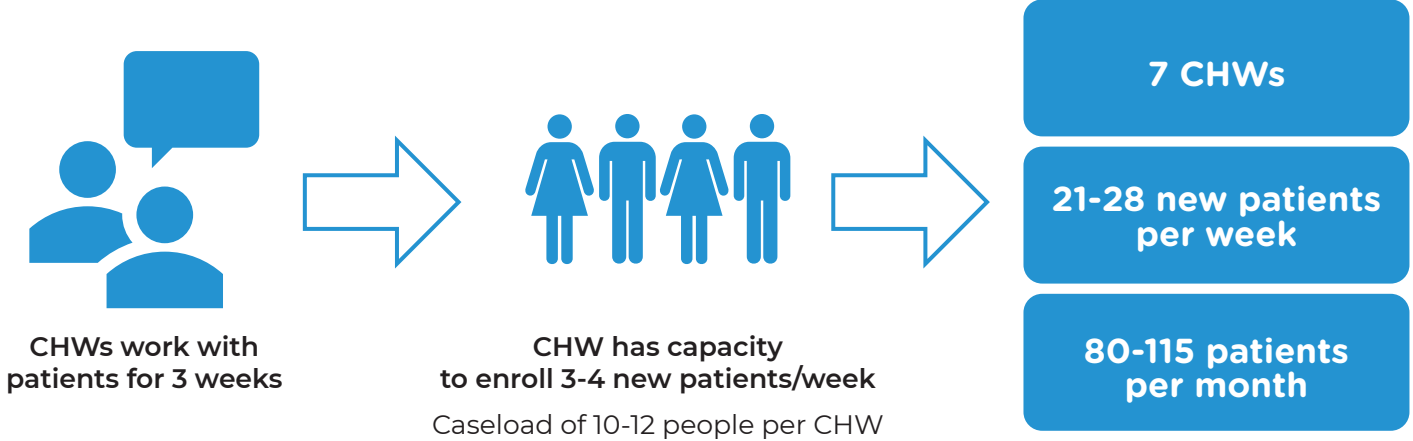
Conduct patient interview revealing real-life issues



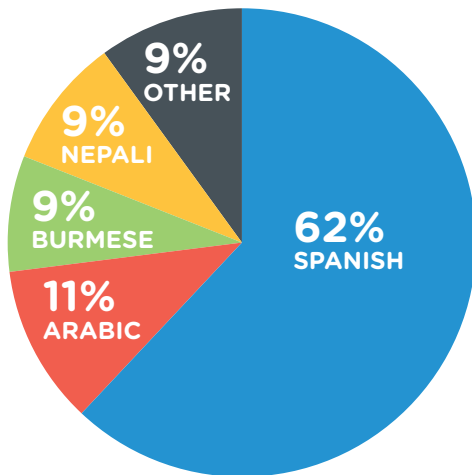
Work with the patient for 3 weeks

CHWs primarily conduct phone-based one-on-one work but are also involved virtual community education activities and porch drop-offs.

WHAT'S THE CAPACITY?



LANGUAGES SERVED (7/2/20)



WHY INVEST IN CHWs?

- ▶ Trust is essential in public health responses like infection control and vaccine uptake
- ▶ Support communities facing intense financial strain
- ▶ Counteract deferred preventive care
- ▶ Fight stress and social isolation
- ▶ Combat health disparities

KEYS TO SUCCESS

- ▶ Rigorous training
- ▶ Robust program infrastructure and supervision
- ▶ Hiring the right people
- ▶ High-functioning data infrastructure





SILOAM
HEALTH

Health Care Transformed By Love

Siloam Health's mission is to share the love of Christ by serving those in need through health care.

ABOUT SILOAM HEALTH

Siloam Health is a faith-based, charitably funded nonprofit organization that provides affordable, high-quality, whole-person health care to the uninsured and underserved in Middle Tennessee as well as health promotion among Nashville's immigrant and refugee populations. Through Siloam's comprehensive medical care and community health programs, we address not only the physical health of those we serve, but their spiritual, emotional, and mental health as well. We also work through student education initiatives to mentor and train the next generation of health professionals and change the face of health care as usual.



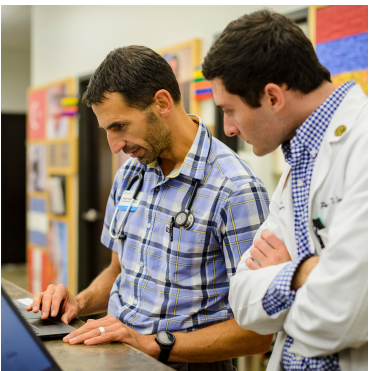
MEDICAL CARE

Siloam's clinical staff works alongside over 300 clinic volunteers yearly to serve nearly 4,000 individual patients in the Siloam Health Primary Care Clinic and welcome newly-arrived refugees for comprehensive medical screenings that are required as part of their entry into the United States. Siloam's patients come from over 80 homelands and speak over 70 languages.



COMMUNITY HEALTH

Siloam's Community Health efforts extend beyond the four walls of the Primary Care Clinic to empower foreign-born Nashvillians to take ownership of their health. Community Health Workers are trained and employed by Siloam as health ambassadors in their own immigrant communities while Nashville Neighbors volunteer teams walk alongside newly-arrived refugee families to improve self-efficacy, health literacy, and capacity of health system navigation.



STUDENT EDUCATION

Siloam's student education initiatives seek to impact a new generation of health professionals through preceptorships and partnerships with local and national universities. Siloam staff clinicians mentor over 50 students and trainees each year in that art of comprehensive, compassionate, and cross-cultural caregiving.

READY TO DIVE IN?

- Visit SiloamHealth.org to learn more about our work, the people we serve, and how you can get involved.
- Find us on Facebook, Twitter, and Instagram.
- Email carrie.horton@siloamhealth.org to receive regular email updates.

Proposal for BOH Meeting:

Tasked with obtaining stakeholder input for a BOH policy we have come up with this tentative proposal.

Covid 19 test result information is privileged information to be used only by the health department in carrying out its primary task of providing optimal health care for the community. This information may be shared in a limited way in the following circumstances.

- A. First responders to a reported medical emergency (911 calls)
- B. Law enforcement, only if vehicular transport is involved (jail, ER., Mental Health Cooperative, etc.)
- C. When technologically possible, this information will be stored on a private server in the Department of Health.
- D. There will be auditing by an independent committee including community stakeholders to assess how it is being used.
- E. It is important that all Metro employees interacting with the public use the best PPE practically available in these situations.

There was a consensus that this was a reasonable compromise between privacy and safety.

Approved July 9, 2020

Director's Update to the Board of Health July, 2020

Protecting Health – Preventing the Spread of Infectious Disease

Covid

Director's Orders

As you know Metro reverted to a Modified Phase 2 operating plan on Friday, July 3, based on the spike in cases we have seen over the last couple of weeks. This phase is outlined in Order 9. The suddenness of the announcement created some confusion in the community about what we allowed and what was not.

See attachment from Hugh Atkins for an exemplar of one enforcement action.

Hotline

Through June 30 the COVID Hotline had received 18,028 calls and referred 6,567 of those individuals to the testing centers.

Results line

We received almost 1,157 calls last Thursday, which is pushing our capacity to its limits. We now have 18 phone stations set up, staffed mostly now with temporary workers as the school nurses are off. Some of them are working but others are not. Through the end of last week we had answered 24, 997 calls.

For both the Hotline and Results Line a looming deadline is July 29 when all of our school nurses will go back to their regular jobs in the schools.

Employees

In order to respond consistently and thoroughly to situations involving employees and potential/confirmed COVID-19 infection, exposure or symptoms, the Clinical Leadership Team has developed an Internal COVID-19 policy, complete with talking points and a decision tree for supervisors. The policy includes symptoms of COVID-19, the process of initial contact tracing to ensure employee health and safety, HR protocol for missed work/working from home, and proper cleaning guidelines for workspaces. A copy of this policy is included in your packet.

Overdoses

See attached report from epidemiologist Josh Love and Overdose Response Coordinator Trevor Henderson.

Improving Health - Services to Individuals & Families

Back to School

We will have Back-To-School immunization clinics, with extended hours, from late July through mid-August here at Lentz, at East and at Woodbine. Information documents included in your packet.

Tobacco

The Baby & Me Tobacco Free Program conducted an interview with 107.5 The River morning show hosts Woody and Jim regarding the program. The spot ran last week. This is an additional spot that the station is giving to us for free.

WIC

The Women, Infants and Children program will continue serving clients by phone until the end of September.

Improving Health – Access & Care Coordination

Equity

MPHD's internal Health Equity Committee has revised membership and met last week to begin discussion on next steps for work within the department. The group laid out the context of past work and asked for commitments to help move that work forward. Good discussion about next steps to achieve the recommendations contained in the report prepared in Fall 2019 but not released to the staff. The report contains the results of the BARHII survey and evaluation of MPHD policies and practices. Staff and partners are working on the 2020 update for the Health Equity Report.

Organizational Updates

Metro Budget

Metro Council passed an amended Fiscal Year 2021 budget that was slightly different than the one proposed by Mayor Cooper. The new fiscal year began July 1. The highlight to the amended budget was the addition of a 1 percent Cost of Living (COLA) increase for employees. As noted when the Board approved the FY21 Pay Plan there are no step or open range increases or longevity pay this fiscal year. None of the improvements the department requested during the budgeting process was approved. Our requests included additional School Health nurses, additional Animal Care and Control positions, and to restore the positions and animal welfare funds lost when the department's \$609,000 of targeted savings cuts became permanent during Fiscal Year 2020.

Metro Finance has lifted the hiring freeze on local positions that has been in effect for the last several months. They have been approving nursing and Animal Care and Control vacancies during the freeze, but now there should be no issues with filling any budgeted local positions.

Timeline for the closure of Nashville Underground

Mr. Frederick said he wanted to talk about enforcement. To help inform that conversation Mr. Atkins has provided one example to give the Board a sense of just a single incident, and a flavor of how cumbersome this process is.

This timeline begins with a text that Nashville Underground was operating out of compliance with Order 9 on Saturday night. Then, per Mr. Atkins (who is the 'I' in this document).

- 7:07 p.m. – I received a text message from Benjamin Eagles of the Mayor's Office stating that Nashville Underground was open and operating. Ben included Tom Sharp with MPHD, Bob Cooper, lead attorney at the Mayor's Office, and Andrew McClanahan with Metro Legal on the text message.
- 7:12 p.m. – I received a text message from Bob Cooper stating, "Send Health and Beer Board to tell them to close and to gather evidence." Bob included Tom Sharp, Ben Eagles, and Andrew McClanahan on the text message.
- 7:12 p.m. – I responded to the text message from Bob Cooper informing all that I was sending the information to Dr. Caldwell.
- 7:14 p.m. – I sent a text message to Dr. Caldwell with a screenshot of the text messages from Ben Eagles and Bob Cooper.
- 7:18 p.m. – I received a text message response from Dr. Caldwell suggesting that we have Baker Bachman, Environmental Health Specialist 1 with MPHD, who was working with him at Nashville Fairgrounds Speedway, respond to Nashville Underground.
- 7:19 p.m. – I received a text message from Andrew McClanahan informing me that he had e-mailed Benton McDonough, Executive Director at Metro-Nashville Beer Board.
- 7:23 p.m. – I called Tom Sharp and apprised him of the situation at Nashville Underground. He advised me to call Ben Eagles.
- 7:32 p.m. – I called Ben Eagles. We discussed enforcement procedures and the need for assistance from Metro Nashville Police Department (MNPD) if we expect real-time responses. He indicated he would speak with Bill Phillips, Deputy Mayor, who was with Chief Steve Anderson of MNPD at the time.
- 7:39 p.m. – Benton McDonough copied me on an e-mail to Andrew McClanahan stating that he had been in contact with Melvin Brown with Metro-Nashville Beer Board and that Melvin could respond to Nashville Underground.
- 7:39 p.m. – I received a text message from Melvin Brown asking if I would meet him at First AVE and Broad.
- 7:55 p.m. – I called Andrew McClanahan with Metro Legal and discussed enforcement options.
- 7:56 p.m. – I called Dr. Caldwell and briefed him on the situation.
- 8:02 p.m. – I received a text message from Ben Eagles informing me that he had spoken with Bill Phillips and given him details.

- 8:04 p.m. – I called Baker Bachman and arranged for him to leave Nashville Fairgrounds Speedway to respond to the situation at Nashville Underground. I explained that, according to Order 9, Nashville Underground was operating illegally.
- 8:06 p.m. – I spoke with Capt. Chris Gilder with MNPd about getting officer support for the response to Nashville Underground. He indicated that Capt. Josh Blaisdell was working in the area and that I could contact him for support.
- 8:13 p.m. – I spoke with Melvin Brown and informed him that Baker Bachman would be meeting him at Nashville Underground.
- 8:15 p.m. - I called Baker Bachman and informed him that I would e-mail him talking points to use when speaking with the manager. I also told him to document his actions on a MPhD comments form and that he could access Order 9 on the Mayor's COVID-19 website.
- 8:19 p.m. – I received a text message from Melvin Brown stating that he was on the scene waiting on Baker Bachman.
- 8:21 p.m. – I received a call from Baker Backman. I told him that Melvin Brown would be expecting him at First Avenue and Broad.
- 8:22 p.m. – I sent a text message to Baker Bachman with contact information for Melvin Brown and Capt. Josh Blaisdell.
- 8:26 p.m. – I received a call from Andrew McClanahan. I informed him that Baker Bachman and Melvin Brown had been in contact; I also told Andrew that MNPd would be providing support.
- 8:31 p.m. – I e-mailed Baker Bachman written talking points to use when discussing closure with the manager of person in charge at Nashville Underground.
- 8:31 p.m. – I called Baker Bachman to make sure he received my e-mail and asked him to look over the talking points to make sure he understood them.
- 8:33 p.m. – I received a follow up call from Andrew McClanahan. He asked me to inform Baker Bachman that, if Nashville Underground refused to close, Baker would need to go to Andrew's office at 223 N Second ST afterwards; Andrew said that he had already informed Melvin Brown. Andrew asked for contact information for Capt. Blaisdell.
- 8:34 p.m. – I sent a text message to Andrew McClanahan giving him Capt. Blaisdell's contact information.
- 8:35 p.m. – Melvin Brown copied me on a text message to Baker Bachman informing him that he was outside Nashville Underground and would meet him in front of the Hard Rock Café.
- 8:40 p.m. – I called Tom Sharp and updated him on the situation.
- 8:46 p.m. – I received a call from Baker Bachman. He had contacted Melvin Brown. I informed Baker that if Nashville Underground refused to close, he would need to take photos, document evidence in field notes, inform the manager that he was going to refer the matter to Metro Legal, who would contact an Environmental Court Judge and seek an Abatement Order to have the establishment declared a public nuisance, and that he would have to go to the office of Andrew McClanahan after leaving Nashville Underground.
- 8:48 p.m. – I called Dr. Caldwell and updated him on the status of the response.
- 9:29 p.m. – I received a call from Baker Bachman. He said the manager of Nashville Underground was refusing to close and had gone to his office to gather paperwork to show that his establishment sold more food than alcohol. I informed Baker that he was not to review receipts. Nashville Underground appears on the list of Limited Service Licensees that Tennessee ABC provided to MPhD; therefore, according to Order 9, they must close until July 17, 2020.

- 9:35 p.m. – I called Andrew McClanahan and briefed him on my conversation with Baker Bachman regarding Nashville Underground’s claim. He agreed that the receipts were irrelevant.
- 9:52 p.m. – I received a text message from Melvin Brown with an update. The manager of Nashville Underground was claiming they renewed their license with the Tennessee ABC in November 2019 as a full-service liquor-by-the-drink restaurant and that the manager was searching for copies of the paperwork.
- 9:57 p.m. – I received a call from Andrew McClanahan. He asked about my confidence in the accuracy of the list MPHD received from the Tennessee ABC. I told him that I felt the list was accurate, and it seemed that if it truly were the case that Nashville Underground was licensed as a full-service liquor-by-the-drink restaurant the manager would have mentioned it before offering to produce receipts to document the establishment sells more food than liquor.
- 10:12 p.m. – I received a text message from Melvin Brown with an update. Joshua Pemberton, operating partner of Nashville Underground, was conferring with counsel, Kirk Clemens, about verifying limited service license status. Melvin checked with Tennessee ABC Assistant Special Agent in Charge for the Nashville District, Jon Swift, who confirmed the status (34% food sales) of Nashville Underground’s license. Baker Bachman informed Nashville Underground that they must close immediately and provided them the consequences for not complying. Melvin Brown, Baker Bachman, and Sgt. Spees, FTO Adcox, and OFF Topping of MNPd were standing by.
- 10:14 p.m. – I called Andrew McClanahan and discussed the details of the text I received from Melvin Brown.
- 10:19 p.m. – I received a text message from Andrew McClanahan informing me that Nashville Underground agreed to close. The manager claimed they believed they had a full-service liquor-by-the-drink license and not a limited service license.
- 10:21 p.m. – I called Andrew McClanahan and discussed the closure of Nashville Underground to ensure that MPHD was taking all necessary steps.
- 10:29 p.m. – During my discussion with Andrew McClanahan, I received a text message from Melvin Brown that the manager of Nashville Underground agreed to close the establishment.
- 10:30 p.m. – I called Baker Bachman and discussed the closure of Nashville Underground. I told him we would debrief more thoroughly once we both return to the office on Monday, July 6, 2020.
- 10:43 p.m. – I sent a text message to Tom Sharp informing him of the closure of Nashville Underground.
- 10:51 p.m. – I sent a text message to Dr. Caldwell informing him of the closure of Nashville Underground.

(This is Tom again: Previous to this event, on Friday night, Hugh personally went to Broadway and closed three establishments on Broadway: Luke Bryan’s, Jason Aldean’s, and Florida/Georgia Line).

Bureau Directors talking points to Staff

- CLT (Clinical Leadership Team) has created the below decision tree to help aid in decision making and addressing appropriate MPHD staff if/when a potential COVID exposure or concern is identified in the workplace.
- Symptoms of COVID-19 **as of 6/29/2020** (these may appear 2-14 days after exposure to the virus):
 - Fever or chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
- Please note: supervisors or bureau directors may ask employees about close contacts in the workplace (given the case definition of being within 6 feet of an individual for greater than 10 minutes)
 - Please encourage employees to trust in contact tracing; if he or she does not hear from a contact tracer, they have not been identified as a contact and do not need to be tested.
 - We appreciate employee help in quickly identifying individuals in the workplace; the information identified by the employee will be shared with the contact tracing team to aid in quick identification of employees impacted in the workplace
- Please re-encourage staff to wear appropriate PPE and maintain social distance of at least 6 feet. Spread of COVID-19 between individuals when each individual is wearing a mask is approximately 1.5%.
- Please provide education regarding cleaning of the work area- COVID-19 does not live on surfaces in circumstances that are not wet; surfaces should be cleaned when fluids are present, i.e. droplets after cough or sneeze, or vomit.

- If an employee goes to an assessment center to be tested for COVID-19, documentation of testing at test site and result can be submitted to HR; in addition, the day that the employee returns to work, the employee should report to HR to complete necessary paperwork.
- Employees are eligible for 10 days of paid leave through Metro. In order to qualify for this leave, the employee must follow up with HR. If an employee utilizes this leave for multiple situations involving COVID-19 and depletes the 10 days of leave time, the employee will need to utilize their own time to cover time off. Furthermore, if there are opportunities to work from home and the work is approved by his or her supervisor, the employee can work from home without utilizing any other form of time.
- If you have any specific questions, please reach out to a member of CLT for additional guidance:
 - o Dr. Stephanie Bailey
 - o Dr. Michael Caldwell
 - o Tina Lester
 - o Dr. Michelle Pardue
 - o Dr. Joanna Shaw-KaiKai
 - o Laura Varnier
 - o Dr. Gill Wright

Decision Tree for MPHD Internal COVID-19 response

COVID-19 concern brought about by employee (either stating that have been tested, are going to get tested, are experiencing symptoms or have been identified as a confirmed contact for an existing positive COVID-19 case):

1. Staff Member positive via test or probable via symptoms or exposure
2. Outside community member in MPHD (patient, volunteer, temp, student, etc.)

Supervisor and/or Bureau Director is alerted

If employee can provide information...

If employee is very sick and cannot provide information...

Ask!:

- Close contacts
- Best contact phone number
- If employee can work from home

SEND TO GET TESTED:

Directly affected employee selects assessment center of choice; if no preference, employee can be referred to MPHD assessment center for testing at Meharry, Nissan Stadium, OR Old K-mart; 9am-3pm M-F); employee is asked to **NOT** return until test result is known.

Consideration should be given to CDC case definition of within 6 feet for longer than 10 minutes and if proper PPE was worn throughout that time.

KEEP GOOD notes to provide to HR and the Contact Tracing team!! 😊

Immediately: Notify HR (Angela Caruthers or Abigail Holloway), via phone or in person preferred, of situation; make sure to note if work at home is an option for affected employee/employees.

Notify within the day (Please ensure to remain HIPAA compliant in all communication):

___ Brian Todd, Matt Peters- Internal communication, external press release, social media update (be sure to include location and status- closed or limited services- dates services will be changed and contact number for follow up questions.

___ Kathryn Correa- if needed to create signs of clinic closure (to make closed signs in all three languages),

___ Dr. Bailey, Dr. Caldwell- brief synopsis of situation and actions taken, i.e. clinic closed, staffing down, etc.

___ Contact Mark/Terry if cleaning of the employee work area/clinic is needed (fluids present)

CDC Cleaning guidelines for cleaning and disinfecting an area of a **symptomatic employee**:

___ Close off area used by person who is sick; companies do not necessarily need to close operations if they can close off affected areas

___ Wait 24 hours before you clean or disinfect

___ Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, etc.

___ Vacuum the space if needed

___ Once area has been appropriately disinfected, it can be open for use, workers without close contact with the person who is sick can return to work immediately after disinfection

**Please note, if more than 7 days since the person who is sick visited or used the facility, additional cleaning and disinfection is NOT necessary. Please continue with routine cleaning and disinfection. This includes everyday practices that businesses and communities normally use to maintain a healthy environment.

Update: Drug Overdose Epidemic in Davidson County, TN July 2020

I. Data

In 2019, Davidson County observed the highest number of fatal drug overdoses (468) on record.

Fatal Drug Overdoses

- Compared to the same time last year, fatal drug overdoses have increased by 44% and are on pace to eclipse 600 drug overdose deaths in 2020.
- Fentanyl has become increasingly present in toxicology reports and is involved in 75% of fatal drug overdoses this year.
- Compared to COVID-19, there have been twice as many drug overdose deaths from March to June.

Nonfatal Drug Overdose Emergency Department (ED) Visits

- Compared to the same time last year, nonfatal drug overdose ED visits have increased by 37%.

Suspected Drug Overdoses

- Compared to the same time last year, suspected drug overdoses requiring response by the Nashville Fire Department EMS have increased by 42%.
- Observed increase in multiple doses of naloxone per patient beginning July 2019. However, a more drastic increase has been occurring since April 2020.

II. Interventions/Activities/Collaborations

Overdose Detection Mapping Application Program (ODMAP)

- Implemented in June 2020
- Near real-time suspected overdose monitoring system used by Nashville Fire EMS that allows for timely response to suspected overdose spikes

TDH-CDC High Impact Area (HIA) Grant

- Approved by Metro Council in late June 2020
- Grant activities would cover Cheatham, Davidson, Montgomery, and Rutherford

Appalachian High Intensity Drug Trafficking Area (HIDTA)

- Collaborating with this group to identify additional resources and potential drug trends/seizure data

Nashville Drug Overdose Surveillance System

- To enhance drug overdose surveillance, MPHD has identified and integrated multiple data systems to monitor and respond to fatal and nonfatal drug overdoses in Davidson County.

Objectives

- Deliver timely and comprehensive data on fatal and nonfatal drug overdoses
- Increase the timeliness of reporting suspected drug overdoses (ODMAP)
- Disseminate surveillance findings to key internal and external partners to inform prevention and response efforts
- Develop weekly, quarterly, annual, and ad hoc (spike alert) reports
- Develop acute overdose response plan

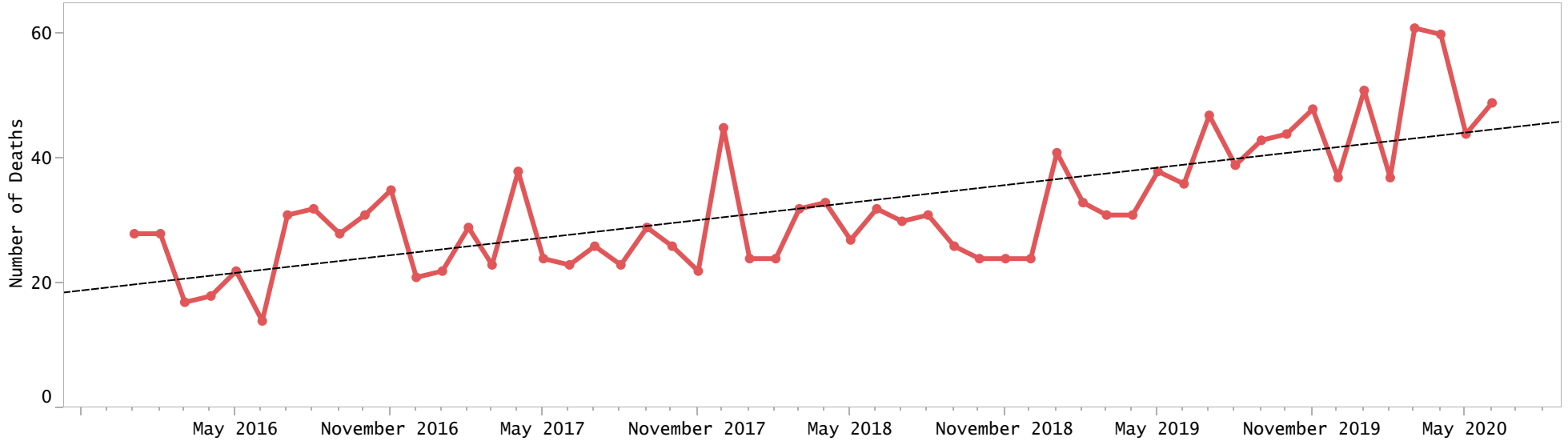
Fatal and Nonfatal Drug Overdoses by Month, 2019-2020

		2019		2020	
		Number of Records	% Difference from Previous Year	Number of Records	% Difference from Previous Year
Fatal Drug OD	January	41	70.8%	51	24.4%
	February	33	37.5%	37	12.1%
	March	31	-3.1%	61	96.8%
	April	31	-6.1%	60	93.5%
	May	38	40.7%	44	15.8%
	June	36	12.5%	49	36.1%
	Total	210	22.1%	302	43.8%
Nonfatal Drug Overdose ED Visit	January	94	40.3%	119	26.6%
	February	119	142.9%	94	-21.0%
	March	101	42.3%	136	34.7%
	April	101	119.6%	172	70.3%
	May	104	65.1%	214	105.8%
	June	156	81.4%	187	19.9%
	Total	675	76.7%	922	36.6%
Suspected Drug OD	January	349	8.7%	421	20.6%
	February	333	15.2%	404	21.3%
	March	349	-4.1%	481	37.8%
	April	349	15.9%	551	57.9%
	May	359	12.9%	603	68.0%
	June	405	8.9%	584	44.2%
	Total	2,144	9.1%	3,044	42.0%

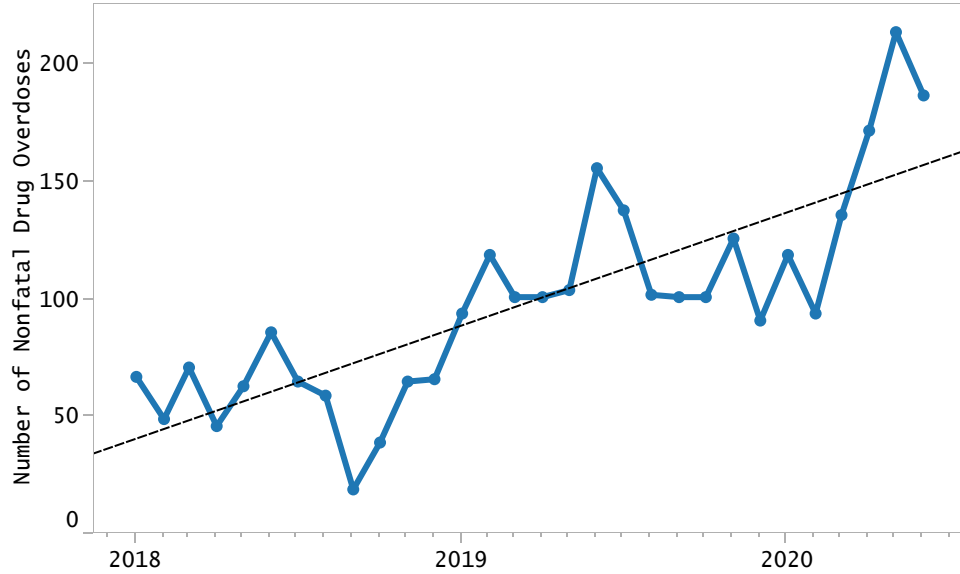
Update: Drug Overdose Epidemic in Davidson County, TN July 2020

Fatal Drug Overdoses by Month, 2016-2020 YTD

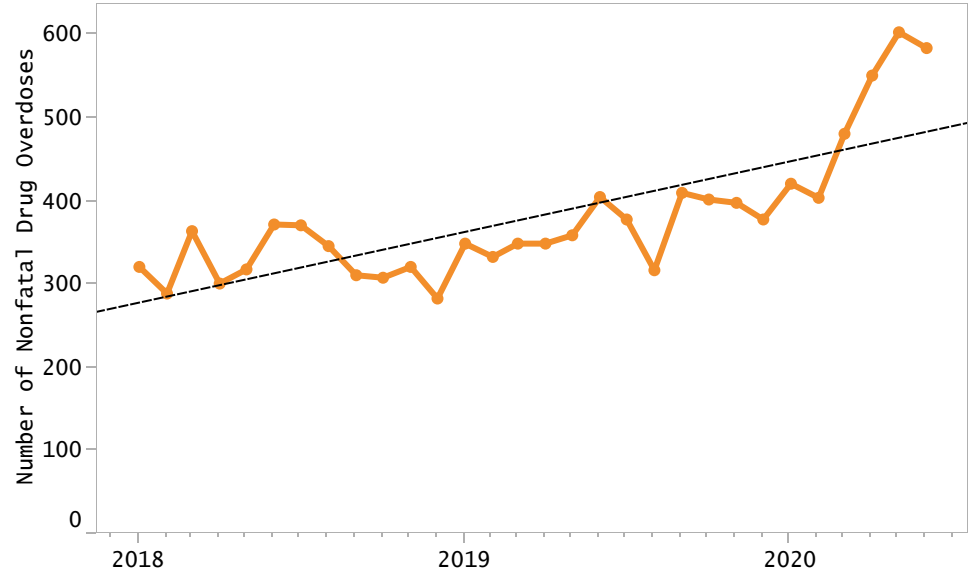
Note: Fatal drug overdoses that occurred in 2020 reflect counts as of 7/1/2020.



Nonfatal Drug Overdose ED Visits by Month, 2018-2020



Suspected Drug Overdoses by Month, 2018-2020



Update: Drug Overdose Epidemic in Davidson County, TN
July 2020

If you have any questions, please contact:

Trevor Henderson | Opioid/Overdose Response Coordinator
Overdose Reduction Program
Metro Public Health Department of Nashville/Davidson County
Email: trevor.henderson@nashville.gov
Phone: 615-340-0392

Josh Love, MPH | Epidemiologist
Overdose Reduction Program
Metro Public Health Department of Nashville/Davidson County
Email: josh.love@nashville.gov
Phone: 615-210-2171

MPHD Website - Drug Overdose Information

<https://www.nashville.gov/Health-Department/Drug-Overdose-Information.aspx>

Fatal Drug Overdoses

Source: Davidson County Medical Examiner

Nonfatal Drug Overdose ED Visits

Source: ESSENCE-TN

Suspected Drug Overdoses

Source: Nashville Fire Department EMS

East Public Health Center Back to School Immunization Clinics Phone: 615-862-7916



Dates:

- 7/22 , 7/29 , 8/5 & 8/12 : 8AM - 6:30PM

Time:

- MONDAY - FRIDAY 8AM - 2:30PM



What to Bring :

- BRING ID
- PREVIOUS SHOT RECORDS
- APPOINTMENTS REQUIRED

School Physicals:

Neighborhood Health

Phone: 615-227-3000 **Website:** neighborhoodhealthtn.org
(Locations all over Davidson County based on sliding fee scale)

Nashville Health Care Center

Phone: 615-341-4419 **Website:** nashvillehealthcarecenter.com
Address: 1919 Charlotte Ave Nashville, TN 37209(M-F 8AM - 4:30PM)

Metro Health Clinic Locations:

East Public Health
1015 East Trinity Lane
Nashville, TN 37216
615-862-7916

Woodbine Public Health
224 Oriel Ave
Nashville, TN 37210
615-862-7940

Lentz Public Health
2500 Charlotte Ave
Nashville, TN 37210
615-340-5607

FOR MORE INFORMATION VISIT: HEALTH.NASHVILLE.GOV

East Public Health Center

Servicios de inmunizaciones para el regreso a clases

Teléfono: 615-862-7916



Fechas:

- 22/7 , 29/7 , 5/8 y 12/8 : 8AM - 6:30PM

Hora:

- LUNES - VIERNES: 8AM - 2:30PM



Qué debe traer:

- TRAIGA IDENTIFICACIÓN
- TRAIGA REGISTRO DE INMUNIZACIONES ANTERIORES
- SE REQUIERE CITA

EXÁMENES FÍSICOS:

Neighborhood Health

Teléfono: 615-227-3000 **Sitio Web:** neighborhoodhealthtn.org
(Ubicaciones en el condado de Davidson. Tarifas varían según ingreso)

Nashville Health Care Center

Teléfono: 615-341-4419 **Sitio Web:** nashvillehealthcarecenter.com
Dirección: 1919 Charlotte Ave Nashville, TN 37209 (L-V 8AM - 4:30PM)

Ubicaciones de las clínicas de salud de Metro:

East Public Health
1015 East Trinity Lane
Nashville, TN 37216
615-862-7916

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Nashville, TN 37210
615-862-7940

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Nashville, TN 37210
615-340-5607

PARA MÁS INFORMACIÓN VISITE: HEALTH.NASHVILLE.GOV



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

مركز إبيست للصحة العامة
عيادة اللقاءات الخاصة بالعودة إلى المدرسة
هاتف: 615-862-7916

الرجاء إحضار:

- بطاقة الهوية الشخصية
- سجل اللقاءات السابقة
- تحديد الموعد مسبقاً



التاريخ:

• 7/22 , 7/29 , 8/5 & 8/12 : 8 صباحاً - 6:30 مساءً

الوقت:

• الجمعة - الإثنين 8 صباحاً 2:30 - مساءً

عيادات الفحص البدني:

Neighborhood Health

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مواقع العيادات التابعة لميترو:

مركز إبيست للصحة العامة
1015 East Trinity Lane
Nashville, TN 37216
615-862-7916

مركز وودباين للصحة العامة
224 Oriol Ave
Nashville, TN 37210
615-862-7940

مركز لينتزل للصحة العامة
2500 Charlotte Ave
Nashville, TN 37210
615-340-5607

Lentz Public Health Center Back to School Immunization Clinics Phone: 615-340-5607



Dates:

- JULY 21ST - AUGUST 13TH, 2020
TUESDAYS & THURSDAYS



What to Bring :

- BRING ID
- PREVIOUS SHOT RECORDS
- APPOINTMENTS REQUIRED

Time:

- 7AM - 6PM
-

School Physicals:

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Nashville, TN 37210
615-862-7940

Lentz Public Health

2500 Charlotte Ave
Nashville, TN 37210
615-340-5607

FOR MORE INFORMATION VISIT: HEALTH.NASHVILLE.GOV

Lentz Public Health Center

Servicios de Inmunizaciones para el regreso a clases

Phone: 615-340-5607



Fechas:

- 21 DE JULIO, 2020 - 13 DE AGOSTO, 2020
MARTES Y JUEVES

Hora:

- 7AM - 6PM



Qué debe traer:

- TRAIGA IDENTIFICACIÓN
- TRAIGA REGISTRO DE INMUNIZACIONES ANTERIORES
- SE REQUIERE CITA

EXÁMENES FÍSICOS:

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PARA MÁS INFORMACIÓN VISITE: HEALTH.NASHVILLE.GOV

مركز لينتز للصحة العامة
عيادة اللقاحات الخاصة بالعودة إلى المدرسة
هاتف: 615-340-5607

الرجاء إحضار:

- بطاقة الهوية الشخصية
- سجل اللقاحات السابقة



التاريخ:

• من 07\21 إلى 08\13

الثلاثاء و الخميس

الوقت:

• 7 صباحاً - 6 مساءً

عيادات الفحص البدني:

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مركز وودباين للصحة العامة
224 Oriol Ave
Nashville, TN 37210
615-862-7940

مواقع العيادات التابعة لميترو:
مركز لينتز للصحة العامة
2500 Charlotte Ave
Nashville, TN 37210
615-340-5607

Woodbine Public Health Center

Back to School Immunization Clinics

Phone: 615-862-7940



Dates:

- JULY 20 - AUGUST 14

Time:

- MONDAY, TUESDAY, WEDNESDAY
7AM - 5:30PM
- THURSDAY 7AM - 6:30PM



What to Bring :

- BRING ID
- PREVIOUS SHOT RECORDS
- APPOINTMENTS REQUIRED

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615-862-7940

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Nashville, TN 37210
615-340-5607

FOR MORE INFORMATION VISIT: HEALTH.NASHVILLE.GOV

Woodbine Public Health Center

Servicios de Inmunizaciones para el regreso a clases

Phone: 615-862-7940



Fechas:

- JULIO 20 - AGOSTO 14

Hora:

- LUNES, MARTES, MIÉRCOLES
7AM - 5:30PM
- JUEVES 7AM - 6:30PM



What to Bring :

- TRAIGA IDENTIFICACIÓN
 - TRAIGA REGISTRO DE
INMUNIZACIONES ANTERIORES
 - SE NECESITA CITA
-

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PARA MÁS INFORMACIÓN VISITE: HEALTH.NASHVILLE.GOV

الرجاء إحضار:

- بطاقة الهوية الشخصية
- سجل اللقاحات السابقة
- تحديد الموعد مسبقاً



التاريخ:

• من 07/20 إلى 08/14

الوقت:

• الإثنين, الثلاثاء, الأربعاء

7 صباحاً - 5:30 مساءً

• الخميس 7 صباحاً - 6:30 مساءً

عيادات الفحص البدني:

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Nashville, TN 37210
615-340-5607

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

Species By Age	Canine		Felilne		Total
	Adult	Up to 5 months	Adult	Up to 5 months	
Beginning Animal Count (date: 5/01/2020)	43	3	28	4	78
Intake					
Stray at large	82	10	13	30	135
Relinquished by owner	8	0	3	0	11
Owner requested euthanasia	0	0	0	0	0
Transferred in from agency	0	0	0	0	0
Other Intakes	14	1	7	1	23
TOTAL INTAKE	104	11	23	31	169
Outcomes					
Adoption	14	0	13	1	28
Returned to owner	37	1	6	0	44
Transferred to another agency	21	11	2	5	39
Other live Outcome	0	0	0	0	0
TOTAL LIVE OUTCOMES	72	12	21	6	111
Died in care	0	0	0	0	0
Lost in care (Physical inventory adjustments)	0	0	0	0	0
Shelter Euthanasia	9	0	4	2	15
Owner requested euthanasia	0	0	0	0	0
TOTAL OUTCOMES	81	12	25	8	126
Ending Shelter Count (date: 5/31/2020)	58	11	25	27	121
SAVE RATE:	91.35%	100.00%	82.61%	93.55%	91.12%

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: 6/01/2020)	58	11	25	27	121
Intake					
Stray at large	97	16	17	53	183
Relinquished by owner	9	0	5	3	17
Owner requested euthanasia	3	0	0	0	3
Transferred in from agency	0	0	0	0	0
Other Intakes	13	0	0	4	17
TOTAL INTAKE	122	16	22	60	220
Outcomes					
Adoption	18	1	12	30	61
Returned to owner	47	0	2	0	49
Transferred to another agency	43	15	5	2	65
Other live Outcome	0	0	0	0	0
TOTAL LIVE OUTCOMES	108	16	19	32	175
Died in care	0	0	0	2	2
Lost in care (Physical inventory adjustments)	0	0	0	0	0
Shelter Euthanasia	12	0	4	5	21
Owner requested euthanasia	3	0	0	0	3
TOTAL OUTCOMES	123	16	23	39	201
Ending Shelter Count (date: 6/30/2020)	55	11	21	53	140
SAVE RATE:	89.92%	100.00%	81.82%	88.33%	89.40%