

**Metropolitan Board of Health of Nashville and Davidson County
November 12, 2020, Meeting Minutes**

Chair Alex Jahangir called the meeting to order at 4:00 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 A. Frederick, MS, Member
Calvin M. Smith III, MD, Member
Michael C Caldwell MD MPH, Director of Health
Celia Larson, PhD, Director, Office of Strategic Planning, Performance, and Evaluation
Trevor Hobson, MA, Director, Fetal Infant Mortality Review
Tina Lester, MSN, RN, Director of Population Health Bureau
Keith Durbin, CMA, MS.PSM, Metro Chief Information Officer and Director of IT Services
Stephen Martini, Director of the Office of Emergency Communications
John Singleton, Director of Information Technology, Metro Nashville Police Department
Derrick Smith, JD, Metropolitan Department of Law

Motion to Approve Conducting Meeting by Electronic Means

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

Chair Jahangir conducted votes taken during the meeting by roll call.

Approval of October 8, 2020 Regular Meeting Minutes

Ms. Etherington made a motion to approve the October 8, 2020, regular meeting minutes as submitted. Vice-Chair Franklin seconded the motion, which passed unanimously.

Data Sharing Review

Dr. Caldwell, Keith Durbin, Stephen Martini and John Singleton provided an update on the implementation of the Data Sharing Policy as approved by the Board on July 9, 2020.

Dr. Caldwell advised that he would work with the work group chaired by Dr. Campbell to review how the implementation of the system is going once data is available to review.

Fetal Infant Mortality Review Update

Trevor Hobson presented an update on the Fetal Infant Mortality Review Program (Attachment II).

Review of Draft Organizational Chart

Dr. Caldwell presented draft organizational charts for review and discussion was held. It was agreed a board retreat would be scheduled to review further, and to review budget information, COVID response and other topics.

Approval of Grant Applications

Dr. Larson presented one grant application:

Grant from Rachael Ray – Best Friends Save Them All

Term: 2021

Amount: \$50,000

Ms. Etherington made a motion to approve the grant application. Mr. Frederick seconded the motion, which passed unanimously.

Approval of Grants and Contracts

Dr. Larson presented four items:

1. Air Pollution 103 Grant from the U.S. Environmental Protection Agency

Term: April 1, 2020-March 31, 2022

Amount: \$260,000

2. Tobacco Prevention & Cessation Services Grant from the Tennessee Department of Health

Term: July 1, 2018-June 30, 2021

Amount: \$98,400

3. STARS Grant

Term: execution-August 30, 2025

Amount: \$379,071

4. Amendment to School Nursing Memorandum of Understanding with Metro Board of Public Education

Term: July 1, 2017-June 30, 2022

Amount: \$12,800,000

Vice Chair Franklin made a motion to approve the grants and contracts. Ms. Etherington seconded the motion, which passed unanimously.

Report of Director

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

Additionally, Dr. Caldwell:

- Made special note of the loss of Carl Sutton
- Asked Lisa Nistler to provide a brief update on School Health
- The Dept will participate in a Health Fair at Plaza Mariachi on Saturday, November 14.
- Asked Tina Lester to provide information about World AIDS Day, Dec. 1.

Report of Chair and Discussion

Chair Jahangir said that over 570,000 people had been tested for COVID in Nashville, 250,000 free tests had been administered at the assessment centers. Testing hours are increased the weeks before and after Thanksgiving, and three days a week and at three school sites. He stressed the importance of staying vigilant.

Review of Board Requests

- Poll for retreat date
- Update on what the Dept. is doing to recruit for vaccination studies, specific language
- Vaccination Planning briefing at or before December retreat

CIVIL SERVICE BOARD

Personnel Changes

Personnel Changes were unremarkable.

Next Regular Meeting

The next regular meeting of the Board of Health is scheduled to be held at 4:00 p.m. on Thursday, December 10, 2020 in the Board Room (third floor) at 2500 Charlotte Avenue, Nashville, TN, 37209, if social distance restrictions are not in place.

The meeting adjourned at 5:38 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.

Fetal Infant Mortality Review

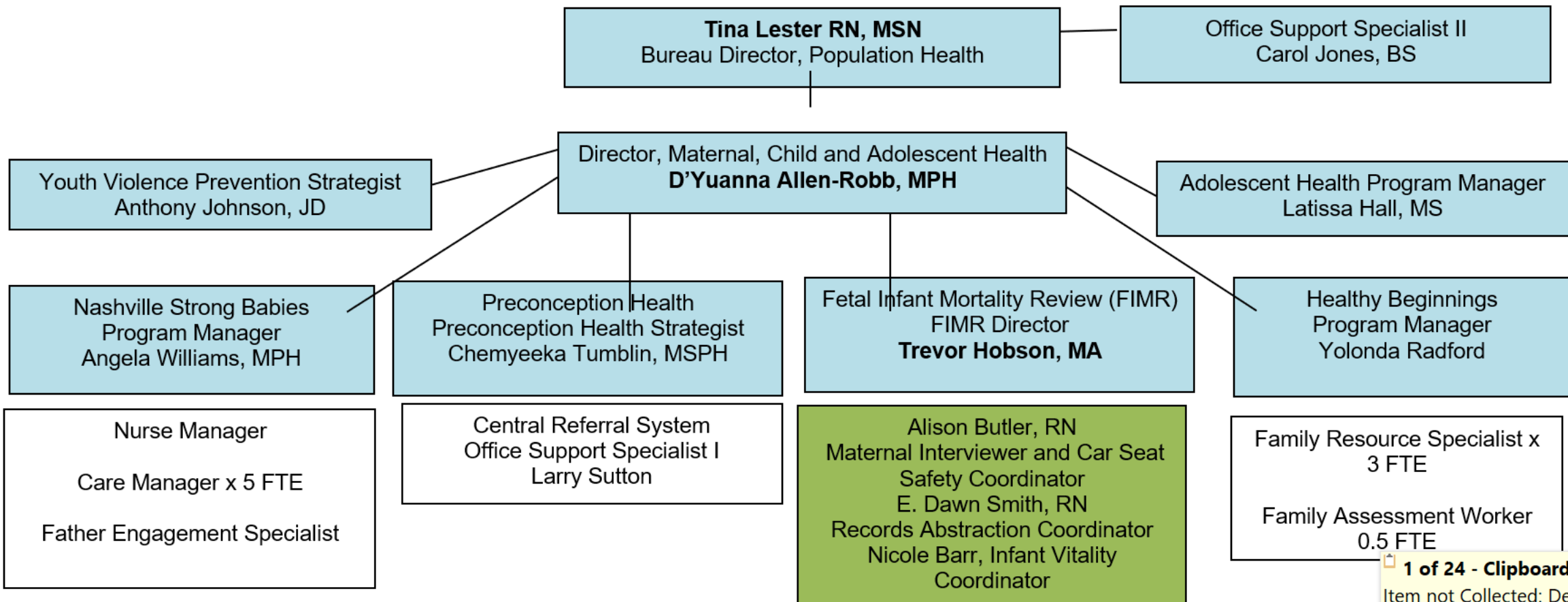
Presentation to the Metro Nashville Board of
Health

November 12, 2020

Trevor C. Hobson, MA

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1 of 24 - Clipboard
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Case Review Team(CRT) and Community Action Team (CAT)

- CRT – Review of abstracted medical records from birth hospital
- Discuss the fetal or infant demise and make recommendations to the CAT
- Specifically look for gaps in service, was everything done that could have been done, perceived inequity in treatment at the hospital
- CAT- Receive recommendations from CRT and make action items



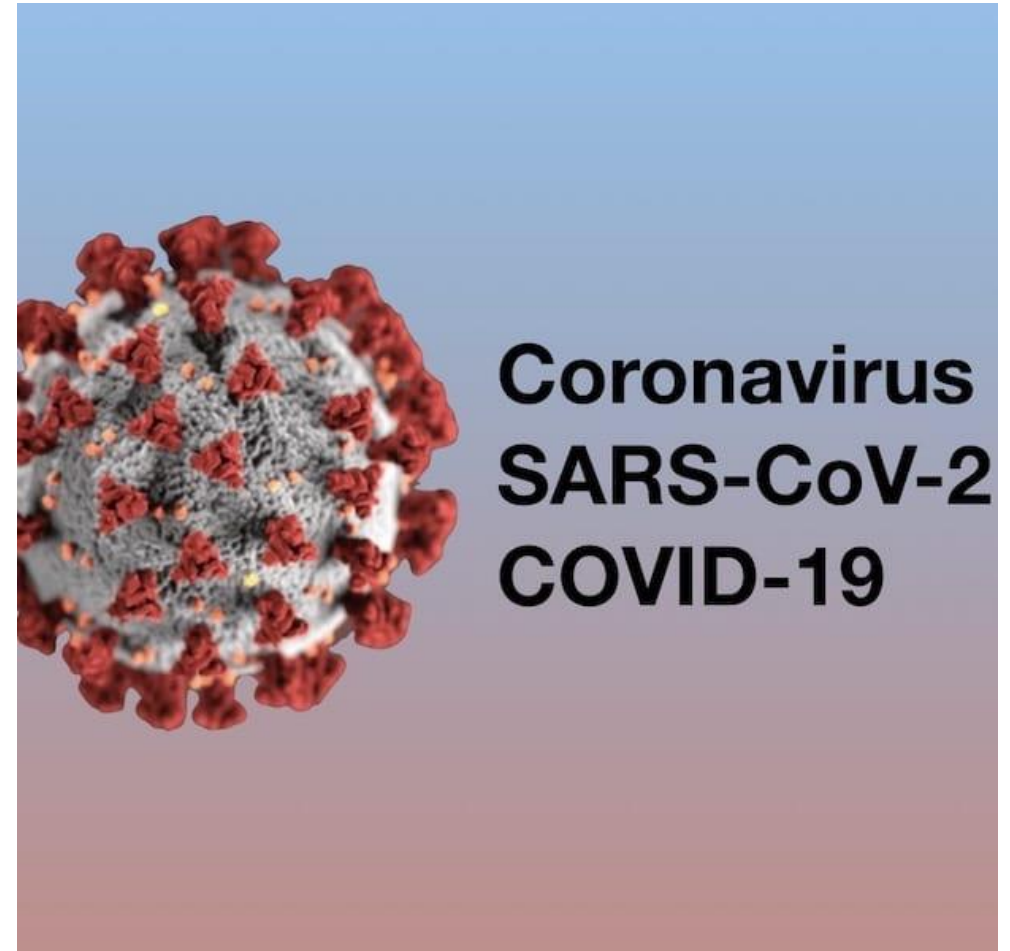
Population Health Measures

- 42% decline in sleep related infant deaths 2015 – 2018
- ALIVE Hospice partnership to address difficult conversations with healthcare professionals
- Parade to celebrate Black Breastfeeding Awareness Week
- Car seat safety handouts disseminated through partnership with Opus, Inc. that reached 5,000 cars going through emissions testing



Forward Thinking

- Preparing for COVID-19 case reviews
- Preparing to expand on sensitivity training with other organizations to address bias
- Inviting representatives from the LatinX and LGBTQ communities to participate on committees



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

Protecting Health – Preventing the Spread of Infectious Disease

COVID

Enforcement

We continue our enforcement & compliance efforts with teams posted on Broadway and at various events every weekend. An important note: the community needs to recognize that Metro cannot assign every individual his or her own personalized compliance officer. As the Mayor has said repeatedly, we cannot enforce our way to full compliance. Only the citizens and visitors can do that.

Testing

Testing is at its highest peak since we started in the Spring. We have had record high numbers of tests in each of the last five weeks, exceeding 30,000 tests a week the last two weeks of October.

School Nurses

We have been adding nurses rapidly in an effort to get to a point where there is a school nurse for every school. To date we have added 33 nurses and three supervisors since the summer, financed by COVID-related funding available to MNPS through the end of next June. Because of these efforts, we have gotten much closer to having a nurse in every school.

The nurses are serving as the first point of contact for COVID issues in schools. They provide initial guidance to MNPS regarding staff, students and faculty, before the case is transferred into the regular system of contact tracing and response. This guidance is very helpful in speeding up the process of responding to COVID cases. One of the biggest burdens has been the after-hours calls from school officials on how to respond to events the next morning. We are in the process of assembling a team of workers to assist with these calls.

Flu shot numbers:

The total number of flu shots administered as of Friday, October 30th was 3,598. Of those 1,767 were Metro employees and 1,831 of who were patients in our clinics.

STI/STD testing

The Woodbine Preventive Health Clinic completed its pilot program of testing all patients who have a positive pregnancy test for STIs/STDs. They have been able to identify many cases of Hepatitis C that the patients were previously unaware of, as well as other STIs that could then be treated before having any further impact on the health of the pregnancies. The state health department has shown great interest in the study and told us that evidence yielded by the pilot may inform best practice standards for care of pregnant females for all health departments across the state.

Improving Health – Access & Care Coordination

Breast Cancer Awareness month

October was Breast Cancer Awareness month. The Breast and Cervical Cancer Screening program partnered with many organizations and programs for events around the city. Events included free mammogram events with Nashville General Hospital and the Center for Women's Health Research at Meharry; awareness and promotion displays with the Tennessee Titans, Pink Glitter Boutique, hair and nail salons in the Hermitage community (an area identified as being lacking in BCS program providers); at all MPHD health department locations; and participation in a Breast Cancer Awareness panel discussion at Lake Providence Missionary Baptist Church. Wear Pink day at MPHD raised more than \$1000 for the Susan G Komen More Than Pink

event. An estimated 281 people were reached individually during these events, with an inestimable number reached with the promotions and displays.

Improving Health – Community Partnerships

Ticks

This summer the Pest Management Division of the Bureau of Environmental Health Services partnered with the Tennessee Department of Health to survey the risk of Lyme disease and other tick-borne illnesses in the county. Pest Management has for years conducted a mosquito trapping and species identification program to determine the prevalence of West Nile Virus in the county. While we have positive WNV tests each year, human cases have been low to nonexistent. Tick-borne illnesses, conversely, are much more prevalent. (The latest MMWR report from the Tennessee Department of Health showing 34 cases of Lyme Disease, 62 cases of Ehrlichiosis/Anaplasmosis, and 75 cases of Rocky Mountain Spotted Fever.)

The Pest Management team collected ticks via a method called dragging, in which a square yard of flannel or corduroy cloth is swept across leaf litter and underbrush. This simulates the passing of an animal or other host, and the ticks attach to the cloth. Those ticks are then tested for the pathogens responsible for the various tick-borne illnesses.

The goals of the survey are to understand the seasonal distribution, abundance, and epidemiological risk posed by tick species and to identify hotspots for ticks and their associated pathogens.

The Pest Management Division has developed an educational brochure that contains data from the survey; explains the life cycle of the tick; gives tips on how to identify different tick species; lists and describes tick-borne diseases present in Davidson County; and provides information on tick bite prevention. We anticipate this survey will continue into future summers.

Mental Health

Angie Thompson, Deputy Chief Damian Huggins and Amanda Bracht, Vice President of Crisis Services at the Mental Health Cooperative, presented on Mental Health Pre-arrest Diversion to the Mayor's Policing Policy Commission on September 15. The WebEx presentation was for all PPC members to become more informed about the current work of the Community Mental Health Systems Improvement initiative, including the success of the collaborative effort between MNPD and the Mental Health Cooperative on using pre-arrest diversion for those experiencing a behavioral health crisis.

The Communities Committee of the Policing Policy Commission invited the community to submit questions for consideration for the interviews for the candidates for the police chief. The members of ACE Nashville's Leadership Team drafted questions in hopes of providing a trauma-informed lens to the new selection process for the new police chief. The members of the Behavioral Health and Wellness Advisory Council also submitted questions developed with a behavioral health lens and are centered in three areas: Mental Health/CIT, Community Policing, and Force Culture.

Organizational Updates

Carl Sutton

Clinical Services lost one of its long-time core staff members when Carl Sutton passed away on November 2nd. Carl was a dedicated Health Department employee for 20 years and a friend to many. He will be remembered by all who knew him as a courageous, selfless, and caring man.

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

I. Data

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

In 2020, there have been 516 fatal drug overdoses at the time of this report.

Fatal Drug Overdoses

- There are currently 10.3 fatal drug overdoses occurring in Davidson County per week.
- Compared to the same time last year, fatal drug overdoses have increased by 35% and are on pace to eclipse 600 drug overdose deaths in 2020.
- Fentanyl is the primary driver for increase and is present in 80% of toxicology reports this year.
- In 2020, the average potential years of life lost (PYLL) per drug overdose death is 33.4 years.

Nonfatal Drug Overdose Emergency Department (ED) Visits

- Compared to the same time last year, nonfatal drug overdose ED visits have increased by 31%.

Suspected Drug Overdoses

- Compared to the same time last year, suspected drug overdoses requiring response by the Nashville Fire Department EMS have increased by 40%.
- The number of doses of naloxone per patient has increased in recent months.

II. Interventions/Activities/Collaborations

U.S. Department of Justice Comprehensive Opioid Abuse Site-based Program (COAP) Grant

- All positions have been filled.

TDH-CDC High Impact Area (HIA) Grant

- All MPHD positions have been filled.

Acute Overdose Response Plan

- Activated in early October to respond to an increase in fatal drug overdoses occurring locally.

Overdose Surveillance & Reporting

- Continuing to conduct routine surveillance and reporting for Davidson County.
- Planning to upscale surveillance and reporting activities to include Cheatham, Montgomery, and Rutherford.

Substance Use Linkage

- Planning to begin implementation in early November. Activities will include linking MPHD clinic patients with substance use disorder to available resources.

Overdose Detection Mapping Application Program (ODMAP)

- Currently operational in Davidson County and used to monitor and detect increases in acute overdose activity.
- Planning to implement ODMAP system in surrounding counties (Cheatham, Montgomery, and Rutherford) to bolster regional overdose surveillance.

Fatal and Nonfatal Drug Overdoses, 2019-2020 (Last 6 Months)

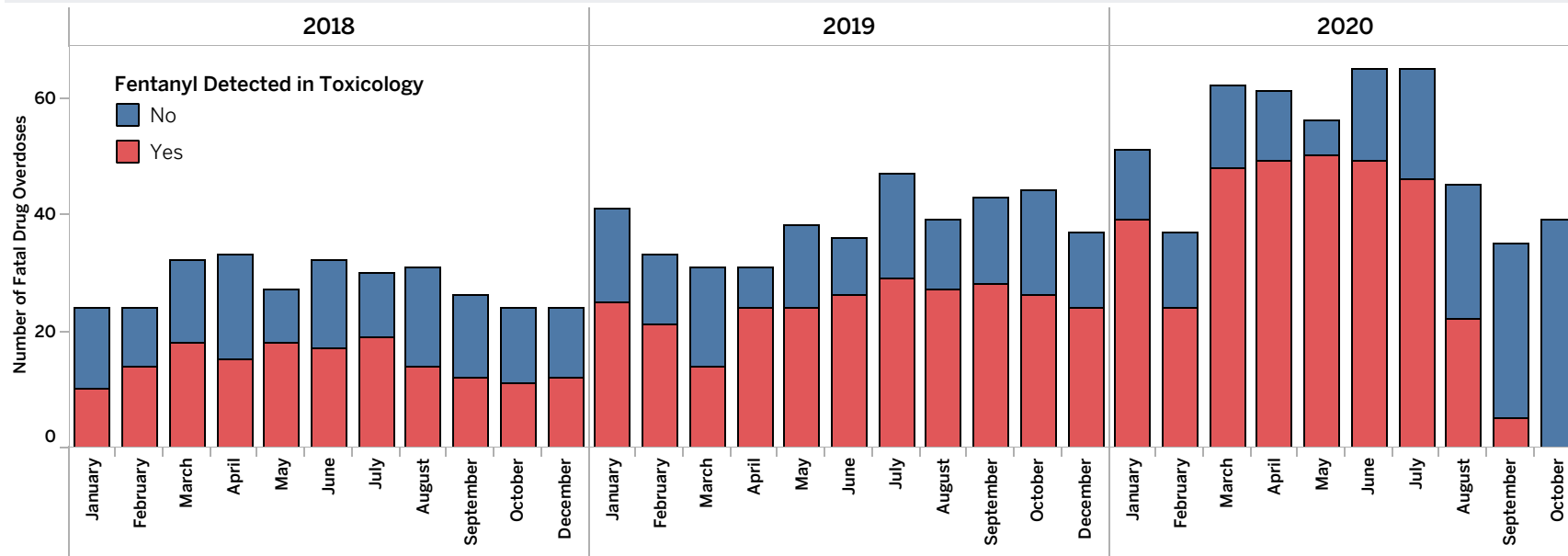
Annual counts represent incidents that occurred between January 1 and October 31 in each respective year.

	2019		2020		
	Number of Records	% Difference from Previous Year	Number of Records	% Difference from Previous Year	
Fatal Drug OD	May	38	40.7%	56	47.4%
	June	36	12.5%	65	80.6%
	July	47	56.7%	65	38.3%
	August	39	25.8%	45	15.4%
	September	43	65.4%	35	-18.6%
	October	44	83.3%	39	-11.4%
	YTD Total	383	35.3%	516	34.7%
Nonfatal Drug OD ED Visit	May	151	67.8%	265	75.5%
	June	201	59.5%	222	10.4%
	July	181	60.2%	236	30.4%
	August	139	32.4%	182	30.9%
	September	152	181.5%	187	23.0%
	October	140	91.8%	195	39.3%
	YTD Total	1,512	56.8%	1,979	30.9%
Suspected Drug OD	May	359	12.9%	603	68.0%
	June	405	8.9%	584	44.2%
	July	378	1.9%	569	50.5%
	August	317	-8.4%	471	48.6%
	September	410	31.8%	534	30.2%
	October	402	30.5%	490	21.9%
	YTD Total	3,651	10.6%	5,108	39.9%

Update: Drug Overdose Epidemic in Davidson County, TN

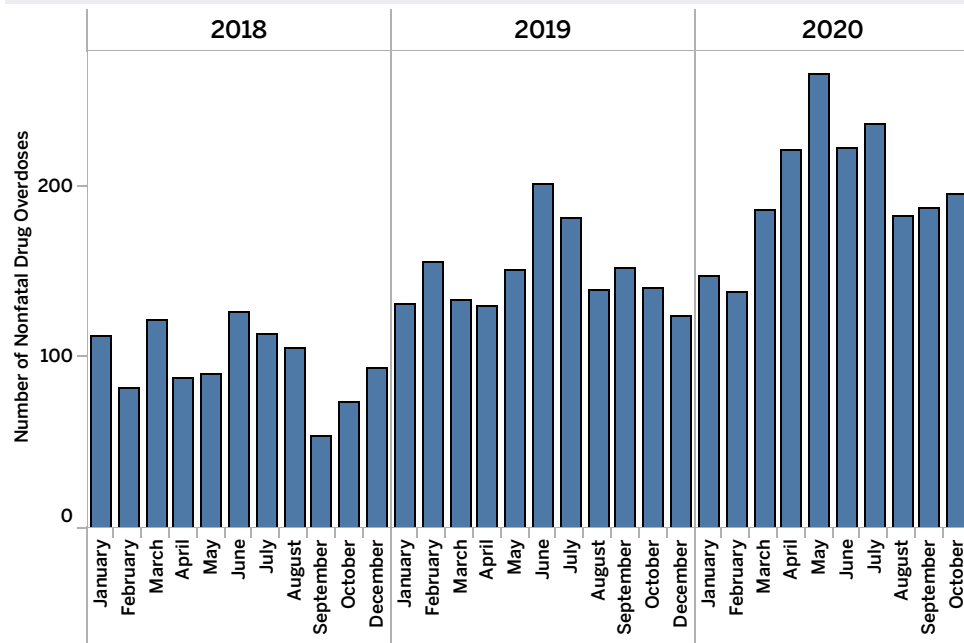
November 2020

Fatal Drug Overdoses by Presence of Fentanyl, 2018-Present

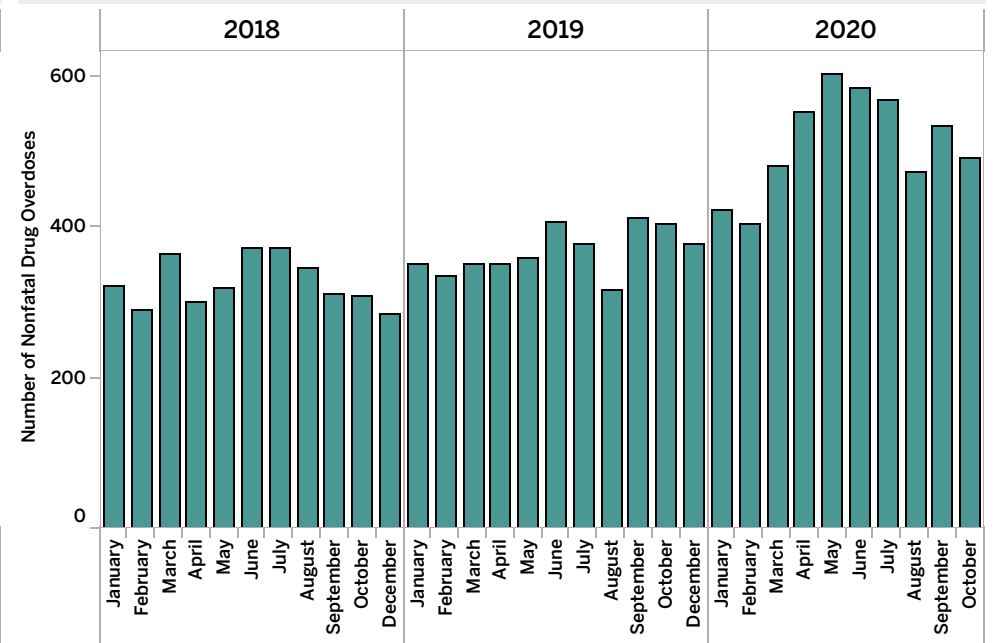


Note: Data obtained from toxicology reports (including drug type) for deaths that occurred over the last several weeks (August-October) are still incomplete and will be updated in subsequent reports.

Nonfatal Drug Overdose ED Visits, 2018-Present



Suspected Drug Overdoses, 2018-Present



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

If you have any questions, please contact:

Trevor Henderson | Director

Opioid/Overdose Response & Reduction Program
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Email: trevor.henderson@nashville.gov
Phone: 615-340-0392

Josh Love, MPH | Epidemiologist

Opioid/Overdose Response & 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>

Data Sources

Fatal Drug Overdoses

Davidson County Medical Examiner

Nonfatal Drug Overdose ED Visits

ESSENCE-TN

Suspected Drug Overdoses

Nashville Fire Department EMS

Note

Data presented in this report were extracted on November 5, 2020 and are provisional. There may be additional fatal/nonfatal drug overdoses reported over this time period in subsequent reports as incidents that occurred during the months of September and October 2020 are not yet finalized.

****If you have information on unusual overdose activity, please contact the Opioid/Overdose Response & Reduction Program****

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

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: 10/01/2020)	74	5	83	67	229
Intake					
Stray at large	147	19	20	32	218
Relinquished by owner	26	0	9	5	40
Owner requested euthanasia	5	0	0	0	5
Transferred in from agency	0	0	0	0	0
Other Intakes	5	1	2	1	9
TOTAL INTAKE	183	20	31	38	272
Outcomes					
Adoption	37	1	11	32	81
Returned to owner	62	2	4	1	69
Transferred to another agency	58	14	4	12	88
Other live Outcome	0	0	0	0	0
TOTAL LIVE OUTCOMES	157	17	19	45	238
Died in care	0	1	2	1	4
Lost in care (Physical inventory adjustments)	0	0	0	0	0
Shelter Euthanasia	16	0	9	0	25
Owner requested euthanasia	3	0	0	0	3
TOTAL OUTCOMES	176	18	30	46	270
Ending Shelter Count (date: 10/31/2020)	92	11	74	54	231
SAVE RATE:	91.11%	95.00%	64.52%	97.37%	89.22%