John Cooper, Mayor Gill C. Wright III MD MMM FAAFP Director of Health

Board of Health

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Regular meetings of the Board of Health are scheduled on the second Thursday of each month. This meeting was rescheduled from August 10.

To sign up for meeting updates, visit: https://www.nashville.gov/departments/health/boards/health-board

FINAL AGENDA

BOARD OF HEALTH SPECIAL CALLED MEETING Lentz Public Health Center Board Room, on the third floor 2500 Charlotte Avenue, Nashville TN 37209 Tuesday, August 22, 2023 4:00 p.m.

APPEAL OF DECISIONS FROM THE METROPOLITAN BOARD OF HEALTH

Pursuant to the provisions of § 2.68.030 of the Metropolitan Code of Laws, notice is hereby given that a contested case hearing before the Metropolitan Board of Health, acting as a Civil Service Commission, which affects the employment status of a civil service employee is appealable to the Chancery Court of Davidson County pursuant to the provisions of the Uniform Administrative Procedures Act. Any such appeal must be filed within sixty (60) days after the entry of the Board's final order in the matter. A common law writ of certiorari is the appropriate appeal process of any decision of the Metropolitan Board of Health that does not involve a contested case hearing affecting the employment status of a civil service employee. This appeal must be filed within sixty (60) days of the action taken by the Board. You are advised to seek your own independent legal counsel to ensure that your appeal is filed in a timely manner and that all procedural requirements are met.

BOARD OF HEALTH

Public CommentFranklin
Pursuant to Tennessee Public Chapter No. 300, time is reserved at the beginning Board of Health meetings for public comment
on legislative items appearing on the agenda. Up to five people will be allowed up to two minutes each to speak. Speakers
must register prior to the beginning of the meeting by signing their name on a physical sign-up sheet available at the meeting.
Welcome New Board Member Rebecca Anne Whitehead, MBAFranklin
Declarations of Conflicts/Recusals or Communiques from the Public on Agenda ItemsFranklin
Approval of July 13, 2023, Meeting MinutesFranklin
Employee RecognitionWright
Approval of Grant Applications
Approval of Grants and Contracts
Presentation: Behavioral Health and Wellness UpdateMelville-Chester
Presentation: REACH First Quarter Data Update
Update on 24-Month Immunization SurveyHooper
Appointment of Personnel CommitteeFranklin
Report of DirectorWright
Report of ChairFranklin
New Business Franklin
a. Board Requests of the Department
b. Departmental Requests of the Board
AdjournmentFranklin
IL SERVICE BOARD
Request to Schedule a Public Hearing for Proposed Changes to Job Descriptions and Pay Plan Patterson
Personnel Changes
AdjournmentFranklin

The Metro Public Health Department does not discriminate on the basis of age, race, gender, gender identity, sexual orientation, color, national origin, religion, or disability in admission to, access to, or operation of its programs, services, or activities, nor does it discriminate in its hiring or employment practices. Contact mphd.ada@nashville.gov with questions, concerns, complaints, requests for accommodation, or requests for additional information regarding the Americans with Disabilities Act.

BEHAVIORAL HEALTH AND WELLNESS

Division Updates and Highlights to the Board of Health August 22, 2023



Behavioral Health and Wellness

- New Employee Update (COPE Grant Update)
- Division Priorities
- Brief Program Highlights
- Overdose Settlement Funds Pilot Update
- Questions and Answers.



Alexis Hill, BS Community Education Coordinator.





Alyxandra (Alyx) Stuehler, M.Ed Research Analyst/Program Evaluator.

New Employee Update NACCHO COPE Grant





John Nardozzi, BA Community Education Coordinator





Nichelle Foster, LMFT, LADAC II Program Manager Assessment and Education Coordinator





Sheldon K. Walker, BSW
Suicide Prevention and COPE Grant
Program Coordinator





Kylan Hadley, MSSW ACE Nashville Coordinator





Brenda Byrns, BSW Referral Coordinator



Division Priorities

- Re-build
- Hiring Personnel
- Develop Strategic Plan (Division Level)
- Community Mental Health Assessment
- Internal/External Relationship Building
- Secure/ Stabilize Funding
- Program Expansion



Strategies To Achieve Priorities

- Organize Division Staff, realigning staff based on expertise
- Fill vacant positions, enhance capacity to achieve deliverables
- Develop vision, define mission and goals of division
- Working closely with HSRI
- Collaborating with MPHD divisions of Executive Leadership Team, Human Resources, EPI Team, Finance Division, etc.
- Continuing community relationships with Mayor's Office, ACE Nashville Collective, SPAAFC Coalition, TDOC, etc.
- Exploring multiple funding options
- Hire key clinical staff to support program/service expansion within our clinics.

GRANT Program Management

High Impact Area (HIA)

Successes: Collaborative data team; Consistent data collection; Bi-monthly REDCap reporting; developed acute response plan; Epi surveillance and support across HIA. EMS patient follow-up services. Held leadership position in HIA Multi-Disciplinary Stakeholder group. Grant has been re-funded for the next five (5) years, beginning September 2023.

Barriers: Multiple staffing changes; multiple stakeholders; clinic navigation and resource development guide not fully executed due to staffing changes.

Department of Justice (DOJ)

Successes: Applied for and received verbal notice of a no cost extension, awaiting the official contract modification. It will extend the grant until September 2024. With a full staff, the deliverables of the amended workplan will be completed.

Overdose Settlement Funds: Pilot Program Update

- Developed an overdose care process.
- ❖ Opioid Settlement Funds Committee approved a 15-month pilot project targeting 50-60 individuals to participate in the program.
- * Received approval from the Mayor to proceed.
- Shared project with Mayoral appointed Behavioral Health and Wellness Advisory Council. They voted to proceed with the programmatic direction.
- ❖ Request For Proposals is currently being developed for up-to two organizations to begin implementation of the project with an anticipated award date of January 2024.



- Attended 3 Conferences related to Illicit Substance Misuse and Strategies for Prevention. (NACCHO Annual, National Rx Drug Summit,
- Site visit with partner Health Department in New York City. Opioid Settlement Funds strategy building meeting with Leadership from both sites (Nashville and New York City).
- Meeting with Mayor Cooper to provide an update on the vision of BHW including BHWAC, PIC and REACH's current progress and projected outcomes.
- Meetings with Trevecca and Tennessee State University Counseling Divisions regarding a partnership to utilize Master's Level Clinician Interns for expansion of counseling services in BHW.
- Co-facilitation and participation in the National Suicide in the Black Church Conference.

+

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BHW Program Activities (March – July 2023)

The following training and presentations were conducted in the community reaching 3351 individuals:

- 4 Listening Sessions (15+ attending ea.)
- ➤ 30 Presentations in the African American and Coptic Communities related to Opioid Overdose Prevention
- 4 QPR Suicide Prevention Trainings
- S Regional Overdose Prevention Specialist (ROPS) trainings completed in partnership with STARS

Community
Mental Health
Systems
Improvement
(CMHSI)

The coordinator for this position facilitates and mobilizes consensus-based systems change. Their other responsibilities include looking at interventions for high utilizers of multiple systems.

Behavioral
Health and
Wellness
Advisory Council
(BHWAC)

The coordinator in this position also provides administrative oversight for the Mayoral appointed Behavioral Health and Wellness Advisory Council. BHWAC recently welcomed six (6) new members.



We invite you to use the following QR Code to engage with *Behavioral Health and Wellness*. You will find the information very helpful.

We Wear Many
Hats in
Behavioral Health
and Wellness.

Thank you!







The situation:

Person calls 911 to report an emergency, and the operator dispatches Fire, EMS, or Police





The situation:

Person calls 911 to report an emergency, and the operator dispatches Fire, EMS, or Police





More detail:

Caller indicates a mental health or addiction crisis

The problem:

- Paramedics and police officers have become default first responders to mental health and addiction crises
- Traditional end-points are evaluation and transport to ED, or arrest and transport to jail





Impact:

- Suboptimal treatment for those needing acute mental health care
- Resources are strained
 - Emergency Department beds
 - > Ambulances out of service
 - Law enforcement time
 - > Criminalization of mental illness; resulting cycle

The Denver model:

Paramedic or police officer trained in Crisis Intervention Technique (CIT)

Master's level counselor trained in public safety





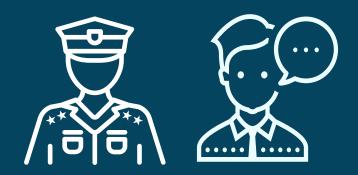




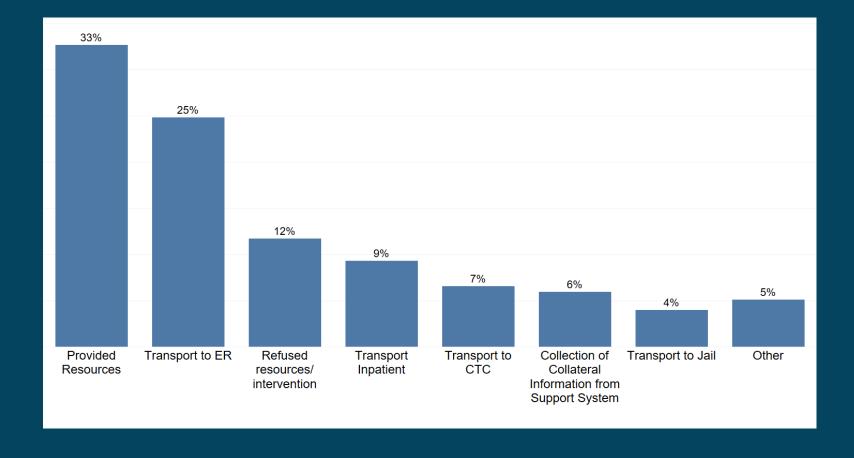
Collaborative
Community Crisis
Response

Partners in Care:

MNPD, Mental Health Cooperative, Emergency Communications, MPHD



- Launched June2021
- >3500 events
- 4% arrest rate



REACH:

NFD/EMS, Mental Health Cooperative, Emergency Communications, MPHD



- 150 events in first 3 months
- 45% transported to ED
- 84% required no police involvement







Director's Update to the Board of Health

August, 2023

Protecting Health – Preventing the Spread of Infectious Disease

Back-to-School – Preventive Services

Preventive health has extended hours at all three clinic sites (East, Woodbine, and Lentz 120) to increase access for children needing back-to-school vaccines. These extended hours will run until August 25. We ask that all children needing vaccination call ahead of time for an appointment, bring their shot record with them and, due to recent legislation, present with their parent or legal guardian.

Back-to-School Strike Team

The MPHD Vaccine Strike Team participated in Plaza Mariachi's Annual Back to School Event on Saturday, July 29. The Strike Team vaccinated 23 children, providing 75 shots total. Vaccines administered include DTaP, Hep B, Varicella, Tdap, Polio, Hep A, MMRV, Meningococcal, HPV and Covid. Support from MPHD Interpreter Services allowed for substantial engagement with our Spanish and Arabic speaking community members. Information and materials were also made available regarding the immunization requirements in Tennessee and other topics related to school entry requirements.

The Strike Team is only recently able to offer so many vital vaccines to children in a mobile, "meet people where they are" setting, and the initiative continues to be successful.

24-Month Immunization Survey Presentation

Angelina Hooper will present at this meeting on the <u>2022-24-Month-Old-Survey.pdf</u> (tn.gov). As it is a substantial document, the link is provided here so you can access it in its entirety.

Creating Healthier Community Environments

Overdose Surveillance

The <u>Quarterly Drug Overdose Surveillance Update</u> for the quarter ended June 30 is now available, along with other overdose information, at https://www.nashville.gov/departments/health/drug-overdose-information (included in the board packet). In summary, the annual number of fatal drug overdoses in Davidson County has increased each year from 2016 through 2022, even while the annual numbers of overdose-related ED visits and NFD-EMS responses have remained relatively stable since peaking in 2020. Other demographic changes and emergence of new substances are detailed in the report.

Child Death Review

The Nashville Davidson Child Death Review team recently published the annual 2021 death investigations report https://www.nashville.gov/departments/health/epidemiology-data-and-statistics/death-data In 2021, the CDRT reviewed 94 child deaths. Two-thirds of these deaths (63 deaths, 67%) occurred to infants under 1 year of age. The mortality rate for children aged 0 to 17 years in Davidson County in 2021 (78.7 deaths per 100,000) was 18 percent higher than the previous year. This rate remains higher than the rates for Tennessee and the United States. The CDRT determined that 48 percent of the child deaths reviewed in 2021 were preventable. The high proportion of preventable deaths highlights the ongoing need for a thoughtful review of each death to understand the risk factors and circumstances leading to injury and illness or death and identify opportunities for prevention. The report also contains a tribute to long-time CDRT member Dr. Michael Meadors, Sr., who practiced obstetrics and gynecology in Nashville for more than 40 years until his death in April 2022.

Red Sand Awareness Event

For the fifth straight year, MPHD participated in the Red Sand Project, an art installation targeted at increasing awareness of human trafficking and highlighting individuals that are "falling through the cracks." Participation occurred at East, Lentz, South Nutrition and Woodbine. Below are a few of the great pictures taken at the events. Thanks to all that participating in raising awareness to this important issue.









Improving Health - Services to Individuals & Families

YRBS

MPHD continues to disseminate results from the 2021 YRBS Youth Risk Behavior Survey that was conducted among MNPS high schoolers. Epi Division staff led a two-hour workshop at the recent Davidson County Social Emotional Learning conference and was scheduled to discuss YRBS findings in two different presentations at the MNPS Ready, Set, Grow! Conference a week ago today. We are planning a series of webinars for local youth-serving CBOs in September. The 2023 YRBS was conducted earlier this year, and results will be available early next year. Of note, new Tennessee legislation as of July 1 requires active positive consent for all students participating in surveys like the YRBS; this replaces the previous approach of implied consent and active opt-out, and may substantially impact the effectiveness of student surveys going forward.

World Breastfeeding Month

The MPHD is excited to celebrate August's World Breastfeeding Month and planned to host a celebration at Lentz for our WIC families, WIC-eligible families, and MPHD staff on Friday, August 4. Women, both pregnant and post-partum, make up about 30 percent of Davidson County's WIC caseload. Approximately 62 percent of post-partum women on the WIC program in Davidson County report breastfeeding at least once per day, which is up from 47 percent in 2019. Comparatively, state-wide WIC breastfeeding rates are around 53 percent. Davidson County WIC employes four breastfeeding peer counselors, 14 Certified Lactation counselors, and three Internally Board-Certified Lactation Consultants to help promote and support breastfeeding with all our families. See below!

COME CELEBRATE WORLD BREASTFEEDING WEEK WITH THE DAVIDSON COUNTY WIC PROGRAM AT OUR OPEN HOUSE CELEBRATION

Prizes, games, photo booth and more!

Friday, August 4 10am - 2pm

Lentz Public Health Center

Centennial Room 2500 Charlotte Avenue Nashville, TN 37209





EVENT SCHEDULE

10:00AM: DOORS OPEN

10:20AM: WELCOME

10:30AM: RETURNING TO WORK

- Davidson County WIC Breastfeeding Peer Counselor

10:45AM: HEALTHY START PROGRAM

- Nashville Strong Babies

11:00AM: INFANT AND CHILDREN CPR

- MPHD CPR Program

12:00PM: BREAK OUT SESSION

1:00PM: CAR SEAT SAFETY

- Vanderbilt's Injury Prevention Program

1:15PM: PREVENTIVE HEALTH SERVICES

- MPHD Preventive Health Program

1:30PM: BREASTFEEDING TRIVIA

- Davidson County WIC Breastfeeding Peer Counselor

1:45PM: RAFFLE DRAWINGS, CLOSING

"This institution is an equal opportunity provider."

Organizational Updates

We continue negotiating issues around the contract for violence prevention and interruption services with Why We Can't Wait, which this Board approved earlier this summer. An attempt was made at Council to add an additional \$750,000 to another vendor into the same resolution, which delayed consideration of the WWCW contract for a month. The substitute resolution was to have been heard last week and a verbal update will be provided during the Board meeting.

Equity Pay Study

We have received the study and will have more information after we have met with Deloitte, which we expect to do shortly. Look for a presentation at the September meeting.

Overdose Response Program - Metro Public Health Department of Nashville/Davidson County

The objective of this report is to provide education and increase awareness in Davidson County about the local drug overdose epidemic.

EXECUTIVE SUMMARY

2023 | Quarters 1-2: January 1 - June 30

Suspected Fatal Drug Overdoses

During the second quarter of 2023, there were 163 suspected drug overdose deaths (104 completed and 59 pending) that occurred in the county. The first and second quarter combined accounted for 332 deaths (271 completed and 61 pending). The annual number of fatal drug overdoses in Davidson County has increased each year from 2016 through 2022.

Fentanyl: Fentanyl, a synthetic opioid, was detected in approximately seventy-six percent of overdose-related toxicology reports in the first two quarters of 2023. Fentanyl is a primary contributor to overdose deaths in Davidson County. Cocaine and methamphetamine were also frequently detected in suspected overdose deaths in quarters one through two.

Demographics: Males accounted for the largest percentage of suspected drug overdose deaths at seventy percent during quarters one through two of 2023. In regard to age group, the largest percentage of deaths occurred among 45-54 year olds (27%).

Suspected Nonfatal Drug Overdose-Related Emergency Department (ED) Visits (Syndromic Surveillance)

The annual number of suspected drug overdose-related ED visits captured by syndromic surveillance (definition on page 3) peaked during 2020 and have remained relatively stable in the years since then. Syndromic surveillance captured 1,048 suspected drug overdose-related ED visits during the first two quarters of 2023. This represents a 10% decrease when compared to the corresponding time period in 2022.

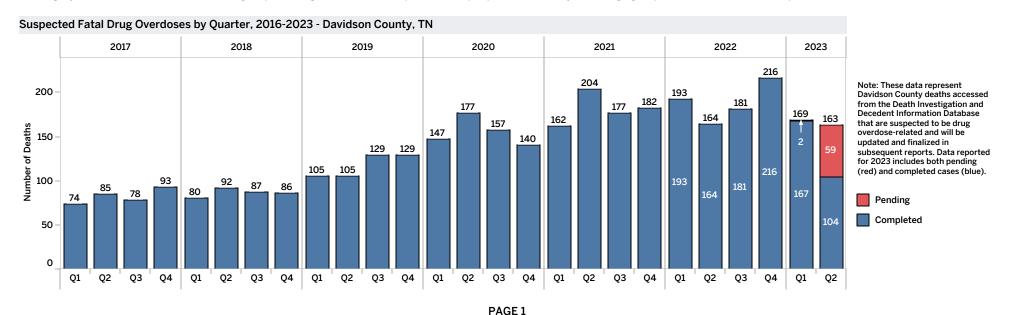
Drug/Substance Category: Non-heroin opioids (73%) was the top drug/substance category reported for overdose-related ED visits.

Demographics: During quarters one through two of 2023, approximately two-thirds of drug overdose-related ED visits in Davidson County were among males, and 31% of drug overdose-related ED visits occurred among individuals 25-34 years old.

Suspected Drug Overdoses Requiring Response by Nashville Fire Department Emergency Medical Services (NFD-EMS)

The annual number of suspected drug overdoses requiring NFD-EMS response increased from 2016 through 2020 and have remained relatively stable since then. There were 2.883 suspected drug overdoses requiring NFD-EMS response during the first two quarters of 2023, representing a 4% increase compared to the first two quarters of 2022.

Demographics: Males accounted for the largest percentage of NFD-EMS responses, and people in the 25-34 year old age group accounted for 31% of responses.



Overdose Response Program - Metro Public Health Department of Nashville/Davidson County

Suspected Fatal Drug Overdoses

2023 | Quarters 1 - 2: January 1 - June 30

Notable Trends

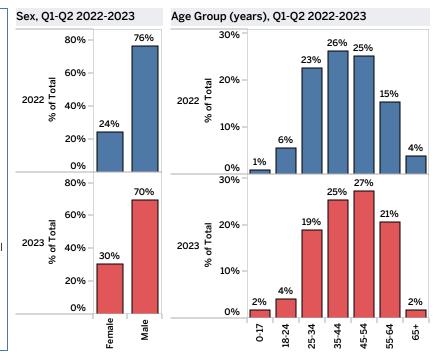
Overdose Deaths: The annual number of fatal drug overdoses in Davidson County has increased each year from 2016 through 2022. During the second quarter of 2023, there were 163 suspected drug overdose deaths (104 completed and 59 pending) that occurred in the county. The first and second quarter combined accounted for 332 deaths.

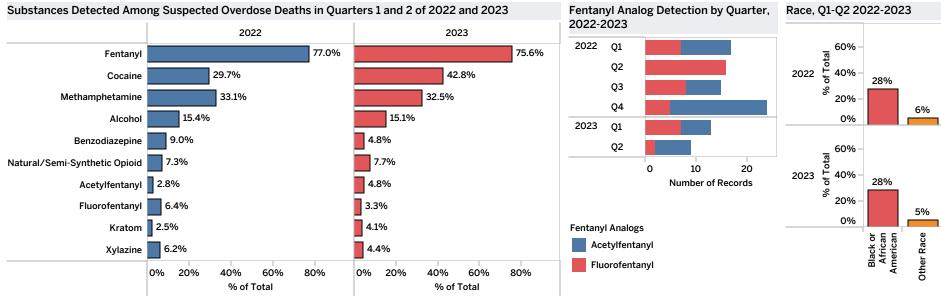
Fentanyl: Fentanyl was detected in 75.6% of overdose deaths in the first through second quarter of 2023. Fentanyl is a synthetic opioid that has contributed to the increased number of drug overdose deaths in Davidson County.

Polysubstance Epidemic: The most frequently detected substances in the first two quarters of 2023 were fentanyl, cocaine, and methamphetamine. The percentage of suspected overdose deaths in which cocaine was detected increased by 44% in the first two quarters of 2023 compared to the first two quarters of 2022.

Emerging Substances: Emerging substances detected include xylazine and fentanyl analogs (fluorofentanyl and acetylfentanyl). Xylazine has been increasingly detected among suspected overdose deaths in the last three years.

Demographics: Males (70%) and White individuals (66%) accounted for the majority of overdose deaths in quarters one through two of 2023. The 45-54 year old age group (27%) represented the highest number of overdose deaths. During the same time period in 2022, the 35-44 year old age group were hightest at 26%.





67%

66%

White

Overdose Response Program - Metro Public Health Department of Nashville/Davidson County

Suspected Nonfatal Drug Overdose-Related ED Visits (Syndromic Surveillance)

2023 | Quarters 1 - 2: January 1 - June 30

Notable Trends

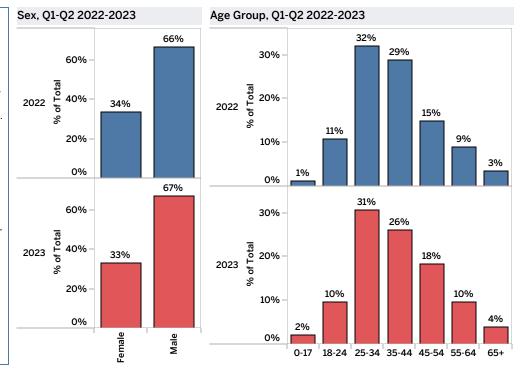
Overdose-related ED Visits: The annual number of suspected drug overdose-related ED visits captured by syndromic surveillance (definition below) peaked during 2020 and have remained relatively stable in the years since then. During first through second quarter 2023, there were 1,048 suspected drug overdose-related ED visits captured by syndromic surveillance, representing a 10% decrease when compared to the first two quarters of 2022.

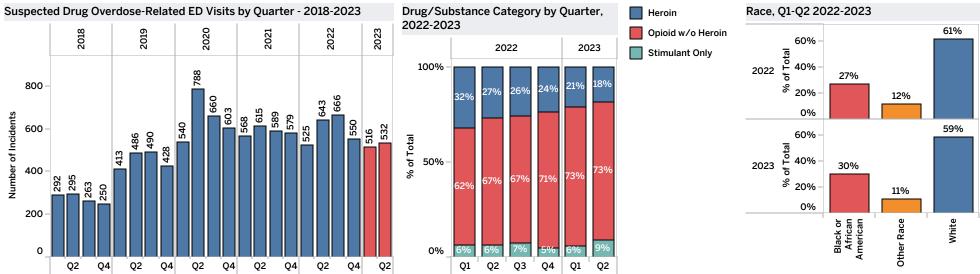
Drug/Substance Category: Nearly three-quarters of overdose-related ED visits in the first and second quarter of 2023 involved non-heroin opioids followed by heroin, and stimulants. This finding indicates a continued shift away from heroin and towards synthetic opioids.

Demographics: Approximately two-thirds of drug overdose-related ED visits in Davidson County during the first two quarters of 2023 were among males. By age group, 31% of drug overdose-related ED visits occurred among individuals 25-34 years old. Among race groups, the majority of ED visits were among White individuals at 59% followed by Black individuals at 30%.

What is Syndromic Surveillance?

Data collected in syndromic surveillance consists of de-identified information from various health care facilities regarding chief complaints, diagnosis codes, and patient characteristics. These data are reported either to state and local health departments or Health Information Exchanges, which then contribute data to the national syndromic surveillance platform for assistance in identifying early trends in diseases and conditions.





Overdose Response Program - Metro Public Health Department of Nashville/Davidson County

Suspected Drug Overdoses Requiring NFD-EMS Response

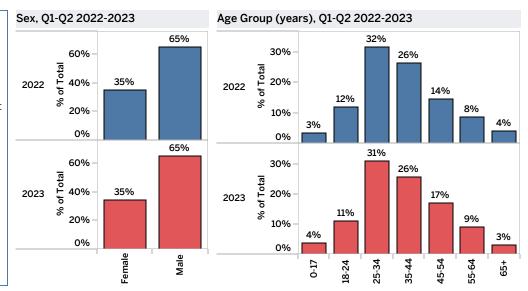
2023 | Quarters 1 - 2: January 1 - June 30

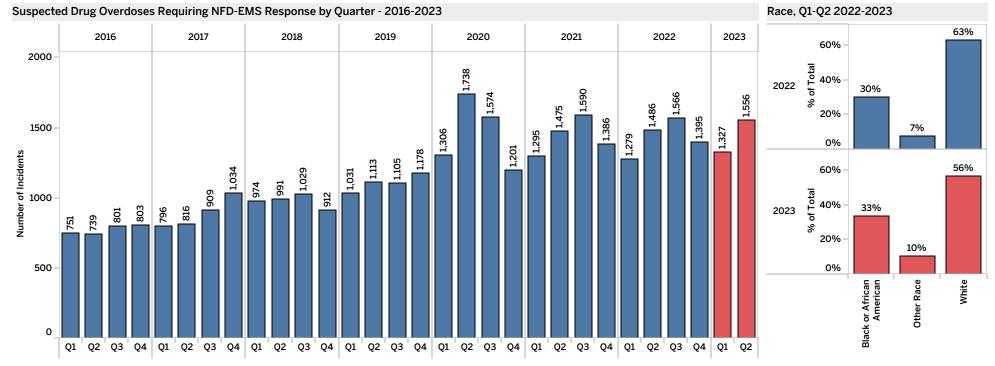
Notable Trends

Suspected Overdoses Requiring NFD-EMS Response: The annual number of suspected drug overdoses requiring NFD-EMS response has remained relatively stable since 2020. During the first and second quarters of 2023 combined, there were 2,883 suspected drug overdoses requiring NFD-EMS response, representing a 4% increase compared to the first two quarters 2022 where 2,765 incidents were reported.

Demographics: Nearly two-thirds of NFD-EMS responses to suspected drug overdoses in Davidson County were among males during the first two quarters of 2023. This trend has remained consistent over the last several years. By age group, 31% of all suspected drug overdoses occurred among individuals 25-34 years old. White individuals accounted for 56%, and Black individuals accounted for 33% of NFD-EMS responses during this time period.

Naloxone Administration: During quarters one and two of 2023, naloxone was administered in 48% of drug overdose incidents to which NFD-EMS responded; during the corresponding time period in 2022, naloxone was administered in 53% of such incidents.





Overdose Response Program - Metro Public Health Department of Nashville/Davidson County

Footnotes and Supplemental Information

If you have information on unusual overdose activity, please contact the Overdose Response Program

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

Technical Notes

Data for the most recent quarter, April 1 through June 30 of 2023, remain preliminary and may be adjusted in later months. Percent change where the cumulative total is less than 20 were not included due to the instability of calculations.

Suspected Fatal Drug Overdoses

- Data represent deaths accessed from the Death Investigation and Decedent Information (DIDI) database on 7/6/2023 that are suspected to be drug overdose-related. These deaths have occurred within Davidson County, and cases are included in this total regardless of resident status. This mortality indicator demonstrates the overall burden on first response, healthcare, and forensic science in addition to the overall magnitude of the overdose epidemic. Counts reported for this metric will likely differ from overdose death counts provided by other agencies that report deaths only among county residents.

Suspected Nonfatal Drug Overdose-Related ED Visits

- Nonfatal drug overdose data were extracted from ESSENCE-TN on 7/6/2023. Syndromic surveillance identifies suspected overdose-related ED vists via chief complaint and discharge diagnosis codes. These incidents are considered suspected and do not include laboratory and/or clinical confirmation.
- Nonfatal drug overdose ED visits were captured by syndromic surveillance (ESSENCE-TN) at the following hospitals: Nashville General Hospital, Saint Thomas Midtown Hospital, Saint Thomas West Hospital, TriStar Centennial Medical Center, TriStar Skyline Medical Center, TriStar Southern Hills Medical Center, TriStar Summit Medical Center, Vanderbilt University Medical Center, Vanderbilt Childrens Hospital, and TriStar Century Farms ER.
- Data was obtained through a query of ESSENCE-TN using the Chief Complaint Discharge Diagnosis (CCDD) Categories: CDC Opioid Overdose Version 2 and CDC Stimulant Overdose Version 3. The CCDD field is used to query diagnosis codes and chief complaint free text.

Suspected Drug Overdoses Requiring NFD-EMS Response

- Suspected drug overdose data were provided by the Nashville Fire Department EMS Database on 7/6/2023.

PAGE 5
All data are provisional and subject to change

Overdose Response Program - Metro Public Health Department of Nashville/Davidson County

Resources for the Public

Community Overdose Response Team

For those seeking treatment for drug addiction, the Community Overdose Response Team (CORT) can help. CORT is a free and confidential resource to help find drug and alcohol treatment for individuals who are at risk of an overdose. The service is offered free of charge regardless of health insurance status. The team works with an individual to determine the appropriate level of care (e.g., detox, residential, or outpatient treatment, etc.).

To make a referral or learn more about this resource for our community, call CORT at 615-687-1701.

Tennessee REDLINE

The purpose of the Tennessee REDLINE is to provide accurate, up-to-date alcohol, drug, problem gambling, and other addiction information and referrals to all citizens of Tennessee at their request even if you do not have health insurance.

- **Phone: 1.800.889.9789** (toll free 24 hours/7 days)
- Website: https://www.tn.gov/opioids/treatment/how-to-get-help.html

Additional Information

Naloxone Training

- STARS Nashville, Call 615-393-6980 or visit https://starsnashville.org/rops/.
- Red Cross https://www.redcross.org/

Overdose Signs

- Person is not responsive
- Fingertips or lips turn blue or grey
- Breathing is slow, shallow, or has stopped
- Person is gurgling or making snoring noises

What can you do if you see an opioid overdose?

- Call 911
- If you have naloxone, give the person naloxone and perform rescue breathing
- If no response after 2-3 minutes, give a second dose of naloxone
- Do not leave the person alone (help will arrive)
- If the person starts to breathe or becomes more alert, lay the person in the recovery position: put the person slightly on the left side so that their body is supported by a bent knee with their face turned to the side and bottom arm reaching out to stabilize the position

SPIKE Auto Text Program

Metro Public Health Department is collaborating with Partnership to End Addiction to implement the SPIKE Auto Text Program in Davidson County. The program will alert you when spikes in drug overdoses occur locally.

Text SPIKE to 855-9-OD-KNOW (855-963-5669) and follow the steps to get messages on your phone when overdose spikes occur. This service is FREE. You can learn more at https://drugfree.org/spike/.

Overdose Response Program - Drug Overdose Information

- Website: https://www.nashville.gov/departments/health/drug-overdose-information
- Contains various resources in English, Spanish, and Arabic.



SPIKE Alerts by Text Information that can save lives Get alerts about overdoses in your community



Partnership to End Addiction is working with organizations in your community to alert you when spikes in drug overdoses occur locally. This knowledge can help you take action to engage and protect your loved ones struggling with addiction.

Why it matters: Spike alerts can prompt families and community members to:

- Have discussions about seeking treatment and/or using substances more safely
- Protect people you care about by getting naloxone and learning how to use it
- 3 Talk to friends or loved ones who are not using substances about the risks of use
- 4 Advocate for and support efforts in your community to prevent overdoses

Text SPIKE to 855-9-OD-KNOW (855-963-5669)

and follow the steps to get messages on your phone when overdose spikes occur.

How it works: Health and law enforcement officials can release a "spike alert" to the media in response to a pattern of drug overdoses within a community. Partnership to End Addiction's SPIKE Alerts by Text program informs you when these alerts are issued.



Learn more: drugfree.org/spike or scan QR code to sign up now

Partnership to End Addiction is a nonprofit working to transform how our nation addresses addiction. Learn more at drugfree.org.



NFHS Basic Data Matrix



07/01/2023 and 07/31/2023

Species										
METRONIACURALE		Canine			Feline				1	
METRO NASHVILLE ANIMAL CARE & CONTROL		Adult	Up to 5 Months	Unknown Age	Canine Totals	Adult	Up to 5 Months	Unknown Age	Feline Totals	Totals
	Beginning Animal Count as of 07/01/2023	149	6	0	155	24	97	2	123	278
	Stray/At Large	234	55	7	296	33	101	2	136	432
I N	Transferred in from Municipal Shelter	0	0	0	0	0	0	0	0	0
T A K	Transferred in from Other Rescue Group	0	0	0	0	0	0	0	0	0
E	Owner Requested Euthanasia	6	0	0	6	1	0	0	1	7
	Relinquished by Owner	15	8	1	24	2	4	1	7	31
	Other Intakes	18	2	0	20	0	1	0	1	21
	Total Intakes	273	65	8	346	36	106	3	145	491
	A double up	87	21	0	108	19	82	0	404	209
	Adoptions								101	
	Returned to Home	73	9	6	88	5	1	0	6	94
0	Transferred to Rescue Group	44	22	0	66	7	9	1	17	83
T	Other Live Outcomes	0	0	0	0	0	0	0	0	0
С О	Return to Field	3	0	0	3	0	0	0	0	3
M E	Total Live Outcomes	207	52	6	265	31	92	1	124	389
S	Died in Care	0	0	0	0	0	6	0	6	6
•	Lost in Care	1	1	0	2	0	0	0	0	2
	Euthanasia	46	0	2	48	7	6	0	13	61
	Owner Requested Euthanasia	5	0	0	5	1	0	0	1	6
	Total Other Outcomes	52	1	2	55	8	12	0	20	75
	Total Outcomes	259	53	8	320	39	104	1	144	464
	Ending Animal Count as of 07/31/2023	167	14	0	181	26	94	4	124	305
	Save Rate	82.46%	98.46%	75.00%	85.34%	80.00%	88.68%	100.00%	86.81%	85.77%



NFHS Basic Data Matrix Deceased Animal Intake Only

07/01/2023 and 07/31/2023

		Species								
		Canine		Canine			Feline]		
		Adult	Up to 5 Months	Unknown Age	Totals	Adult	Up to 5 Months	Unknown Age	Totals	Totals
	Beginning Animal Count as of 07/01/2023	1	0	0	1	0	0	0	0	1
	Stray/At Large	1	2	1	4	0] 1	1	2	6
I N	Transferred in from Municipal Shelter	0	0	0	0	0	0	0	0	0
A	Transferred in from Other Rescue Group	0	0	0	0	0	0	0	0	0
K E S	Owner Requested Euthanasia	0	0	0	0	0	0	0	0	0
	Relinquished by Owner	0	0	0	0	0	0	0	0	0
	Other Intakes	1	0	0	1	0	0	0	0	1
	Total Intakes	2	2	1	5	0	1	1	2	7

Position Title: Communicable Disease Investigator	Fair Labor Standards Act (FLSA): Non-Exempt
Salary Grade: OR01	Effective Date: 07/01/1993 Revision Date: 08/10/2023

Position Objective:

Under general direction, performs surveillance and / or intervention activities involving communicable diseases; participates in community outreach; and performs related duties as required.

Major Responsibilities:

- Conducts counseling and epidemiological investigations.
- Counsels patients on preventative measures, test results, program services, and procedural guidelines.
- Interviews patients for potential contacts to initiate partner notification and contact tracing through fieldwork.
- Reviews medical records of various health care facilities to abstract communicable disease data
- Encourages and reinforces the specific health care plans initiated by medical professionals.
- Transports patients for testing and treatment as needed.
- Compiles and submits statistical and other related reports.
- Collects data, conducts statistical analyses, and enters data on surveillance activities.
- Completes State and Centers for Disease Control reports on all positive results.
- Creates computer databases.
- Promotes program objectives and services with various community groups.
- Prepares for and participates in health fairs.
- Organizes and conducts mass screenings in the field.
- Provides educational lectures to schools and various community groups.
- Performs testing procedures.
- Collects laboratory specimens.
- Performs skin testing.
- Performs chest x-rays.
- Performs general clerical duties.
- Records specimens in laboratory log.
- Tracks status of laboratory specimens.
- Provides back up for other general clerical duties.
- Attends conferences and in-services.
- Performs related duties as required.

Supervision Exercised/Supervision Received

This classification may lead clerical support staff and assist in the training of a new Communicable Disease Investigator.

This classification reports to an immediate supervisor who reviews job duties and is consulted on unusual or complex matters.

PERFORMANCE STANDARDS

Knowledge of the laws, rules, and regulations applicable to public health agencies.

Knowledge of community organizations and resources applicable to program needs and objectives. Skill in written and oral communication.

Ability to work independently.

Ability to interview, counsel, and communicate effectively with patients.

Ability to establish and maintain effective working relationships.

Minimum Qualifications:

EDUCATION AND EXPERIENCE

Bachelor's degree in the Social Sciences, Public Health, or related field.

LICENSURE

Valid class "D" driver's license.

Working Environment/Physical Demands:

The work is sedentary. Typically, the employee sits comfortably to do the work. However, there is some walking, standing, carrying of light items, or driving an automobile. No special physical demands are required to perform the work.

The work environment involves moderate risks or discomforts, which require special safety precautions, e.g., visiting residences in a high crime area, working under poor weather conditions, exposure to contagious diseases, etc. Employees may be required to use protective clothing or gear such as masks, coats, or gloves.

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. Employee may perform other related duties as needed to meet the ongoing needs of the department.



Position Title: Records Management Analyst	Fair Labor Standards Act (FLSA): Non-Exempt
Salary Grade: OR02	Effective Date: 07/09/2002 Revision Date: 08/10/2023

Position Objective:

Coordinates the acquisition, restoration, retrieval, scanning, indexing, storage, disposal, and purging of paper and electronic records, and documents for the Metro Public Health Department.

Major Responsibilities:

- Researches, retrieves, and maintains records information requested from clinics and other internal customers.
- Tracks inventory by routinely scheduling visits to all locations where records are housed and maintained for retrieval and or destruction.
- Performs annual records purging project.
- Processes requests for destruction of inactive records in accordance with the State of Tennessee and Metro Government Archives Public Record Commission, by use of the Records Disposition Authorizations (RDA).
- Coordinates with contracted vendor for pick-up and final destruction of records.
- Obtains all required documentation to support a recommendation for the proper disposition of records.
- Performs scanning and indexing of birth, death, and other specified record types into the Questys System, and completes daily quality monitoring of all scanned and indexed documents.
- Provides professional and timely customer service to the public, both walk-ins and telephone customers, and directs them to appropriate service.
- Appropriately models and promotes the values of the Department in all interactions with other employees and with the public.

Supervision Exercised/Supervision Received

Leads and/or trains clerical and administrative support personnel engaged in records management. Works under the supervision of the Director of Medical/ Vital Records, Privacy Officer who defines overall objectives and priorities of the work and is consulted on unusual or complex matters.

PERFORMANCE STANDARDS

Thorough knowledge of local, state, and federal records management standards.

Knowledge of records scheduling and disposal procedures.

Knowledge of records center storage procedures.

Knowledge of standards for records transfer.

Knowledge of microfilming procedures.

Knowledge of forms management program.

Knowledge of file management.

Knowledge of electronic record keeping standards.

Demonstrated knowledge of Excel, Access, Questys System, and PTBMIS.

Excellent written and oral communication skills.

Demonstrated exceptional organizational skills.

Ability to coordinate multiple projects.

Ability to use various office equipment.

Minimum Qualifications:

EDUCATION AND EXPERIENCE

Bachelor's degree in Records Management, Archives Management, Health Information Management, or a related field from an accredited college or university and three (3) to five (5) years' experience in Records Management, Archives Management, Health Information Management, or related field. Two (2) years of supervisory experience preferred.

LICENSURE

Valid class "D" driver's license.

Association of Records Managers & Administrators (ARMA) and Certified Records Manager (CRM) certifications preferred.

Working Environment/Physical Demands:

The work environment involves the everyday risks or discomforts associated with retrieving and re-filing records. Normal safety precautions typical of records rooms, offices, meeting and training rooms, and transporting of records are required. The work area is adequately lighted, heated, and ventilated.

This classification works primarily both within an office setting and a records room setting under generally favorable working conditions. Work is not usually sedentary and involves lifting, bending, pulling, carrying boxes that weigh on average 35lbs or more. Must have the physical capacity to bend and lift 35lbs.

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. Employee may perform other related duties as needed to meet the ongoing needs of the department.