The Tennessee Public Health Association Presents

Preparing the Best

GAME PLAN:

Tackling Behaviors for Health Improvement

Cool Springs Marriott Hotel & Conference Center
Franklin, Tennessee
August 27-29, 2008
Hello and welcome to the 65th annual meeting of the Tennessee Public Health Association. This year’s theme – Preparing the Best Game Plan: Tackling Behaviors for Health Improvement – marries the concepts of planning and preparedness with the recognition that our health behaviors often have the most significant impact on our overall health. It’s a theme that attempts to not only encapsulate an agenda that covers a broad range of topics, but also hints at the flavor of the after-hour activities that we have planned.

As we all know this has proven to be a challenging year. By the time we come together many of us will be living with the impact of buy-outs, and all of us will be affected by budget constraints of one kind or another. For nearly 80 years, in times of feast and famine, TPHA has brought public health workers together to fellowship and learn. The opportunity to hear from subject-matter experts from across the nation and to network with colleagues, old and new, allows us to rekindle our passion for the mission that unites us all.

Experts on the topics of health literacy, public health accreditation, and the latest trends in public health headline our plenary sessions. Attendees can then choose from 24 separate workshops covering a myriad of issues including addiction, diabetes management, infectious disease, colorectal cancer, wellness and many more. Speakers hail from all corners of the nation including Boston, Massachusetts; Seattle, Washington; Fort Worth, Texas; and Minneapolis, Minnesota to name just a few. I know you all will agree there is something for everyone.

I want to personally thank everyone who played a role in making this year another very successful one for TPHA. The Board guided our organization through some needed changes that will help strengthen us for years to come. The vice-presidents held wonderful grand division meetings that were both informative and entertaining. All of the committee chairs dedicated themselves to making sure their particular area was bigger and better than ever before. Section chairs provided meaningful dialogue to the Association and assured each major discipline was well represented. Doris endured my numerous phone calls and emails with her usual professionalism and grace. And finally to the hundreds of volunteers who serve on committees and planning groups, I thank you from the bottom of my heart for making my experience as TPHA President one of the most enjoyable of my career.

I wish you all a most enjoyable three days of learning and welcome you to the annual conference!

Glenn Czarnecki, MPA
2007-08 TPHA President
### 2008 TPHA Conference At-A-Glance

#### Tuesday, August 26th

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
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| 1:30 PM – 4:00 PM | Epidemiology & Biostatistics Section  
 Pre-conference Meeting | Salons 7&8     |
| 2:00 PM – 4:00 PM | TPHA Board of Directors & Committee Chairs Meeting | Franklin       |

#### Wednesday, August 27th

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<th>Time</th>
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<tr>
<td>9:00 AM – 4:00 PM</td>
<td>Conference Registration</td>
<td>Registration Area</td>
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<tr>
<td>9:00 AM – 9:45 AM</td>
<td>Student Section Meeting</td>
<td>Williamson</td>
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<tr>
<td>10:00 AM – 5:00 PM</td>
<td>Exhibits</td>
<td>Salons 7-10</td>
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<tr>
<td>10:00 AM – 5:00 PM</td>
<td>Poster Session</td>
<td>Conference Center Main Hallway</td>
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<tr>
<td>10:00 AM – 10:45 AM</td>
<td>TPHA New Member Orientation</td>
<td>Williamson</td>
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<td>10:00 AM – 11:00 AM</td>
<td>TPHA Program Committee Meeting</td>
<td>Franklin</td>
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<tr>
<td>11:30 AM – 12:00 PM</td>
<td>Opening General Session</td>
<td>Champion Ballroom</td>
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<tr>
<td>12:00 PM – 12:45 PM</td>
<td>Opening Session Luncheon</td>
<td>Champion Ballroom</td>
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<tr>
<td>12:45 PM – 1:45 PM</td>
<td>Plenary Session #1</td>
<td>Champion Ballroom</td>
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<tr>
<td>1:45 PM – 2:00 PM</td>
<td>President’s Welcome</td>
<td>Champion Ballroom</td>
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<tr>
<td>2:00 PM – 3:00 PM</td>
<td>Plenary Session #2</td>
<td>Champion Ballroom</td>
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<tr>
<td>3:00 PM – 5:00 PM</td>
<td>Silent Auction</td>
<td>Arabian &amp; Clydesdale</td>
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<tr>
<td>3:30 PM – 4:45 PM</td>
<td>Workshops #1 – #6</td>
<td>Various Locations</td>
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<tr>
<td>5:15 PM – 6:00 PM</td>
<td>Fun &amp; Fitness – First Half</td>
<td>Marriott Terrace</td>
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<tr>
<td>7:00 PM – 8:00 PM</td>
<td>Dinner</td>
<td>Champion Ballroom</td>
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<tr>
<td>8:00 PM – 8:30 PM</td>
<td>Half Time Entertainment</td>
<td>Champion Ballroom</td>
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<tr>
<td>8:30 PM – 10:00 PM</td>
<td>Fun &amp; Fitness – Second Half</td>
<td>Champion Ballroom</td>
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#### Thursday, August 28th

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<tr>
<th>Time</th>
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<th>Location</th>
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<tr>
<td>7:30 AM – 3:00 PM</td>
<td>Exhibits</td>
<td>Salons 7-10</td>
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<tr>
<td>7:30 AM – 4:00 PM</td>
<td>Conference Registration</td>
<td>Registration Area</td>
</tr>
<tr>
<td>7:30 AM – 9:00 AM</td>
<td>Continental Breakfast</td>
<td>Registration Area</td>
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<tr>
<td>7:30 AM – 9:15 AM</td>
<td>Case Management Section Meeting</td>
<td>Mustang</td>
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<tr>
<td>7:45 AM – 9:15 AM</td>
<td>Nursing Section Meeting</td>
<td>Salon 5&amp;6</td>
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<tr>
<td>8:00 AM – 9:15 AM</td>
<td>TPHA Section Meetings</td>
<td>Various Locations</td>
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<tr>
<td>8:00 AM – 3:00 PM</td>
<td>Silent Auction</td>
<td>Arabian &amp; Clydesdale</td>
</tr>
<tr>
<td>8:00 AM – 3:00 PM</td>
<td>Poster Session</td>
<td>Conference Center Main Hallway</td>
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<tr>
<td>9:45 AM – 11:00 AM</td>
<td>Workshops #7 – #12</td>
<td>Various Locations</td>
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<tr>
<td>11:30 AM – 12:15 PM</td>
<td>TPHA Awards Luncheon</td>
<td>Champion Ballroom</td>
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<tr>
<td>12:15 PM – 1:00 PM</td>
<td>Plenary Session #3 – Awards Luncheon Speaker</td>
<td>Champion Ballroom</td>
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<tr>
<td>1:00 PM – 1:45 PM</td>
<td>TPHA Awards Presentation</td>
<td>Champion Ballroom</td>
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<tr>
<td>2:00 PM – 3:15 PM</td>
<td>Workshops #13 – #18</td>
<td>Various Locations</td>
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<tr>
<td>3:45 PM – 5:00 PM</td>
<td>Workshops #19 – #24</td>
<td>Various Locations</td>
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<tr>
<td>6:00 PM – 8:00 PM</td>
<td>President’s Reception – Tailgate Party</td>
<td>Champion Ballroom</td>
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<tr>
<td>8:00 PM – 12:00 AM</td>
<td>Entertainment &amp; Dance – Syndicate of Soul</td>
<td>Champion Ballroom</td>
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#### Friday, August 29th

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<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
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<tr>
<td>7:30 AM – 8:30 AM</td>
<td>Continental Breakfast</td>
<td>Registration Area</td>
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<tr>
<td>8:00 AM – 9:00 AM</td>
<td>TPHA Business Meeting</td>
<td>Champion Ballroom</td>
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<tr>
<td>9:00 AM – 10:00 AM</td>
<td>Plenary Session #4</td>
<td>Champion Ballroom</td>
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<tr>
<td>10:20 AM – 11:20 AM</td>
<td>Plenary Session #5</td>
<td>Champion Ballroom</td>
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<tr>
<td>11:20 AM – 11:30 AM</td>
<td>Installation of 2008-09 TPHA President</td>
<td>Champion Ballroom</td>
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<tr>
<td>11:30 AM – 12:00 PM</td>
<td>Door Prizes and Adjourn</td>
<td>Champion Ballroom</td>
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*This project is partially funded under an agreement with the state of Tennessee.*
### Speaker Overview

<table>
<thead>
<tr>
<th>Date</th>
<th>Speaker</th>
<th>Topic</th>
<th>Location</th>
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<tbody>
<tr>
<td><strong>Wednesday, August 27th</strong></td>
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<tr>
<td>12:45 PM – 1:45 PM</td>
<td>Dr. Stephanie Bailey</td>
<td>Collaborative Leadership</td>
<td>Champion Ballroom</td>
</tr>
<tr>
<td>2:00 PM – 3:00 PM</td>
<td>Dr. Russell Rothman</td>
<td>Health Literacy &amp; Numeracy</td>
<td>Champion Ballroom</td>
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<tr>
<td>3:30 PM – 4:45 PM</td>
<td>Becky Gregory * *</td>
<td>Diabetes Management</td>
<td>Mustang &amp; Quarter Horse</td>
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<tr>
<td></td>
<td>Panel Discussion</td>
<td>Access to Health Care</td>
<td>Palomino</td>
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<td></td>
<td>Drew Falkenstein</td>
<td>Foodborne Illness Litigation</td>
<td>Williamson</td>
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<tr>
<td></td>
<td>Dr. Robert Mooney</td>
<td>Addiction Medicine</td>
<td>Franklin</td>
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<tr>
<td></td>
<td>Dr. Susan Gerber</td>
<td>Foodborne Outbreak Investigations</td>
<td>Salons 1-3</td>
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<tr>
<td></td>
<td>Claudia Fuentes</td>
<td>Preventing Youth Violence</td>
<td>Saddlebred &amp; Highland</td>
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<tr>
<td><strong>Thursday, August 28th</strong></td>
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<tr>
<td>9:45 AM – 11:00 AM</td>
<td>Dr. William Schaffner</td>
<td>ACIP Update</td>
<td>Meeting Room 2</td>
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<tr>
<td></td>
<td>Panel Discussion</td>
<td>School/Public Health Partnerships</td>
<td>Salons 1&amp;2</td>
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<tr>
<td></td>
<td>Dr. David Basset</td>
<td>Active Living</td>
<td>Salons 3&amp;4</td>
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<tr>
<td></td>
<td>Dr. Beverly Largent</td>
<td>Oral Health/General Health</td>
<td>Williamson</td>
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<td></td>
<td>Patti Waller</td>
<td>Public Health Record Requests</td>
<td>Franklin</td>
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<tr>
<td></td>
<td>Dr. Steve Byrum</td>
<td>Stress Management</td>
<td>Meeting Room 1</td>
</tr>
<tr>
<td>12:15 PM – 1:00 PM</td>
<td>Commissioner Susan Cooper</td>
<td>Public Health Update</td>
<td>Champion Ballroom</td>
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<tr>
<td>2:00 PM – 3:15 PM</td>
<td>Officer Bill Cain</td>
<td>Public Safety</td>
<td>Williamson</td>
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<tr>
<td></td>
<td>Dr. John New</td>
<td>Zoonoses in Tennessee</td>
<td>Saddlebred &amp; Highland</td>
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<td></td>
<td>Dr. Paul Schroy</td>
<td>Colorectal Cancer Screening</td>
<td>Franklin</td>
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<tr>
<td></td>
<td>Yvette Jones</td>
<td>Teenage Health Issues</td>
<td>Morgan</td>
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<tr>
<td></td>
<td>Dr. Steve Byrum</td>
<td>Future of Healthcare</td>
<td>Quarter Horse &amp; Palomino</td>
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<td></td>
<td>Dr. Susan Speraw</td>
<td>Personal Preparedness</td>
<td>Mustang</td>
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<tr>
<td>3:45 PM – 5:00 PM</td>
<td>Dr. Mike DeVoe</td>
<td>Infant Mortality</td>
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<td>Panel Discussion</td>
<td>Tobacco-free Health Campuses</td>
<td>Franklin</td>
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<td>Jenny Moshak</td>
<td>Fitness</td>
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<td></td>
<td>Vicki Brinsko</td>
<td>MRSA</td>
<td>Mustang</td>
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<td></td>
<td>Viston Taylor</td>
<td>Aging Workforce</td>
<td>Quarter Horse &amp; Palomino</td>
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<td></td>
<td>Ray Cronise</td>
<td>Suction Entrapment Hazards</td>
<td>Appaloosa</td>
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<tr>
<td>9:00 AM – 10:00 AM</td>
<td>Dr. Edward Baker</td>
<td>Public Health Accreditation</td>
<td>Champion Ballroom</td>
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<tr>
<td>10:20 AM – 11:20 AM</td>
<td>Major General Dick Burleson</td>
<td>Leadership</td>
<td>Champion Ballroom</td>
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Conference Evaluation Forms

Conference evaluation forms are included in each registration packet. Each attendee is asked to complete an evaluation at the end of all plenary sessions and workshops attended. Completed evaluation forms will be collected on Friday during the 10:00 AM break. Please turn in your name badge with your completed evaluation form to qualify for door prizes at the end of the conference. Attendees leaving the conference prior to this time may leave completed forms at the continuing education table or the information booth in the registration area. Your feedback, comments, and suggestions play a very important part in the planning and funding of future TPHA-sponsored conferences and events!

Continuing Education

Continuing education credit has been approved for the following disciplines:

- This conference is approved for 9.75 continuing nursing education hours. This continuing nursing education activity was approved by the Tennessee Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

- 10.0 category 1 contact hours for certified health education specialists; approved by the National Commission of Health Education Credentialing, Inc.

- 12.5 hours for dentists, dental hygienists, and dental assistants; approved by the Tennessee Department of Health, which is approved as a provider of continuing education in dentistry by the Tennessee Board of Dentistry.

- 10.0 contact hours for environmental health specialists; approved by the National Environmental Health Association.

- 10.0 hours for dietitians; approved by the Commission on Dietetic Registration of the American Dietetic Association.

- 0.7 continuing education units for paramedics and emergency medical technicians; approved by Tennessee Board of Emergency Medical Services.

- 6.0 hours for pharmacists; approved by the Tennessee Board of Pharmacy.

- 9.0 CME hours for physicians; approved by the American Academy of Family Physicians.

- 10.0 hours for social workers; approved by the National Association of Social Workers.

Please check at the continuing education table for CE-related forms and evaluations. The CE table will be staffed throughout the conference by CE committee members who will answer questions and provide additional information.

Name Badges & Tickets

Conference name badges must be worn at all times to enter the educational sessions, meetings, special events, and the exhibit hall. It serves as your proof of registration, and it’s a great way to meet other people. Special event tickets must be presented for the Opening Session Luncheon, Awards Luncheon, Wednesday and Thursday evening receptions, and entertainment on Wednesday and Thursday nights.

Information and Message Center

An information booth will be maintained in the registration area throughout the conference. Messages will be posted at this location.

Cell Phones and Pagers

As a courtesy to our speakers and conference attendees, please silence your cell phones and pagers while attending all conference sessions and events.
Stephanie B. Coursey Bailey, MD, MS

Dr. Stephanie B. Coursey Bailey was known for her ties to CDC long before becoming chief of the Office of Public Health Practice in October 2006. Since 1999, she has worked with CDC on projects, including co-chairing the National Public Health Workforce Taskforce, serving as a senior consultant for local practice to the Public Health Practice Program Office, and serving on the National Advisory Committee for the Elimination of Tuberculosis.

In 1981, Dr. Bailey joined the Nashville-Davidson County Metropolitan Health Department as a public health medical doctor. From this position, she was promoted in 1988 to medical director and director of the Bureau of Health Services and in 1995, was appointed the director of health for the Department. During her early career, she served as a public health medical doctor and as a physician in the National Health Services Corps, providing health care in rural Dickson County, Tennessee.

Dr. Bailey received her MD in 1976 from Meharry Medical College and performed her residency in internal medicine at Grady Memorial/Emory University in Atlanta, Georgia. She also earned an MS in health services administration in 1993 from the College of St. Francis in Joliet, Illinois. She received her BA in psychology in 1972 from Clark University in Worcester, Massachusetts.

Dr. Bailey is author or co-author of numerous publications and is a long-time member of the American Public Health Association, the American Medical Association, and the National Association of County and City Health Officials. She is a past president of NACCHO and has served and/or currently serves on several committees at CDC, including the National Advisory Committee to the Director, National Rural Health Committee, the Advisory Council for the Elimination of Tuberculosis, the National Interagency Committee on Smoking and Health, National Forum for Heart Disease and Stroke, Public Health Law Conference planning and faculty, Heart Disease and Stroke Prevention Policy Expert Panel, Taskforce on Public Health Workforce Development, and the National Exploring Accreditation Steering Committee. Dr. Bailey is also a member of numerous state and local associations, committees, as well as other organizations including the Public Health Leadership Society and the Public Health Foundation.

Dr. Bailey’s academic affiliations are many, including adjunct faculty member at Tennessee State University; Florida A&M, School of Public Health; Meharry Medical College; and the Public Health Institute/Leadership Program at the University of North Carolina at Chapel Hill. She has received numerous public health service awards, including the Nashville Urban Journal’s Person of the Year Award, APHA's Roemer Award, the Association of State and Territorial Health Officer's Excellence in Public Health for Local Practice, and the AMA's Dr. Nathan B. Davis Award for Outstanding Government Service in the category of career public servant at the local level.

Edward L. Baker, MD, MPH

Dr. Edward Baker currently serves as a professor and director of the North Carolina Institute for Public Health, the outreach and service unit of the University of the North Carolina School of Public Health. The North Carolina Institute for Public Health has worked closely with Tennessee public health professionals to enhance public health capacity through the North Carolina Center for Public Health Preparedness, the Management Academy for Public Health, and the Southeast Public Health Leadership Institute.

Previously, Dr. Baker served as an assistant surgeon general in the U.S. Public Health Service and director of CDC’s Public Health Practice Program Office. In that role, he led major national initiatives to strengthen the public health infrastructure including creation of Public Health Leadership Institutes, the Health Alert Network, and the National Public Health Performance Standards Program. More recently, Dr. Baker was actively involved in the development of the North Carolina Local Health Department Accreditation Program and is actively involved nationally in policy development and consultation related to public health department accreditation and quality improvement working closely with ASTHO and CDC.
Plenary Session Speakers

Dr. Baker is a native Tennessean, born in Chattanooga, and is a graduate of Vanderbilt University, Baylor College of Medicine, and Harvard University. He has received numerous awards and published over 100 papers in scientific journals. He and his wife Pam have three outstanding children, Justin, Ryan, and Lindsay, and a second home in South Pittsburg, Tennessee.

Major General Dick Burleson

Richard B. (Dick) Burleson is vice-president of one of the largest engineering firms in the United States. He is a native of Alabama and was inducted into the Alabama High School Sports Hall of Fame. General Burleson graduated from Georgia Tech with a civil engineering degree. In addition to his engineering career, he also rose to the Army Reserve's highest rank, that of Major General. He graduated from the Army War College and was Commanding General of the largest Army Reserve Command in the World. His command covered eight states, 40,000 troops, and included over 5,000 soldiers placed on active duty during Desert Storm. General Colin Powell personally decorated General Burleson’s units.

One of his highest personal honors came when General Burleson received the Spirit of America's Audie Murphy Patriotism Award. He was only the 23rd American to receive this award. In addition to his engineering and military careers, Dick Burleson has been a football official in the Southeastern Conference for 25 years and worked a full schedule of top SEC games every year as head referee. He has served as chief referee and president of the SEC and has officiated 15 major bowl games and the SEC championship game. His last game on the field was as the head referee for the National Championship Rose Bowl game. He is now an SEC staff advisor on officiating and evaluates officials’ performance each Saturday from the press box and assists with instant replay.

General Burleson is a member of the National Speakers Association and is a highly requested speaker in the Southeast. His just-released book *You Better Be Right* has reached the #1 Best Sellers list at Barnes & Noble Bookstores.

Commissioner Susan R. Cooper, MSN, RN

Susan R. Cooper, MSN, RN, made Tennessee history on January 20, 2007, when she became the first nurse to serve as commissioner of the Tennessee Department of Health. Commissioner Cooper is a master’s prepared registered nurse and earned both her Bachelor and Master of Science nursing degrees from Vanderbilt University School of Nursing. Her priorities are to protect, promote, and improve the health of all Tennesseans. She considers this the most important work she will face in her career.

Commissioner Cooper first came to the state level in 2005 as a special policy and health advisor to the Governor. She was charged with developing Tennessee’s Health Care Safety Net program for citizens facing disenrollment from TennCare. Commissioner Cooper later assumed leadership of Project Diabetes, a program the Governor created to address the threat of Type 2 diabetes facing young people in Tennessee. In addition, she helped facilitate the creation of the Governor’s GetFitTN initiative. The statewide public awareness program is aimed at addressing the rising epidemic of Type 2 diabetes and risk factors, like obesity, that lead to diabetes. The program involves educating adults and children how they can make modest lifestyle changes to delay or prevent the onset of Type 2 diabetes.

Before joining state government, Commissioner Cooper was a faculty member and assistant dean of practice at Vanderbilt University’s School of Nursing, overseeing the nurse-managed clinics and operations led by the School of Nursing. She also served as co-director of the Health Systems Management program at Vanderbilt University School of Nursing. Commissioner Cooper has an extensive background in health policy, health care regulation, and
Plenary Session Speakers

evidence-based practice. She helped create the Center for Advanced Practice Nursing and Allied Health at Vanderbilt University Medical Center, covering the regulatory needs and credentialing for the hundreds of non-physician providers at Vanderbilt.

Commissioner Cooper was born and raised in West Tennessee. Her father was an ophthalmologist, and her mother was a nurse. One of the Commissioner’s first jobs as a teenager was in her father’s office in West Tennessee, checking in patients and later performing routine vision checks. She currently resides in Franklin and enjoys spending time with her three grown children and three grandchildren.

Russell L. Rothman, MD, MPP

Dr. Russell Rothman received his bachelor's degree in zoology and political science from Duke University in 1992. He received his MD from Duke in 1996. During this time he also completed a master’s degree in public policy at the Sanford Institute of Public Policy at Duke. After this, Dr. Rothman remained at Duke where he completed a combined internal medicine and pediatrics residency in 2000. From 2000 to 2002, he served as a Robert Wood Johnson clinical scholar at the University of North Carolina in Chapel Hill.

In 2002, he joined the faculty at Vanderbilt as an assistant professor in internal medicine and pediatrics. Dr. Rothman’s current research focuses on improving care for adult and pediatric patients with diabetes and other chronic diseases. He has been funded by the National Institutes of Health, American Diabetes Association, and the Pfizer Clear Health Communication Initiative to examine the role of literacy and numeracy in patients with diabetes. He has also served as a reviewer on the NIH Special Emphasis Panel on Health Literacy and the Pfizer Health Literacy Fellowship Awards.

Dr. Rothman has been a Pfizer visiting professor in health literacy at the University of Pittsburgh. He currently serves as the director of the Vanderbilt Program on Effective Health Communication and is the deputy director of the Prevention and Control Division of the Vanderbilt Diabetes Research and Training Center.
Tackling Behaviors for Health Improvement

Tuesday, August 26, 2008

1:30 PM – 4:00 PM  Epidemiology & Biostatistics Section Pre-conference Meeting (Salons 7&8)
2:00 PM – 4:00 PM  TPHA Board of Directors and Committee Chairs Meeting (Franklin)

Wednesday, August 27, 2008

9:00 AM – 4:00 PM  Conference Registration (Registration Area)
9:00 AM – 9:45 AM  Student Section Meeting (Williamson)
                   (Proposed TPHA membership section approved by the Board of Directors)
10:00 AM – 5:00 PM  Exhibits (Salons 7-10)
10:00 AM – 5:00 PM  Poster Session (Conference Center Main Hallway)
10:00 AM – 10:45 AM TPHA New Member Orientation (Williamson)
10:00 AM – 11:00 AM TPHA Program Committee Meeting (Franklin)
11:30 AM – 12:00 PM Opening General Session (Champion Ballroom)
                   Presiding: Glenn Czarnecki, TPHA President
                   Color Guard: Tennessee Army National Guard
                   National Anthem: Robert Goff
                   Opening Remarks: The Honorable Rogers Anderson
                   Mayor, Williamson County
                   Suzie Hamm
                   President, Southern Health Association

12:00 PM – 12:45 PM  Opening Session Luncheon (Champion Ballroom) – TICKET REQUIRED
                   Invocation: Rev. John Williams, Minister of Visitation
                   Franklin First United Methodist Church

12:45 PM – 1:45 PM  Plenary Session #1 (Champion Ballroom)
                   Introduction: Glenn Czarnecki, TPHA President

                   The Tipping Point to a New Brand of Leadership
                   Stephanie B. Coursey Bailey, MD, MS, Chief, Office of Public Health Practice, Centers for Disease
                   Control and Prevention, Atlanta, Georgia

                   Public health is at the tipping point to lead the country and the global community toward a health
                   system that truly values health protection and health equity, that works to prevent diseases and
                   injuries and disability before they occur, and is prepared to contend with whatever the next health
                   threat may be. A much more collaborative leadership, sometimes referred to as meta-leadership –
meaning thinking vertically but acting horizontally – is a critical element to our being able to connect with leaders and agencies that are not traditional partners in public health, but are essential in moving health upstream to prevention reducing the burden on health care. In this new age, where we must learn to do more, better, and faster, it is imperative that we learn how to facilitate partnerships and collaborations where the whole is greater and more effective than the sum of the individual parts. Public health is certainly at the helm on leading change.

1:45 PM – 2:00 PM
President’s Welcome
Glenn Czarnecki, TPHA President

2:00 PM – 3:00 PM
Plenary Session #2 (Champion Ballroom)
Introduction: Cathy R. Taylor, DrPH, MSN, RN
Assistant Commissioner, Tennessee Department of Health

Addressing Health Literacy and Numeracy to Improve Patient Care
Russell L. Rothman, MD, MPP, Director, Program on Effective Health Communication, and Deputy Director, Diabetes Research & Training Center, Vanderbilt University Medical Center, Nashville, Tennessee

Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. Numeracy is the ability to understand and use numbers and math skills in daily life. Outcomes associated with health literacy and numeracy include: general health status, hospitalizations, emergency department use, diabetes control, immunizations, chronic disease management, and medication adherence. People with adequate general literacy can still have low health literacy. Patients with low or marginal health literacy struggle to understand medical terminology, self-care instructions, and informed consent documents. Health communication links the domains of communication and health and is recognized as a necessary element of efforts to improve personal and public health. Effective health communication helps raise awareness of health risks and solutions, provides motivation and skills needed to reduce these risks, can increase demand for appropriate health services, and affects or reinforces attitudes.

3:00 PM – 3:30 PM
Break (with refreshments)
Poster session presenters will be available at their tables for Q&A and discussion during this 30-minute break.

3:00 PM – 5:00 PM
Silent Auction (Arabian & Clydesdale)

3:30 PM – 4:45 PM
Concurrent Workshops

Workshop #1
Location: Mustang & Quarter Horse
Moderator: Rubelyn Mays

Penalty-Free Diabetes Management: Keeping Up with the Latest
Becky Gregory, MS, RD, LDN, CDE, Nutrition Coordinator, Vanderbilt Diabetes Research & Training Center, Vanderbilt University Medical Center, Nashville, Tennessee

During this workshop common ‘myths of diabetes’ and diabetes care will be discussed and clarified. The presenter will examine research that debunks commonly held myths and will discuss how the research findings translate into quality patient care.
Workshop #2  
Location: Palomino  
Moderator: Howard Roddy  

Improving Access to Health Care for the Uninsured  
Rae Bond, Executive Director, Medical Foundation of Chattanooga and Director of Project Access; Nancy P. Franks, BS, President, Volunteers in Medicine – Chattanooga; and Fonda M. Harris, BS, Director of Health Services, Metro Public Health Department and Executive Director, Bridges to Care, Nashville, Tennessee  

Across the state, low-income, uninsured residents are receiving health care from a variety of sources. Partnerships that bring together doctors, hospitals, medical schools, community health clinics, health departments, and other resources are successfully improving the overall health and well-being of this population. This panel discussion represents two such clinics in the Chattanooga-Hamilton County area and a third in the Nashville-Davidson County area. Panelists will address viability with limited resources and other particular challenges they face along with the numerous successes that have resulted.  

Workshop #3  
Location: Williamson  
Moderator: Dr. Tim Jones  

Intersection between Foodborne Illness Litigation and Public Health  
Drew Falkenstein, JD, Attorney, Marler Clark, LLP, PS, Seattle, Washington  

This session will focus on federal and state laws that apply to foodborne illness litigation, including a discussion of strict liability, negligence, and punitive damages. The session will include information on agency liability in foodborne illness, both division and employee risks. Similarities and disparities between public health and litigators will be defined relating to food safety training and education, industry roles and responsibilities, and preventing foodborne illness.  

Workshop #4  
Location: Franklin  
Moderator: Becky Brumley  

Recognition of Addictive Disorders in Ambulatory Care  
Robert W. Mooney, MD, Medical Director, Willingway Hospital, Statesboro, Georgia  

Addiction is one of the most costly public health problems in the United States. It is a progressive syndrome, which means that it increases in severity over time unless it is treated. Substance abuse is characterized by frequent relapse or return to the abused substance. Substance abusers often make repeated attempts to quit before they are successful. The presenter has devoted his life to addiction medicine and the treatment of addicts and their family members affected by chemical dependence. Dr. Mooney will describe three symptoms of addictive behaviors and two tools for diagnosing addiction. Consequences of untreated addiction in the general population will also be discussed.  

Workshop #5  
Location: Salons 1-3  
Moderator: Dr. Bill Paul  

It’s a Small World After All: Lessons Learned from Foodborne Disease Outbreak Investigations in Chicago
Tackling Behaviors for Health Improvement

Susan I. Gerber, MD, Chief Medical Officer, Chicago Department of Public Health, Chicago, Illinois

The initial focus of this workshop will be on the important steps necessary to investigate a foodborne disease outbreak. After the initial overview, examples of outbreaks investigated by the Chicago Department of Public Health will be discussed. The overarching theme will be national and international implications to local health department foodborne disease outbreak investigations.

Workshop #6
Location: Saddlebred & Highland
Moderator: Charles Turner

Blueprint for Action: Preventing Youth Violence in Minneapolis
Claudia Fuentes, MA, Policy Aide on Youth & Learning, Mayor’s Office, Minneapolis, Minnesota

In 2007, city and community leaders decided to view and attack the problem of youth violence in Minneapolis from a public health perspective. The blueprint targets individuals ages 8 to 17 years who face factors that place them at higher risk to commit a crime or be a victim. This session will be a presentation of the blueprint as a common vision that seeks to bring together disparate efforts and better coordinate fragmented systems that are leaving too many youth falling through the cracks.

5:15 PM – 6:00 PM
Fun & Fitness – 1st half (Marriott Terrace)

7:00 PM – 8:00 PM
Dinner (Champion Ballroom) – TICKET REQUIRED

8:00 PM – 8:30 PM
Half-time Entertainment (Champion Ballroom) – TICKET REQUIRED

8:30 PM – 10:00 PM
Fun & Fitness – 2nd half (Champion Ballroom)

Thursday, August 28, 2008

7:30 AM – 3:00 PM
Exhibits (Salons 7-10)

7:30 AM – 4:00 PM
Conference Registration (Registration Area)

7:30 AM – 9:00 AM
Continental Breakfast (Registration Area)

7:30 AM – 9:15 AM
Case Management Section Meeting (Mustang)
Speaker: Nichelle Foster, MMFT
Topic: Working with Drug-Addicted Moms and Their Drug-Exposed Children

7:45 AM – 9:15 AM
Nursing Section Meeting (Salons 5&6)
Speakers: Commissioner Susan Cooper, Deborah Hardin, RN, and Alisa Haushalter, RN, MSN
Topic: The History of Public Health Nursing

8:00 AM – 9:15 AM
TPHA Section Meetings
Administrative, Management, & Planning Section (Highland)
Speaker: Bridget McCabe, MD
Topic: Public Health Accreditation
Communicable Disease Section (Appaloosa)

Dental Section (Franklin)
Speaker: Vaughn Blank; 3M/ESPE
Topic: Preventive Dental Products Update

Emergency Preparedness Section (Saddlebred)

Environmental Section (Palomino)

Epidemiology & Biostatistics Section (Morgan)
Speaker: Steve Dearwent, PhD; Agency for Toxic Substances and Disease Registry
Topic: Use of GIS in Public Health & Case Studies in Epidemiology

Health Promotion/Health Education Section (Salons 1&2)
Speaker: Paige Turner, MS
Topic: Employee Wellness

Management Support Section (Williamson)

Nutrition Section (Salons 3&4)
Speaker: Beth Allen, MEd, RD, LDN
Topic: Promoting Partnerships within the Health Department

Physicians Section (Quarter Horse)
Speaker: James C. Gray, MD
Topic: Preconception Health and Health Care

8:00 AM – 3:00 PM Silent Auction (Arabian & Clydesdale)

8:00 AM – 3:00 PM Poster Session (Conference Center Main Hallway)

9:15 AM – 9:45 AM Break

Poster session presenters will be available at their tables for Q&A and discussion during this
30-minute break.

9:45 AM – 11:00 AM Concurrent Workshops

Workshop #7
Location: Meeting Room 2
Moderator: Becky Barnes

Update from the Advisory Committee on Immunization Practices (ACIP)
William Schaffner, MD, Chairman, Department of Preventive Medicine, Vanderbilt University
School of Medicine, Nashville, Tennessee

The Advisory Committee on Immunization Practices (ACIP) consists of 15 experts in fields
associated with immunization who have been selected by the Secretary of the U.S. Department of
Health and Human Services to provide advice and guidance to the Secretary, the Assistant
Secretary for Health, and the Centers for Disease Control and Prevention (CDC) on the control of
vaccine-preventable diseases. The Committee develops written recommendations for the routine
administration of vaccines to children and adults in the civilian population. Recommendations
include age for vaccine administration, number of doses and dosing interval, and precautions and contraindications. The overall goal of the ACIP is to provide advice that will lead to a reduction in the incidence of vaccine preventable diseases in the United States and an increase in the safe use of vaccines and related biological products. This session will include a presentation of the recent ACIP recommendations and deliberations on the expansion of influenza vaccine recommendations to include all children 5 through 18 years of age and the progress in implementation of HPV vaccine.

Workshop #8
Location: Salons 1&2
Moderator: Sara Smith

The Power of Partnerships: Coordinated School Health and Public Health Collaborations
Kathy Brown, PhD, Knox County Health Department; Shunji Brown-Woods, MPH, Coordinator of School Health, Shelby County School System; Russell Cliche, MS, Coordinator of School Health, Hamilton County School System; Jan Freschette, BS, Community Health Council Coordinator, Sequatchie County and Bledsoe County; Elaine Jackson, MEd, Coordinator of School Health, Stewart County School System; Cheryl Shouse, BS, Supervisor of TENNderCare Outreach, Hamilton County Health Department; and Susan Warden, BSN, RN, Coordinator of School Health, Bledsoe County School System

A panel discussion will be held to describe the benefits of expanding school health goals through partnership with local health departments. Panelists represent both metropolitan and rural communities. An overview of each partnership and how it has made a difference in students’ lives will be shared. Participants will gain ideas and strategies of successful partnerships/initiatives that could be implemented in their own counties.

Workshop #9
Location: Salons 3&4
Moderator: Dr. Paul Erwin

Active Living: Changing Communities for the Better
David R. Bassett, Jr., PhD, Professor, Tennessee Obesity Research Center, University of Tennessee, Knoxville, Tennessee

Dr. Bassett has primary research interests in the measurement of physical activity and energy expenditure in humans, the physiological effects of physical training, and the relationship of the built environment to walking and bicycling levels. Results of his research will be presented in this workshop including time trends in obesity prevalence in the U.S., how the built environment influences physical activity, and the relationship between active commuting and obesity rates in countries on three continents.

Workshop #10
Location: Williamson
Moderator: Dr. Suzanne Hayes

Teeth First – The Relationship of Oral Health to General Health
Beverly Largent, DMD, President, American Academy of Pediatric Dentistry, Paducah, Kentucky

Early childhood caries, also known as baby bottle tooth decay, is a syndrome characterized by severe decay in the teeth of infants or young children. Its prevalence is epidemic, and the U.S. rate is highest in minority and rural populations. A large body of scientific evidence indicates that dental caries is an infectious and transmissible disease; therefore mothers with untreated dental
Tackling Behaviors for Health Improvement

disease present a very high risk to their children. In this session, Dr. Largent will present information on caries risk assessment, predictors of decay, and dental caries management throughout life. Participants will learn the indicators for an increased risk of dental caries infection, methods available for the primary prevention of dental caries initiation throughout life, and treatments available for detecting and stopping the progression of early dental caries.

Workshop #11
Location: Franklin
Moderator: Frances Reece

Response to Public Health Records Requests
Patti Waller, MS, Epidemiologist, Marler Clark, LLP, PS, Seattle, Washington

The public depends on health departments and food regulators for protection from foodborne illness. Such protection relies on rapid detection of outbreaks, determination of the cause of the outbreak, and incorporation of control measures to protect the public. The careful and diligent investigation of foodborne and waterborne outbreaks is essential for disease control and prevention. In foodborne disease outbreaks, numerous agencies at the federal, state, and local levels have roles and responsibilities in protecting the public’s health. These agencies also have responsibilities to respond to resulting public health records requests. Participants in this session will learn about laws that allow release of information and tips to handle requests and responses successfully. Examples of agency responses to public health record requests will be presented.

Workshop #12
Location: Meeting Room 1
Moderator: Ami Mitchell

Living Fast Forward
Steve Byrum, PhD, CEO and Primary Consultant, Byrum Consulting Group, Chattanooga, Tennessee

This is not just another session on reducing stress in the workplace. This session on stress will intentionally move beyond ‘canned’ approaches to stress management and outline clear metric-based strategies that have proven successful in modern-day health care settings. Developed at Memorial Hermann Healthcare System (MHHS) in Houston, Texas in 2005, this presentation was honed through numerous focus groups as well as the healthcare system’s administration before being utilized. It has since become a quarterly presentation throughout the MHHS system. Participants are given a chance to experience a concrete example of what a new approach to stress presentation can look like. Strategies for a more strategic approach which can be institutionalized will be sketched out.

11:00 AM – 11:30 AM
Break

11:30 AM – 12:15 PM
TPHA Awards Luncheon (Champion Ballroom) – TICKET REQUIRED

Invocation: Rev. Vona Wilson, Associate Pastor
Franklin First United Methodist Church

12:15 PM – 1:00 PM
Plenary Session #3 – Awards Luncheon Speaker (Champion Ballroom)
Introduction: Glenn Czarnecki, TPHA President

A View from the Commissioner’s Chair
Commissioner Susan R. Cooper, MSN, RN
Tennessee Department of Health, Nashville, Tennessee
Commissioner Cooper will share her perspective on the ‘State of Public Health’ in Tennessee. Her talk will focus on the challenges and opportunities that public health practitioners will face in the coming years as we strive to promote, protect, and improve the health of people living in or visiting Tennessee. Commissioner Cooper will discuss Governor Bredesen’s health care priorities and new legislation that will impact the health of Tennesseans. Changes in organizational structure, personnel, and new initiatives at the Department will also be discussed.

1:00 PM – 1:45 PM

**Awards Presentation** *(Champion Ballroom)*

Presiding: Glenn Czarnecki, TPHA President

Presenter: Helen Brakebill, TPHA Awards Committee Chair

**Partners and Leadership (PAL) Award** – Presented to a non-public health professional, group, or organization that has made a significant contribution on behalf of public health.

**Public Health Group Award** – Presented to a group, unit, or department that has made an outstanding contribution to public health.

**Public Health Worker of the Year** – Presented to a person in the field of public health who during the past three years has provided outstanding service to public health.

**Alex B. Shipley, MD, Award** – Presented to an employee of a regional or local health department who has made outstanding contributions in the field of public health over a period of several years.

**R. H. Hutcheson, Sr., MD, Career Award** – Presented to a person in the field of public health who has made outstanding contributions to public health throughout his or her career.

**Dr. Durward R. Collier Scholarships** – Presented to public health workers who desire to advance their knowledge and competence in the field of public health.

**Distinguished Service Award** – Presented to a Tennessee Public Health Association member who has made outstanding contributions to the Association over a period of several years.

1:45 PM – 2:00 PM

Break

2:00 PM – 3:15 PM

**Concurrent Workshops**

**Workshop #13**
Location: Williamson
Moderator: Erica Wilson

**Street Smart**
Officer Bill Cain, Instructor, Public Safety Coalition, Atlanta, Georgia

The information provided to seminar attendees can help reduce an individual’s chance of becoming a victim by as much as 70 percent. This program will provide attendees with the knowledge of the best tactics to use while working and traveling in the community. The instructor will teach you the signs and situations to be aware of, how the criminal reasons, what the criminal looks for in a victim, and how a criminal picks his or her target.
Selected Zoonoses of Tennessee: Prevention and Control
John C. New, Jr., DVM, MPH, DACVPM, Professor and Head, Department of Comparative Medicine, College of Veterinary Medicine, University of Tennessee, Knoxville, Tennessee

Any disease and/or infection which is naturally transmissible from vertebrate animals to man is classified as a zoonosis according to the PAHO publication ‘Zoonoses and Communicable Diseases Common to Man and Animals.’ This workshop will serve as an introduction to the concept of zoonoses and will include a discussion of the epidemiology and risk factors of selected zoonoses. Current trends in zoonosis will be discussed along with preventive and control options and measures. Information on the following zoonoses will be presented: animal bites, rabies, Bartonella (cat scratch disease), dermatophytes (ringworm), and some internal parasites.

Colorectal Cancer Screening 2008: Opportunities for Intervention
Paul C. Schroy III, MD, MPH, Professor of Medicine, Boston University School of Medicine; Professor of Epidemiology, Boston University School of Public Health; and Director of Clinical Research, Section of Gastroenterology, Boston Medical Center, Boston, Massachusetts

Colorectal cancer affects both men and women of all racial and ethnic groups and is most often found in people aged 50 years or older. For men colorectal cancer is the third most common cancer after prostate and lung cancers. For women colorectal cancer is the third most common cancer after breast and lung cancers. Participants in this session will learn the background of the rationale for screenings as well as the new colorectal cancer screening recommendations for average-risk patients. Barriers to colorectal cancer screenings and strategies to address these barriers will be discussed from the patient, provider, and system perspectives.

Teen Videofest: An Innovative Method to Address Teen Health Issues
Yvette M. Jones, MPA, Health Education Coordinator, Tarrant County Public Health, Fort Worth, Texas

Teenagers today face a multitude of challenges and make important social and health decisions that have serious consequences for their lives, their future health, their families, and the health of the community. Teen Videofest challenges teens to speak out on aspects of teen health that directly affect them and their peers by creating videos with effective health promotion messages. Participants are provided general health categories from which to draw their topics, are encouraged to work in teams, are given high-quality VHS tapes, and must do most of the production work with no direct adult help. They also receive editing assistance from companies and organizations willing to enhance the Teen Videofest learning experience. If time permits, there will be viewing of videos.
Workshop #17
Location: Quarter Horse & Palomino
Moderator: Ami Mitchell

No Crystal Ball, But Maybe a Little Sense: Assessing Critical Elements in the Future of Healthcare
Steve Byrum, PhD, CEO and Primary Consultant, Byrum Consulting Group, Chattanooga, Tennessee

Decision makers need to always keep their eyes on the horizon for new opportunities and challenges. The field of healthcare and especially public health is ever changing. Relying on an ongoing client base of over 60 healthcare organizations across the United States, this session will focus on new trends, both from the point of view of what is not working well and what is working well. Added attention will be given to prevailing fears and frustrations and new horizons of interest and success.

Workshop #18
Location: Mustang
Moderator: Karen Lynn

Personal Preparedness for Public Health Providers
Susan Speraw, PhD, RN, Associate Professor, College of Nursing, University of Tennessee, Knoxville, Tennessee

Definitions and key research on preparedness among health professionals will be presented in this session including things that impede response to disaster, things that support response, and lessons learned from Hurricane Katrina. There will also be discussion of resources available on the web and the various forms that personal preparedness can take, such as: routine preparedness for self and family, planning for special health care needs, and working with employers collaboratively. There will be group discussions of cases and scenarios of personal barriers and development of strategies to address these barriers.

3:00 PM
3:15 PM – 3:45 PM Break (with refreshments)
3:45 PM – 5:00 PM Concurrent Workshops

Workshop #19
Location: Williamson
Moderator: Beth Rader

Infant Mortality in Tennessee: Current Status of Improvement Projects
Michael DeVoe, MD, Director of Neonatology and Professor of Pediatrics, East Tennessee State University, Johnson City, Tennessee

This workshop will review definition of terms for infant outcomes reporting, review the known common causes of infant mortality in Tennessee and the U.S., and review multi-year and regional trends in infant mortality. Tennessee efforts to improve outcomes through regional grants, efforts of the Governor’s Office, and the Perinatal Advisory Committee will be explored.
Workshop #20
Location: Franklin
Moderator: Howard Roddy

Achieving Tobacco-Free Health Campuses
Jay Collum, BA, Tobacco Education Coordinator, Chattanooga-Hamilton County Health Department; Gregory M. Duckett, JD, Senior Vice President/Corporate Counsel, Baptist Memorial Health Care Corporation; Liz Jenkins, MA, EdS, Assistant to Vice President for Healthy Communities and Advocacy, Memorial Health Care System in Chattanooga; and Donna Roddy, MSN, RN, Regional Nurse Liaison, BlueCross BlueShield of Tennessee

Participants attending this workshop will gain greater insight into the process for achieving tobacco-free health campuses, including best practices and challenges. The diverse panel has representation from a county health department, major insurance company, and hospitals. Each panelist will discuss the challenges and achievements of efforts within his or her respective system to implement a tobacco-free campus.

Workshop #21
Location: Meeting Room 1
Moderator: Melissa Davis

How to Fit Fitness Into Your Schedule
Jenny Moshak, MS, Assistant Athletic Director for Sports Medicine, University of Tennessee, Knoxville, Tennessee

Jenny Moshak is in her 19th year with the Lady Vols. She oversees all sports medicine, athletic training, rehabilitation, strength and conditioning, and continues to work directly with basketball. Moshak’s vision led to the creation of UT’s unique program, Team ENHANCE, which creates a healthy culture for the Lady Vol student-athletes so they can achieve personal bests in their sports and in their lives. Under her direction, the UT Women’s Athletics Department established Team ENHANCE to assist student-athletes in the nutritional, mental, and emotional aspects of performance with the guidance of UT professional staff, coaches, and a comprehensive group of medical experts from the private sector. She brings this same three-pronged approach to her presentation. Attendees will learn more about how she promotes moderation in all aspects of life as a way of bringing wellness and good living to the lives of adults and children alike.

Workshop #22
Location: Mustang
Moderator: Dr. Calita Richards

MRSA 411
Vicki Brinsko, RN, Infection Control Coordinator, Vanderbilt University Medical Center, Nashville, Tennessee

MRSA (Methicillin-resistant Staphylococcus aureus) has been featured in the news and on television programs a great deal recently. This type of bacteria causes infections that are resistant to treatment with usual antibiotics. MRSA is becoming more prevalent in healthcare settings and occurs most frequently among patients who undergo invasive medical procedures or who have weakened immune systems and are being treated in hospitals and healthcare facilities such as nursing homes and dialysis centers. Infection control guidelines produced by CDC and the Healthcare Infection Control and Prevention Advisory Committee (HICPAC) are central to the prevention and control of healthcare infections and ultimately, MRSA in healthcare settings. This session will review current MRSA legislation across the U.S., including Tennessee. In addition, participants will receive up-to-date information on MRSA infections and prevention strategies.
**Workshop #23**  
Location: Quarter Horse & Palomino  
Moderator: Glenn Czarnecki

**Aging in the Workforce**  
Viston Taylor, MA, MPH, CEO, Alexian Brothers Community Services, Signal Mountain, Tennessee

*The 2008 Institute of Medicine’s study ‘The Future Healthcare Workforce for Older Americans’ is the focus of this workshop. Participants will become familiar with the study and understand the future demand for health services by older adults and how population trends affect the workforce. Also included will be a discussion of the state and federal public policy changes which must be considered in view of the aging workforce.*

**Workshop #24**  
Location: Appaloosa  
Moderator: Hugh Atkins

**Suction Entrapment: How to Recognize and Eliminate Suction Entrapment Hazards from Pools and Spas**  
Ray Cronise, MS, Vice President of Engineering, Trilogy Pools, Fayetteville, Tennessee

*With the passage of the Federal Pool and Spa Safety Act there is a renewed focus with state health officials and regulators to eliminate suction entrapment hazards from residential and public pools and spas. Unfortunately many do not fully understand underlying causes of suction entrapment and this leads to undetected hazards during inspections and incomplete code requirements. The ANSI/APSP-7 Suction Entrapment Avoidance Standard addresses all five modes of entrapment and the three underlying physical causes. In this session participants will review all modes of entrapment and give a clear method for recognizing and eliminating all entrapment hazards from pools and spas.*

5:15 PM – 5:45 PM  
TPHA Board of Directors Meeting (if necessary) – *(Quarter Horse)*

6:00 PM – 8:00 PM  
**Tailgate Party** *(Champion Ballroom)* – **TICKET REQUIRED**

8:00 PM – 12:00 AM  
**Entertainment & Dance** *(Champion Ballroom)* – **TICKET REQUIRED**

**Friday, August 29, 2008**

7:30 AM – 8:30 AM  
Continental Breakfast *(Registration Area)*

8:00 AM – 9:00 AM  
**TPHA Business Meeting** *(Champion Ballroom)*

9:00 AM – 10:00 AM  
**Plenary Session #4** *(Champion Ballroom)*  
Introduction: Glenn Czarnecki, TPHA President

**Public Health Agency Accreditation: The Time Has Come**  
Edward L. Baker, MD, MPH, Director, North Carolina Institute of Public Health, University of North Carolina School of Public Health, Chapel Hill, North Carolina
Voluntary accreditation is a concept that is gaining momentum in the public health realm as a way of defining and striving for the optimal public health system. As leaders in the effort to promote, protect, and improve the health of our residents we are charged with improving coordination, reducing redundancy, and engaging in improvement of the system in its entirety. Dr. Baker has spent most of his career leading major national initiatives to strengthen the public health infrastructure including creation of Public Health Leadership Institutes and the National Public Health Performance Standards Program. From his work as Assistant Surgeon General in the U.S. Public Health Service to his current role as the director of the North Carolina Institute of Public Health, he remains actively involved in policy development and consultation related to public health accreditation and quality improvement (QI). He will highlight the critical role of QI in the accreditation process and discuss the value of each in public health agencies, summarize national trends in both, and identify critical success factors with respect to QI and accreditation in Tennessee.

10:00 AM – 10:20 AM  
Break

10:20 AM – 11:20 AM  
**Plenary Session #5 (Champion Ballroom)**  
Introduction: Glenn Czarnecki, TPHA President

**Leadership: ‘You Better Be Right’**  
Major General Dick Burleson, Vice President (Major Engineering Firm), Major General (USA Army Reserve), SEC Football Head Referee, Hoover, Alabama

*General Burleson shares his ‘12 Mandatory Leadership Traits’ for success developed during his time with great leaders like Coach Paul ‘Bear’ Bryant and General Colin Powell. He will cover such issues as how to manage change and how to be an effective leader. Attendees will leave knowledgeable on how to immediately make a difference as a leader. The ‘Mandatory 12’ will be followed by ‘Lessons of Leadership.’ From how good leaders ‘…usually tick people off…’ to how good leaders believe ‘…you don’t know what you can get away with until you try!’ These vignettes will be both educational and entertaining. General Burleson is a highly requested speaker because of his ability to teach and motivate as well as his ability to lend his humorous college football experiences to the lesson.*

11:20 AM – 11:30 AM  
Installation of 2008-09 TPHA President

11:30 AM – 12:00 PM  
Door Prizes & Adjourn
Special Events & Entertainment

Fun & Fitness Game Plan Activities – Wednesday Evening

The Fun & Fitness Spirit Stick will be awarded this year to the region that scores the most points after four quarters of competition. The Jamboree 1st Half starts at 5:15 PM at the Marriott Terrace and includes the Touchdown Toss and Super Bowling. The Jamboree 2nd Half begins at 8:30 PM in the Champion Ballroom and features the Mascot Mold and Cheer Challenge. The rules and scoring details of this year’s Fun & Fitness activities can be found in the Fun & Fitness Game Plan in your conference registration packet.

The regional teams competing for the coveted Spirit Stick will be cheered on to victory with a little help from the Father Ryan High School pep band. The pep band will pump us up with all our favorite fight songs, dance songs, and football game music. Half-time activities from 7:00 PM until 8:30 PM include a southern style BBQ dinner and the Father Ryan competition dance team. Under the direction of Mrs. Casey Cossit-Jones, the dance team provides opportunities for girls to participate in organized school-sponsored dance. The dance team performs at pep rallies, basketball games, competitions, and school-sponsored art performances.

TPHA President’s Reception – Thursday Evening

Grab your favorite jersey and put your game face on! Beginning at 6:00 PM the Tailgate Party kicks off! We will honor our very own 2008 President Glenn Czarnecki (Pittsburgh Steeler wannabe) as you enjoy all your favorite tailgating food. Entertaining you from the bed of a pick-up truck will be two of Nashville’s top country music songwriters – Kelley Lovelace and Lee Thomas Miller. They have scored big-time goals in the business, writing for some of country music’s top artists.

Kelley Lovelace was born in Kentucky, raised in Hixson, Tennessee, and braved the challenges of adolescence like braces, mullets, and acne alongside our President Glenn Czarnecki. Kelley now calls Franklin, Tennessee, his home. As a writer, he has had many songs recorded by artists such as Brad Paisley, Tracy Byrd, Teri Clark, David Ball, Mark Chesnutt, Clay Walker, Joe Nichols, and others. Some of his hits include: He Didn’t Have To Be (Brad Paisley), Wrapped Around (Brad Paisley), Two People Fell In Love (Brad Paisley), What’s A Guy Gotta Do (Joe Nichols), and Don’t Forget To Remember Me (Carrie Underwood). Kelley has also received ‘Song of the Year’ nominations for He Didn’t Have To Be from the Country Music Association (CMA), the Academy of Country Music (ACM), and the TNN Music Awards and was awarded ‘Song of the Year’ by the TNN Music Awards and Music Row Magazine. Kelley’s first Grammy nomination came in 2002 in the category of ‘Best Country Song’ for The Impossible recorded by Joe Nichols and co-written with Lee Thomas Miller.

After graduating from Eastern Kentucky University in 1991, BMI award-winning songwriter Lee Thomas Miller knew exactly where he wanted to go next. He became a top-rank songwriter whose hits include chart-toppers for stars like Terri Clark, Joe Nichols, Brad Paisley, and Trace Adkins. Joe Nichols’s rendition of The Impossible went all the way to #1. In 2007, Trace Adkins recorded Miller’s #1 hit You’re Gonna Miss This. Other hits include Men Don’t Change and Hillbilly Porn. Miller has now branched out into production work with artists including Steve Holy and Amy Dalley, but songwriting remains his top priority. Together Kelley and Lee have co-written number one hits such as The Impossible (Joe Nichols), I Just Wanna Be Mad (Terri Clark), and The World (Brad Paisley).
Dance Following the President’s Reception

Following the Tailgate Party on Thursday night you’ll want to tackle the dance floor to the sounds of Syndicate of Soul, one of Nashville’s best high-energy performance bands. Syndicate of Soul has provided entertainment through the years and has a wide range of musical ability, a large song list, and offers fun for everyone. The group has new draft picks from time to time, but the guarantee of fun entertainment hasn’t changed!

Poster Session

Poster presentations are available for viewing on Wednesday from 10:00 AM until 5:00 PM and on Thursday from 8:00 AM until 3:00 PM. Posters are located in the conference center’s main hallway and the Marriott lobby outside the Stirrup Cup Lounge. Presenters will be at their posters for Q&A and discussion during the 3:00-3:30 PM break on Wednesday afternoon and the 9:15-9:45 AM break on Thursday morning. The poster session is a great opportunity to learn about innovative projects that are happening in our communities across the state.

Silent Auction

This year’s silent auction, located in the Clydesdale & Arabian meeting rooms, is open Wednesday from 3:00 PM until 5:00 PM and again on Thursday from 8:00 AM until 3:00 PM. A very special ‘Thank You!’ is expressed to everyone who contributed items this year. Don’t forget… The region which donates items that bring in the most money will score a Fun & Fitness touchdown. Each year the money generated from the silent auction funds TPHA’s scholarships the following year, so bid early, bid often, and bid high. Don’t let someone else leave the conference with those items you want!

Exhibits

Exhibits are a very important part of the educational presentations of the annual conference. Exhibits are located in Salons 7-10 and will be open from 10:00 AM until 5:00 PM on Wednesday and from 7:30 AM until 3:00 PM on Thursday. Please visit the exhibits and get acquainted with the representatives. They welcome your questions and requests for literature. Let them know that we appreciate their participation and help in making this annual conference a great success!
Rogers Anderson is the county mayor of Williamson County, Tennessee. He took office September 1, 2002, and as chief executive officer of Williamson County, Mayor Anderson is responsible for the county’s fiscal management and exercises a role of leadership in county government. He also served Williamson County as a county commissioner from 1986 to 2002, serving as its chairman for four years. Mayor Anderson is a graduate of the University of Tennessee – Knoxville, receiving his Bachelor of Science in business and education. He is a Veteran of the United States Air Force, having served in Africa and Vietnam. After being elected county mayor, Rogers left the commercial insurance industry after 25 years experience servicing commercial insurance accounts and clients.

Mayor Anderson is a board member for the Williamson Medical Center, Williamson County United Way, and the American Hospital Association Committee on Governance. He is an active member of the Williamson County/Franklin Chamber of Commerce, Franklin Noon Rotary, Regional Transportation Authority, Greater Nashville Regional Council, Workforce Essentials Board, Williamson County Economic Development Council, Franklin Tomorrow, and the League for Deaf & Hard of Hearing. Rogers currently serves as vice-president of the Transportation Management Authority and was 2005 chairman of the Metropolitan Planning Organization.

David R. Bassett, Jr, PhD, is a professor in the Department of Exercise, Sport, and Leisure Studies at the University of Tennessee in Knoxville. He is co-director of the University of Tennessee Obesity Research Center and a member of the Tennessee Obesity Task Force. His primary research interests are the measurement of physical activity and energy expenditure in humans, the physiological effects of physical training, and the relationship of the built environment to walking and bicycling levels. Dr. Bassett earned a BA in biology from Oberlin College (Ohio), a Master of Science from Ball State University (Indiana), and his PhD from the University of Wisconsin-Madison.

Dr. Bassett has a special interest in measuring walking in different populations. He and his students have collected data on populations ranging from Amish farmers to sedentary, middle-aged adults. They have also explored the relationships between physical activity and body weight, blood pressure, and other cardiovascular risk factors. Dr. Bassett is a board member of the American College of Sports Medicine and serves on the editorial boards of the Journal of Applied Physiology and the Journal of Physical Activity and Health. He is co-author of the book Pedometer Walking: Stepping Your Way to Health, Weight Loss, and Fitness (Lyons Press, 2006) with Mark Fenton.

Rae Bond is the executive director of the Chattanooga-Hamilton County Medical Society, the Medical Foundation of Chattanooga, and Project Access, a community health partnership to coordinate charity care for low-income, uninsured residents of Hamilton County. She has also served as the executive director of the Tennessee Municipal League and was the founding director and president of First Things First, a nationally recognized nonprofit organization dedicated to strengthening families. Before moving to Chattanooga in 1994, Rae was director of public affairs for the National Governors’ Association in Washington, D.C., for 10 years and an award-winning journalist in her native Idaho. She is a graduate of Towson State University. In Chattanooga, her current community involvement includes the Hamilton County Regional Health Council, the board of directors of the Community Research Council, the Emergency Food and Shelter Board, the Hamilton County Step ONE Operations Council, and serving on the boards of several other local, state, and national health organizations.

Vicki Brinkso, RN, graduated from Vanderbilt University in 1976 and Belmont University in 1978. She has experience in critical care nursing and was the occupational health nurse for Exxon Corporation. She began her career in infection control at St. Barnabas Medical Center in Livingston, New Jersey, in 1982 and was in the original cohort of ICPs who took the 1983 certification exam in New York City. She returned to Nashville and joined the infection control staff at Vanderbilt in 1986.

Vicki has published articles, written chapters for nursing text books, and written articles for the lay press urging parents to continue to vaccinate their children. Her current focus is surgical site infections and perioperative/operative infection control issues. She teaches the introductory course in infection control for Belmont University Nursing School. She is a past member of the CDC’s Hospital Infection Control Practices Advisory Committee (HICPAC) and was recognized as one of the Association of Professionals in Infection Control and Epidemiology (APIC) Heroes of Infection Prevention in 2007.

Kathleen Brown, PhD, is the director of community assessment and health promotion for the Knox County Health Department. She joined the health department in September 2006, after instructing at the University of Tennessee for 12 years. Prior to her work at UT, she was employed as an intensive care nurse in a number of hospitals across the Southeast U.S. Dr. Brown is an active community volunteer and serves on a number of committees and boards. She is particularly committed to the issue of breast health and chairs the grant committee for the Knoxville Susan G. Komen for the Cure. Dr. Brown received her BSN from the University of South Carolina and her MPH and PhD from the University of Tennessee, Knoxville.
Shunji Brown-Woods, MPH, has a varied background in healthcare with past work experience in the hospital setting as a clinical analyst and hospital educator. She has also worked as a consultant and health professional recruiter to underserved areas. Currently, she serves as the coordinated school health specialist for Shelby County Schools, one of the largest school districts in Tennessee with over 47,000 students and greater than 5,000 faculty and staff. She obtained her BS in chemistry from Xavier University of Louisiana and earned a master's degree in health administration from the University of Memphis. She is enrolled as a doctoral candidate for educational leadership with a concentration in policy studies from the University of Memphis with anticipated completion in 2009.

C. Stephen Byrum, PhD, has had a personal and family counseling practice in Chattanooga for 22 years. Dr. Byrum earned a BA from Tennessee Wesleyan College, his Master of Divinity at Southern Seminary, and his MA and PhD degrees at the University of Tennessee in Knoxville. He has completed post-graduate work at Vanderbilt, Princeton, and Spellman College. Dr. Byrum taught at UTK and Chattanooga State a total of 25 years and held the position of Dean of the Arts and Humanities Department. Since 1978, he has been involved in consulting work in business and industry. Dr. Byrum is the author of nearly 40 book articles and more than 100 periodical articles.

Officer Bill Cain is a former law enforcement officer who served with the Macon-Bibb County Police Department for more than eight years. He graduated at the top of his class from the Georgia Police Academy and served on both the Rat Patrol and the First Response SWAT teams. Bill has specialized in crime prevention, crimes targeted against travelers, and random acts of violence for the past 11 years. He is considered by many law enforcement professionals to be among the top authorities in these fields. Mr. Cain is also the author of a book entitled What You Need to Know About the most Recent Road Crimes, Cons, & Scams used on Motorists Today.

Russell Cliche, MS, serves as the coordinator of school health for the Hamilton County Department of Education. He has a Master of Science in exercise physiology and health promotion. He has worked as the Step ONE coordinator with the Chattanooga-Hamilton County Health Department, as a graduate teacher at Middle Tennessee State University, and in cardiac rehabilitation at Vanderbilt Hospital. Russell is very active in community involvement serving as a board member with the American Heart Association, Creative Discovery Museum, Chattanooga Active Living Summit, Partners in Prevention, Tennessee Extension Coalition, and Activate Chattanooga.

Jay Collum is coordinator of tobacco education at the Chattanooga-Hamilton County Health Department. In this position, Jay coordinates media efforts to increase awareness of the damaging effects tobacco has on residents of Hamilton County. He also champions advocacy on legislative issues and community-wide, tobacco-free promotions. As a licensed addiction counselor and family program director, Jay has an extensive background in behavioral healthcare. He is the immediate past chair of Smoke Free Chattanooga and organized a collaborative team of healthcare providers who promote the benefits of tobacco-free lifestyles and campuses. Smoke Free Chattanooga promotes the use of nicotine replacement therapy for those dependent on tobacco products.

Ray Cronise is a founder and vice-president of engineering for Trilogy, a leading composite pool and spa manufacturer. Before joining Trilogy, he served for 15 years as a material scientist at NASA’s Marshall Space Flight Center in the biophysics branch of the Space Science Laboratory. While at NASA, he participated in a wide range of scientific studies including water recirculation for the Space Station’s Environmental Control and Life Support System (ECLSS). His undergraduate and graduate studies were in chemistry at the University of Alabama, Huntsville.

Ray is author of more than 20 peer-reviewed scientific journal articles. Since joining the swimming pool industry he has served on ANSI writing committees for residential and public pools as well as suction entrapment avoidance. He is a member of the Association of Pool and Spa Professional’s (APSP) Technical Committee. Currently his research interests center on energy efficiency of pools, computational fluid dynamic studies for circulation, and suction entrapment avoidance.

Michael DeVoe, MD, is the director of neonatology and a professor in the Department of Pediatrics at East Tennessee State University in Johnson City. Prior to moving to Tennessee in 1992, he was a faculty member at Tulane University College of Medicine for 10 years where he directed the NICU transport system. Dr. DeVoe received his undergraduate training at Miami University in Oxford, Ohio, and earned his medical degree at Ohio State University College of Medicine. He completed a pediatrics residency and neonatal-perinatal medicine training at Cincinnati Children’s Hospital. Dr. DeVoe’s service to public health in Tennessee includes being a member of the State Perinatal Advisory Committee, Tennessee Birth Defects Registry, two regional child fatality review teams, and the Northeast Regional Health Council.

Greg Duckett, JD, was appointed to the Tennessee Board of Regents on July 14, 2006, representing Tennessee’s ninth congressional district. He is senior vice-president and...
Nancy Franks, BS, is a native of Chattanooga and a graduate of the University of Tennessee with a Bachelor of Science in home economics. She taught home economics in Georgia and Tennessee before raising a family. Nancy spent the last 14 years of her career as an ABE GED instructor at Chattanooga State Community College.

Nancy presented the idea of having a free health clinic for the low income uninsured of Hamilton County to a long-range planning committee at her church. Her pastor asked for a report and thus the beginnings of the Volunteers in Medicine clinic in June 2003. The idea was taken community-wide through the faith community in the fall of 2003. The VIM Chattanooga clinic opened its doors in May 2005, and in the first 36 months served nearly 13,000 patient visits and delivered healthcare at a conservative value of $14 million based on hospital emergency department rates. From its inception, Nancy has served as president and as a volunteer. She was honored with the Woman’s Community Service Award by the Pilot Club in 2005, Chattanooga Woman of Distinction in 2006, and the national Spirit of ’76 Award from the Freedoms Foundation at Valley Forge.

Jan Frechette, BS, became the community health council coordinator for Sequatchie County and Bledsoe County in September 2007. Prior to working for the Tennessee Department of Health, Jan was a case manager at a psychiatric hospital for teens and their families for six years. Jan graduated from the University of Tennessee at Chattanooga in 1994, with a bachelor’s degree in psychology. She is married to a police officer who has spent two of the past three years in Iraq as a security contractor. They have two energetic sons and a nationally certified narcotics detection dog.

During her employment as community health council coordinator, Jan was helpful in securing and utilizing the tobacco grants, developing two junior health councils in Bledsoe County, and building strong, effective partnerships with many health care organizations, providers, and coordinated school health. Working with Junior Health Councils, Sequatchie County was able to hold a tobacco-free sporting event which was deemed a big success. By securing speakers with whom students could relate, preparing displays, and playing CDC videos, Sequatchie County Junior Health Council was able to convey the dangers of tobacco and became spokespersons and campaigners for a tobacco-free county. Bledsoe County was able to initiate junior health councils in their middle school and high school through collaborative efforts with coordinated school health, health council members, and school personnel.

Claudia Fuentes, MA, serves as the policy aide on youth and learning for the city of Minneapolis. A primary focus of her work is the Blueprint for Action: Preventing Youth Violence. In 2007, city and community leaders decided to view and attack the problem of youth violence in Minneapolis from a public health perspective. The blueprint targets those ages 8 to 17 years who face factors that place them at higher risk to commit a crime or be a victim. Claudia also provides staff support to activities related to Minneapolis School District, parent groups, and regional partners to support Minneapolis Promise – a cluster of coordinated efforts designed to eliminate barriers to post-secondary education for Minneapolis youth. She holds a Master of Arts in international and intercultural management from the School for International Training in Brattleboro, Vermont, and an individualized Bachelor of Arts in intercultural communications from the University of Minnesota.

Susan L. Gerber, MD, received her bachelor’s degree in biochemistry at the University of Illinois, Urbana, and earned...
Becky Pratt Gregory, MS, RD, LDN, obtained her bachelor’s degree from David Lipscomb University, completed her dietetic internship at the Medical College of Virginia, and earned her master’s degree from Middle Tennessee State University. She is the nutrition coordinator of the Diabetes Research & Training Center at the Vanderbilt University School of Medicine. She also works at the Vanderbilt High Risk Diabetes & Pregnancy Clinic at the Vanderbilt Medical Center. She is involved in diabetes-related research and teaches health care professionals across the country about nutrition and diabetes management.

Suzie Hamm began her public health career in 1982 as a part-time WIC clerk in a small county in Kentucky. When that county merged into a district health department consisting of three counties, she transferred to the district office serving as WIC coordinator. In addition to duties as WIC coordinator, Suzie served as prenatal billing coordinator and Medicaid billing coordinator. In October 1998, Suzie became the finance administrator for the Buffalo Trace District Health Department with responsibility for budgets, payroll, accounts payable and receivable, and personnel.

During her tenure in public health, she has been active in the Kentucky Public Health Association, serving as exhibits chair for 10 years, a director for four years, and currently as co-chair of the awards committee and golf committee. She has been a member of KAMFES (Kentucky Association of Milk, Food, and Environmental Sanitarians), and KSPO (Kentucky Support Personnel Organization). In 2001, Suzie joined the Southern Health Association and currently serves as president, having previously served as secretary as well as chair of various committees. On July 31, 2008, Suzie retired from public health. She is spending her days playing golf and taking some time to enjoy her retirement. She and her husband Rocky have one son, William.

Fonda M. Harris, BS, is director of health services for the Nashville/Davidson County Metropolitan Public Health Department. She holds a Bachelor of Science from Middle Tennessee State University, completed coursework through Kennedy Western University in human resource development, and is currently completing a Master of Science in public service management at Cumberland University. She serves on several local community health boards that address issues pertaining to resolving health inequities for the community’s underinsured and uninsured population. Mrs. Harris has made several presentations on innovative approaches to reducing health disparities and inequities. She also serves as the principle leader of the Safety Net Consortium of Middle Tennessee.

Elaine Jackson, MS, is the director of coordinated school health for the Stewart County School System and is currently employed by Austin Peay State University as a health and human performance adjunct professor teaching coordinated school health. Elaine received her BS in 1988 from Austin Peay State University with a major in psychology and minor in sociology. In 2000, she received her master’s degree in educational psychology & guidance from the University of Tennessee at Martin. Prior to employment with the school system, Elaine was employed 11 years as the youth service officer for Stewart County Juvenile Court.

Liz Jenkins, MA, EdS, presently works with the Healthy Communities and Advocacy Department for Memorial Health Care System in Chattanooga. In this position she assists the vice-president of healthy communities and advocacy with the Healthy! Memorial program, a wellness plan that is designed to proactively promote a healthier and holistic lifestyle for all staff and their families.

Yvette M. Jones, MPA, received her BA in criminology, criminal justice, and sociology, and master’s degree in public administration from the University of Texas at Arlington. She
has extensive experience in health promotion and health education. As a diabetes program coordinator for a non-profit organization, Yvette worked with middle-aged and senior populations to decrease risk factors of diabetes as well as improve diabetes management skills. Currently, she is the health education coordinator for Tarrant County Public Health (TCPH).

For more than nine years, Yvette has managed and coordinated health education programs and prevention education initiatives with emphasis on the youth population, such as Teen Videofest, tobacco awareness and prevention, diabetes, physical activity, and child nutrition. In addition, she develops and provides consultations on health education curriculum development and implementation. For the past three years, she has served as board member for the Tarrant County Youth Collaboration with a recent appointment to the executive committee. She is also a charter member of TCPP’s Toastmasters Club and a member of Texas Society of Public Health Educators.

Beverly A. Largent, DMD, is a pediatric dentist in private practice in Paducah, Kentucky. She is a graduate of the University of Kentucky College of Dentistry and also received a certificate in pediatric dentistry from UK. Dr. Largent has been in private practice for 25 years. She has been active in organized dentistry, serving as president of the Kentucky Dental Association and currently as president of the American Academy of Pediatric Dentistry.

Robert W. Mooney, MD, is a son of Dr. John and Mrs. Dot Mooney, founders of Willingway Hospital in Statesboro, Georgia. He has devoted his life to addiction medicine and the treatment of addicts and their family members affected by chemical dependence. Dr. Mooney is certified in addiction medicine by the American Society of Addiction Medicine. He has been continuously certified as an addiction counselor since 1986 and currently holds a masters addiction counselor certification form the National Association of Alcoholism and Drug Abuse Counselors. Dr. Mooney is also a diplomate of the American Psychotherapy Association and has lectured extensively across the United States and internationally.

Jenny Moshak, MS, is in her 20th year with the Lady Vols. As the assistant athletics director for sports medicine, she oversees all sports medicine, athletic training, rehabilitation, strength and conditioning, and continues to work directly with basketball. Ms. Moshak’s vision led to the creation of UT’s unique program, Team ENHANCE, which creates a healthy culture for the Lady Vol student-athletes so they can achieve personal bests in their sports and in their lives. A graduate of Western Michigan University in physical education, she also holds a master's degree from UT in exercise physiology.

Ms. Moshak has been the recipient of numerous awards, most recently the 2006 Western Michigan University Academy of Honors Award. She is a four-time recipient of the Governor’s Outstanding Tennessean Award. Well recognized by the University of Tennessee for her accomplishments, she has received the Chancellor’s Citation of Extraordinary Service to the University, the Team Excellence Award, and the Women of Achievement Award. The USA Olympic Committee cited her for Outstanding Athletic Training Support at the United States Olympic Festival.

The Skokie, Illinois, native has been a certified member of the National Athletic Trainers’ Association since 1986 and a certified strength and conditioning specialist since 1997. She is an adjunct professor with the Department of Exercise Science. She is an avid cyclist who in May 2006 rode her bicycle across the country covering over 2,900 miles in 27 days, riding an average of 120 miles per day with America by Bicycle. In the summer of 2007 she cycled England and Wales.

John C. New, DVM, MPH, DACVPMM, received his Doctor of Veterinary Medicine from Texas A&M University and his MPH from the University of Minnesota. He is a diplomate of the American College of Veterinary Preventive Medicine. Dr. New is a professor in the University of Tennessee College of Veterinary Medicine and currently serves as head of the Department of Comparative Medicine. His teaching assignments include epidemiology, zoonoses, food hygiene, wildlife diseases, responsible pet ownership, and the human-animal bond.

Dr. New’s research has focused on zoonotic disease of free-roaming wildlife (e.g., hantavirus, borreliosis, and rabies) and factors associated with the surplus pet problem including the implementation of preventive strategies. Dr. New is the recipient of the Tennessee Veterinary Medical Association Faculty Award; Michael J. McCulloch, MD, Memorial Award; Bustad Companion Animal Veterinarian Award; William T. Miles, MD, Memorial Award for Community Service; and the American Veterinary Medical Association’s Animal Welfare Award.

Donna N. Roddy, MSN, RN, has been a registered nurse for 36 years with experience in home health, hospital, nursing education, and administration. She is active on numerous local, state, and national boards including the Tennessee Board of Nursing; the National Council of State Boards of Nursing; the Tennessee Rural Health Association; the Tennessee, American, and National Black Nurses Associations; and the American Organization of Nurse Executives.

Donna completed her BS at the University of Tennessee at Chattanooga and received her MS in nursing administration
from Andrews University in 1993. Her current responsibilities at BlueCross BlueShield of Tennessee include provider education related to medical management issues. Additional responsibilities include community liaison for healthcare services in the Chattanooga area as well as establishing partnerships with external agencies to promote wellness and prevention.

William Schaffner, MD, is chairman of the Department of Preventive Medicine and professor of infectious diseases at the Vanderbilt University School of Medicine. His primary interests are infectious diseases and their prevention. Dr. Schaffner has worked extensively on the effective use of vaccines in both pediatric and adult populations. He is a strong proponent of collaboration between academic medical centers and public health institutions.

Currently, Dr. Schaffner is a liaison member of the Advisory Committee on Immunization Practices (ACIP), a former member of the National Vaccine Advisory Committee (NVAC), and is a member of the Physician Advisory Board of the Adult Immunization Initiative of the American College of Physicians. He is a member of numerous professional societies and has written over 250 scientific articles and textbook chapters.

After graduating from Yale in 1957, he graduated from Cornell University Medical College in 1962 and then completed an internship, residency training, and a fellowship in infectious diseases at the Vanderbilt University Medical Center. He was commissioned in the U.S. Public Health Service as an epidemic intelligence service officer with the Centers for Disease Control in Atlanta for two years (1966-1968). He is a longstanding collaborator with the Tennessee Department of Health and has been a member of TPHA since 1988.

Paul C. Schroy III, MD, MPH, is a graduate of Haverford College, Jefferson Medical School, and the Boston University School of Public Health. He completed his residency in internal medicine at the North Shore University Hospital (Cornell University) and fellowship in gastroenterology at the Memorial Sloan-Kettering Cancer Center. Dr. Schroy is a professor of medicine at the Boston University School of Medicine and director of clinical research for the Section of Gastroenterology at Boston Medical Center. He is the recipient of a number of grants, which support his ongoing research in the area of community-based colorectal cancer control. Dr. Schroy is also chair of the Massachusetts Colorectal Cancer Working Group and former co-chair of the National Colorectal Cancer Roundtable’s Public Awareness and Best Practices Task Forces. He is a member of the Massachusetts Department of Public Health’s Cancer Coalition Leadership Team, Cancer Registry Advisory Committee, the National Colorectal Cancer Roundtable’s Quality Assurance Task Force, Professional Education/Practice Task Force, and Nominating Committee (chair).

Utilizing an integrated approach that incorporates a strong background in laboratory research, clinical experience and public health training, Dr. Schroy’s research activities focus primarily on the development, implementation, and evaluation of model programs for community-based colorectal cancer control. Current ongoing studies include: (1) exploring the role of shared decision-making as a strategy for increasing patient participation in colorectal cancer screening, (2) developing a risk assessment tool for predicting the presence of advanced neoplasia at screening colonoscopy, (3) evaluating the feasibility and validity of novel colorectal cancer screening strategies such as stool-based DNA testing and virtual colonoscopy, and (4) implementation of quality measures related to colorectal cancer screening.

Cheryl Shouse, BS, has been employed by the Chattanooga-Hamilton County Health Department for more than seven years. She has worked in three positions at the health department including as the injury prevention coordinator with the health promotion and wellness section and as a health educator and supervisor with TENNderCare outreach. As the injury prevention coordinator she designed programs and activities with the goal of reducing the incidence and impact of unintentional injuries. As a health educator with TENNderCare Outreach, her activities included outreach to the community to inform and educate county residents regarding the importance of receiving medical check-ups and dental services available to TennCare-eligible children and young adults from birth to 21 years. Cheryl received her BS in exercise science, community health concentration, from the University of Tennessee at Chattanooga and has completed her final class and requirements for the Master of Public Health from the University of Massachusetts at Amherst. She is an advocate for wellness issues including healthy lifestyle choices.

Susan Speraw, PhD, RN, is an associate professor of nursing at the University of Tennessee, Knoxville, and director of the homeland security graduate programs. She is co-chair of the U.S. Surgeon General’s National Strategic Plan Workgroup which leads the effort to integrate disability education into the curriculum of health professionals across disciplines. Prior to her current positions, Dr. Speraw was an associate professor of pediatrics at the Oregon Health & Services University in Portland.

Dr. Speraw received her BSN at California State University in Los Angeles and her Master of Nursing at UCLA. She earned an MA and PhD in clinical psychology at the California School
of Professional Psychology in Los Angeles. She then completed post-doctoral studies in pediatric psychology and behavioral pediatrics at the University of Tennessee College of Medicine and at T.C. Thompson Children’s Hospital in Chattanooga. Throughout her career, Dr. Speraw has been the principal investigator in numerous professional research projects and has published several articles in peer-reviewed journals.

**Viston Taylor, MA, MPH,** is president and CEO of Alexian Brothers Community Services and Alexian Brothers Senior Neighbors. He has served as CEO of Hospice of Chattanooga, director of Erlanger’s Department of Geriatrics, and the Southeast Tennessee Area Office on Aging. His career in service to older adults in Chattanooga spans 31 years. He holds a BA in English from Vanderbilt, an MA from the University of Tennessee at Knoxville, an MPH from Johns Hopkins University in health policy and management, and is certified as a specialist in aging from the University of Michigan Institute of Gerontology.

Viston is a fellow of the American College of Health Care Executives and has taught graduate seminars in aging policy and health policy in the Department of Political Science at UT-Chattanooga from 1985 to 2000. He was appointed by Governor McWherter to the Tennessee Commission on Aging in 1989, President Clinton to the 1995 White House Conference on Aging, and Governor Bredesen to the 2005 White House Conference on Aging. He has served as chair of the Hamilton County Regional Health Council, a faculty member in geriatrics with the UT College of Medicine, Chattanooga Unit, Department of Internal Medicine, and is currently a board member of the Medical Foundation of Hamilton County.

**Patti Waller, MS,** joined Marler Clark law firm in 2003 after working for 12 years in the communicable disease program at the Washington State Department of Health. At the health department, Patti investigated food and water borne illnesses and outbreaks. She conducted food safety training courses focusing on best epidemiologic practices in outbreak investigations. At Marler Clark, Patti uses her expertise to develop protocol, screen potential clients, and gather evidence for successful litigation. Since 2004 she has submitted more than 2,000 public records requests to over 200 public agencies. A frequent speaker, Patti appreciates the opportunity to serve as a liaison between the legal world and public health. She earned a Master of Science in epidemiology at the University of Washington in 1990.

**Susan Warden, BSN, RN,** is a registered nurse leading Bledsoe County schools coordinated school health initiatives. She is excited to promote the mission of improving student health outcomes as well as supporting the connection between good health practices, academic achievement, and lifetime wellness. She earned her Bachelor of Science in nursing from Graceland University and an Associate of Applied Science in nursing from Cleveland State Community College. Her 22 years of experience include patient care and administrative positions in medical/surgical, emergency, critical care, operating room, post anesthesia care, home health care, and school nursing providing effective networking and communication skills to coordinated school health. Susan is a member of the Tennessee Nurses Association, National/Tennessee School Nurse Associations, Bledsoe County Health Council, Bledsoe County Community Advisory Board, Children's Council, and teaches basic life support classes for the American Heart Association.
Executive Committee:

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Meigs County Health Department, Decatur
Memphis/Shelby County Health Department, Memphis
Metro Public Health Department, Nashville
Metro-Moore Health Facility, Lynchburg
Mid-Cumberland Regional Health Office, Nashville
Monroe County Community Health Council, Madisonville
Monroe County Health Department, Madisonville
Montgomery County Health Department, Clarksville
Morgan County Health Council, Warburg
Morgan County Health Department, Warburg
MTSU Department of Health & Human Performance, Murfreesboro
MTSU Tennessee Lead Elimination Action Program, Murfreesboro
National Healthcare of Cleveland, Cleveland
Northeast Regional Health Department, Johnson City
Obion County Health Department, Union City
Overton County Health Department, Livingston
Perry County Health Department, Linden
Pickett County Health Department, Byrdstown
Polk County Health Department, Benton
Putnam County Health Department, Cookeville
Rhea County Health Department, Evensville
Roane County Health Council, Rockwood
Roane County Health Department, Rockwood
Robertson County Health Department, Springfield
Rural Health Association of Tennessee, Murfreesboro

Rural Medical Services, Inc., Newport
Rutherford County Health Department, Murfreesboro
Scott County Health Department, Huntsville
Sequatchie County Health Department, Dunlap
Sevier County Health Department, Sevierville
Smith County Health Department, Carthage
South Central Regional Health Office, Columbia
Southeast Regional Office, Chattanooga
Southwest Community Services Agency, Jackson
Stewart County Community Medical Center, Dover
Sullivan County Health Department, Blountville
Sumner County Health Department, Gallatin
Tennessee State Employees Association, Nashville
Tennessee Academy of Family Physicians, Brentwood
Tennessee Dental Association, Franklin
Tipton County Health Department, Covington
Trousdale County Health Department, Hartsville
Unicoi County Health Department, Erwin
Union County Health Department, Maynardville
University of Tennessee, MPH Program, Knoxville
UT Extension – Family & Consumer Sciences, Knoxville
Upper Cumberland Regional Health Office, Cookeville
Van Buren County Health Department, Spencer
Vanderbilt Ingram Cancer Center, Nashville
Warren County Health Department, McMinnville
Washington County Health Department, Johnson City
Wayne County Health Department, Waynesboro
Weakley County Health Department, Dresden
West Tennessee Regional Health Office, Jackson
West Tennessee Regional Health Office, Union City
White County Health Department, Sparta
Williamson County Health Department, Franklin
Wilson County Health Department, Lebanon
2007-2008 TPHA Committees

**Arrangements**
Annette Haley, Chair  
DeSha Anschuetz  
Misty Claude  
Chris Freeman  
Greg Morneau

**Audit & Finance**
Judy Dias, Chair  
Andre Fresco  
Rick Johnson  
Marianne Sharp

**Awards**
- Helen Brakebill, Chair  
- Judy Dias  
- Glenda Drum  
- Colleen Edgell  
- Robin Gibby  
- Gail Harmon  
- Sandy Hayes  
- Jennifer Johnson  
- Kolleen Kolassa  
- Cathy Maxwell  
- Sandy Moore  
- Kevin Morris  
- Lee Ann Moss  
- Lynne Ray  
- Marti Smith

**Constitution and Bylaws**
Charles Turner, Chair  
Dr. Mike Garrett  
Dr. Charles Hamilton  
Andy Langford  
Art Miller

**Continuing Education**
- Jennifer Kozlica, Chair  
- Julia Axley  
- Dr. David Brumley  
- Blaine Hill  
- Donna Hurst  
- Margaret Jones  
- Rubelyn Mays  
- Diana Richardson  
- Carolyn Riviere  
- Micky Roberts  
- Melissa Wolford

**Exhibits**
Ami Mitchell, Chair  
Chris Freeman  
Tlissia Halbrooks  
Connie Ingram

**Fun & Fitness**
- Robert Goff, Chair  
- Amy Bonner  
- Dr. Alisa Cade  
- Tymikia Glenn  
- Sharon Goforth  
- Tekeela Green  
- Vincent Pinkney  
- Karen Roper  
- Shanna Shearon
2007-2008 TPHA Committees

Misty Claude  Glenda King  Meri-Leigh Smith
Eric Coffey  Paula Masters  Leilani Spence
Ashley Dove  Janet McAlister  Teresa Thomas
Angela Frame  Pattie Norman  Ann Marie Vinson
Danni Frazee  Christina Phipps  Debbie Wall

Membership

Jeannie Bentley, Co-chair  Kolleen Kolassa
Charlene Nunley, Co-chair  Barbara Reedy
DeSha Anschuetz  Donna Robbins
Pam Browning  Michael Thomas
Angela Frame  Shannon Townsend

Nominations and Elections

Debbie Johnson, Chair  Kaye Greer
Marilyn Barnes  Gail Harmon
Chris Freeman  Beth Rader

Poster Session

Beth Delaney, Chair  Kasey Poole
Beth Allen  Beth Rader
Tymikia Glenn  Laurie Stanton
Susan Moores  Jannie Williams
Sharon Nelson

Program

Art Miller, Chair  Robert Goff  Francis Reece
Hugh Atkins  Annette Haley  Dr. Calita Richards
Becky Barnes  Dr. Tim Jones  Howard Roddy
Dr. David Brumley  Rubelyn Mays  Sara Smith
Glenn Czarnecki  Dr. Bill Paul  Charles Turner
Dr. Paul Erwin  Beth Rader  Erica Wilson

Public Health Week

Shannon Railling, Chair  Dr. Lanora Bryant  Steve Hall
Beth Allen  Tracy Byrd  Paula Masters
Bonnie Bashor  Joan Cook  Sabrina Novak
David Borowski  Lacreshia Elike  Beth Rader
Chelsea Brandon  Nancy Foshee  Ranee Randby
Elizabeth Brown  Jan Frechette  Teresa Thomas

Public Policy

Dr. David Brumley, Chair  Bart Perkey
Tammy Burke  Dr. Bob Stolarick
Glenn Czarnecki  Dot Watson
Karen Lynn
### 2007-2008 TPHA Committees

#### Public Policy – Legislative Subcommittee
- Bart Perkey, Chair
- Hugh Barnes
- Lorrie Clark
- Dr. Tony Emison
- Sandy Hayes
- Darrell Holden
- Mark Jones
- Gary Mayes
- Wanda Richardson
- Dot Watson

#### Public Policy – Resolutions Subcommittee
- Karen Lynn, Chair
  - Angie Hassler
  - Shirley Hughes
  - Jennifer Johnson
  - Kevin Morris

#### Public Relations and Publicity
- Renae Pickens, Co-chair
  - Lucia Vining, Co-chair
  - Renae Pickens, Co-chair
  - Lucia Vining, Co-chair

#### Registration
- Vanessa Watkins, Chair
  - Tammy Mansfield
  - Andrea Shanks
  - Evelyn Vaillencourt
  - Anita Worley
  - Mitzi Wyrick
- Paulette Cowan
- Jenny Crane
- Brandy Fox
- Judy Hogan
- LeeAnne Kelley

#### Scholarship
- Robb Garman, Chair
  - Sherry Adams
  - Greg Galfano
  - Susan Porter
  - Margaret Zylstra
  - Robb Garman, Chair
  - Sherry Adams
  - Greg Galfano
  - Susan Porter
  - Margaret Zylstra

#### Silent Auction
- Melissa Davis, Chair
  - Andy Langford
  - JoAnn McElhaney
  - Susan Porter
  - Beth Simpson
  - Jerry Tollett
  - Kim Villegas
- Julia Axley
- Geanie Cooper
- Gail Harmon
- Billie Hagdon
- Pam Isom
- Robbie Jowers
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<td>Dr. J. B. Black</td>
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<td>1946</td>
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<td>Dr. W. B. Farris</td>
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<td>1948</td>
<td>Dick Thompson</td>
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<td>Helen Jean</td>
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<td>Dr. Frank A. Moore</td>
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<td>1951</td>
<td>Dr. R. H. Hutcheson, Sr.</td>
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<td>1952</td>
<td>Dr. Paul M. Golley</td>
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<td>1953</td>
<td>Dr. George M. Cameron</td>
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<td>1954</td>
<td>Frank L. Roberts</td>
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<td>Dr. J. W. Erwin</td>
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<td>Dr. M. F. Brown</td>
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<td>1956</td>
<td>J. Lashley Johnson</td>
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<td>Dr. A. H. Trithart</td>
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<td>1958</td>
<td>Jane E. Holland</td>
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<td>Mildred Patterson</td>
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<td>1960</td>
<td>Dr. R. B. Turnbull</td>
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<td>1961</td>
<td>Frank L. Cheney</td>
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<td>1962</td>
<td>Dr. Alex B. Shipley</td>
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<td>1963</td>
<td>Dorothy Latimer</td>
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<td>1964</td>
<td>Dr. Cecil B. Tucker</td>
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<td>Golden Williams</td>
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<td>Dr. Robert Q. Ingraham</td>
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<td>1967</td>
<td>Ann Dillon</td>
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<td>Ernest L. Shipe, Jr.</td>
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<td>Thomas H. Hale</td>
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<td>Elizabeth Lovell</td>
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<td>Betty Denny</td>
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<td>Dr. A. J. Mueller</td>
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<td>Dr. J. Howard Barrick</td>
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<td>1974</td>
<td>Carl T. Burns</td>
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<td>James C. Austin</td>
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<td>James E. Payne</td>
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<td>William R. Forbes</td>
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<td>Hazel H. Fowler</td>
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<td>Wayne S. Everett</td>
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<td>C. Allen Murray</td>
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<td>Doris G. Spain</td>
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<td>Darrell L. Holden</td>
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<td>Hugh A. Barnes</td>
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<td>Janey Blackburn</td>
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<td>Mary H. Mincey</td>
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<td>Richard A. Long</td>
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<td>Dr. Fredia S. Wadley</td>
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<td>Howard W. Roddy</td>
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<td>1994</td>
<td>Patricia Jowers</td>
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<td>Sylvia Pile Cowan</td>
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<td>Becky Barnes</td>
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<td>Dr. Tony R. Emison</td>
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<td>1998</td>
<td>Suellen Joyner</td>
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<td>1999</td>
<td>Bill Ray</td>
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<td>Tommy A. Smith</td>
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<td>2001</td>
<td>Dr. Wendy J. Long</td>
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<td>2002</td>
<td>Carole A. Martin</td>
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<td>2003</td>
<td>Anthony W. Harden</td>
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<td>2004</td>
<td>Pat Santel</td>
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<td>2005</td>
<td>Tammy Burke</td>
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<tr>
<td>2006</td>
<td>Barbara Medlin</td>
</tr>
<tr>
<td>2007</td>
<td>Dr. David E. Brumley</td>
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</tbody>
</table>
## TPHA Award Recipients

### Distinguished Service Award

*Presented to a Tennessee Public Health Association member who has made outstanding contributions to the Association over a period of several years.*

<table>
<thead>
<tr>
<th>Year</th>
<th>Recipient</th>
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<tr>
<td>1973</td>
<td>Pat M. Winters, Secretary to Dr. Cecil B. Tucker</td>
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<tr>
<td></td>
<td>Allie Farmer, Print Shop</td>
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<tr>
<td>1974</td>
<td>Dr. R. H. Hutcheson, Sr., Commissioner of Health</td>
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<tr>
<td></td>
<td>Dr. Cecil B. Tucker, Deputy Commissioner of Health</td>
</tr>
<tr>
<td>1975</td>
<td>Dr. Alex B. Shipley, East Tennessee Regional Office</td>
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<td></td>
<td>Dr. R. M. Neudecker, West Tennessee Regional Office</td>
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<tr>
<td>1976</td>
<td>Ernest L. Shipe, Jr., Knoxville Branch Laboratory</td>
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<td></td>
<td>Joe Covington, Environmental Sanitation</td>
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<tr>
<td>1977</td>
<td>Dr. Homer P. Hopkins, Policy Planning</td>
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<td>1979</td>
<td>Dr. Eugene W. Fowinkle, Commissioner of Health</td>
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<td>1980</td>
<td>Dr. Durward R. Collier, Dental Health Services</td>
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<td>1981</td>
<td>Dr. Mary B. Duffy, Knox County Health Department</td>
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<tr>
<td>1982</td>
<td>Sara Hood, Bureau of Environment</td>
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<td>Gerald E. Ingram, Bureau of Environment</td>
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<td>1983</td>
<td>Mary Jane Sassaman, Laboratory Services</td>
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<td>1984</td>
<td>Kenneth W. Sanders, Metro Davidson County Health Department</td>
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<td>1985</td>
<td>Mary H. Mincey, East Tennessee Regional Office</td>
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<td>1986</td>
<td>Charles Wood, Food and General Sanitation</td>
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<td>1987</td>
<td>Doris G. Spain, Mid-Cumberland Regional Office</td>
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<td>1988</td>
<td>Patricia Kempson Hager, Dental Health Services</td>
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<td>1989</td>
<td>Janey Blackburn, Division of Information Resources</td>
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<td>1990</td>
<td>Sandy Johnson Bowers, East Tennessee Region/Johnson City</td>
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<td>1991</td>
<td>Larna Grindstaff Smith, Johnson City Environmental Field Office</td>
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<td>1992</td>
<td>Dr. Fredia S. Wadley, Metro Davidson County Health Department</td>
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<td>Sandra J. Whittle, TPHA Office</td>
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<td>1994</td>
<td>Martha Barber, West Tennessee Regional Office</td>
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<td>1995</td>
<td>Hugh A. Barnes, Memphis-Shelby County Health Department</td>
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<td>1996</td>
<td>Carol Ballard, Memphis-Shelby County Health Department</td>
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<td>1997</td>
<td>Howard W. Roddy, Chattanooga-Hamilton County Health Dept.</td>
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<tr>
<td>1998</td>
<td>Becky Barnes, Chattanooga-Hamilton County Health Department</td>
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<td>1999</td>
<td>Dr. Tony Emison, Jackson-Madison County Health Department</td>
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<td>2000</td>
<td>DeeDee McKimm, Memphis-Shelby County Health Department</td>
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<td>2001</td>
<td>Peggy Tackett, Montgomery County Health Department</td>
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<tr>
<td>2002</td>
<td>Dr. Wendy J. Long, Assistant Commissioner of Health</td>
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<td>Dr. James A. Gillcrist, Oral Health Services</td>
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<td>2003</td>
<td>Dr. David Brumley, South Central Regional Office</td>
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<td>2004</td>
<td>Rick Long, Mid-Cumberland Regional Office</td>
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<td>Annette Haley, Mid-Cumberland Regional Office</td>
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<td>2005</td>
<td>Tommy Smith, West Tennessee Region, Union City Office</td>
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<td>2006</td>
<td>Vanessa Watkins, Robertson &amp; Cheatham County Health Departments</td>
</tr>
<tr>
<td>2007</td>
<td>Dr. Allen Craig, Communicable &amp; Environmental Disease Services</td>
</tr>
</tbody>
</table>
TPHA Award Recipients

R. H. Hutcheson, Sr., MD, Career Award

*Presented to a person in the field of public health who has made outstanding contributions to public health throughout his or her career.*

<table>
<thead>
<tr>
<th>Year</th>
<th>Name &amp; Affiliation</th>
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<tbody>
<tr>
<td>1975</td>
<td>Sammie G. Shapiro, Division of Nursing</td>
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<td>1976</td>
<td>Dean John P. Lamb, East Tennessee State University</td>
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<td>1977</td>
<td>James L. Church, Bureau of Environmental Sanitation</td>
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<td>1978</td>
<td>Jane Smoot, Upper Cumberland Regional Office</td>
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<td>1979</td>
<td>Ernest Barnard, Johnson City Branch Laboratory</td>
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<td>1980</td>
<td>James Payne, Division of Tuberculosis Control</td>
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<td>1981</td>
<td>Hazel H. Fowler, Health Services Administration</td>
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<td>1982</td>
<td>Helen Booth, South Central Regional Office</td>
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<td>1983</td>
<td>Dr. Joseph M. Bistowish, Metro Davidson County Health Department</td>
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<td>1984</td>
<td>Dorothy Latimer, Obion County Health Department</td>
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<td>1985</td>
<td>Dr. H. R. Anderson, Division of Tuberculosis Control</td>
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<td>Sarah Rice Miller, Dyer County Health Department</td>
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<td>Dr. A. J. Mueller, Jackson-Madison County Health Department</td>
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<td>Dr. Mary B. Duffy, Knox County Health Department</td>
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<td>Dr. Robert H. Hutcheson, Jr., Communicable Disease Control</td>
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<td>Wilbur Bailey, Jackson-Madison County Health Department</td>
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<td>Al Taylor, Memphis-Shelby County Health Department</td>
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<td>Sumner Glassco, Memphis-Shelby County Health Department</td>
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<td>Dr. Durward R. Collier, Oral Health Services Section</td>
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<td>Howard W. Roddy, Chattanooga-Hamilton County Health Department</td>
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<td>Sherryl Midgett, Bureau of Health Services, Nashville</td>
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<td>Rena Mills, East Tennessee Regional Office</td>
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<td>2001</td>
<td>Kate Wells, Office of Vital Records</td>
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<td>Dr. Fredia S. Wadley, Commissioner of Health</td>
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<td>Hugh Barnes, Southeast Regional Office</td>
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<td>Dr. Charles B. Hamilton, University of Tennessee, Knoxville</td>
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<td>Rick Long, Mid-Cumberland Regional Office</td>
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<td>Patti Harden, West Tennessee Regional Office</td>
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<td>2007</td>
<td>Jo Ann Armbrister, East Tennessee Regional Office</td>
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</tbody>
</table>
TPHA Award Recipients

Presented to an employee of a regional or local health department who has made outstanding contributions in the field of public health over a period of several years.

1986 Dr. C. D. Huffman, Mid-Cumberland Regional Office
1987 Dr. Robert Q. Ingraham, Southwest Regional Office
Doris G. Spain, Mid-Cumberland Regional Office
1988 Jean Bickel, Cannon County Health Department
1989 Anthony W. Harden, Southwest Regional Office
1990 Hugh A. Barnes, Memphis-Shelby County Health Department
1991 Patricia Harden, West Tennessee Regional Office
1993 Martha Barber, West Tennessee Regional Office
1994 Dr. Charles Chapman, First Tennessee Regional Office
1995 Bill H. Ray, Sullivan County Health Department
1996 Eloise E. C. Waters, Bradley County Health Department
1997 Sammie Walker, West Tennessee Regional Office
1998 Carla Coley, Benton, Carroll, & Henry County Health Departments
1999 Sam Rose, Chattanooga-Hamilton County Health Department
2000 Betty Thompson, Metro Davidson County Health Department
2001 Barbara Medlin, Jackson-Madison County Health Department
2002 Carole A. Martin, East Tennessee Regional Office
2003 Richard Swiggart, West Tennessee Assessment and Planning
2004 Suellen Joyner, South Central Regional Office
2005 Marilyn Wortman, Dyer County Health Department
2006 Marilyn Barnes, Lake, Dyer, Crockett, & Obion County Health Departments
2007 Sandy Halford, East Tennessee Regional Office
TPHA Award Recipients

Public Health Worker of the Year

Presented to a person in the field of public health who during the past three years has provided outstanding service to public health.

1973 Dorcie Yates, Humphreys County Health Department
1974 Thomas H. Hale, Benton County Health Department
1975 Vernon L. Smith, Southwest Regional Office
1976 Dr. Leonard Chadwell, First Tennessee Regional Office
1977 Dr. Robert S. Sanders, Rutherford County Health Department
1978 Rebecca J. Groves, Center for Health Statistics
1979 Hugh Bellamy, First Tennessee Regional Office
1980 Larry Bowles, East Tennessee Regional Office
1981 Manny Martins, Health Services Administration
1982 Frank L. Duncan, Knox County Health Department
1983 Eddie H. Abernathy, Hawkins County Health Department
1984 Marguerite Sallee, Bureau of Health Services
1985 Joyce Holt, Stewart County Health Department
1986 Judith Womack, Mid-Cumberland Regional Office
1987 Susie Baird, Bureau of Health Services
1988 Richard C. Swiggart, Memphis-Shelby County Health Department
1989 Dr. Barbara Levin, Monroe County Health Department
1990 Fred Adams, Greene County Health Department
1991 Debbie Dotson, Sullivan County Health Department
1993 Joy Lorance, Cannon County Health Department
1994 Rebecca Johnson, Hardin County Health Department
1995 Peggy Tuckett, Montgomery County Health Department
1996 Cindy Lewis, West Tennessee Regional Office
1997 Christie Morris, West Tennessee Regional Office
1998 Charlene Nunley, Grundy, Franklin, Bledsoe, & Sequatchie County Health Departments
1999 Sharyn Thompson, Jackson-Madison County Health Department
2000 Jo Ann Armbrister, East Tennessee Regional Office
2001 Rose Kidwell, East Tennessee Regional Office
2002 Barry Moore, Memphis-Shelby County Health Department
2003 Art Miller, Roane County Health Department
2004 Dr. David Brumley, South Central Regional Office
2005 Dr. Tim Jones, Communicable & Environmental Disease Services
2006 Joan Carter, Lincoln & Moore County Health Departments
2007 Jennifer Spears, Trousdale County Health Department
TPHA Award Recipients

Public Health Group Award

*Presented to a group, unit, or department that has made an outstanding contribution to public health.*

- 1993: Claiborne County Health Department, Tazewell
- 1994: Middle Tennessee HIV Treatment Center, Columbia
- 1995: Crockett County Health Department, Alamo
- 1996: Nurse Case Managers, Memphis-Shelby County Health Department
- 1997: Health Assessment and Planning, East Tennessee Regional Office
- 1998: Henderson County Health Department
- 1999: Henry County Health Department
- 2000: West Tennessee Alcohol and Drug Central Intake, Jackson
- 2001: LaCross Surveillance Team for East Tennessee Region and Knox County
- 2002: Scott County Health Department
- 2003: Public Health Unit, Upper Cumberland Region
- 2004: Chattanooga/Hamilton County Health Department TB, HIV, and LEP Teams
- 2005: Tennessee Public Health Nursing Hurricane Relief Team
- 2006: Campbell County Health Department
- 2007: Washington County Health Department

Partners and Leadership (PAL) Award

*Presented to a non-public health professional, group, or organization that has made a significant contribution on behalf of public health.*

- 1999: Dr. Robert C. Coddington, Chattanooga (Individual)
  Dr. James P. Guider, Loudon (Individual)
- 2000: The Communications Group, Little Rock, AR (Group)
- 2001: Dwight E. Murphy, Scott County Executive (Individual)
  Music City Division Program Services – March of Dimes (Group)
- 2002: Claude Ramsey, Hamilton County Executive (Individual)
- 2003: Clay County Health Council (Group)
- 2004: Kathy Krone Johnson, Reporter, Dyersburg (Individual)
  Laura T. Harrill, Blount County Health Improvement Initiative (Individual)
  Junior League of Murfreesboro (Group)
- 2005: Dot Watson, Partners for Healing, Tullahoma (Individual)
  Dispensary of Hope, Rutherford County (Group)
- 2006: Pickett County Health Council (Group)
- 2007: Dr. Ray Burden, U.T. Extension-Hamilton County (Individual)
  Unicoi County High School Horticulture Class (Group)
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Determining Baseline Self-Harm Behavior in Knox County Youth
J. Mark Prather, PhD, Kathleen C. Brown, PhD, Knox County Health Department

Background: Deliberate self-harm is of increasing interest to those concerned with adolescent health. Self-harm includes a number of behaviors including cutting, burning, piercing, pulling-out of hair, and the prevention of wound healing. The limited research conducted on this behavior indicates that it is most often non-suicidal in intent and more closely associated with emotion regulation, especially stress relief. Anecdotal reports from parents, community agencies, and school officials suggest the behavior is common among Knox County youth. Lack of local data was immediately apparent and provided rationale for conducting the survey. Methods: Through collaboration with the school system, we were able to conduct a computer-based survey on self-harm behaviors in a representative sample of Knox County high school students. A shortened version of the Deliberate Self-Harm Inventory (Gratz, 2001) was administered as an addendum to the Youth Risk Behavior Survey in November 2007. SAS (Statistical Analysis Software) was used to manage the data and perform the analyses. Results: A baseline prevalence of self-harm behavior in Knox County high school students was established indicating an overall 34.9% (CI:31.2-38.8) prevalence for performing any of the measured self-harm variables during their lifetime. Conclusion: The prevalence of self-harm behavior among Knox County high school students warrants attention. Survey results can be used to initiate a conversation around reducing and preventing this behavior.

Initiating Safety Contracts to Modify Behaviors among College Students
Peggy Johnson, MPH, Kiley Winston, MPH, CHES, June Gorski, DrPH, CHES, University of Tennessee, Knoxville

Background: Unintentional injuries are the greatest cause of morbidity and mortality in college-age students. Colleges and universities have a responsibility to prevent injuries from occurring on school property and at school-sponsored events. In addition, schools can teach students the skills needed to promote safety and prevent unintentional injuries, violence, and suicide while at home, at work, at play, in the community, and throughout their lives. Methods: During the semester-long course, Personal Health and Wellness, each student was required to identify a personal safety risk and describe how to reduce the risk. A written contract was provided by the instructor. The student was expected to complete the safety contract citing peer reviews journal articles as a basis for a personal safety plan. This qualitative research was conducted for a full academic year at the University of Tennessee. The safety thematic areas identified by participants and findings from this study will be reported. Results: The results of the surveys and literature reviews of this study indicate that there are areas of safety that should be addressed by the University of Tennessee to promote safety and prevent injuries to the student population. Results of this study indicate that unintentional injuries are the leading cause of death in college students and are the 5th leading cause of death overall. Results indicate that the top three causes of fatal unintentional injuries include: motor vehicle crashes (41.8%), falls (14.8%), and poisoning (13.9%). Conclusion: Unintentional injuries are the primary cause of morbidity and mortality in young adults ages 15 to 24 years. Surveys conducted by the authors of this study indicate that work-related injuries are a significant percentage of the unintentional injuries on the campus of the University of Tennessee. Further research should be done to identify the causes of unintentional injuries that are work-related. These efforts will contribute to the development of strategies for the prevention of injuries to college students working on and off campus.

Melanoma in Southern Appalachian Region: Examination of Patterns and Comparison of Rates
Lana McGrady, MS, James Anderson, MD, PhD, Joel Hillhouse, PhD, Tim Aldrich, PhD, College of Public Health, East Tennessee State University

Background: Cancer is the second leading cause of death in the U.S. Incidence of melanoma has been increasing faster than any other malignancy. Research has shown that the incidence rates of skin cancer are higher in Appalachian regions compared to the national average. Focus of this study is the Southern Appalachian region which is considered to be medically underserved, especially in its rural areas. Methods: Crude and age-adjusted incidence and mortality rates for melanoma were requested from the Southern Appalachian state cancer registries: Alabama, Georgia, North Carolina, South Carolina, and Tennessee for the most recent five-year period that state registry had completed. Appalachian counties for each state were identified using the Appalachian Regional Commission (ARC) listing. Results: Incidence rates were compared for all five states to national rates for total population subgroup and for two major risk groups: white males and white females. Maps were drawn for all three groups showing distinct clusters of high melanoma incidence rates for all five states. The clusters for all three subgroups consistently represented the distinct portion of the Appalachian Tennessee, North Carolina, South Carolina, and Georgia. Conclusion: These findings advocate further research on this subject within the Appalachian region. The need for efficacious interventions is
imperative given that melanoma mortality may be prevented if treated in the initial stages. Such interventions could include an increase in patient screening and raising awareness about melanoma. This could ultimately result in a decrease in mortality rates and an improvement in the quality of life within the region.

Rurality and Birth Outcomes: Findings from Southern Appalachia and the Potential Role of Pregnancy Smoking
Beth A. Bailey, PhD, Laura K. Jones Cole, MS, MA, Department of Family Medicine, East Tennessee State University

Background: Rates of preterm birth (PTB) and low birth weight (LBW) vary by region with disparities particularly evident in the Appalachian region of the South. Community conditions related to rurality likely contribute to adverse birth outcomes in this region. This study examined associations between rurality and related community conditions and newborn outcomes in Southern Appalachia and explored whether pregnancy smoking explained such associations. Methods: Data for all births in a Southern Appalachian county over a two-year period were extracted from hospital records. Results: Data were available for 4,144 births, with 45 different counties of residence. Babies born to women from completely rural counties on average weighed 700gm less, were 1.5 inches shorter, and were born more than three weeks earlier than less rural infants. In addition, these babies were 4.5 times more likely to be LBW, four times more likely to be PTB, and five times more likely to be admitted to the NICU. Effects were also found for per capita income, poverty rate, and unemployment rate, all of which were associated with rurality. Some, but not all of the association was explained by elevated rates of pregnancy smoking. Conclusion: Babies born to women residing in rural and economically depressed counties in Southern Appalachia are at substantially increased risk for poor birth outcomes. Improving these outcomes in the rural South will likely require addressing access to health services and information, health care provider retention, transportation services, employment opportunities, and availability of public health services including smoking cessation assistance.

INFORM, EDUCATE, AND EMPOWER PEOPLE ABOUT HEALTH ISSUES

A Night to Remember
Christy J. Smith, Chattanooga-Hamilton County Health Department

Background: Hamilton County teens are becoming more aware of the dangers of drinking and driving with the help of an award-winning video, A Night to Remember. Created by the Chattanooga-Hamilton County Health Department, Red Bank High School students, the Advisory Council on Traffic Safety, the simulated crash involved the Hamilton County District Attorney's office, Red Bank Fire and Police Departments, Hamilton County EMS, the Hamilton County Sheriff’s Department, and other volunteers. Methods: The video was filmed in October 2007 during the Advisory Council for Traffic Safety’s (ACTS) simulated crash. It won a first-place award from the Tennessee High School Press Association for best electronic news gathering. Approximately 250 Red Bank High School seniors assembled before a staged fatal car crash involving student and parent actors, narrators, and actual emergency responders. A Night to Remember covers not only the homecoming crash scene, but also scenes from a hospital emergency department, funeral home, and local courtroom. Results/Conclusion: This public service project was produced and reported by teens to encourage other teens to make positive decisions regarding drinking and driving. The ACTS council coordinates these simulated crashes throughout Hamilton County and will show the video in schools where a simulation is not possible. The goal of the program is for students and adults to come together to draw attention to the dangers associated with drinking and driving; the consequences of which not only affect them, but their friends, family, and the entire community.

Agreement between Perceived and Measured Body Mass Index (BMI) in a College Population
Sarah Jacob, Marian Levy, DrPH, RD, University of Memphis

Background: Perception of body image is a strong determinant of weight management practices in young adults. Individuals of normal weight who perceive themselves as overweight are at increased risk for eating disorders. Conversely, overweight/obese individuals who do not perceive themselves as such are unlikely to initiate weight management. This study examined the association between perceived and calculated BMI in a diverse sample of college students. Methods: College students (n=240) attending a university-sponsored health fair completed a brief survey to assess demographics and body weight perception. Sixty-six percent of the sample was female; 61% African American, 27.5% Caucasians, and 12.5% other races. Prior to anthropometric measurement, students were asked to rate whether their weight for height was ‘too low,’ ‘about right,’ or ‘too high.’ Actual BMI was calculated from height and weight measurements obtained using a standard protocol. The study was approved by the Institutional Review Board at the University of Memphis. Results: Measurements found 47% of students were normal weight, 32.5% overweight and 20.5% obese. Self-perceptions of BMI indicated 5% of students rated themselves as underweight; 58.3% perceived themselves as the right weight; and 28.3% perceived themselves overweight. Over half (58%) of student perceptions matched their actual BMI, while 32.8% were inaccurate. Chi-square goodness-of-fit test found a significant 29% of students underestimated their actual BMI (p <0.05). Conclusion: This study suggests that obesity has become so normative that college students fail to recognize normal weight. Increasing awareness of healthy weight may be important in promoting positive health behaviors among young adults.
Be Aware Take Care: HUGS Workshop for Prenatal/Postpartum Women

Patti Gervin, Chattanooga-Hamilton County Health Department

Background: HUGS (Help Us Grow Successfully) is a home visiting program which offers support and education to new mothers and their children. A grant was awarded to HUGS from the local Minority Health Committee to present a workshop for prenatal/postpartum women. This workshop was divided into three components: SIDS, prenatal care, and child safety. The SIDS area there were displays of safe and unsafe infant sleeping arrangements. The prenatal component focused on alcohol, drugs, smoking, nutrition, STD’s, breast feeding, and birth control. Shaken baby, choking hazards, car seat, and water safety were topics addressed in the child safety section. The TENNderCare staff also addressed the importance of every child receiving their EPSD&T exam. Methods: The workshop was visual and interactive for the participants. Props, videos, hands on activities, and demonstrations were used in each area. Interaction between staff and participants was individualized in each section. A SIDS survey related to their knowledge of safe sleep habits was given to each participant. Results: The goal of the workshop was to provide specific information using visual aids and staff interaction on prenatal and child health and safety. Over 200 prenatal and post-partum women attended the workshop. Approximately 75 percent of the women who attended were minorities. Incentives were given to each participant which included child safety items. Conclusion: Due to the positive feedback from the participants this workshop was conducted on a smaller scale at two local health clinics. All participants were made aware of the risks of SIDS, bed sharing, and the Back to Sleep Campaign, preventive measures for low birth weight and preterm labor, and child-safe environments.

Healthy Steps: Food and Fitness for Preschoolers

Janie Burney, PhD, RD, Carrie Barker, MS, RD, LDN, University of Tennessee Extension

Background: Healthy Steps is a nutrition and physical activity program developed to prevent childhood obesity. Methods: Focus groups with preschool teachers were conducted to develop 10 thematic units. Lessons were integrated with Tennessee Department of Education’s Office of Early Learning Standards. Ecological Systems Theory was used to develop a program that enhanced the health environment of classrooms. Nutrition education resources were provided to support hands-on food preparation and tasting experiences. Physical activity lessons engaged students in structured, active play to build skills. Classrooms received all physical activity equipment required to implement each physical activity session. Participating teachers were trained by their local extension agent to implement the program. Teachers piloted four nutrition lessons and participated in physical activity three times a week for about four to six weeks in the pilot phase of Healthy Steps. Results: Healthy Steps has been shown to increase knowledge and willingness to eat healthy foods and increase the time spent on physical activity. Teachers reported improvements in student food recognition, knowledge of healthy eating habits, and increased knowledge of fruits and vegetables. Teachers reported improvements student coordination and body control as a result in participating in the physical activity sessions. The greater the time spent on physical activity, the greater improvements in skills (p<.05). Conclusion: In order to achieve lifestyle changes necessary to prevent chronic disease, education must begin early and be reinforced throughout the lifecycle. Exposing young children to tasting and preparing food and physical activity increases their willingness to eat healthy foods and be physically active.

Home Sweet Home: Promoting Voluntary Smoke-Free Policy through a Community Media Campaign

Carrie Thomas, MPH, Alicia Mastronardi, MPH, Knox County Health Department

Background: The 2004 Tennessee Youth Tobacco Survey revealed that 50.3% of Knox County middle school students are exposed to secondhand smoke at home. This provided the rationale for a community-wide media campaign highlighting the dangers of secondhand smoke. Methods: The Knox County Health Department, in collaboration with the Knox County Youth Health Board and Smoke-Free Knoxville, developed a multidimensional media campaign intended for parents about the consequences of secondhand smoke exposure. The Knox County Youth Health Board developed two media messages to be used in the secondhand smoke campaign. From these media messages, the Knox County Health Department produced billboards, posters, and postcards to be distributed throughout the community. Evaluation of the Knox County Secondhand Smoke Media Campaign will track awareness of the campaign over time. Short surveys will be administered at multiple schools and community health functions before and after billboards and posters are circulated throughout Knox County. Results: Surveys will assess current smoking habits and indoor smoking policies among parents in Knox County. The community partners involved plan to detect heightened awareness about secondhand smoke exposure within a few months of the start of the media campaign and to see demonstrable changes in smoking policies throughout the community within a year. Impact will be measured with additional follow-up surveys, Behavioral Risk Factor Surveillance Survey responses and the Tennessee Youth Tobacco Survey results as appropriate. Conclusion: Survey collection and evaluation is still in progress. At the present time, over 250 surveys have been collected at multiple community health functions.

Increasing Sleep among College Freshmen at The University of Tennessee: An Orientation Plan

Cheri Cole-Jenkins, June Gorsk, DrPH, CHES, Kenetra Hix, Caroline Price, Fluertette Sambira, Rosa J. Emory Thomas, MPH, CHES, University of Tennessee – Knoxville
Background: Adequate sleep is essential for life. Late adolescents need between 8½ and 9½ hours of sleep each night. As with many segments of the population, college students are sleep deprived averaging less than six hours of sleep per night reported. Without adequate sleep, students do not learn well and are at increased risk for drug abuse, anxiety, and accidents including car crashes. Fifty-five percent of all crashes in which the driver fell asleep involve drivers less than 26 years of age. Methods: Using aspects of the PRECEDE/PROCEED model, this research described the development of a sleep education program at The University of Tennessee with the goal of improving the quality and quantity of sleep for incoming freshmen. After researching student sleep needs and existing sleep education programs, MPH students used a modification of a program developed by the National Sleep Foundation. Topics in the sleep education program included the importance of adequate sleep for healthy living and academic success and methods to achieve better sleep in a university setting. Within the administrative assessment significant budgetary constraints were identified. Therefore, the MPH students created a master computer disk for use during freshmen orientation programs. Formative evaluations allowed modifications of the program during development. Results: Student evaluators were positive about the sleep education program and requested the program campus-wide through the online computer system. Conclusion: College student need sleep education. Computer technology offers innovative method of providing sleep education to the college students at The University of Tennessee.

Promoting Health Education Activities that Work: The Let’s Talk Talking Tin Success Story

Linda Wyatt Nelms, PhD, MPH, CHES, Pam Purkey, Donna Raines, Jackie Harris, Tammy Hamby, Kathy Scruggs, East Tennessee Region, Tennessee Department of Health

Background: Since the early 1990’s, U.S. teen pregnancy and birth rates have gradually declined. According to the Tennessee Department of Health, state teen birth rates decreased between 1996 and 2005. Despite statistical decline, teen pregnancy and birth rates, particularly between the ages of 10-17 years remain a concern. Research indicates that strong parent and family involvement with teens decrease the likelihood of teen sexual activity. To promote parent/child connectedness, health educators and community youth leadership should seek to provide parents with educational activities that elevate the likelihood for success in teen sexual health education interventions. Methods: The purpose of this study was to determine among community youth leaders the efficacy of a community-based health education activity that promotes parent/child communication and connectedness. Six Tennessee Department of Health educators in nine East Tennessee counties randomly targeted leaders from local schools and nonprofit youth organizations to promote a health education activity entitled ‘The Let’s Talk Talking Tin,’ a tin can with 100 questions promoting conversation between parent and child at the kitchen table. In response, during Let’s Talk Month, October 2007, various leaders of youth-serving organizations engaged youth in this health education activity by instructing them on how to make their own talking tin, either as a group activity within the organization or at home with parents, and use the talking tin to promote conversation between themselves and their parent/grandparent/guardian.

Results: Outreach efforts by six health educators in nine of the 15 East Tennessee counties exceeded 2,207 people, an average of 368 people per health educator. The 2,207 people served included 1,343 teens/youth (61%), 554 adults (25%), 157 professionals (7%), and 153 children (6%). Outcomes included youth leader overall satisfaction of the activity and level of participation by youth and parent, grandparent, or guardian. Community youth leaders that facilitated the activity agreed unanimously that the activity was successful, and that they would continue using the talking tin in planned activities for the populations they served. Health educators reported parent/child participation surpassed previous similar health education activities in the region. Conclusion: Community health educators and youth leaders should seek and utilize health education interventions that possess a familial interaction component as family participation plays an important role in the lives of youth and historically contributes to their ability to make better overall decisions about risky behaviors.

Peer Service Learning: Equipping Tomorrow’s Leaders to Reduce Risk-Associated Sexual Behavior

Terri L. Foxx, Elizabeth Brown, Tennessee State University

Background: The incidence and prevalence rates of HIV/AIDS remain high among college-aged students, according to the CDC (2008). For the years 2001-04, an estimated 18,849 individuals under 25 years of age were diagnosed with HIV/AIDS out of 33 reporting states. By the end of 2004, of the 12,069 people living with HIV/AIDS in Tennessee, a reported 50% had been diagnosed with AIDS. With more than 10 years of research and investigations, there is still no cure, stigmatization continues to be a cultural norm, and the spread of communicable diseases are prevalent among college students. There is a need to equip, educate, and train college-age students who are perceived as tomorrow’s leaders about HIV/AIDS transmission and the risk factors associated with sexual behavior. Methods: An online education and training service learning module will be developed from a completed literature review regarding college students’ knowledge and attitudes about HIV/AIDS at a historically black university in the South. Results: The literature will inform the college-campus of the incidence and prevalence about HIV/AIDS. The online service learning project will be ongoing to provide education and training for the college student entering as a freshman through matriculation, which can be carried beyond the college campus. Conclusion: The service learning project will fulfill the unmet need for online health information available to equip, educate, and train tomorrow’s leaders.
Secondary Prevention of Eating Disorders Targeting Female College Students: The Images Intervention
Valerie L. Sylar Johnson, University of Memphis; Katherine D. Veazey Morris, PhD, Veterans Affairs Medical Center, Memphis; Marian Levy, DrPH, RD, University of Memphis

Twenty-five percent of female college students are at-risk of developing an eating disorder, and one-third of women who develop eating disorders do so in college. With a student body of more than 20,000 students, at least 3,000 females attending the University of Memphis are at-risk. An intervention entitled Images was designed by the Eating Disorders Coalition of Tennessee (EDCT) to target female students at the University of Memphis. Images is grounded in the Socio-Ecologic Model of health promotion, recognizing that health behaviors are influenced by intrapersonal, interpersonal, community, and institutional factors. In eight weekly sessions, Images participants learn about combating society's obsession with thinness, enhancing body image, reducing weight/shape concerns, understanding emotional eating, healthy exercising, rejecting dieting, dealing positively with stress, and relapse prevention. Participants will be recruited through a campus-wide multimedia marketing campaign via brochures, flyers, posters, table tents, newspaper ads, public service announcements, news releases, and mass e-mail targeting female students interested in improving body image, reducing stress, and improving eating and exercise habits. The intervention will be piloted in fall 2008 at the University of Memphis Career and Psychological Counseling Center by a clinical psychologist and a graduate assistant who is a member of the EDCT. Outcome measures include the Eating Attitudes Test-26, Body Shape Questionnaire-34, and Sociocultural Attitudes towards Appearance Questionnaire to be administered at baseline, post-intervention, and at 10-week follow-up. A qualitative evaluation will also be administered post-intervention to obtain participant feedback.

Secondhand Smoking Prevention Endowment Grant
Micky Roberts, Blount County Health Department; Laura Harrill, Blount Memorial Foundation; Mary Beth Bevins, Blount County Public Schools; Amy Cochran, Maryville City Public Schools; Kelly Gallemore, Alcoa City Public Schools; Stephanie Strutner, MPH, Metropolitan Drug Commission; Mayor Jerry Cunningham, Blount County Government; Karrin Reinheimer, MPH, Blount County Health Council

Background: New legislation has reduced exposure to secondhand smoke, but youth are still exposed to dangerous effects of secondhand smoke in the home environments. Methods: Attempt to prevent secondhand smoking exposure for youth in Blount County by educating 10% of our Blount County parents on the effects and health consequences for their children when exposed to secondhand smoke. Our goal is to create a smoke-free environment for our Blount County youth within their home environment. We created baseline data by surveying the seventh grade parents of our three public school systems. We then saturated the home with messages regarding the effects and health consequences for smoke exposure. The delivery mechanism for this information was the youth themselves. The youth were given information every Friday in the spring semester to take home for their parent or guardian. Results: Over 200 students were involved in this program to educate parents on health effects and hazards of secondhand smoking. Parents were also asked to fill out a post survey to determine numerically if there is a significant change in the exposure to secondhand smoke. Parents were also asked to sign a ‘Smoke-free Home and Cars’ pledge. Conclusion: In our outreach effort over 200 families were informed about the hazards of secondhand smoking exposure. These families also contributed to our pre- and post-surveys which will show how much of an impact we have made in our community exposure to secondhand smoke in the home environment.

MOBILIZE COMMUNITY PARTNERSHIPS AND ACTION TO IDENTIFY AND SOLVE HEALTH PROBLEMS

Community Perception of Health: An Assessment of East Tennessee
Bonnie Hinds, Carolyn Fulghum, East Tennessee Region, Tennessee Department of Health

Background: Tennessee’s statewide community diagnosis process (circa 1996), a partnership between public and private stakeholders, utilized primary and secondary data sources to provide the foundation for community health councils to identify county specific priority areas. To assist health councils in evaluating the relevance of previously established priority areas and to identify community perceptions and concerns, in 2007 the East Tennessee Regional Health Council convened a subcommittee of regional representatives to develop a methodology, implementation strategy, and evaluation process for a community-specific reassessment. Methods: To gather data, this community-based and community-owned process utilized a survey instrument derived from the Mobilizing for Action through Planning and Partnerships (MAPP) Community Themes and Strengths Assessment. Results: The utilization of the Health Council Community Survey resulted in community-specific information regarding the thoughts, opinions, and concerns about quality of life and community assets, and these provide a portrait of the community as seen through the eyes of its residents. The results from the over 5,000 surveys completed across the East Tennessee Region by residents with racial, ethnic, and socioeconomic diversities, offer insight into the community perception of items such as the biggest health problems in the county, access to healthcare, and the most important factors for a healthy community. When combined with available quantitative data, the Health Council Community Survey provides community
Healthy Worksites Healthy People: A Model for Worksite Wellness Programs
Aimee Pehrson, MPH, CHES, Knox County Health Department

Background: The obesity epidemic is continuing to plague our communities. With 60.7% of Knox County adults being overweight or obese, the Healthy Weight Program (HWP) at the Knox County Health Department partnered with University of Tennessee Master of Public Health students to implement the East Tennessee 2 Step Recommendations to combat obesity in the worksite setting. These recommendations set forth by this peer-reviewed document stress worksites developing comprehensive wellness programs. The efforts of the HWP combined with the university partnership provide worksites in Knox County with the resources to facilitate worksite wellness programs. Methods: In order to engage businesses in developing wellness programs, the HWP initiated a county-wide worksite wellness program that includes a step-by-step toolkit, Healthy People Healthy Worksites. This toolkit was developed by the HWP in collaboration with area businesses. The HWP also initiated quarterly worksite wellness seminars to assist worksites with program planning and policy change. In addition, education materials regarding physical activity, nutrition, smoking, and stress were created by graduate public health students for more than 75 worksites in Knox County. Results: Currently the toolkit is being piloted at Molecular Pathologies Inc., Stower’s Machinery Company, and Knoxville Utilities Board and is available on the internet for the general public. The education materials and seminars are being utilized by worksites in and around Knox County and have been well received as part of a comprehensive wellness program. Conclusion: The resources created through the HWP enable Healthy Worksites and Healthy People through collaboration and partnership with businesses and the University of Tennessee.

Public Health and Engineering Collaborate to Support Environmental Justice
Marian Levy, DrPH, RD, University of Memphis; Srikant Gir, PhD, John Hochstein, PhD, Herff College of Engineering, University of Memphis

The Center for Biofuel Energy & Sustainable Technologies at the University of Memphis is a partnership between the Herff College of Engineering and the Master of Public Health Program to improve air quality and promote environmental awareness on campus. Funded by the Tennessee Department of Environment and Conservation, this effort involves the design, fabrication, and commissioning of a biodiesel production unit (BPU) that converts recycled cooking oil from cafeterias into biodiesel fuel for use in university generators, vehicles, and the Physical Plant. A particularly exciting initiative involves incorporating biodiesel in the new West Hall, the first sustainable residence hall to be constructed in the state of Tennessee. Another important enterprise is a campus-wide Biofuel Awareness Day planned for fall 2008. This event is designed to encourage environmental awareness, inquiry, and activism among students, faculty, and staff. Messages promoting social consciousness and environmental justice will be displayed in residence halls, dining facilities, and lecture halls. The biofuel initiative has tremendous economic, environmental, and health potential. Replacing conventional diesel with B20 (20% biodiesel blended with 80% conventional) can significantly reduce harmful emissions: particulates by 15%, hydrocarbons by 20%, carbon monoxide by 12%, and carbon dioxide by 16%. Use of biodiesel produced by the BPU in existing engines and in new dormitories will directly improve the quality of air breathed by the 20,000+ students, faculty, and staff on campus as well as the quality of the air breathed by residents of the immediately surrounding communities in Shelby County.

TENNderCare Community Outreach Tackling Efforts in the Upper Cumberland Region
Karen Roper, Upper Cumberland Regional Office, Tennessee Department of Health

Background: TENNderCare is Tennessee’s commitment to promoting good health in children from birth until age 21 years. TENNderCare is a comprehensive program of checkups and health care services for children who have TennCare. It provides free checkups, dental checkups and services, medical treatment, and behavioral health services. Doctors, dentists, and other health professionals do TENNderCare well checkups and other services. TENNderCare community outreach promotes checkups with the child’s primary care provider for continuity of care, but advises the local health department is also a resource if the child does not have a primary care provider. Methods: Back to School Campaigns and Health Rocks Campaigns have been conducted in some of the Upper Cumberland counties. Partners for the campaigns have included the managed care organizations, the local medical providers, the school system, housing authorities, an agency that works with the high-risk population, and other community partners such as banks, hospitals, and newspapers to target children from birth to the 20 year-olds to encourage them to get their well checkups. Results: Over 1,350 children and young adults have participated in one of these type campaigns. The poster will include the breakdown per campaign of participation. Conclusion: This outreach method represents an excellent example of public health and private sector collaboration in promoting good health in our children.
**The NFD/MNPD Wellness Initiative: A Partnership of the Metro Public Health Department and the Metro Employee Benefit Board**

Tara Beever, Sarah Vaughn, NFD/MNPD Wellness Initiative; Christopher Fletcher, MD, Lori Meyer

**Background:** The NFD/MNPD Wellness Initiative was created to address the problem of heart disease, obesity, smoking, and sedentary lifestyle among the public safety population. Similar programs have demonstrated a decrease in sick leave usage and injuries on duty. The goal is to bring about change that will improve the health and quality of life of participants enabling them to better serve the citizens of Nashville. **Methods:** The Wellness Initiative services are designed to enhance the yearly physical performed by the civil service medical examiner and the occupational health and wellness clinic staff by offering the beneficial services of an exercise physiologist (EP) and a registered dietitian (RD). The EP and RD develop personalized, disease-specific fitness and nutrition plans to help further reduce negative health variables. Services are delivered face-to-face and through electronic communication. Follow-up, including a comprehensive survey, is conducted at four weeks, 12 weeks, and six months. **Results:** The wellness staff has conducted more than 100 one-on-one consultations since the beginning of the program in September 2007. The program has been promoted through meet-and-greet events for all shifts at each Metro precinct and introduced to 37 fire halls. The staff has offered fitness and nutrition classes upon request and provided presentations to trainees at the Police Training Academy. Monthly newsletters are also distributed. **Conclusion:** The NFD/MNPD Wellness Initiative focuses on the total well-being of an individual by providing evidence-based fitness and nutrition plans. Participants are equipped with the proper tools to support healthy lifestyles, enhance job performance, and foster a healthy worksite culture.

**Howard Elementary Makes Learning and Fitness a Combined Priority**

Hal Hendricks, Sumner County Health Department

**Background:** Similar to thousands of other schools across the country, Howard Elementary staff acknowledged a growing problem – childhood obesity and lack of children’s physical activity occurring in our communities, our state, and our nation. **Methods:** In 2005, Howard Elementary established a new philosophy in order to improve students’ educational experience, test scores, as well as their overall health. An initiative within the school was established by the faculty. Teachers were encouraged to have their students exercise by walking in the hallway when students fall into a daze or become restless during class. The walks helped to energize the students and refocus their attention. The faculty saw the benefits of this and plans soon developed for the purchase of exercise equipment similar to that used at Curves fitness centers. Sixteen pieces of exercise equipment plus running boards and interactive fitness bikes were purchased. Needed classroom space was converted into a fitness area. All this was able to happen due to proper budgeting and a dedication to the plan. **Results:** Howard Elementary is recognized as an ‘Extra Mile School’ through the Walking Works for Schools Program sponsored by BlueCross BlueShield of Tennessee. Students enjoy participating in all the fitness opportunities offered at Howard Elementary. As a bonus, staff is using the fitness room also to improve their health and physical activity. **Conclusion:** In today’s schools, physical activity has taken a back seat to test scores. As a result, the health of our students is in jeopardy. Test scores are rising annually at Howard Elementary as a result of increased physical activity available during the school day to students. By not only addressing the educational needs of their students, Howard Elementary is assisting their students in becoming healthier individuals to become better citizens.

**Acquired vs. Desired Information about Diabetes among African American Women**

Bethany Eakin Wrye, Kari Campbell, Cheryl Ellis, Dianne Bartley, Department of Health and Human Performance, Middle Tennessee State University

**Background:** Diabetes is one of the most commonly diagnosed diseases in America today, with an estimated 20.8 million Americans suffering from the disease in 2005. Minorities, including African Americans, have a higher rate of diabetes type II than do Caucasian Americans. Recently focus groups have become more commonly utilized in research within the health community. The purpose of this study is to better understand how health information concerning diabetes can best be conveyed from the perspective of the African American woman by using focus groups. **Methods:** Female participants were recruited from an African American church. A focus group was conducted. Data were recorded using video cameras and analyzed using qualitative research techniques. Cluster analysis was used in order to organize and analyze findings. **Results:** Acquired Information: Physical activity is important. Many people manage the disease with insulin. There is a strict eating schedule. There is a strict diet, especially with sweets and carbohydrates. Desired Information: They wanted a simple list of easy to recognize symptoms, recipes for tasty and healthy foods, a simple method of tracking dietary/treatment progress, and convenient screening for everyone. **Conclusion:** First, annual screenings could be conducted in convenient locations, such as churches and places of employment. Second, understandable tracking methods and recognizable symptoms, as well as tasty and inexpensive recipes for healthy meals should be taught by others. Lastly, this information would be most effective when presented by a friend or someone with whom the participants identify.

**DEVELOP POLICIES AND PLANS THAT SUPPORT INDIVIDUAL AND COMMUNITY HEALTH EFFORTS**

**Howard Elementary Makes Learning and Fitness a Combined Priority**

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Open Access Scheduling: A Team Solution to an Organizational Issue
Sonya Franklin RN, MSN, Southeast Regional Office, Tennessee Department of Health

**Background:** Traditionally, patients seeking appointments in local health departments often find themselves frustrated by long waiting periods. Providers in health department settings have offered complaints about the inflexibility of the appointment scheduling format and the inconvenience placed on clients in emergency or unexpected rescheduling situations. Clinic show rates and costs per RVU were unacceptable to regional staff as a measure of productivity. **Methods:** A retrospective longitudinal analysis was performed to demonstrate the efficacy of the pilot implementation of open access scheduling at one rural health department site. **Results:** Preliminary data demonstrate a 30% increase in the rate of kept appointments for the pilot site in eight months time. Costs per RVU have decreased from $49.58/unit to $37.15/unit when compared to month/year data in November 2007. Staff satisfaction has increased along with morale. Clients have reported increased satisfaction with ability to obtain immediate appointments and have stated that they have realized a reduction in wait times while at the clinic for services. **Conclusion:** Open access scheduling provides a flexible appointment system that will increase clinic productivity, staff and client satisfaction, and reduce RVU cost while empowering clients to take responsibility for their health.

Pandemic Influenza Planning: Stakeholder Group Feedback in Metropolitan Shelby County
Marian Levy, DrPH, RD, University of Memphis; Yvonne S. Madlock, Norman La Chapelle, Barry Moore, Joan Carr, Brenda Ward, Jennifer Price, Beverly Watkins, Memphis-Shelby County Health Department

The Memphis and Shelby County Health Department (MSCHD) conducted community meetings with seven key stakeholder groups in July 2006 to raise awareness of the pandemic influenza threat, assess preparedness and response capabilities, and catalyze community-wide preparedness efforts. The seven stakeholder groups consisted of 1) elected and appointed officials, 2) emergency response community, 3) health/medical providers, 4) media, 5) schools/education, 6) business/industry, and 7) community service organizations.

A total of 203 stakeholder participants attended, and 138 (68%) completed a survey which assessed their organization’s level of preparedness. Nearly three-fourths of respondents (73%) indicated that they were discussing or preparing pandemic response plans, and only 9% had actually completed their plans. Only 4% had tested their plan, and 14% were unaware of any preparations their organizations were making. Seven percent did not know the name of the individual in their organization who was responsible for emergency preparedness. When asked “What information does your organization need to assist your planning for an outbreak?” the top three responses related to educating staff (61%), coordination with external organizations (56%), and planning for the impact of a pandemic on their staff and clients (51%). Group 7, Community Service Organizations, expressed the greatest need for assistance in planning.

As a follow-up, in March 2007 the MSCHD convened a group of 25 community agencies (e.g., Red Cross, Salvation Army, United Way, Memphis Housing Authority, Food Bank, Aging Commission, Hispanic Affairs Office) to coordinate planning for vulnerable populations. MSCHD is currently seeking CDC funding to enhance pandemic planning.

**LINK PEOPLE TO NEEDED PERSONAL HEALTH SERVICES AND ASSURE THE PROVISION OF HEALTH CARE WHEN OTHERWISE UNAVAILABLE**

Diabetic Retinopathy Screening in Tennessee: Equity of Care in a Risk Reduction Program
Lawrence M. Merin, Vanderbilt Ophthalmic Imaging Center, Vanderbilt University

**Background:** Diabetic retinopathy (DR) is the leading cause of preventable blindness among working age Americans. Therapy is available, but less than 50% of all diabetics obtain a yearly dilated retinal examination (the standard of care for every diabetic). Lack of compliance is greatest among the elderly, the poor, members of racial or ethnic minorities, and patients in rural areas. **Methods:** We established a screening network in Middle Tennessee, including community health and Veterans Administration facilities. Retinal cameras were installed and linked to a reading center. Screeners photographed patients during regular clinic visits. The reading center graded images for the presence and severity of DR. We used evidence-based guidelines to provide the PCP with follow-up recommendations. We then introduced a mobile screening service to rural East Tennessee. Appointments are scheduled in advance and ≤ 50 patients a day may be screened. The camera’s computer stores the images until it is returned to the reading center where images are graded. **Results:** Average compliance rates increased by more than 50% with greatest improvement in mobile camera clinics. All patients received standardized care; identical photographic protocol and image grading techniques were used. Results were sent to the primary care physician within one business day. Aggregate results indicate that 60% of all screenings were within normal limits or showed mild retinopathy; 30% required non-urgent referral; and 10% needed urgent laser treatment for sight-threatening diabetic retinopathy. **Conclusion:** Telemedicine-based retinopathy screening may provide uniform, high quality care to medically vulnerable patients unable to obtain conventional eye screenings.
‘Heart Health, It’s a Beautiful Thing’ Community Initiative
Christina Featherstone, Chattanooga-Hamilton County Health Department

Background: In celebration of Black History Month and Heart Health Month, the Chattanooga-Hamilton County Health Department hit the streets with a new initiative. The campaign entitled, Heart Health; It’s a Beautiful Thing, targeted local barbershops and beauty salons with predominately African American clients. In the African American culture, beauty salons and barbershops are one of the cornerstones in the community and often serve as a speaking forum on many different issues including health. The focus was to encourage individuals to know the signs and symptoms of heart disease. Methods: Participants had their blood pressure checked as well as received information on different types of heart disease. Our visits initiated conversations related to several health issues including diabetes, prostate health, breast health and access to health care. At one particular barber shop, individuals actively engaged in attempting to answer the age-old question, ‘Why men don’t go to the doctor.’ Results: The goal for this month-long program was to serve 50 clients. Fifty-one individuals were served. Many of these individuals do not have medical insurance and six were referred to a local health center for elevated blood pressure readings. All participants were encouraged to have yearly physicals including cholesterol testing. Each individual received an incentive for participating in the program. Conclusion: Two barbershops and one beauty salon scheduled monthly blood pressure screenings as a result of this month’s program. This program will become an annual community event in which we will add more locations each year.

Journey to Better Health
Misty Claude, Beth Allen, Mid-Cumberland Regional Office, Tennessee Department of Health

Background: The Journey to Better Health program is a 12-week program that was created and sponsored by the Cheatham County Health Council. The purpose of the program is to encourage students to choose a path to a healthier lifestyle. The Cheatham County Health Council selected 13 children based on their BMI’s from Cheatham Middle School to participate in the program. Methods: Curves and Snap Fitness in Ashland City have opened their facilities on Tuesday and Thursday afternoons for mandatory workouts. These workouts are free for the children and parents. Also, each Monday a representative from one of the fitness centers leads the children in a mandatory workout after school. Each Friday, the children weigh in with the school nurse so we can monitor their weekly progress. Throughout the program we hold monthly round-up sessions that will focus on body image, self-esteem, nutrition, and respect. Results: The physical results of the Journey to Better Health program are measurable; however, the emotional and mental gains could not be measured. All nine participants lost at least one pant size with five showing a decrease in percent body fat. Six participants saw a reduction in blood pressure with four showing a reduction in Body Mass Index. Conclusion: Physical results are important, but emotional and mental results are just as important. All of the children showed a tremendous increase in self-esteem, body image and energy throughout the 12-week program. They gained a bond with each other, and they learned to love themselves.

ASSURE COMPETENT PUBLIC AND PERSONAL HEALTH CARE WORKFORCE

Nurse Training Initiative: An Innovative Approach to Increase Voluntary Smoke-Free Home and Car Policies by New Knox County Parents
Amber Miner, MPH, CHES, Smoke-Free Knoxville; Carrie Thomas, MPH, Knox County Health Department

Background: Secondhand smoke exposure in the home continues to be a major public health issue in Tennessee. Twenty percent of pregnant mothers report using tobacco during pregnancy. 13.6% of all Knox County residents reported having no rules about smoking in their home, and the rate is even higher among African-American families at 18.76%. Methods: Smoke-Free Knoxville and the Knox County Health Department partnered with three area hospitals to provide training to labor and delivery nurses that discharge new mothers and infants home. The goal of the training is to increase the number of voluntary smoke-free home and car policies among parents in Knox County. Nurses are trained and encouraged to counsel new parents about the detrimental effects of secondhand smoke exposure on their baby. Following the consultation, nurses ask parents to sign a pledge card promising to keep their baby away from secondhand smoke. If the parent(s) agree, they are given a bag containing a baby bib with the slogan ‘Give me first hand love, not secondhand smoke’ and other information, including the phone number for the Tennessee Tobacco Quitline. Results: To date, an estimated 60 nurses from two of the three partner hospitals have been trained to counsel new moms about the dangers of secondhand smoke and smoking cessation resources. Conclusion: Nurses are trusted healthcare professionals, and the education they provide upon discharge can assist parents in making healthy choices for their new babies, including both voluntary smoke-free home and car policies and parental smoking cessation.

Public Health Week and Climate Change: Making an Impact at the County Level
Art Miller, Kathy Scruggs, MEd, Anderson County Health Department

Background: Anderson County is a rural/suburban county in East Tennessee. The director and health educator collaborated to celebrate the American Public Health Association (APHA) sponsored yearly Public Health Week and its 2008 theme of
climate change and its impact on community health. **Methods:** A variety of methods including a mayoral proclamation, local media coverage, daily informational e-mails, and an intra-office competition between teams to generate ideas on reducing our carbon footprint were included in the celebration. The event culminated in a staff meeting featuring a guest speaker related to the environment. At the staff meeting, teams presented their projects including a puppet show and poster board. Several of the ideas generated were implemented in the health department including more types of recycling and a cooperative vegetable garden. **Results:** Staff members were very positive in their feedback and felt their consciousness/knowledge of global climate change was heightened. It also proved to be a fun event. **Conclusion:** By organizing events around Public Health Week and its annual theme, public health departments can make an impact on the community, build morale, and increase staff awareness of relevant issues.

**Using the Outbreak Management System (OMS) in a Contact Investigation**

Roberta Hern, MPH, Knox County Health Department; Erin Holt, MPH, Jason Cummins, MPH, Tennessee Department of Health; Kathy Brown, PhD, Martha Buchanan, MD, Elena Powers, Knox County Health Department

**Background:** Contact investigation is a critical component in the control and prevention of communicable illness. In a large-scale investigation with hundreds of contacts, data management quickly becomes a challenge. The Outbreak Management System (OMS), developed by the Centers for Disease Control and Prevention, is a tool that allows efficient data management and rapid communication across jurisdictions. Until recently, Knox County Health Department (KCHD) epidemiologists had only used OMS in training exercises; however, a large-scale investigation provided an ideal opportunity to test the efficacy of OMS. **Methods:** The KCHD public health officer, disease intervention specialists, epidemiologists, clinical staff, and Central Office personnel from the Tennessee Department of Health formed an investigation team. The decision to use OMS was made, and KCHD epidemiologists received ‘just-in-time’ OMS training from Central Office. The investigation questionnaire was developed and loaded into OMS. Central Office uploaded the demographic information from a Microsoft Excel file into OMS. The epidemiologists worked closely with KCHD clinical staff to update OMS daily. Through the replication feature of OMS, rapid data synchronization between Central Office and KCHD was possible. Central Office then provided weekly contact status reports. **Results:** OMS was successfully used for conducting a large-scale contact investigation. However, inexperience was the greatest obstacle to implementation. **Conclusion:** Ample support from Central Office and communication was the key to the successful use of OMS. Based on lessons learned from this experience, OMS should be used for future investigations.

**EVALUATE EFFECTIVENESS, ACCESSIBILITY, AND QUALITY OF PERSONAL AND POPULATION-BASED HEALTH SERVICES**

**An Evaluation of Community-Based Programs Aimed at Reducing Infant Mortality in Memphis & Shelby County: Best Practices and Approaches**

Landrus Burress, Dr. Kenneth Daniel Ward, Dr. Marian Levy, University of Memphis

**Background:** Tennessee has the second worst infant mortality rate in the United States with a clear disparity in infant mortality rates of African Americans compared to Caucasians. Mortality among African American infants is 2.5 times greater than that of whites (17.4 per 1000 vs. 6.4 per 1000, respectively). Of the nation’s 50 largest cities, Memphis has the highest infant mortality rate and ranks among the bottom in many child well-being categories. **Methods:** This study examined the use of nine national best practices in current community-based programs to reduce infant mortality in Shelby County. Best practices included the following: home visitation, prenatal care access, family planning, substance abuse, smoking cessation, nutrition knowledge, folic acid consumption, social support, and sudden infant death syndrome education. Existing community-based programs targeting infant mortality were identified through the local health department, U.T. Health Science Center, program reports, internet, health professionals, and literature from the Tennessee Department of Health. Additionally, a semi-structured survey was used to interview the project coordinator/manager of each program to determine how well local programs conform to best practices. **Results:** Of the seven community infant mortality reduction programs identified in Shelby County, none utilized all nine of the best practices available. However, only one program lacked more than two of the nine best practice components. **Conclusion:** Programs in Shelby County use similar strategies as the model programs reviewed. Most of the Memphis infant mortality programs conform to many national best practice guidelines and utilize six or more recommended evidence-based practices.

**Are Obstetricians Following Best-Practice Guidelines for Addressing Pregnancy Smoking? – Results from Northeast Tennessee**

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**Background:** The rate of pregnancy smoking in Northeast Tennessee is three times the national average and more than twice the rate for the rest of Tennessee. The American College of Obstetricians and Gynecologists established the well-proven 5 A’s method of smoking cessation counseling (ask, advise, assess, assist, and arrange) as a standard component of prenatal care in 2000. The purpose of this investigation was to describe the use of the 5 A’s in prenatal care in Northeast Tennessee and to evaluate
provider attitudes toward and willingness to deal with pregnancy smoking. **Methods:** Surveys were distributed to all obstetric practices in a six-county area in Northeast Tennessee. **Results:** All respondents indicated they asked all pregnant patients about smoking, however only two-thirds indicated they always gave their pregnant smokers clear, strong, and personalized advice to quit. Less than one-quarter of providers reported always assessing willingness to quit, providing quit assistance, or arranging for follow-up. While all providers indicated they believe that pregnancy smoking affects the health of the unborn child, only one-third indicated this effect was severe, and just over half indicated that addressing smoking during a clinical encounter was of significant value. Reasons for not using the 5 A’s method on a regular basis included lack of time, not knowing where to send patients for further treatment, and a belief that an intervention would not be effective. **Conclusion:** Efforts to address high rates of pregnancy smoking in Northeast Tennessee should include a facilitation of the effective use of smoking cessation interventions in prenatal care.

**Improving Health Outcomes in Child Obesity: Common Components of Successful Programs**

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**Background:** Childhood obesity is a major health concern in the United States. In Healthy People 2010, not only is overweight and obesity identified as a leading indicator of the nation’s health, but also educational and community-based programs are targeted as a key focus area for improving the nation’s health. With a goal to increase the availability of educational and community-based programs and the quality and effectiveness of these programs, the public health advocate is charged to develop programs to ensure that knowledge translates into a quantifiable improvement in health outcomes. The purpose of this project was to identify components of programs that improve health outcomes related to child obesity. **Methods:** A critical review of successful community and public health education programs focused on decreasing child obesity was undertaken. These programs were examined for components that were considered by reviewers, program administrators, and participants to be instrumental in promoting positive outcomes. **Results:** A common theme among successful programs was that knowledge alone is seldom sufficient for achieving change, and that knowledge alone is particularly inadequate for maintaining change. Rather, obesity is a condition which results from multiple contributing factors and thus requires a comprehensive approach. **Conclusion:** An analysis of findings from successful programs targeting childhood obesity led to the discovery of common elements. By incorporating components from successful programs in the development of new programs, educators and program developers can increase the likelihood of positive health outcomes related to child obesity.

**Personnel Perceptions of Child Obesity and Diabetes Prevention Efforts in Northeast Tennessee Schools**

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**Background:** Child obesity and type II diabetes in the United States have increased over the past two decades, particularly in the rural Southeast. The purpose of this study was to better understand personnel perceptions of child obesity and diabetes prevention efforts in schools. **Methods:** Key personnel from six school systems in Northeast Tennessee were invited to participate in a written survey. **Results:** All school systems participated, with a total of 32 administrators and teachers completing the survey. Sixty-five percent of respondents believed that the amount of student physical activity at their school was too little. All respondents felt that to be healthy, students needed 30 minutes of daily physical activity at school. Eighty-four percent of respondents thought that the nutritional quality of foods and drinks at school was at least fair. Most respondents agreed that schools should not sell unhealthy snacks as fundraisers and that classroom parties should include mostly healthy foods and drinks. Eighty-two percent of personnel were very concerned about child obesity in their school community. In terms of efforts to promote physical activity and healthy nutrition for children, over 90 percent agreed that schools should do more, and all respondents felt that parents needed to be more involved. **Conclusion:** School personnel in this Northeast Tennessee sample were concerned about child obesity and seemed willing to make beneficial changes. The results of this survey will be useful in implementing a program to promote healthy changes in school curricula, policies, and environments in partnership with the Tennessee Coordinated School Health Program.

**TENNderCARE Outreach: Youth Focus Groups**

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**Background:** By the time children reach the teen years, the number seeing a doctor for an annual physical drops dramatically. The East Tennessee TENNderCare Outreach program conducted focus groups to identify youths’ perceived barriers to regular well-checkups and their perceptions on health and risky behaviors. **Methods:** A total of 134 youth participated in the focus groups. Of these, 47 were pre-teens and 87 were teens; 56% were female and 44% were male. **Results:** Some of the themes that emerged were: Health and Access to Care; Health Concerns (overweight and obesity; substance abuse - drinking, smoking and drug use; pregnancy; and AIDS); Influences on Healthy Choices (parents - mom; peers, close friend; school personnel - teacher, coach, counselor); Frequency of Access (When I am sick; twice a year);
Barriers to Doctor Visits (feeling scared; feeling embarrassed or nervous; ‘Being talked down to;’ lack of time with homework/sports; lack of money/insurance); Sexual Activity: Prevalence (‘A lot of kids talk about it;’ ‘Walk down the halls and you will see a lot of touching;’ ‘Not a big deal or nothing… People act like that’); Reasons for Engaging (peer pressure and media influence; ‘To feel and show love;’ ‘Just like doing it’). Reasons for not Engaging (scared of consequences/afraid of getting caught; church/waiting until marriage; peer pressure). **Conclusion:** Teens and pre-teens have many opinions on health-related topics and enjoy having a forum for their thoughts. Understanding youth’s perceptions may provide insight for health professionals and improve program outreach.

**RESEARCH FOR NEW INSIGHTS AND INNOVATIVE SOLUTIONS TO HEALTH PROBLEMS**

**Understanding Mechanisms Involved in Human Cytomegalovirus Dissemination in Placenta and Brain: Implications for Congenital Disease in Children**
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**Background:** In the United States, 40,000 children are born each year with congenital cytomegalovirus infection (CMV). CMV is the leading infectious cause of mental retardation and deafness in children. Primary cytomegalovirus infection in utero is second only to Down’s syndrome in causing birth defects. Central nervous system abnormalities in newborn babies can include vision loss, mental retardation, motor deficits, seizures, and hearing loss. It may also cause severe disease in immunocompromised patients such as those with HIV. These children will often experience extended hospital stays and require more aggressive and long-term health care measures for support. **Methods:** Methods employed include cultivations of primary cytotrophoblasts from fetal tissue as well cultivation of brain vascular cerebral pericytes from a commercial source. We have also developed a Tri-cell culture model of the blood brain barrier (BBB) for examining viral dissemination in real time and we have performed gene array analysis and developed a method of dual staining immunohistochemistry. **Results:** We have established HCMV in vitro infection models in both primary brain vascular pericytes and human placental cytotrophoblasts. In addition, we have developed an in vitro Tri-cell culture model of the blood brain-barrier (BBB) made up of astrocytes, brain microvascular endothelial cells (BMVEC) and pericytes. **Conclusion:** We have identified genes altered after HCMV infection of primary placental cytotrophoblasts in vitro as well as a method of dual label immunohistochemical staining of cellular and viral antigens for in vivo analysis of archival placenta and brain tissue from infants with CMV-associated congenital disease.