



# Tennessee Public Health Association Newsletter

HEALTHY PEOPLE IN HEALTHY COMMUNITIES

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## “PREPARING THE BEST GAME PLAN: TACKLING BEHAVIORS FOR HEALTH IMPROVEMENT” August 27-29, 2008

Submitted by: Art Miller, Chair, Program Committee

The Program Committee is very excited about this year’s conference. Not only do we have exceptional plenary session speakers but we have fantastic learning opportunities throughout our 24 concurrent sessions. We have put tremendous effort into having a variety of session topics. Throughout the year we stayed mindful to recruit a roster of speakers that would offer an array of topics for each discipline. In order to whet your appetite, we present the following small sample of interesting topics:

**“It’s a Small World After All: Lessons Learned from Foodborne Disease Outbreak Investigations in Chicago”** - Foodborne disease outbreaks that start with the local health department can have both national and international implications, especially when your local health department is one that serves one of the world’s largest metropolitan areas. Hear stories from Dr. Susan Gerber, Chief Medical Officer of the Chicago Department of Public Health of how important the investigative steps become when dealing with foodborne illness.

**“Selected Zoonoses of Tennessee: Prevention and Control”** - Dr. John New is a professor in the UT College of Veterinary Medicine and currently serves as head of the Department of Comparative Medicine. His extensive research has focused on diseases and infections that are transmissible from vertebrate animals, to man, known as zoonoses. Current trends in zoonosis will be discussed along with preventative and control options and measures.

**“Teen Videofest Program, An Innovative Method to Address Teen Health Issues”** - The Tarrant County Youth Collaboration in Fort Worth, Texas has found

*(Continued on page 2)*



## President’s Message Summer 2008

Glenn Czarnecki,  
TPHA President

As we all know, this has proven to be a challenging year. By the time we meet in late August many of us will be living with the impact of buy-outs and all of us will be affected by budget constraints. Through these difficult times it is important for all of us not to lose sight of why we do what we do and why we love what we do. It’s our calling to promote, protect, and improve the lives of our constituents. Remembering how our clients depend on us, will help us focus on the task at hand. At no time is it more important for folks of similar passions to gather and refuel ourselves with the mission that unites us all.

That being said, the countdown has begun! It’s hard to believe that the annual conference is only two short months away and as they say, its time to get our game faces on.

I want to start by thanking you, the members, for having the confidence in me to elect me your President for this past year. I can truly say this has been one of the most rewarding aspects of my career thus far. I have been pleased to represent you at each of the three Grand Division Meetings and want to recognize the hard work of your Vice Presidents LeeAnn Neal, Mark Houser and Melissa Davis and their respective committees for putting together three outstanding meetings. Each session was very well attended and offered a full day of sessions that were both educational and entertaining. Along the way we met some interesting people who share our passion and mission.

In spite of tough times, our organization continues to flourish. We have added a number of new friends to our membership roster. To date we have 200 new members, thanks, in part, to our newfound partnership with the

*(Continued on page 2)*

Coordinated School Health Programs, who represent nearly half of those memberships. Also participation from universities has increased significantly as painstaking efforts have been made to offer agency memberships that suit their needs, as well as the needs of their students. All indications suggest that by opening session our membership will have climbed to new heights.

Another indication of increased interest is this year's poster session. Submissions this year have far exceeded years past, to the point of capacity, resulting in having to actually turn down some well designed and well thought out applicants. The halls of the annual conference will be filled with posters from across the state, representing numerous different organizations and institutions.

Speaking of the conference, I want to again recognize the work of the all the Committee Chairs for the outstanding job they have done preparing for this year's big event. Speakers are booked, arrangements are in place, CEU/CME's are requested, awards nominations are in, exhibits are near capacity, resolutions are written, scholarship applications complete, candidates are balloted, Fun and Fitness is planned, and auction items are coming in. Who knew there was this much to do!

I encourage each and every one of you to take a long look at the registration brochure and give serious thought to joining us this year. It may take slightly more creativity on your part this year to avoid that pesky out-of-pocket expense, but whether you have to car pool, camp out, stay with a friend, ride your bike in, etc. I guarantee it will be well worth your while. I sincerely hope to see you then!

an innovative way to get teens interested in teen health. Students are given a variety of health topics to choose from and then work in teams to film, produce and edit their own video health messages. Hear from the program's coordinator, Yvette M. Jones, on how to get local companies and organizations interested in enhancing the program.

**“Colorectal Cancer Screening 2008: Opportunities for Intervention”** - Dr. Paul Schroy, Director of Clinical Research, Section of Gastroenterology, Boston Medical Center will lead discussions on the rationale for screenings as well as the new CRC screening recommendations for average risk patients. Strategies to address the barriers from the patient, provider and system perspectives will be discussed.

**“How to Fit Fitness into Your Schedule”** - Jenny Moshak is in her 20th year with the Lady Vols and oversees all sports medicine, athletic training, rehabilitation, and strength and conditioning. 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 by focusing not only on the game but also the nutritional, mental and emotional

aspects of performance. She uses this same philosophy when trying to bring a new brand of “fitness” to the lives of both children and adults.

Additional topics address diabetes, oral health, addiction, public health law, smoke-free campuses, public health and coordinated school health partnerships, infant mortality, and much, much more.

Don't miss your chance to see and hear for yourself all you can learn from these and the many other outstanding presenters at this year's annual conference: **“Preparing the Best Game Plan: Tackling Behaviors for Health Improvement.”** See you in August!

## ARRANGEMENTS COMMITTEE ANTICIPATES A WINNING SEASON!

This year's arrangements committee has created a great



game plan! Wednesday evening, as fun and fitness competition 'kicks off,' our draft picks will be cheered on by Father Ryan High School's Pep Band. Half-time festivities will include a southern style dinner and the Father Ryan Dance Team entertaining us as we anticipate the second half events.

Be sure to **pack your favorite team jersey** and get your game face on. In honor of our President, Glenn

Czarnecki, on Thursday evening we will be wearing our team colors as we open up the evening's event with a 'tailgate' party. You will find all your favorite tailgating cuisine while you are being entertained by two of Nashville's top country music songwriters. Kelley Lovelace and Lee Thomas Miller have scored big-time goals in the business, writing for some of country music's top artists in the country.

The evening's event wouldn't be complete without the sounds of Syndicate of Soul once again providing a time for everyone to tackle the dance floor.

So get your tickets in advance, grab a great seat and enjoy the game!



Kelley Lovelace



Lee Thomas Miller

## Fun & Fitness...on the Gridiron!

by Robert Goff, Fun & Fitness Committee Chair

The theme of this year's conference, “Preparing the Best Game Plan: Tackling Behaviors for Health Improvement”, will be carried onto the Fun & Fitness playing field. Regional teams will compete in the Fun &

Fitness Jamboree, a set of events with a football theme.

The first half of the Jamboree will be Wednesday before dinner with two team events – Touchdown Toss and Super Bowling. These events are great for the Peyton Manning wannabes to showcase their throwing abilities. There will then be a break before dinner for teams to hit the showers in their locker rooms. The halftime show will be held after dinner, and then the second half kicks off. The second-half events will be Mascot Mold and Cheer Challenge. Mascot Mold will give one team member from each region an opportunity to go for all the glory...with modeling clay! Cheer Challenge will showcase the hidden cheerleading skills of regional team members. Throughout both halves of the Jamboree, teams will also be judged on Team Spirit with special guests serving as judges.

The F&F Committee members from the regions have more details. Teams across the state are beginning summer camp to prepare for the Jamboree, so loosen up your throwing arm and break out the pompoms. It's time to take the field!

## David Brumley Receives SHA Award

David Brumley, DDS, Epidemiologist with the South Central Health Regional Office in Columbia, TN, was presented the



(Becky Barnes, Chairman of Awards Committee, Dr. David Brumley, and Tammy Burke, SHA President.)

Southern Health Association's (SHA) Special Meritorious Award at their recent annual meeting in Hot Springs, Arkansas. This award honors an individual for outstanding and continuous service to, involvement with, and support of the Southern Health Association whose mission it is to serve as the regional advocate for public health and for the development and growth of its leadership. The Southern Health Association is comprised of members from Alabama, Arkansas, Florida, Georgia, Kentucky, North Carolina, South Carolina, and Tennessee.

Dr. Brumley began his public health career in 1982 as a clinical dentist at the Sevier County Health Department. Since 1986, he has served as a regional dental director for three public health regions and worked for several years in Nashville in the statewide dental program. He has held his current position since 2003.

Dr. Brumley has been active in both the Tennessee Public Health Association (TPHA) and the Southern Health Association for a number of years. He has served in numerous capacities with TPHA including President in

2007. He has been a strong supporter of SHA for several years including serving as Treasurer in 2003-2004 and as Member-at-Large on the Governing Council in 2005 and 2006. For the past three years, he has been the principal author of grants to CDC requesting funds for SHA to support education conferences for the affiliate states.

Dr. Brumley has been honored several times for his work in public health. In 2004, he was named Public Health Worker of the Year in Tennessee. In 2003 he received the Above and Beyond Award from the Tennessee Department of Health and the Distinguished Service Award from TPHA. SHA is proud to recognize Dr. David Brumley for his many years of service to this Association and to Public Health.

David and his wife, Becky, reside in Franklin, Tennessee.

## NEWS FROM SOUTHERN HEALTH ASSOCIATION

Submitted by Tammy Burke, Representative to SHA

The Southern Health Association held its annual meeting, jointly with the Arkansas Public Health Association, May 7 – 9, 2008 at the Austin Hotel in Hot Springs, Arkansas. The theme of the meeting was “A Matter of Time, to Prepare Ourselves and Our Communities, to Promote Healthy Living, to Eliminate Health Disparities...The Time is Now”.

SHA members from all eight affiliate states met with the Arkansas Public Health Association membership to hear the latest information on regional public health issues and to spend time with public health colleagues from other states. Of particular note was the opening session featuring Kristine M. Gebbie, Dr PH, RN, Columbia University. Dr. Gebbie gave a motivating presentation and then served as moderator for a panel of public health officials from Florida, South Carolina and Kentucky. The topic of the presentation was Succession Planning for Public Health. The panel shared information on how their representative states were preparing for succession in the public health workforce. Dr. Stephanie B. Coursey Bailey, MD, MS, Chief of the Office of Public Health Practice at CDC gave a most enlightening presentation entitled “The Tipping Point to a New Brand of Leadership”. Conference attendees also could attend workshops on numerous topics, including the Challenges and Successes of Mass Flu Clinics in Arkansas, Health Communication Strategies, and Seeking Solutions to Health Care Disparity.

A highlight of the conference was the naming of TPHA's own David Brumley as recipient of SHA's Special Meritorious Award for outstanding service to the organization.

## COMMITTEE REPORTS

### SCHOLARSHIP COMMITTEE

Submitted by: Robb Garman, Chair

The TPHA Scholarship is awarded annually to worker(s) in Public Health who desire to advance their knowledge and increase their competence. It assists those who are pursuing training in a variety of settings in Public Health.

It is with great pleasure that we announce that the following individuals are recipients of 2008 Scholarship Awards from the Tennessee Public Health Association: Gail Harmon, East Tennessee Regional Health Office; Sonya Franklin, Rhea County Health Department; and Tamara Grayson, Chattanooga-Hamilton County Health Department.

### CONTINUING EDUCATION COMMITTEE

Submitted by: Jennifer Kozlica, Chair

The Continuing Education Committee will be offering the following continuing education credits at this year's conference:

- **Certified Health Education Specialists** - approved for 10 CEUs through the National Commission for Health Education Credentialing
- **Dentists/Dental Hygienists** - approved for 12 CEUs through the TN Board of Dentistry.
- **Environmentalists** - approved for 10 CEUs through the National Environmental Association
- **Nurses/Nurse Practitioners** - 10 CEUs through the Tennessee Nurses Association
- **Nutritionists/Registered Dieticians** - approved for 10 CEUs through the American Dietetics Association
- **Paramedic/Emergency Medical Technicians** - approved for 7 CEUs through the TN Board of Emergency Medical Services
- **Pharmacists** - approved for 6 CEUs through the TN Board of Pharmacy
- **Physicians** - approved for 9-10 CMEs through the American Academy of Family Physicians
- **Social Workers** - approved for 10 CEUs through the National Association of Social Workers

To obtain CEUs, a participant must register for them at the CEU table located near the conference registration table, document sessions attended, complete the program evaluation form, and return the form(s) to the CEU table at the end of the conference. CEU certificates will either be mailed or available for pick-up after the last session.

### CONSTITUTION AND BY LAWS COMMITTEE

Submitted by: Charles Turner, Chair

The following proposed changes to the TPHA Bylaws have been approved by the Board of Directors and will be voted on during the annual meeting at the Association's business session on Friday, August 29, 2008.

ARTICLE VI. Sections. Section 1.

Add: m) Students

### RESOLUTIONS COMMITTEE

Submitted by: Karen Lynn, Chair

The following resolutions have been approved by the Board of Directors and will be presented for adoption to the general membership at the TPHA business meeting on the morning of Friday, August 29, 2008. Questions or comments should be directed to Karen Lynn, Upper Cumberland Regional Office.

#### RESOLUTION Regarding HEALTHY FOOD CHOICES IN GROCERIES

WHEREAS, school systems across the state of Tennessee continue to prioritize the health and well-being of all children through their efforts to increase structured physical activity for children in pre-kindergarten through the eighth grade, and with their implementation of the "Junk Food" bill mandates; and;

WHEREAS, overweight and obesity now affect 2/3 of the U.S. population and 1/3 of children are overweight or at risk of being overweight; and;

WHEREAS, 27.8% of Tennessee adults are obese and 20.9% of Tennessee's children are overweight; and;

WHEREAS, overweight and obesity are linked with the development of many health problems, such as diabetes and cardiovascular disease; and;

WHEREAS, findings published in the American Journal of Health Promotion show that for men employed full time in the labor market, the combined annual per capita cost of being obese, including medical expenses and absenteeism, ranges from \$460 to \$2,030 and for women ranges from \$1,370 to \$2,485; and ;

WHEREAS, in a study documenting the costs associated with specific levels of obesity in the American workplace, researchers at RTI International and the Center for Disease Control and Prevention have found that the average annual per capita costs associated with obesity increase as body mass index increases; and;

WHEREAS, the risk for overweight and obesity has been linked with multiple factors, including the lack of access to healthful foods;

NOW, THEREFORE BE IT RESOLVED, that the Tennessee Public Health Association urges the Tennessee Grocers and Convenience Store Association to urge members to offer healthy food choices that would increase access to healthy, culturally acceptable vegetables, fruits, legumes, grains and low calorie, low fat beverages.

BE IT FURTHER RESOLVED, that the Tennessee Public Health Association supports the continued efforts of the Coordinated School Health Program in the fulfillment of their mission to improve the lives of students and their families through health education, physical education/physical activity, health services, and nutrition services.

BE IT FURTHER RESOLVED, that this resolution be furnished to the Tennessee Grocers and Convenience Store Association, the Tennessee Commissioner of Health, and the Tennessee Department of Education Office of Coordinated School Health, and that a copy of this resolution be spread upon the minutes of this association.

References:

- Tennessee Department of Education, Office of Coordinated School Health
- American Public Health Association, Policy Number 200072, 11/6/2007
- Center for Disease Control and Prevention, Behavioral Risk Factor Surveillance System
- Healthamericans.org, Tennessee index

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Articles for the next Newsletter due by  
September 16, 2008

## RESOLUTION Regarding HEALTH CARE FOR UNDOCUMENTED IMMIGRANTS

WHEREAS, in 2005, the foreign born population was nearing 36 million, 31% of whom were undocumented; and;

WHEREAS, in 2005, the Pew Hispanic Trust estimated that there were as many as 150,000 illegal immigrants residing in Tennessee and that number is growing; and;

WHEREAS, expectations are that the U.S. population will add 120 million people by 2050, about 80 million of whom are or will be here as the direct or indirect effect of immigration; and;

WHEREAS, immigrants are most likely to be employed in industries that do not offer health insurance coverage, or are unable to access employer-based or private health insurance due to cost; and;

WHEREAS, areas with relatively high uninsured rates are likely to have greater instances of vaccine-preventable diseases, communicable diseases, and disability; and;

WHEREAS, slightly more than half of all TB cases in the U.S. were among foreign-born individuals, a rate that is nearly ten times higher than for U.S.-born cases; and;

WHEREAS, persons born outside of the U.S. comprised about 24.7% of the TB cases in Tennessee; and;

WHEREAS, undocumented immigrant women were more likely to have higher rates of medical complications due to a lack of prenatal care; and;

WHEREAS, epidemiologists have found that every dollar spent on preventive care for undocumented women, including prenatal care with screening for STD's, saves over \$13 and the net savings on each prevented case of fetal HIV saves an estimated \$75,266; and;

WHEREAS, while immigrant children visit the emergency room less often than U.S born children, because they are often sicker when seeking care their emergency room expenditures are more than three times higher, suggesting that access to primary and preventive care could have prevented the illness from worsening and ultimately, reduced medical costs;

WHEREAS, local health departments are regularly called upon to provide preventive, primary care, and communicable disease, and population based services to

undocumented immigrants and their families with the provision of such services requiring high standards of confidentiality and the removal of inappropriate administrative and policy barriers;

NOW, THEREFORE BE IT RESOLVED, that the Tennessee Public Health Association urges the Tennessee General Assembly to support legislation that allows continued public health, general medical, and primary care services to people without regard to their immigration status.

BE IT FURTHER RESOLVED that a copy of this resolution be provided to the Commissioner of Health, members of the Tennessee General Assembly, the Tennessee Medical Association, the Tennessee Nurses Association, the Tennessee Hospital Association, the Tennessee Primary Care Association, the Rural Health Association, and that copies of this resolution be spread upon the minutes of this association.

References:

Routine prenatal screening for HIV in a low-prevalence setting, D M Patrick, D M. Money, J Forbes, S R Dobson, M L Rekart, D A Cook, P J Middleton, and D R Burdge

J. Passel, Estimates of the Size and Characterization of the Undocumented Population, Pew Hispanic Center, March 21, 2005.

Tuberculosis Fact Sheet, 2006.

Morbidity and Mortality Weekly Report, April 21, 2006, Vol. 55, No. RR-6.

**RESOLUTION  
regarding  
IMPROVED PREVENTION AND CONTROL OF  
MULTI-DRUG RESISTANT ORGANISMS**

WHEREAS, that multidrug-resistant organisms (MDROs) including methicillin-resistant *Staphylococcus aureus* (MRSA), vancomycin-resistant enterococci (VRE) and certain gram-negative bacilli (GNB) have been associated with increased lengths of stay, costs and mortality; and,

WHEREAS, that successful prevention and control of MDRO's requires administrative and scientific leadership and a financial and human resource commitment; and,

WHEREAS, that the prevention and control of MDROs is a national priority – one that requires that all healthcare facilities and agencies assume responsibility; and,

NOW, THEREFORE BE IT RESOLVED, the Tennessee Public Health Association urges health care quality and standards setting organizations (e.g., Joint Commission) to

create additional infection prevention and control standards, alerts, and patient safety goals focused on MDRO prevention, identification and control.

BE IT FURTHER RESOLVED, the Tennessee Public Health Association supports rigorous infection prevention and control practices in health care settings with a focus on implementing clinically proven methodologies such as recommendations from the Centers for Disease Control and Prevention (CDC)'s Healthcare Infection Control Practices Advisory Committee (HICPAC) MDRO guidelines.

BE IT FURTHER RESOLVED, a copy of this resolution be furnished to the Commissioner of the Tennessee Department of Health, the Tennessee Hospital Association, the Rural Health Association, the Tennessee Health Care Association, the Tennessee Nurses' Association, the Tennessee Medical Association, the Tennessee chapters of the Association for Professionals in Infection Control, the Tennesseans Improving Patient Safety Committee, the Tennessee Center for Patient Safety, the Tennessee Quality Improvement Organization, the Tennessee Health Information Management Association, the Tennessee Academy of Physician Assistants, the Tennessee Organization of Nurse Executives, the Joint Commission for Accreditation of Healthcare Organizations, and that a copy of this resolution be spread upon the minutes of the Association.

References:

"Management of Multidrug-Resistant Organisms in Healthcare Settings, 2006. Jane D. Siegal, M.D.; Emily Rhinehart, RN, MPH, CIC; Marguerite Jackson, PhD; Linda Chiarello, RN, MS; the Healthcare Infection Control Practices Advisory Committee, Centers for Disease Control and Prevention.

American Public Health Association, Prevention and Control of Multi-drug-Resistant , Policy Number 200717, 11/06/2007.

**SECTION NEWS**

**NURSING SECTION**

The Nursing Section will have its annual meeting August 28, 2008 at 7:45 am during the continental breakfast. Commissioner Susan Cooper will speak and Dr. Alisa Haushalter will present the history of public health nursing. Awards and \$4500 in scholarships will be awarded. New officers will be elected. Check out our recruitment poster at the annual meeting. Watch for a nursing section link from the TPHA web site. If you are a nurse and would like to join the nursing section please call Doris Spain or any member.

## CASE MANAGEMENT SECTION

The Case Management Section Meeting will begin at 7:30 on August 28. In addition to our business session, Nichelle Foster will be our featured speaker. Her topic will be "Strategies for Effectively Working with Drug-Addicted Moms and Their Drug-Exposed Infants/Children." Please make your plans to join us!

Nichelle Foster currently works at the Metro Public Health Department as a Program Specialist 2. She helps individuals determine if they have Alcohol/Drug or Mental Health problems and refers them for appropriate treatment. She received her undergraduate degree from Fisk University in Psychology, and her graduate degree from Trevecca Nazarene University in Marriage and Family Therapy. Nichelle has over ten years experience working with several populations in the Nashville area including the homeless, youth offenders, female ex-offenders who need assistance returning to their community, adults with substance abuse or mental issues, and their family members. Nichelle is married and has one adult daughter. Her passion is working with people in an effort to help them be the "Better Person" they have the potential of being. She is very active in her congregation as one of Jehovah's Witnesses and enjoys the ministry and conducts Bible Studies.

## FOCUS ON PUBLIC HEALTH ISSUES

### PRIMARY AND SECONDARY SYPHILIS SURVEILLANCE DATA: RECENT TRENDS in TENNESSEE, 2003 - 2007

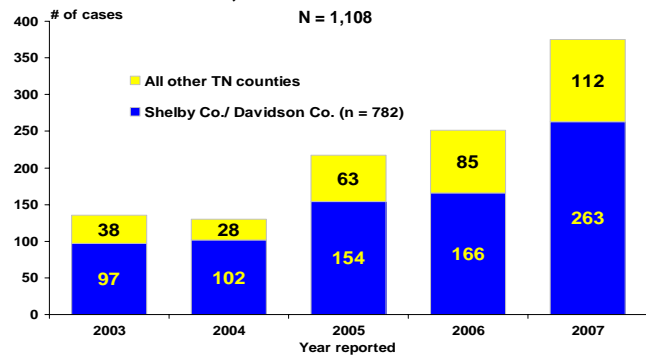
Submitted by: Shanell McGoy, Shelby County Health Dept.  
Jeselyn Rhodes, Metro Health Department

Recent trends suggest that Primary and Secondary (P&S) syphilis among heterosexuals is rapidly increasing across the state of Tennessee. P&S cases from the metropolitan areas of Davidson and Shelby Counties account for 71% (n = 782) of all cases reported from 2003 through 2007. Until recently, these two metropolitan areas had two distinct populations affected with P&S syphilis - mainly men who have sex with men (MSM) in Davidson County and heterosexuals in Shelby County.

A descriptive analysis of provisional surveillance data from local health departments was conducted to investigate the increase in cases. The analysis illustrated that P&S syphilis cases in TN more than doubled from 135 cases in 2003 to 375 cases in 2007. Between 2006 and 2007 cases of P&S syphilis increased nearly 50% (from 251 to 375): from 69 to 81 among MSM, and from 161 to 256 among heterosexuals. This increase is driven by

increases in Davidson County where heterosexual transmission went from 21% to 49% of total cases. Between 2005 and 2007, the rate among females increased 85.7% from 2.1 in 2005 to 3.9 per 100,000 in 2007. Cases among Black females increased 90% during this time period; particularly in Davidson (from 1 to 8 cases) and Shelby counties (from 44 to 78 cases). Prevention strategies should be tailored to the needs of the impacted community which may differ among areas within a state. For implementation of appropriate prevention strategies, public health should monitor local surveillance data for changes in impacted communities.

### P & S Syphilis -- Reported Cases: TN, 2003 – 2007



Data Source: NETSS, Tennessee Department of Health (2003 – 2005), STDMS, MPH and MSCHD Division of Epidemiology (2006 – 2007).  
Note: 2007 data is provisional and subject to change until validated by the Tennessee Department of Health.

### Public Health Nursing Launches Statewide Standardized Orientation

The Statewide Standardized Nursing Orientation Training was implemented in January, 2008 for all new nursing personnel, in all regions. The goal for this effort is to provide a standardized, consistent and comprehensive orientation for all new public health nursing staff regardless of their assignment in the Regions.

Deborah Hardin, State Public Health Nursing Director has stated in the Public Health Nursing Standardized Orientation and Practice Manual that public health nurses in Tennessee are striving to provide the highest quality of care for citizens as they enter the doors of our public health departments. In order to assure this quality of care is provided, a comprehensive, standardized orientation is essential. The Public Health Nursing Standardized Orientation and Practice Manual and standardized orientation training was developed through the efforts of many State and Regional Public Health nurses. With Deborah Hardin, as chair, the Standardized Nursing Orientation committee members include, Charlene Jessee, Northeast Regional Nursing Director, Janet Ridley, Southeast Nursing Director, Charlene Haynes, Mid-Cumberland Regional Nursing Director, Mica

Rudd, Staff Development West Tennessee Region, and Kathy Abbott, Nursing Supervisor, East Region. Central Office administrative and program resource staff have contributed in their area of expertise.

Positive feedback from orientees and supervisors across the Regions has demonstrated that the Statewide Standardized Nursing Orientation is launching new nursing staff into public health quickly and competently.

## REGIONAL REPORTS

### **SOUTHEAST REGION - Open Access Scheduling: A Team Solution to an Organizational Issue**

Submitted by: Sonya Franklin, RN, MSN

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. The Southeast Region is comprised of 10 counties and 11 health department sites in Tennessee. Rhea County Health Department is one of its 11 sites and in August 2007 decided to pilot a new appointment scheduling system known as open access.

Open access scheduling also known as "same-day scheduling" or "advanced access" is strongly supported in the literature. Murray (2005) defines this as the practice of doing today's work today. The result is "more timely care, increased patient satisfaction and improved practice efficiency." Kodjababian (2005), states that "given limited patient care resources, health departments across the country are seeking to increase capacity and improve patient access." He further discusses the impact of missed appointments under the traditional style of appointing patients. "One in three appointment slots go unused" in the traditional appointment scheduling system. This author articulates well the sentiment felt in health departments everywhere and echoed by the staff at Rhea County Health Department "the pressure of increasing demand for patient care, combined with the short-comings of traditional patient scheduling, requires a change to maximize public health access."

A growing body of literature describes the necessary steps a practice site needs to consider when planning to change their appointing system over from the traditional style to the "open access" style. These include but are not limited to the following:

Reduce appointment backlog

Minimize appointment types

Review and modify schedules and processes

Communicate the change with patients

Monitor performance

These steps were implemented by Rhea County Health Dept. staff and the results have been amazing. Preliminary data demonstrates a 35% increase in the rate of kept appointments for the pilot site in 9 months time. Costs per RVU have decreased from 49.58/unit to 37.15/unit when compared to month/year data in November 2007. Based on 2008 data, kept appointments are at 91.42% for the clinic overall. 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."

So why open access? Murray (2005) comments, that "under open access, you create the dignity and respect of an appointment time while doing today's work today."

### **EAST REGION - Open Combat on Childhood Obesity**

Submitted by Bonnie Hinds, Public Information Officer

Strong partnerships and creative programming are the hallmarks of community activity in the East Tennessee Region. Known across the state for its vigorous health councils, the East Tennessee region boasts numerous efforts to combat the scourge of obesity and its attendant health problems. Several health councils have focused their efforts with healthy weight initiatives on their local youth, crafting programs that encourage fun and social approaches to physical activity.

The Hamblen County Health Council completed the second year of *Healthy Hamblen Kids*, an after-school activity program, with celebrations at four participating schools in early May. *Healthy Hamblen Kids* enjoyed its inaugural year of operation in two Hamblen County elementary schools during the 2006-2007 school year and expanded to two additional schools in 2007-2008. The program was conceived by the health council, funded by the HealthStar Foundation, and made possible by a partnership with Morristown's National Fitness Center and the Hamblen County Board of Education.

Participation in *Healthy Hamblen Kids* is open to any fourth grade student in participating schools and commences at the end of the school day. Students report to their school's gymnasium for a variety of kid-friendly, kid-fun physical activities designed by National Fitness Center. During the first year of the program, National Fitness Center donated the services of staff members to teach and lead the activities. For the 2007-2008 year, National Fitness Center personnel scheduled training for community volunteers, who then supervised the

after-school programs. Volunteers included health council members, Coordinated School Health staffers, school district faculty members, and local parents. *Healthy Hamblen Kids* targets participation by fourth graders in an effort to instill the habit of exercise before BMI rates escalate, typically between the seventh and eighth grades. The goal of the program is to make *Healthy Hamblen Kids* available to the

fourth graders in every Hamblen County school. With new corporate partners already aligning for 2008-2009, the health council continues to recruit new volunteers for future expansion.

Hamblen County's next door neighbor, Jefferson County, implemented creative physical activity into its elementary schools during the course of the academic day through a program known as *Kids' Fitness*. Partnering with majors in Physical Education at Carson Newman College, the Jefferson County Health Council's Youth Subcommittee produced a videotape and teachers' guide derived from the renowned *Brain Gym* program. *Brain Gym* features brief (five minute) exercises set to music that teachers can integrate into their instructional schedule.

The *Kids' Fitness* program premiered at Dandridge Elementary School in the fall of 2007. Since then, it has been presented to other Jefferson County Elementary faculties during in-service trainings. In the fall of 2008, the health council and their Carson Newman champion, Dr. Melanie Hodgson, will offer a regional training for other school systems who might want to offer this program to their students.

Scott County's Diabetes Coalition, affiliated with the Scott County Health Council, hosted two *Survivor Challenges* in May—one at Oneida Elementary School and the other at Huntsville Elementary School. This spirited physical activity was first designed by the coalition in 2007 and offered to children at Fairview Elementary School last spring. Using the television pop icon *Survivor* as a model, committee members created an outdoor obstacle course that was at the same time a "throwback" to old-fashioned kid activities and an exotic escape to the tropics, replete with such events as "Limbo Rock" and the popular "Survivor Stew" relay.

*Survivor Challenges* are scheduled as an end-of-school activity and include classroom dialogue on outdoor play and healthy snacking as prevention to Type II diabetes. Participants also ferry a letter home to their parents, explaining the purpose of this special event: encouraging children to use their summers in outdoor play rather than the more common sedentary practices of television viewing and video games. The Scott County coalition has been designing diabetes outreach and education for the community since 2006 and commenced its efforts with funding from the Appalachian Regional Commission.

For more information on any of these youth programs, e-mail [Bonnie.Hinds@state.tn.us](mailto:Bonnie.Hinds@state.tn.us).

## NORTHEAST REGION

The University of Tennessee Medical Center's Breast Health Outreach Program is partnering with the Hancock County Health Department to offer screening mammograms for Hancock County residents. The event will be held Saturday, August 9<sup>th</sup> from 9am to 4pm at the Hancock County High School. Women 35 and older are eligible for the screenings. Health insurance will be filed for each participant and those without coverage may qualify for a free screening mammogram. A total of 23 appointments are available. Refreshments will be provided for each participant and other health care organizations and groups will be on hand to distribute valuable information and resources.

"Dining with Diabetes" is a program developed through the University of Tennessee to help educate those diagnosed with diabetes about their diets and give them more information regarding their disease. Quarterly Dining with Diabetes classes have been offered three times in Johnson County through a partnership including the Johnson County Extension Office, Johnson County Health Department, Mountain City Pharmacy, East Tennessee State University, and Appalachian State University. The community expressed a need for diabetes education within the county and has shown interest in this program through attendance with an average of 30 participants being present for each session (this is the best turnout out for any community programs). The participants receive a packet of information and recipes, they hear and ask questions from a registered dietitian, and they eat lunch prepared with diabetic recipes. A Registered Dietician from the Carter County Health Department developed meal plans using "Southern/Local" foods at the request of participants. The Dining with Diabetes sessions all take place at Johnson County Health Department's Conference Room utilizing the new demonstration kitchen. This facility provides a perfect atmosphere and equipment needed for the sessions.

The staff of the Northeast Tennessee Region responded to nine (9) confirmed cases of Hepatitis A during the month of May. In response to this, staff provided over 1,500 Hepatitis A vaccinations during a three day clinic established at the Slate Hill Baptist Church in the Mooresburg community of Hawkins County. Two of five private wells tested positive for Hepatitis A and local residents are being advised to contact the Hawkins County Health Department to determine if vaccination or other treatment to prevent hepatitis A is needed.

## UPPER CUMBERLAND REGION

The Upper Cumberland Region suffered a great loss with the sudden passing of Linda Owens on June 11, 2008. Linda was a Public Health Nurse for 33 years. She

worked with various programs over the years and served the last several years as the Coordinator of the Breast & Cervical Cancer Screening Program. Linda was widely known as a diligent patient advocate. She loved her profession and was so proud her daughter Emily followed her into nursing. Linda was a special person that blessed the lives of many and will be forever missed and remembered.

### MID CUMBERLAND REGION - Sumner County Opens Third Site



Mary Howard Hayes, County Director and Commissioner Susan Cooper

On February 7<sup>th</sup>, 2007 Commissioner Susan Cooper presented Sumner County with a check in the amount of \$311,000 to build a new health department located in Portland. On June 5, 2008, Commissioner Cooper was joined by other state and local dignitaries at the ribbon cutting and open house of the new facility.

The new clinic was made possible by a partnership between the state, the city of Portland, county of Sumner, and HCA. The health department is a beautiful 6,200 square foot facility located on land donated by the hospital.

Staff in Portland includes a nurse practitioner making it the third facility in Sumner County to provide primary care services. The Sumner County Health Department serves as a PCP to TennCare patients as well as serving numerous individuals with no insurance.

### Smyrna Clinic Receives A Facelift and Expansion!



Commissioner Susan Cooper visits with staff and Smyrna Mayor, Bobby Spivey.

On May 29<sup>th</sup>, Commissioner Susan Cooper joined staff and local officials in the grand Reopening of the North Rutherford County Health Department Clinic.

The clinic, located in Smyrna had been closed since late June, 2007 for renovation and expansion. A temporary site was leased which gave patients the ability to continue to receive services in the community.

Once consisting of 3,500 square feet, the clinic is now a beautiful 5,500 square foot facility housing nine clinic rooms. Following the expansion and renovations, doors were reopened in April. During the month of April, staff generated a total of 1,049 encounters or about 48 patients per day.

The new clinic became a reality as a result of a partnership between the state, Rutherford County, City of Murfreesboro, City of Smyrna, City of Lavergne, and the Christy-Houston Foundation.

### SOUTH CENTRAL REGION

Anne-Marie Pender, R.N. with the Coffee County Health Department in Manchester, was honored recently by the Tennessee Nurses Association with this year's Community Outreach Award. The award recognizes Pender's expertise and commitment in helping the uninsured and underserved population to access health care.

Anne-Marie is a part-time bilingual nurse for the health department's prenatal clinic. She also has volunteered at the Partners for Healing Clinic in Tullahoma and served on the board of directors of St. Teresa's Outreach Ministry. Her knowledge of medical care resources is especially valuable as she assists clients to not only enter the often complex health care system, but also to navigate within it on an ongoing basis.

Michelle Collins, a certified nurse midwife at Vanderbilt University Hospital, works with Pender and nominated her for the award. Collins' nomination related an incident when Pender drove a frightened pregnant woman (with a very high risk pregnancy) to the hospital, remaining with her throughout the delivery. "Her presence was invaluable as she comforted the woman and her family, interpreting for the family, which allowed them to understand their baby's delicate condition and the care he was given," says Collins.

The Coffee County Health Department staff feels fortunate to have Anne-Marie Pender as a co-worker and a friend.

### WEST TENNESSEE REGION

The West Tennessee Region is on the move setting a standard that others will follow.

A Community Preventative Initiative program at Children & Family Services, Inc., CFS All Stars is a school/community-based program designed to delay the onset of and prevent high-risk behaviors in middle school adolescents 11 to 14 years of age through the development of positive personal characteristics. It especially targets drug use, violence, and premature sexual activity. It is designed to help young people develop qualities that will motivate them to avoid drug use and high-risk behaviors; reduce the use of gateway drugs – alcohol, tobacco, marijuana and inhalants; help young people develop meaningful relationships with each other, their parents and the institutions that serve them; and motivate youth to develop positive character and lifestyles.

To offset negative behaviors, the agency meets with 50 or more children after school twice a week for at least four hours each week and a parent or adult family member monthly for at least one hour to discuss problems they are having and positive ways to address barriers.

As a result of the 2007-2008 program, pre/post tests and surveys reveal 64% of children enrolled with negative conduct, have a 64% improvement in conduct; and 89% shows an increase in skills with bonding through parent/child communications.

Carroll, Benton Henderson Counties Public Health Educator, Barbara Kelly created colorful National Day To Prevent Teen Pregnancy Kits for distribution in the counties prior to the May 7, 2008, National Day To Prevent Teen Pregnancy. Each kit contained *The National Day Quiz, Parent Discussion Guide, Teen Discussion Guide, What Are Teens Saying About the National Day Quiz, Facts Posters*, and the 7th Annual National Day Information Posters. Kits were delivered to middle and high schools in the following counties: Benton, Carroll and Henderson County. The schools were encouraged to allow students classroom time to log-on to [StayTeen.org](http://StayTeen.org) to take the quiz. Also, the kits were provided to 5 churches in Carroll County and 5 churches in Henderson County.

Chester County hosted it very first "Girl Talk" session for young girls age nine through 12. Beth Hamilton, Chester County Public Health Educator collaborated with community partners: Coordinated School Health, UT-Extension, and the Carl Perkins Center to team teach four educational sessions to 16 mothers and 16 daughters.

On June 2nd, the Gibson County Humboldt Health Department staff moved into the new addition of the Humboldt Health Department. However, there is still a few more weeks of renovation left in the original building to remodel and expand the family planning clinic, laboratory and clerical/administrative areas.

County. 107 doses of various vaccines were provided. Several other Memphis and Shelby County Health Department programs, including the Epidemiology Program, the Healthy Start Initiative, the Lead Screening Program, TENNderCARE, the School-Based Dental Program, Community Development and the Child Safety Seat Program also provided free services at the event. Health Department personnel provided 27 school physicals, 23 blood lead screenings, 83 dental screenings, and 17 car seat inspections. In addition to shots and screenings, parents and children were also treated to refreshments, face painting, and story-telling. Health Department personnel provided incentives and some great door prizes, including books and two children's bicycles. Approximately 191 children and parents participated in the event.

Community partners/vendors included BlueCross/BlueShield of Tennessee, Girls, Incorporated, the Imagination Library, Unison, United American Health Care, TennCare, and Birth to Books.

Jennifer Kmet, Environmental Epidemiologist and Connie Binkowitz, Manager of Community Development hand out popcorn and other goodies to children attending the health fair.



Sisters Laiyah Whisper Hicks and Jolee Phillissa Hicks enjoyed the health fair, despite the shots they both received.



**MEMPHIS-SHELBY COUNTY REGION**

**National Infant Immunization Week Health Fair**

By Joan Carr, Assistant Public Information Officer

On April 26, 2008, the Memphis and Shelby County Health Department held its first National Infant Immunization Week Health Fair at the Health Department's main office location of 814 Jefferson Avenue near downtown Memphis. The Shelby County Community Immunization Coalition partnered with the Memphis and Shelby County Health Department's Immunization Program to help plan the event.

Immunizations were provided for free at the event for all children aged 0-18 who reside in Shelby

**TO MAKE YOUR HOTEL RESERVATIONS**

Go to <http://marriott.com/bnacs?groupCode=tpbtpba&app=resvlink> You will be directed to the property's home page with the code already entered in the appropriate field. Simply enter your arrival date to begin the reservation process. OR

Dial 1-888-403-6772 to call in your reservations. Be sure to ask for the TN Public Health Assn. group rate.

**Cancellations for the TN Public Health Assn. Group must be made 2 weeks prior to arrival date.**

Tennessee Public Health Association  
 P. O. Box 210147  
 Nashville, TN 37221

## **INDIVIDUAL, STUDENT, AND AGENCY MEMBERSHIP DUES REVISED**

Submitted by: David Brumley, Chair  
 Public Policy Committee

The year was 1992. Newspaper headlines across the U.S. tell us that Johnny Carson is leaving the Tonight Show; Microsoft releases Windows 3.1; Hurricane Andrew devastates South Florida; Bill Clinton defeats President George H.W. Bush; and South Africans vote to end apartheid. The Dow Jones Industrial Average closed at 3,301 by year's end. The cost of a gallon of gas was \$1.05, and a first-class stamp was 29 cents. TPHA annual membership dues increased from \$15.00 to \$20.00.

Earlier this year the TPHA Board of Directors voted to increase membership dues for the first time in 16 years. This is only the seventh increase in the 70-year history of the Association. TPHA was officially chartered in 1939, and annual dues of \$1.00 were approved. Membership dues remained \$1.00 until 1966 when they were increased to \$2.00. Dues increased to \$5.00 in 1973, \$10.00 in 1977, and \$15.00 in 1985. Not since the earliest years of TPHA have members gone so long a period of time without a dues increase.

Effective August 29th, individual membership dues will increase to \$30.00, student membership will increase to \$15.00, and the new-member discount will be eliminated. And as an incentive to pay our dues on time (as we all know we should), the late fee will increase to \$10.00. In addition, many more agency membership categories are now available with a wide variety of benefits for companies, institutions, and organizations. Details of

the seven agency membership categories are available at [www.tnpublichealth.org](http://www.tnpublichealth.org).

A survey of state public health associations revealed that we had the lowest annual dues for individual members and students. Even after an increase, we still are one of the lowest. Add in the benefits of membership, and there is no better value than membership in the Tennessee Public Health Association.

Each year TPHA adds more new members who represent an increasing diversity of backgrounds and interests, but with a common interest to advance public health in Tennessee. Whether you're interested in advocacy, continuing education, networking, scholarships, legislation, awards, or just making new friends and renewing old friendships, TPHA will continue to provide these and many more opportunities to all its members.

The Association's financial health is essential to its ability to provide services to members, advocate for public health issues, and achieve the goals and objectives of the Strategic Plan. To achieve our vision as the leading professional organization recognized as the voice for public health in Tennessee, we need additional resources to expand and improve existing services, as well as to develop new ideas and opportunities.

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## **TPHA ANNUAL MEETING**

### **Cool Springs Marriott Hotel and Convention Center**

**August 27-29, 2008**