One Health

One Environment

One World

Your TPHA Program Committee has been hard at work this year, and as a result, the 2012 annual educational conference has shaped up to be one of the best ever!! The Registration Brochure including the listing of speakers, workshop and plenary session topics and the schedule of events has been mailed and is posted on our website at www.tnpublichealth.org.

We look forward to seeing you at the meeting September 11-14 at the Cool Springs Marriott.
Message from the President

Submitted by: Marian Levy, Dr. P. H., R.D.

The countdown has begun- a little over a month until our annual TPHA conference in Cool Springs! As I write this last message of my Presidency, the Olympics are in full swing. The fastest, strongest athletes in the world compete to achieve dreams of performance excellence.

Performance excellence has been a theme for the Tennessee Public Health Association this year, and we have undertaken many initiatives to improve public health in Tennessee. First, it has been our pleasure and great honor to partner with the Tennessee Department of Health to identify and implement statewide strategic planning for public health priorities. TPHA members attending regional meetings identified priority areas for public health in Tennessee: 1) defining the role of the Tennessee Department of Health and local health departments in improving population health; 2) improving pregnancy outcomes; and 3) reducing chronic disease risk. At our annual meeting, key messages and strategies for implementation will be developed.

Secondly, TPHA is proud to support excellence in public health training and workforce development through LIFEPATH, a consortium of universities and public health agencies in Tennessee. Through this partnership, we are able to support student membership, mentoring, and professional development, thereby enhancing the competence of Tennessee’s future public health workforce.

A third source of excellence has been our innovative “Visionary Award,” in which TPHA recognizes community partners in each of our three grand divisions who extend the borders and scope of traditional public health. We are proud that an article highlighting this exceptional effort was published in the July 2012 issue of The Nation’s Health.

Still more points of excellence this year include membership numbers (938 members and counting!); receipt of CHES Provider status from the National Commission for Health Education Credentialing; and filing APHA’s Affiliate MOU to recognize memberships of students who relocate to Tennessee from reciprocal states.

Finally, as part of our strategic planning for excellence, the TPHA Board has undertaken a comprehensive review of current policies and structures. New priorities relate to increasing the use of social media, hiring a lobbyist, and shifting our focus from regional associations toward state and national ones. To that end, the Board voted to discontinue membership in the Southern Health Association. We will vote on relevant changes in our By-Laws at the annual meeting. Please contact Robert Goff, Chair of the TPHA Review Task Force, if you have questions regarding the new priorities.

Speaking of the annual meeting… this year’s conference is shaping up to be the best yet! Dr. David Brumley and his committee have lined up a group of nationally renowned speakers, including Commissioner Dreyzehner, Deputy Commissioner Behringer, and APHA President Mel Shipp! I’m told the hotel rooms are already reaching capacity, so please make your reservations now.

In closing, thank you for the opportunity to serve as your President. TPHA members are among the most passionate, respected advocates of public health I have ever had the pleasure to know. It has been my honor to work on your behalf alongside such a strong, devoted Board and our superb Executive Director, Doris Spain.

And so, like our Olympic counterparts, we will continue to strive for excellence. But our stakes are much higher than gold medals; they are the improved health and quality of life of Tennesseans. I can’t think of more noble goals.
Notes from the Nursing Section
Submitted by: Nancy Brookshire, Chair

The current Officers and Committee Chairwomen of the Nursing Section have focused their energy into putting together an exciting section meeting for September. Dr. Carol Myers, PhD, RN will be the featured speaker at this year’s section meeting. Dr. Myers is an Associate Professor with the College of Nursing at the University of Tennessee Knoxville and Co-Coordinator of the Tennessee Action Coalition. The goal of the Tennessee Action Coalition is to ensure “that all Tennesseans have access to high-quality, patient centered health care, with nurses contributing to the full extent of their capabilities.”

It has been my privilege to work with the following Officers and Committee Chairs this year.

Officers:
Vice Chair: Cindy English
Chair Elect: Pam Browning
Vice Chair Elect: Toni McDaniel
Secretary: Mickey Harchis
Treasurer: Jennifer Johnson

Committee Chairs:
Awards: Kathy Shearon
By-laws: Ashley Alexander
Membership & Dues: Jennifer Johnson
Nominations & Elections: Pam Browning
PHN Nursing History: Judy Lea
Program: Cindy Ables
Resolutions: Cindy English
Scholarship: Judy Michael

At last count we have 202 Nursing Section members, but there’s always room for more! If you’d like to join the Nursing Section, go to the TPHA website: http://tnpublichealth.org/ and click on the membership link.

See you in September!

ENVIRONMENTAL SECTION
Submitted by: Eric Coffey, Chair

The environmental section of the Tennessee Public Health Association would like to announce the newest inductee to the Tennessee Environmental Hall of Fame is Jerry Franklin. Jerry was born in Jacksboro, Tennessee in 1939, the youngest of five children. His family moved to Lebanon, Tennessee in 1944. Here he attended Lebanon High School where he starred in football and tennis. He graduated from Lebanon High School in 1957. During his senior year, he led his Blue Devils team to a win in the Tobacco Bowl in Hartsville by scoring three touchdowns. Jerry went on to attend Middle Tennessee State University where he lettered in tennis and earned a Bachelor’s of Science degree. After his graduation in 1962, Jerry served his country as an active member of the Army.

In 1963 he was hired as a sanitarian to work Lincoln and Moore Counties. Here he worked the Grade A milk inspection program, school plant inspections, child care inspections and rabies control. Having wanted to get back to his roots in Wilson County, he transferred to the Wilson County Health Department in 1965. Soon after he met and married his lovely wife Thersa McClanahan Franklin. Their first child, Jon, was born in 1967. In 1968 Jerry receive a promotion to the district supervisor for Wilson, Smith, and Dekalb counties. In 1970, he was named the sanitarian of the year by the environmental section of TPHA. This was soon followed by the birth of Jerry and Thersa’s second son Jason in September of that same year. Jerry’s work location and duties began change in the 1970’s. Programs such as organized campground inspections, mobile home park inspections, drinking water sampling, sewage system inspections, and solid waste control were added. Booming counties such as Rutherford, and Sumner were added to his supervisory duties. During this time period, he served as the acting director for the Wilson County Health Department. In 1985, reorganization added food service establishments, hotel, and public swimming pool inspections. The lead screening program was added soon afterward.

Jerry continued to serve the citizens of Tennessee and visitors until his retirement in 2002. He and Theresa travel the state following their grandchildren’s participation in sports and 4H.

The Tennessee Environmentalist Hall of Fame was created to recognize meritorious service in the field of environmental health and the Tennessee Environmental Health Association. It is housed at Lamb Hall on the campus of East Tennessee State University which is also home of the oldest Environmental Health program in the nation. After the initial class, the Board of Directors names one to three members for induction each year with a minimum of one inductee. For election, you must receive sixty-six per cent of the vote.

This year the Tennessee Environmental Hall of Fame Dinner and Induction Ceremony will again be held in conjunction with the Tennessee Public Health Association Annual Education Conference. The ceremony will take

(Continued on Page 4)
place at the Cool Springs Marriott, 700 Cool Springs Blvd. in Franklin, Tennessee. The cost of the ticket is $30.00 and tickets will be pre-sold to allow sufficient time for preparation. Tickets may be purchased from any TEHA Board of Directors member; For East Tennessee- Eric Coffey (423) 634-5820, Melissa Wolford (423) 745-7431, and Lowe Wilkins (423) 209-8124; For Middle Tennessee – Mark Houser (931) 520-4210, Kim Davidson (931) 879-9936, and Carter Garner (615) 741-8536; For West Tennessee – Tommy Smith (731) 886-1531, and Bradley Dodd (731)852-2461. The meal will begin at 6:00 P.M. and continue until around 9:00 P.M. A silent auction will be conducted during this time. If you have this evening available and would like to hear some interesting stories, please join us for fun and fellowship.

The following resolution has 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 Wednesday, September 12, 2012. Questions or comments should be directed to Dr. Lorraine Macdonald at Lorraine.Macdonald@tn.gov.

Resolution to Promote Safe Sleeping in the State of Tennessee

Whereas, the Center for Disease Control reports that infant mortality deaths in the United States is 6.1/1000 live births, with the Tennessee rate being 7.9/1000 live births (2009).

Whereas, the Tennessee Division of Health Statistics reported 626 infant deaths in 2010, of which 131 were sleep (non SIDS) related deaths.

Whereas, the Tennessee Division of Health Statistics reported a two fold increase in sleep related deaths (61 to 131 deaths) from 2005-2010, while the overall number of deaths decreased, (718 to 626) in the same time period.

Whereas, the Tennessee Pregnancy Risk Assessment Survey (PRAMS 2009) reported that 34% of parents do not place their child on their back to sleep.

Whereas, PRAMS 2009 reported that only 30% of respondents stated their infant “always slept alone.”

Whereas, the odds ratio of a sleep related death, if placed prone (facedown) is 2-13 times greater than if placed on the back. (American Academy of Pediatrics Task Force on SIDS, 2011)

Whereas, the Tennessee Child Fatality Review 2009, found the majority of sleep related deaths were due to sleeping in a non-crib situation (82%), co-sleeping with an adult (60%), not on back to sleep (45%), unsafe bedding or clothes (25%).

Now, THEREFORE, BE IT RESOLVED, that a copy of this resolution be furnished to members of the Tennessee General Assembly, the Tennessee Commission of Health and Education, hospitals in Tennessee and the Board for Licensing Health Care Facilities to apprise the aforementioned groups of the dangers of co-sleeping and the risk of infant deaths, and that a copy of this resolution be spread upon the minutes of the Association.
REPORT OF THE
CONSTITUTION AND BYLAWS COMMITTEE
Submitted by: Kevin Morris, Chair

The following revisions (italicized) to the TPHA Constitution and Bylaws have been approved by the TPHA Board of Directors and will be voted on by TPHA members at the Association’s annual business meeting on Wednesday, September 12, 2012, at 11:00 AM (CDT).

CONSTITUTION

ARTICLE VII. Board of Directors

Section 1. The Board of Directors of the Association shall consist of the following:

(e) The Representative to the Southern Health Association.

(e) Remove “the Representative to the Southern Health Association”

ARTICLE X. Executive Committee

Section 1. The Executive Committee shall consist of the officers of the Association, the Immediate Past President, the Representative to the SHA, and the Representative to APHA.

Remove “the Representative to the SHA”

BYLAWS

ARTICLE III. Board of Directors

Section 8. The Board of Directors shall elect one Representative and one alternate Representative to the Governing Council of the American Public Health Association and one Representative and one alternate Representative to the Southern Health Association, who may serve as many as two (2) consecutive three year terms. The alternates shall be elected from the membership of the Board of Directors.

Remove "...and one representative and one alternate representative to the Southern Health Association..."

Change "The alternates..." to "The alternate..."

ARTICLE IV. Executive Committee

Section 1. In addition to those prescribed in the Constitution, the Executive Committee shall have the following duties and powers:

(d) To study the resolutions and policy statements of American Public Health Association and Southern Health Association, establish positions for the Association, and instruct the respective Representatives.

Remove “...and Southern Health Association...”

Change “...respective Representatives.” to “...Representative.”

ARTICLE V. Standing and Special Committees

Section 2. (l) Public Policy Committee shall be chaired by the immediate past president of TPHA and shall consist of the following members: TPHA President, President-Elect, the American Public Health Association Representative, the Southern Health Association Representative, representatives of each of the three grand divisions, at least one metro health department representative, at least one health council representative, and the chairs of any subcommittees including, but not limited to, Legislative and Resolutions.

Remove “...the Southern Health Association Representative...”
Following the ABC’s of Safe Sleep Can Save Lives
Submitted by: Rachel Heitmann
Injury Prevention and Detection Director
Tennessee Department of Health

Infant mortality has a profound impact on all citizens of Tennessee. One of the top priorities of the Tennessee Department of Health is to reduce the State’s infant mortality rate. Tennessee has made progress in reducing the infant mortality rate from 8.7 in 2007 to 7.9 in 2010. In 2007, 718 babies died before their first birthday, however in 2010, that number was down to 626. Although there has been a significant decrease in the total of infant deaths, the number of preventable sleep-related infant deaths has increased.

This increase may be partly due to better classification of infant death causes. Many infant deaths used to be attributed to SIDS; however, a death should be attributed to SIDS only after an autopsy, thorough death scene investigation, and review of the medical history reveal no specific cause for the infant’s death. According to the most recent Child Fatality Review data, only 8 infant deaths were due to SIDS in 2010, compared to 36 in 2007. Causes of other sleep-related deaths include suffocation, such as when an adult rolls over on an infant or an infant is smothered by pillows or blankets. In 2010, 131 such preventable sleep-related deaths occurred in Tennessee.

Following the ABC’s of safe sleep (placing babies Alone, on their Back and in a Crib) can prevent SIDS and other sleep-related deaths. The Tennessee Department of Health promotes the American Academy of Pediatrics recommendations that infants should:

* Always be placed on their backs to sleep
* Sleep alone in a crib or bassinet, although the crib or bassinet can be in the same room as an adult caregiver
* Not have bumper pads, blankets, stuffed animals, toys, or pets in their cribs
* Sleep on a firm crib mattress with the mattress covered only by a fitted sheet

In response to the increase in sleep-related deaths, the Tennessee Department of Health has launched a new safe sleep campaign. New fliers, posters and door hangers have been created to distribute through the local health departments and community agencies. Buttons, ink pens, dry erase memo boards and onesies with a safe sleep message are all being distributed through the regional and local health departments.

In addition to educational and promotional materials being distributed, the Department is spreading the safe sleep message through city bus advertisements and public service announcements. City buses in Nashville, Memphis and Chattanooga will be carrying a safe sleep advertisement through the end of September. Dr. Dreyzehner recorded a public service announcement that is being broadcast statewide through the end of September.

The Tennessee Department of Health is encouraging all Tennesseans to follow the ABC’s of safe sleep. Community partners are being recruited to help spread the word and promote this message. Organizations interested in becoming safe sleep partners should contact Rachel Heitmann at Rachel.Heitmann@tn.gov. More information about safe sleep can be found on our new website at safesleep.tn.gov.
REGIONAL REPORTS

MID CUMBERLAND REGION

Mid-Cumberland Region Children’s Special Service (CSS) Pilot:
Addressing Childhood Obesity as a Special Service
Submitted by: Vincent Pinkney, Assistant Regional Director

Children's Special Services (CSS) provides services to children with special health care needs that meet certain financial and medical criteria. In addition to medical care (surgery, physicians/clinic visits), medical supplies, pharmaceuticals and therapies provided for children under 21 years of age living with certain medical conditions, children living with obesity will now be a covered diagnosis within the CSS program. Recognizing the tremendous burden of obesity in Tennessee particularly among children, the Department of Health is launching a pilot in the Mid-Cumberland Region and Metro-Davidson County to explore the possibility of covering physical activity resources (YMCA and other local fitness membership) for CSS enrollees. In order to be enrolled, the child must have a body mass index (BMI) at or above the 95th percentile for his/her age and sex. Benefits available to CSS enrollees in the pilot will include coverage for medical visits to physicians that are authorized CSS vendors; coverage for nutritional counseling up to twice per month from authorized CSS vendors; one year membership to a community fitness resource for the family maintained by a commitment to three times per week and a monthly weigh-in; and access to a quarterly food demonstration and healthy food basket.

CSS employs a community partnership approach to reach families to link and train parents to much needed resources in an effort to support the child. As evident from the 2011 Youth Behavioral Risk Factor Surveillance System Report, in every grade in high school at least one in seven (14%) students is obese, not just overweight. The same YBRFSS report indicated that more than 40% of students (Grades 9th - 12th) self-reported that they are currently trying to lose weight.

The Children’s Special Services program hopes that this pilot will bridge the gap between students being aware of available community resources and helping children and their families that have financial constraints be able to access these resources to adopt a healthy lifestyle. If the pilot is successful, it will be considered for expanding the service statewide.

SULLIVAN REGION

BECCA WRIGHT NAMED TENNESSEE MEN'S HEALTH NETWORK'S 2012 NURSE OF THE YEAR
Submitted by: Mike Leventhal, Executive Director
Tennessee Men's Health Network

Each year, Tennessee Men’s Health Network selects a nurse to be named the organization’s Nurse of the Year. This year, the Nurse of the Year is Becca Wright, the Maternal-Child Health Director and Assistant Director of Nursing for the Sullivan Co. Regional Health Department.

Since 2004, Becca and the staff at the Sullivan County Regional Health Department have hosted a “Free Health Check-Up Day” at both the Blountville and Kingsport offices during National Public Health Week. This 4 day event includes no-cost health screenings and education on a range of health issues for both women and men that are uninsured or under-insured.

Men living in and around Sullivan County have the opportunity to take advantage of free health screenings for health conditions such as hypertension, diabetes, skin and prostate cancer. Likewise, women receive screenings for osteoporosis, breast and cervical cancer.

Health outcomes continue to improve as thousands of participants throughout the years have become more aware of disease risk factors, their personal risky behaviors, and lifestyle changes that can improve their health.

In addition, Becca also works with young men to raise awareness of health conditions that tend to affect them early in life. TMHN is proud to be able to provide essential tools and other resources to aid her in creating a healthier community.

The Tennessee Men's Health Network is proud to name Becca Wright as their 2012 Nurse of the Year!
Hepatitis B is a serious viral illness transmitted through infectious blood or body fluids. Acute infection with Hepatitis B is typically transient; however, 5-10% of acutely infected adults may develop chronic disease, which can lead to fatal liver damage. Although chronic Hepatitis B is treatable, it is not curable. Fortunately, Hepatitis B infection is preventable with a 3-shot vaccine series, which has been universally recommended for children since 1992.

The East Tennessee Region (ETR) has experienced a precipitous increase in acute Hepatitis B cases over the past 5 years, rising by more than 340% between 2007 and 2011. Cases in the region nearly doubled from 2010 to 2011. Since 2004, case rates statewide have steadily trended downwards and plateaued at a rate that is still approximately 60% higher than the Healthy People 2020 Goal (1.5 per 100,000 adult population). In 2011 the state’s rate increased noticeably for the first time in nearly a decade, rising from 2.4 to 2.9 cases per 100,000 population, apparently driven by significant increases in the East and Northeast Regions.

While the majority of acute Hepatitis B cases resolve uncomplicatedly, the small percentage that become chronically infected remain capable of transmitting the virus in spite of their asymptomatic status. These individuals represent a reservoir of infection associated with the increase noted over the past 5 years. However, distribution of both acute and chronic cases is spread across all counties in the ETR, making identification and interruption of specific transmission patterns very difficult.

In Spring 2011, the ETR carried out a review of acute Hepatitis B cases reported between 2005 and 2010. Case rates were highest among 40-49 year olds and lack of vaccination in those over age 20 played a predominant role. The gender ratio was 6 male:4 female cases, which was consistent across counties as well as across all years of review. Analysis revealed that 81% of cases reported at least one risk factor and 58% reported at least two risk factors. However, there was variance by gender: while 65% of females reported having multiple risk factors, only 55% of males did so. Because the majority of cases are males and the majority of public health interviewers are female, this may indicate that there is a social desirability or other interview bias in play that has not been accounted for.

The most common risk factors included incarceration, intravenous drug use, multiple sexual partners, hospitalization, and receiving a tattoo. Female cases were significantly more likely to report having had a known Hepatitis B-positive partner or having received a tattoo; male cases were more likely to have had a history of long-term incarceration. For other common risk factors there was no significant difference by gender.

A vaccine outreach program targeting jails and prison in high population counties ran from 2008-2010, closing due to funding and implementation challenges. Current interventions proposed include the reinstitution of vaccine efforts, as well as an educational program for tattoo studios. Tattooing was a relatively common risk factor (12% of reviewed cases) and the majority of these cases (80%) received tattoos in non-commercial or correctional settings. Unfortunately, current educational resources do not adequately address tattooing as a risk factor or safe tattooing practices. Licensed tattoo artists are likely to assist us if the message does not disparage tattooing but instead focuses on their training and ability to safely perform the tattooing. Working with the tattoo artists will allow us to provide more in-depth information that they can share during long hours in close contact with clients, especially if they observe non-commercial tattoos.

An additional intervention implemented is follow-up with newly-diagnosed chronic Hepatitis B cases. ETR staff contact patients to provide education regarding their infectivity and transmission precautions as well as discuss their at-risk contacts’ need for testing/vaccination. Additionally staff determine patients’ prior awareness of their diagnosis and assess their level of prior education regarding Hepatitis B. Among cases reached to-date, ETR was the first to deliver the diagnosis for 13% and the first to provide information for 36% of chronic Hepatitis B cases. These findings have led to a new focus on coordinating with primary care providers to ensure appropriate delivery of diagnosis and follow-up. Because of the dramatic increase, the East Tennessee Region has worked in an innovative and diligent manner to address this escalating problem.
UPPER CUMBERLAND REGION

Upper Cumberland staff worked with Chambers of Commerce on another successful Get Fit Highlands Challenge. The Spring Challenge had four counties participating: Jackson, Overton, Putnam and White. The goal of the three-month challenge was for each participant to exercise at least five days per week, 30 minutes per day. The Get Fit Tennessee website was utilized to enter activity. A total of 714 participants entered the challenge representing businesses, churches, schools, hospitals, nursing homes, health departments and other community members. The results were 432 participants, 61%, successfully completed the challenge! Tennessee Tech University conducted a survey of all participants which reflected 50% of the participants lost weight, 81% felt better, and 77% felt the program was motivating.

SOUTH CENTRAL REGION

GILES COUNTY HEALTH DEPARTMENT
Head Start Initiative
Submitted by: Janet McAlister, Assistant Regional Director

Giles County Health Department staff recently led a community outreach effort by providing well-child exams for families enrolled in the local Head Start program in Pulaski. Like the health department, Head Start promotes preventive care and early detection of possible health problems. Both agencies serve families in the local community. Wanda Moore, Giles County Health Department Nurse Supervisor, and Shirlee Macklin, Head Start Director, initiated the planning process with the support of the following staff: Janet McAlister (Giles County Director), Pam Browning (Regional Nursing Director), Ami Mitchell (Regional Director), Judy Hogan (Clerical Consultant) and Leanne Beasley (Giles County Office Supervisor).

Prior to delivering services at the Head Start location, staff at both agencies organized packets of information for all parents to complete before arriving for the exams. Head Start staff contacted parents about the exams and worked with them to schedule an appointment time for each family. They were also available to answer questions and assist parents with paperwork as needed.

Beginning Monday, May 21st through Thursday, May 24th, staff representing both agencies provided services for a total of 39 Head Start families. Outcomes include:

- 44 children received well-child exams
- 38 immunizations provided for 13 children
- 34 children received fluoride varnish as part of the dental screening
- 41 children received lead screenings (all results within normal limits)
- 28 children referred to their provider following the screening process
  (failed hear screening, wheezing in lungs, numerous enlarged nymph lodes, decreased hemoglobin, severe sunburn with blistering, weight below 5th percentile, speech evaluation)

Head Start provided an objective hearing screening for all children and vision screenings were provided by the health department for those ages three and older. Equipment needed to conduct the screenings such as otoscopes, opthalmoscopes, scales, stethoscopes, and hemocues were borrowed from various other health departments who eagerly volunteered to assist with identified equipment needs.

Staff that participated was as follows: Debbie Brown, Wendy Brown, Elizabeth Caperton, Kim Carter, BJ Caulk, Wendi Clark, Lesley Davidson, Amanda Green, Jada Helums, Rhonda Journey, Charlotte Kennedy, Jewell McCoy, Deborah Molder, Lorrell Rains, and Lisa Reynolds. County Directors from adjacent counties in the region supported the effort by allowing staff to volunteer. Regional Office support staff also contributed by supporting the clerical and clinical needs of the initiative.
METRO DAVIDSON REGION

Give Me Five: Improving hospital support of breastfeeding through Nashville’s Communities Putting Prevention to Work Campaign

Submitted by: Rebecca Morris, Breastfeeding Community

The United States Breastfeeding Committee recommends breastfeeding as a primary prevention strategy to reduce obesity and promote a healthy weight throughout life. Nashville’s Communities Putting Prevention to Work (CPPW) campaign includes changing community culture; working with institutions to create policy, systems and environmental change (PSE) anticipated to improve breastfeeding rates in Davidson County. Efforts were focused in places such as hospitals, worksites, and neighborhoods. This article focuses on Nashville’s hospital based initiative.

Breastfeeding begins in hospitals

Hospitals can lead the charge toward supporting and educating new mothers about breastfeeding. A supportive environment in the first days significantly improves the chances of a woman reaching her breastfeeding goal. In the 2011 Surgeon General’s Call to Action to Support Breastfeeding, several barriers were identified to breastfeeding in the United States including social norms, employment and childcare as well as barriers related to health services. In Tennessee 66% of infants are breastfed. Although this percentage needs improvement to reach the Healthy People 2020 goal of 81.9%, it does show many mothers in Tennessee want to breastfeed. A challenge is evident, however, when you look at the low percentages of mothers that are breastfeeding at 6 and 12 months and it shows that mothers are still facing barriers.

Give Me Five

The Give Me Five initiative was developed to recognize a hospital’s dedication to promoting and supporting breastfeeding. The Give Me Five Steps were selected from the World Health Organization and Unicef “Ten Steps for Successful Breastfeeding.” The steps chosen localized the “Ten Steps to Successful Breastfeeding” to the specific climate within Nashville hospitals allowing for celebration of incremental success. Technical assistance was available to all maternity hospitals in Davidson County from local health department staff and staff from Baby Friendly USA through March 2012. To achieve Give Me Five designation, each hospital must take five steps towards improving breastfeeding through policy and practice.

Give Me Five Steps are:

1. Inform all expectant mothers about the benefits and management of breastfeeding.
2. Place babies in Skin to Skin contact with their mothers immediately following birth for at least an hour.
3. Show mothers how to breastfeed or how to maintain lactation if separated from their infant(s).
4. Encourage breastfeeding on demand by promoting rooming-in, and to recognize when their babies are ready to breastfeed.
5. Provide mothers with breastfeeding support information at discharge.

Four of the five maternity hospitals in Davidson County have been awarded Give Me Five Designation for demonstrating significant achievement and dedication in the promotion and support of breastfeeding. The recognized hospitals are: Baptist Hospital, Centennial Medical Center, Monroe Carrell Jr. Children’s Hospital at Vanderbilt, and Nashville General Hospital at Meharry.

Nashville has taken significant strides implementing PSE to support breastfeeding mothers. Momentum seized by legislative efforts, policy implementation and positive response from the community ensures that Nashville’s families are getting a healthy start - leading to healthier babies, healthier mothers and a healthier community.
SOUTHEAST REGION

Sequatchie County Health Department Receives Award
Submitted by: Beth Delaney, Community Dev. Director/PI Officer

Sequatchie County Health Department set a goal of making sure children in the county received their Early Periodic Screening, Diagnosis, and Treatment (EPSDT) or well-child exams. According to Charlene Nunley, Sequatchie County Health Department Director, “Because the staff believes so strongly in the value of prevention and felt some children were not receiving the exams they should be, they developed a plan to increase the percentage of patients receiving an EPSDT exam. Thanks to hard work from the staff, EPSDT screenings at Sequatchie County Health Department went up more than sixty percent above their goal.”

The staff met to discuss ways of increasing the number of EPSDTs conducted in the health department. The plan they developed involved having Carol Henson, Nursing Supervisor with the health department, regularly review patient records. If patients have missed appointments, Carol sends letters to remind them about immunizations and EPSDT exams. As she reviews the charts, she marks the patient registration screens so that the Public Health Office Assistants know to make an appointment for the appropriate services when the patients call the Health Department.

Sequatchie County was chosen out of eleven health department sites by the Southeast Regional Office to receive the annual Award for Outstanding Achievement in providing EPSDT services in 2011. To honor the staff, which includes Carol Henson, R.N., Michelle Holland, R.N., Chaddy Thompson, R.N., Melissa Machado, N.A., Shelia Stephens, PHOA, and Audrey Anderson, PHOS, the Southeast Regional TENNderCare staff prepared a luncheon for them. They also had a lunch with the Southeast Regional Director Glenn Czarnecki and the County Director Charlene Nunley to celebrate their achievement and share their ideas for additional improvements in health department services.

NORTHEAST REGION

Farmer’s Market Screening Event
Submitted by Heatherly Sifford, Health Educator, Washington County Health Department

For the past 8 years the Washington County Health Council has partnered with numerous community agencies to provide free health screenings to a very vulnerable population attending the Farmer’s Market in Johnson City. This year the Adult Health Issues Subcommittee of the health council organized and implemented the 8th annual Farmer’s Market Health Screening Event on Saturday, July 21, 2012. The event, which took place from 7 a.m. to 12 noon, targeted the indigent and homeless populations of Washington County; however, anyone attending the Farmer’s Market was eligible to be screened. There were over 100 people that participated in the event. The screenings that were completed included: 74 BMI’s, 65 blood sugar checks and 80 blood pressure checks. The average age of the participants was 50. Community partners participating in the event included: Johnson City Downtown Clinic, Mountain States Health Alliance, Washington County Health Department, Collart Chiropractic, Aimee Bright-Massage Therapist, Asthma Allergy and Sinus Center, and Johnson City Lions Club. Vendors included: UT Extension, Insight Alliance, Project Access, Tennessee Cancer Coalition, TENNderCare, and Solution Source. The first 100 participants received a free tote bag with hygiene samples and health information. This event is always a huge success and there continues to be new partners added annually.

WEST REGION

Submitted by: Elna Blankenship, Community Services Director

Staff in West TN have led or participated in over 23 primary prevention events throughout the spring and summer 2012 with a total of at least 6,900 in attendance. Health Educators, WIC Nutrition Educators, TENNderCare, HUGS/CSS and other local and regional staff members engaged community members regarding the importance of good nutrition, physical exercise and avoidance of tobacco and alcohol in developing and maintaining good health. In collaboration with local health councils and advisory boards, annual community events such as Teen Summits, School Safety and Wellness Days, Healthy Living Days, “Get Fit” Walk/Run Campaigns, Family Fun in the Park Days, National Men’s Health Week and Food Olympics created opportunities.
for approximately 1,700 youths and adults to share information and discuss healthy habits. At least seven local parks and ball fields were sites of the region’s “Knock Tobacco Out of the Park” campaign reaching over 2400 youths and adults to discourage the use of all tobacco products in city and county parks. (A picture of the “Get Fit Hardeman” 2k walk/run is attached). In July, local staff engaged approximately 2700 children and youth during eleven Back to School events. School supplies such as backpacks, pencils, notebook paper, glue sticks, writing journals, folders along with health information and other educational materials are provided to help children and youth get a positive start on the school year.

In observance of World Breast Feeding Month in August, prenatal events are slated in at least eleven counties to promote primary prevention through breastfeeding. In addition to highlighting the benefits of breastfeeding to both infant and mother, the ABC’s of Safe Sleep, “Baby and Me – Tobacco Free” information with the 1-800-QUITNOW TN tobacco hotline resources will be emphasized with the pregnant and parenting teens and adult prenatal patients in a casual “baby shower” atmosphere complete with door prizes and healthy snacks.

Thanks to the efforts of local and regional staff, 90 individuals with chronic conditions have participated in Chronic Disease Self Management Workshops held at health departments in nine counties. An additional six workshops are scheduled to begin in August and run through mid September.

In keeping with our theme “one health… one environment… one world” and the 2012 Summer Olympics and us being the role models for public health, our Fun and Fitness activities will be incorporated throughout the conference - as we compete in the TPHA Pentathlon.

Those attending the annual conference will be able to participate in 5 activities to help earn points for their teams! There will be: mid afternoon Minutes to Move It breaks, a group walk Thursday afternoon, an exercise class combining Zumba and Yoga Wednesday afternoon, a Zumba class Thursday morning and the group competition on Thursday night. Regions will earn points based on participation from their region.

Meals served at our conference will be healthier options and the nutritional component will be provided – helping us to make the best choices for our personal needs. The reception will include foods with an international flair! Even the conference gift will convey the message that WE are public health and are active participants!

The Fun and Fitness event for Thursday night will be a creative, spontaneous, active night with lots of friendly competition and high energy. No need to practice or prepare, just come in comfortable clothing (T-shirts are fine) and of course tennis shoes to … work it, move it, and mix it up!!

In order to compete, I must have a representative from each area to be on the committee to help at the conference by, coordinating team efforts, tracking points, etc. There is no prep work needed this year! I have someone identified from Northeast, East, Southeast, Chattanooga -Hamilton, West, Central Office, Mid Cumberland and Students – which means I need someone to represent: South Central, Upper Cumberland, Jackson-Madison, Knox, Memphis, Nashville, Sullivan. Please contact me at cathyc@hamiltontn.gov or 423-209-8248 if you are willing and able to serve in this capacity. Thanks, Cathy