President’s Message

Susan Porter, President
2017-18

Happy Spring, almost!! Seeing buttercups blooming on my drive to work helps me to know that Spring is coming soon. With the cold weather, flu cases and cloudy rainy days, it will be nice to say GOOD-BYE to Mr. Winter.

We recently received the Healthier People, Thriving Communities: Our Vision for Tennessee 2017 Annual Report from the Tennessee Department of Health describing some of the most significant efforts and achievements over the past year. There were a few which stood out that I wanted to share: The Tennessee Department of Health employs 3,234 people across the state who work in local, regional and state facilities in our 95 counties as well as many metro partners who are employed by their local government. There were 1.7 million visits to local health departments by 746,000 individuals, 189,000 primary cares service visits by 91,000 different patients, Special Services provided for 4,997 children with special needs, 68,000 dental screenings were performed with 48,000 dental sealants applied to school students, 478,000 administered immunizations, $112.3 million spent for nutritious food in our local groceries by participants in the Women, Infants and Children supplement nutrition program, 113,000 inspections of 42,000 permitted establishments such as restaurants, hotels, etc. and the Tennessee Cancer Registry contains records for 1,049,927 cancers diagnosed in 968,931 unique individuals. These are outstanding achievements.

(Continued on Page 3)

Grand Divisions’ Regional Spring Meetings in April

Make Your Reservation Now For A Regional Meeting Near You!

The Tennessee Public Health Association invites you to join public health professionals throughout the East, Middle and West Grand Divisions of Tennessee to hear interesting presentations, network with colleagues and applaud community members who are making a difference. Please ask your co-workers and others interested in public health issues to join us on April 6 in Chattanooga, April 13 in Franklin and April 20 in Memphis.

There is no charge to attend the meeting; however, all attendees must register online through the TPHA website, www.tnpublichealth.org. If you choose to have lunch on site, a nominal fee of $12.00 will be charged. Deadline to register is March 31, 2018.

April 6 - East Tennessee
University Center, University of Tennessee
615 McCallie Avenue, Chattanooga, TN

April 13 – Middle Tennessee
Williamson County Enrichment Center
110 Everbright Avenue, Franklin, TN

April 20 – West Tennessee
Southern College of Optometry
1245 Madison Avenue, Memphis, TN

Tennessee Public Health Association Newsletter
www.TNpublichealth.org
Transportation is necessary for access to healthcare, community participation, and overall quality of life. This is no different for older adult populations. Older adults are more likely to restrict their driving in bad weather, at night, or on high speed roads than their younger counterparts. Many older adults also give up driving completely because of concerns over their ability to drive safely. Furthermore, older adults often experience mobility impairment that limits their ability to utilize modes of “active transportation” such as bicycling or walking. These barriers to transportation can potentially lead to lower access to healthcare, missed or delayed medical appointments, and increased costs.

While many counties in Tennessee have a variety of private and public transportation options, such as driving, taxi, Uber/Lyft, and public/paratransit bus system, these options are neither fully integrated nor comprehensive, and significant gaps in service, particularly for older adults, exist. Many older adults express concerns and mobility challenges in using the current transportation options. Many experienced challenges with using the local bus system because of its cost, limited routes and hours of operation and safety concerns in certain areas where the bus stops are located. Others expressed concerns about using Uber/Lyft and taxis, worrying about safety, high costs, and unfriendly drivers. While some older adults get rides from their friends or family members, many worry about being a “burden.” This number of older adults living in Tennessee is projected to increase by over 20% between 2015 and 2020 and will continue climbing for several more decades. We believe that for older adults to maintain mobility, preserve independence, and “age in place”, additional modes of transportation must be explored. Individuals must have viable transportation options which can be accessed independently in their own community.

One way some Tennessee communities have filled this unmet need is through volunteer transportation programs such as MyRide TN. MyRide TN and other volunteer transportation programs provide older adults with the assistance they need. Unlike traditional public transit, volunteer transportation is often designed to provide older adults with personal assistance, as needed. For example, volunteer drivers assist riders with tasks such as folding a walker, helping them get in and out of the vehicle, opening doors, or walking with them to the building they are visiting. For many decades, non-profits have been utilizing volunteer transportation programs such as the Road to Recovery Program run by the American Cancer Society. In 2014, the National Volunteer Transportation Center reported that over 700 volunteer transportation programs were active across the United States.

MyRide TN is a volunteer transportation program providing door-through-door rides to seniors. The key feature of MyRide TN and the reason for its sustainability is the use of volunteers as drivers. In the first 8 months of operation, the MyRide TN program in West TN recruited and trained 35 volunteers and has given 1,161 trips to more than 70 riders. The majority of trips are for doctor appointments (40%) but other riders use the program for rides to grocery store (12%) and the beauty shop (10%). This much needed service has improved transportation access for older adults as well as promotes aging in place. In a recent survey, 91% of participants said “because of MyRide I can remain living in my own home.”

In addition to MyRide TN, several other highly successful volunteer transportation programs have been implemented and sustained across Tennessee. One is the Volunteer Assisted Transportation Program in Knoxville which has completed more than 24,000 trips since 2009. Despite having no restriction on travel destinations, 65% of the trips provided by this program have been for medical appointments or essential errands. A second successful system in Tennessee is the SMiles program in Blount County in rural Blount County. In its second year of operation, SMiles provided 5,036 rides to 148 older adults in this rural county, and it projects a 14% increase in rides and 7% increase in participating riders during the next fiscal year.

These Tennessee programs highlight important points: (1) a volunteer-based ride service for older adults can work well and is effective in addressing service gaps and (2) having access to rides to medical and wellness destinations is particularly important for the older population. The types of healthcare/wellness-oriented rides

(Continued on Page 3)
covered through these programs include non-emergent medical appointments, pharmacy, senior centers, congregate meal sites, Farmers Markets, grocery stores, and socialization opportunities. Through the programs described above, older adults across Tennessee can obtain access to services that encompass mental, social, and physical health, all of which are important for achieving good health and improving their quality of life.

**Partner Profile: Tennessee Commission on Aging and Disability**

The Tennessee Commission on Aging and Disability, the designated state agency on aging, is mandated to provide leadership relative to aging issues on behalf of older persons in the state. Our mission is to bring together and leverage programs, resources, and organizations to protect and ensure the quality of life and independence of older Tennesseans and adults with disabilities. For more information, go to [www.tn.gov/aging](http://www.tn.gov/aging)

As we strive to make Tennessee one of the nation’s ten healthiest states, we focus on Tennessee’s “Big Four”. These factors were discussed as contributing to the leading causes of death and disease in Tennessee. Some eye opening stats are: People who are Physically Inactive - 30.4% of adults spend fewer than 30 minutes/week physically active outside of work, People with Obesity – 33.8% of adults are overweight or obese, Tobacco and Nicotine Addiction – 21.9% of adults use nicotine products and Other Substance Use Disorders – 18.3% of deaths are related to substance abuse. These are alarming numbers and facts which affect us or those we love.

While keeping these factors in mind, the different committees have been working hard on our annual meeting which will take place September 12th-14th, 2018 at Cool Springs Marriott Hotel and Conference Center. We will be celebrating TPHA’s 75th Conference so get ready for a bit of glam, jewels and great speakers. Our conference theme is *The Healthiest Tennessee: Enduring Accomplishments That Matter For Our Future.* Our keynote speaker, Austin Eubanks, is an injured survivor of the Columbine Shooting. The current president of APHA, Joseph Telfair, will be leading us Thursday morning. Well loved speakers like Dr. Tim Jones and Dr. William Schaffner will be providing interesting updates on the latest infectious diseases. I think you will be able to find interesting topics and speakers throughout the entire conference. Make you plans today to attend and of course there will be a little healthy competition between the regions during fun and fitness. Who will take home the treasured Spirit Stick??

In a few weeks each grand division will be having their regional meetings. This is a great opportunity to reach out to someone who is not a member of TPHA and invite them to attend. Each of the Vice Presidents and their committees have been working to obtain interesting and informative speakers for these meetings. Registration is now open on our TPHA website.

As spring approaches and you see the new life of the season bloom and grow, I hope you will take a minute to reflect on yourself. We all could use a little pruning to make ourselves more positive, productive and a light to those around us. Remember to make each day special. You only have one life to live, so make the most of it.

“ABILITY is what you’re capable of doing.
MOTIVATION determines what you do.
ATTITUDE determines how well you do it.”

Lou Holtz
Planning for the Tennessee Public Health Association’s 2018 conference is well underway. Committee members have been hard at work identifying topics, securing speakers, designing art work for the program, and meeting with event staff at the Cool Spring Marriott - just a few of the activities required for a successful conference.

(For a peak at the 2018 conference program cover, go to page 5)

Another important element for success is attendance and to help each of our readers make the decision to join us in September, we will be previewing some of the outstanding speakers in this and upcoming newsletters beginning with keynote speaker, Austin Eubanks.

Austin’s story of trauma, over-prescribed medications, and substance use disorder is sure to leave a lasting impression. One of the 24 injured during the Columbine High School shooting on April 20, 1999 that also left 15 dead including the two gunmen, Austin is now devoting his career to helping others who have journeyed into addiction by way of trauma. He speaks nationally regarding the problems with overprescribing medication, how anonymity adversely effects youth, the importance of the continuum of care, benefits of treatment centered in empowerment vs. powerlessness, and overcoming trauma as it pertains to addiction. He offers amazing insight into the current epidemic and allows others to better understand substance use disorder, symptoms and signs as well as pathways to recovery.

Austin’s story begins on that horrific day in April of 1999 at Columbine High. So many impactful lessons can be learned from listening to him. He moves his audience through many ranges of emotions as he traces his journey from that dark day into active addiction and despair and then slowly, finally into the light of recovery. Austin’s message is important to a variety of audiences including treatment and behavioral professionals and touches on many of the most critical and relevant topics surrounding substance use disorder and recovery today.

Austin is currently the Program Director at The Foundry Treatment Center in Colorado. He came to the rehabilitation industry by way of his own personal recovery after a decade-long career as an advertising executive. After years on both the agency and the client sides of marketing, Austin found inspiration through his own recovery to focus his professional talents on the behavioral health and addiction treatment industry. Austin is an expert in the addiction treatment industry and a nationally recognized speaker and media contributor on topics of behavioral health and addiction recovery. He is the Chief Operations Officer for Foundry Treatment, on the board of directors of Stout Street Foundation, a founding board member for 5280 High School, and the proud father of two sons.
National Public Health Week will be celebrated April 2-8, 2018! The theme of this year’s celebration is *Healthiest Nation 2030 Changing Our Future Together* and focuses on making America the healthiest nation in one generation.

We will be honoring local public health dreamers and doers with the 8th Annual Public Health Visionary Awards! The committee received a number of extremely impressive nominations by the March 5th deadline and the winner for each of the Grand Divisions will be recognized at their region’s Spring Meeting in April. The Visionary Awards honor local public health advocates who work to make their communities a healthier place to live, work, play, and grow. It could be a local elementary school food services manager who has changed the cafeteria environment to make the healthy choice the easy choice or a dedicated group of community members who have created a farmers market or walking trail. How about the local government employee or elected official who has worked to improve county or city policies that affect health, the health professional who is working tirelessly to improve the lives of NAS infants, or a local community advocate who is a voice for sidewalks, bike lanes, or playgrounds? The examples are abundant across the state. TPHA applauds the contributions made by each and everyone of the impressive nominees considered for this year’s Visionary Awards.

This year we are also continuing the 5th Annual Student Video Challenge. This opportunity gives our future public health professionals a chance to stand out and let their voices be heard! Students created videos based on the theme *Healthiest Nation 2030 Changing Our Future Together* and submitted them by the March 5th deadline. Videos are being reviewed and scored by the Public Health Week committee and a winner will be chosen for the grand prize and recognition at their region’s Spring Meeting. The Video Challenge is open to any public health student attending college in the state of Tennessee.

Lastly, this is our 2nd year to take part in the American Public Health Association’s 1 Billion Steps Challenge! This challenge has teams from across the country walking to improve their health with the goal of reaching 1 Billion steps by the end of Public Health Week. You can join Team TPHA by following this link [https://stridekick.com/tc/apha18](https://stridekick.com/tc/apha18) and using code j6759. If you have never used Stridekick, you must first create an account, then click “join”.

As always, Public Health Week is a time to recognize our local public health heroes, YOU! Every region and metro area has their Public Health Week traditions that are unique to them. TPHA is proud to be a part of your celebration. Thank you to each of you for the daily work you do to improve the health of Tennesseans. You are Public Health at its best!
# TPHA Scholarships
Submitted by Carrie Thomas, MPH, Chair, Scholarship Committee

If you have at least three years of public health experience, have been a member of TPHA for a minimum of one year and are enrolled in an educational program; you may be eligible for a TPHA Scholarship!

Who wouldn’t like a little financial assistance with educational endeavors? If you are interested in applying, you can download an application from the TPHA website at [www.tnpublichealth.org](http://www.tnpublichealth.org)

Scholarships shall be awarded to advance individual knowledge and competence in Public Health. Awards for Public Health training shall be limited to programs which award college credit, continuing education units (CEU's) or certification through a nationally recognized accrediting body or educational institution. Scholarships will be awarded in amounts up to $1,000 for degree programs and $500 for certificate programs.

**The deadline to submit an application is May 18th.** If you have any questions, please contact Carrie Thomas at Carrie.Thomas@knoxcounty.org

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### American Public Health Association Is Seeking Nominations

APHA needs the help of its Affiliates to identify the best among us by nominating a colleague who exemplifies outstanding contributions. Membership is not required for nomination of several of the APHA’s Awards listed below. The awards will be presented at the 2018 APHA Annual Meeting & Expo., Nov. 10-14, in San Diego. Nominations must be received by **May 18**. Awards descriptions, criteria and nomination forms are available at [http://www.apha.org/about-apha/apha-awards](http://www.apha.org/about-apha/apha-awards).

* **Sedgwick Memorial Medal** recognizes an individual for outstanding accomplishments in the field of public health and is APHA’s oldest and most prestigious honor.

* **APHA Award for Excellence** honors an individual for creative work in applying scientific knowledge or innovation to improve community health.

* **David P. Rall Award for Advocacy in Public Health** recognizes an individual who has made outstanding contributions to public health through science-based advocacy.

* **The APHA Distinguished Public Health Legislator of the Year Award** recognizes a local, state or federal lawmaker who is a public health champion.

* **Martha May Eliot Award** honors a professional in the field of maternal and child health.

* **Milton and Ruth Roemer Prize for Creative Local Public Health** honors a health officer of a county, city or other unit of local government in recognition of outstanding creative and innovative public health work.

* **Helen Rodriguez-Trias Social Justice Award** recognizes an individual who has worked toward social justice for underserved and disadvantaged populations.

* **The Victor Sidel and Barry Levy Award for Peace** honors an APHA member who has made outstanding contributions to preventing war and promoting international peace.

* **The Student Assembly Public Health Mentoring Award** recognizes an APHA member for an essential role of mentoring in public health and leadership development.
How APHA policy statements are developed: A Q&A with JPC chairs

APHA policy statements help guide the work of the Association. But how are APHA policy statements developed and adopted? For answers, we reached out to the leaders of the Joint Policy Committee, or JPC — the APHA body charged with overseeing the annual process. JPC co-chairs Ayanna V. Buckner, MD, MPH, FACP, chair of the Science Board; Tara Hayden, MHSA, chair of Education Board; and Martha C. Romney, RN, MS, JD, MPH, chair of the Action Board, explain below.

Q: What are APHA policy statements and how are they developed?

APHA policy statements describe and endorse a defined course of action around current or future public health issues in a manner that reflect APHA’s goals, aims and objectives. The policy statements range from legislation and regulations desired to needed new policies of non-governmental organizations and private enterprises. Policy statements help to shape APHA’s stance on a variety of public health topics reflecting the depth and the diversity of interests and expertise among APHA’s members. The policy statements serve as a regular source of information to many, including APHA staff, members, Affiliates, partners, policymakers and other stakeholders.

Proposed policy statements only become official APHA policy statements after approval by the APHA Governing Council at the Annual Meeting. APHA members, individually and/or as members of APHA components, are encouraged to develop policy statement proposals on key public health topics, including issues that APHA annually identifies as policy statement gaps or policy statements that need updating. Members and components are strongly encouraged to work collaboratively across APHA member groups when developing policy statement proposals to ensure the proposals contain input from all relevant member groups and experts within the Association. APHA members, including APHA Sections, Special Primary Interest Groups, Caucuses and Affiliates, also review proposed policy statements and submit comments and recommendations, which are forwarded to the APHA Science Board and the APHA Joint Policy Committee to consider in their reviews of each proposed policy statement. The Joint Policy Committee, or JPC, which is composed of Science Board, Action Board and Education Board members, considers the Science Board review as well as the feedback from the APHA members as part of its initial assessment and collectively makes a determination as to whether the draft policy statements are accurate, evidence-based and meet the standards outlined in the APHA Proposed Policy Statement Submission Guidelines.

Authors are notified by letter regarding the JPC’s assessment of whether the proposed policy statement has met the APHA Proposed Policy Statement Submission Guidelines criteria. When proposed policy statements have partially met or have not met the criteria, the JPC’s letter to the authors includes recommendations for revising the proposal. Proposed policy statement authors have an opportunity to consider the JPC’s recommendations, revise the proposals and submit them for another review by the JPC. JPC members and APHA staff are available to discuss the assessments and recommended revisions with authors.

During the APHA Annual Meeting, public hearings are held on proposed policy statements. The hearings are intended as an open forum for detailed exploration and discussion of the proposed policy statements among APHA authors and members. The role of the JPC during the hearings is to listen to members’ comments but not to debate the policy statements or the JPC assessment. After the hearings, proposed policy statement authors submit a final draft of the proposals for review by the JPC. The committee meets again to review the proposed policy statements and develop final recommendations to present to the Governing Council. The Governing Council considers the JPC’s recommendations and votes on the proposed policy statements. (Continued on Page 9)
Q: As a science-based organization, how do we ensure that policy statements are accurate and evidence-based?

APHA policy statements are expected to reflect the latest available scientific research. Per the APHA Bylaws, the Science Board coordinates the development of the scientific basis for the APHA’s professional and policy statement programs. Through this function, the Science Board reviews and evaluates the evidence base of proposed policy statements. The results of the Science Board review of each proposed policy statement are forwarded to the JPC, and the JPC considers the Science Board’s review results as it makes its assessment. The JPC reports its assessment and recommendations for revisions to authors to ensure that policy statements are accurate, evidence-based and meet the standards outlined in the APHA Proposed Policy Statement Submission Guidelines.

Q: What happens if a proposed policy statement is rejected? Does that mean APHA opposes the aim of the policy statement?

If a proposed policy statement is not approved by the Governing Council, that does not mean that APHA opposes the topic or aim of the policy statement. APHA’s policy statements help to shape the organization’s stance on a variety of public health topics, so policy proposals must meet the APHA Proposed Policy Statement Submission Guidelines and reflect the depth and the diversity of interests and expertise among APHA’s members. If a proposed policy statement is not approved, it can be revised to address the JPC’s recommendations and resubmitted in the next year’s policy statement development process — either by the original authors or by others.

Q: Once adopted by the APHA Governing Council, how are policy statements used and what impact do they have?

APHA, in coordination with its members and state and regional Affiliates, works with key decision-makers to shape public policy to address today’s ongoing public health concerns. The policy statements help to inform APHA’s advocacy work. Once policy statements are adopted by the Governing Council, they help to shape the development of legislative, regulatory and media advocacy activities. APHA staff members regularly refer to APHA policy statements as background for determining whether APHA will support or oppose legislation, regulations and other actions based on the research, general position and recommendations included in the policy statements. The policy statements also drive the content of APHA’s legislative and regulatory recommendations including letters and comments sent to Congress, the White House, federal agencies and the judiciary.

APHA members, Sections and Affiliates also use the policy statements to advocate for public health issues in their states and communities.

Additionally, the policy statements are frequently referenced in peer-reviewed literature and white papers, and they inform resource information for the public such as media reports, infographics, fact sheets, other reports and educational webinars and scientific sessions at the APHA Annual Meeting. All of these uses underscore the need for members to submit policy statement proposals on the issues that APHA identifies in its policy statement gaps.

Ayanna V. Buckner, MD, MPH, FACPM, Chair APHA Science Board

Martha C. Romney, RN, MS, JD, MPH, Chair APHA Action Board

Tara Hayden, MHSA, Chair APHA Education Board
SOUTHEAST REGION

Improving School Flu Vaccine Process and Vaccination Numbers
Submitted by Amanda Goodhard, Assessment and Planning Coordinator

By improving the process for the school flu shot clinics, the Southeast Region was able to increase the number of students vaccinated throughout the region by nearly 1,500. The need to improve this process was noted every year after reviewing clinic numbers but there was no standardization when it came to implementing the improvements. Coordinated School Health, Nursing Supervisors, Public Health Office Supervisors, County Directors, core management staff, and the Emergency Response Coordinator were all brought in to the planning process for the FY 18 school flu clinics. Emergency Response was brought in because as a group, they have plans for getting large groups of people vaccinated quickly and the goal was to adapt that planning strategy to the school flu clinics.

Bringing this group together was vital to making sure this process was efficient and that everyone was on the same page. Each county in the region agreed to a standardized packet that would go out to every student in every school so the packet making process would be easier and more efficient. These packets were delivered to the counties and the schools early enough that when the vaccine arrived, counties had the information they needed from the students and were able to coordinate clinic dates quicker. As a result, the Southeast Region vaccinated 9.1% of the students in the region, up from 7.5% in 2017 and 5.3% in 2016.

As the planning process begins for the next school flu clinic, the same group of people will be brought together to assess what worked, what didn’t, and what needs to be tweaked slightly to improve the process and hopefully get even more students vaccinated next year.

WEST REGION

West Region’s Movement and Progress within the Healthier Tennessee Initiative
Submitted by Veronica Calvin, Assessment & Planning Coordinator
Jackson Regional Health Office

“Health is best understood within an ecological context. Accordingly, health promotion involves processes that foster supportive environments and healthful behavior. Thus, effective health promotion programs are typically multilevel, focusing not only on the population at risk but also on the environmental conditions that contribute so importantly to health and health behavior. Health behavior is important at each societal level.” – Bruce Simons-Morton, EdD, MPH of the National Institutes of Health, within the journal Health Education & Behavior, Vol. 40, Issue 1, pp. 6-10, February 2013.

The West Region is making great strides to ensure that its counties possess environments that are conducive to protect, promote and improve the health and prosperity of people in Tennessee. One of the manners in which West is improving its communities is via implementation of the Healthier Tennessee (HTN) initiative; the health promotion campaign provided by the Governor’s Foundation for Health and Wellness to enables citizens to establish healthier lives. Through strategic planning and action, HTN places efforts to increase the number of

(Continued on Page 11)
Tennesseans who are physically active for at least 30 minutes five times a week, promote a healthy diet, and reduce the number of people who use tobacco (www.healthiertn.com), addressing three of the TN Department of Health’s Big Four focus: physical activity, healthy weight and tobacco use.

HTN truly integrates health promotion practices to increase positive health behaviors as it unifies efforts among the multiple societal levels to create communities for health. The mode in which this evidence-based approach is executed throughout the West Region is the utilization of Public Health Educators (PHEs) to serve as front-line agents who engage residents to create healthy communities within the counties in which they live, work, play and worship. PHEs work diligently with Health Councils, community organizations and county officials to acquire the active participation and commitment of individuals, workplaces and places of worship to form healthy environments with comprehensive reach.

The goals and objectives of HTN’s evidence-based ecological approach is excellently executed within the West Region, for, as of date, 14 out of the 19 counties (76%) in the West Region have an active designation as “Recognized HTN Communities”, and the remaining five counties are identified as “In Progress” of receiving the same designation.

While it is too early to determine the long-term effect of how obtainment of HTN within the counties, (e.g. correlation of HTN designation to county health rankings), the short-term impact of HTN within West communities play a significant role in health access and activity among the population. The West Region looks forward to the future success within HTN and to determine and disseminate the long-term of its health promotion efforts.
KNOX COUNTY

Knox County Naloxone Deployment by First Responders
October 1, 2016 – September 30, 2017

Submitted by Roberta Sturm, MPH, Epidemiologist
Knox County Health Department

To aid in understanding the scope and depth of the opioid crisis locally, the Knox County Naloxone Community Collaborative recently released a summary of naloxone deployments by first responders occurring in the county between Oct. 1, 2016, and Sept. 30, 2017. Naloxone, also known commercially as Narcan, is administered when a person displays behaviors consistent with an opioid overdose. The medication rapidly provides partial or complete reversal of an opioid overdose. In response to the increased use of opioids in Knox County, the Naloxone Community Collaborative was created to bring together first responders and other community organizations aiding in naloxone distribution. The first meeting of the Naloxone Community Collaborative was convened by Metro Drug Coalition (MDC) in September 2016. Agencies participating in monthly meetings include American Medical Response (AMR) Rural/Metro EMS and Fire, Cherokee Health Systems, the Knox County Health Department, Knox County Schools, the Knox County Sheriff’s Office, the Knoxville Police Department (KPD), the Knoxville Fire Department (KFD), Cornerstone of Recovery, Appalachia HIDTA, the Knox County District Attorney’s Office and MDC.

Knox County’s first responders (including several agencies listed above) provided data on naloxone deployments to the Knox County Health Department for analysis. The Knox County Health Department then compiled and analyzed these data. The findings include:

- The use of naloxone by first responders in Knox County is a daily occurrence;
- Between Oct. 1, 2016 and Sept. 30, 2017, more than 1,200 individuals in Knox County received naloxone for suspected overdose, an average of almost four deployments per day with a trend that continues to increase.
- White males between the ages of 25 and 39 were administered naloxone most frequently.
- While each ZIP Code of the county is affected, certain areas are more burdened with naloxone deployment than others.

As part of the report, the collaborative created several recommendations and next steps, some of which are outlined below.

For the collaborative:

- Connect individuals receiving naloxone to care.
- Direct prevention resources and efforts to areas of the community where higher percentages of deployments occur.
- Work with area hospitals and the Knox County Regional Forensic Center to determine the outcomes of patients receiving naloxone by first responders.
- Continue to track naloxone deployments and report statistics annually, including calculated rates of deployment.

(Continued on Page 13)
(Continued from Page 12—Knox County...)

- Provide first responders with density maps of naloxone deployment to better prepare officers and responders serving those areas.
- Continue to track naloxone deployments and report statistics annually, including calculated rates of deployment.
- Provide first responders with density maps of naloxone deployment to better prepare officers and responders serving those areas.

For prescribers and pharmacists:
- Co-prescribe naloxone when writing narcotic prescriptions.
- Offer counseling and naloxone to patients picking up prescriptions for opioids.
- Increase education for prescribers on safe prescribing and care of addicted patients.

The full report is available online at: https://knoxcounty.org/health/epidemiology/reports_data/naloxone_report/Naloxone%20Report%202018.pdf

Naloxone Deployment in Knox County by Month, October 1, 2016 - September 30, 2017 (N=1268)

Let Us Know If You Have Questions or Comments about the TPHA Newsletter

Kim Harrell, Editor
Phone: (615) 426-1667
Email: khharrell@tnpublichealth.org
Upper Cumberland Region Piloting Diabetes Prevention Program

Submitted by: Jonathon G. Smith, MPH, A&P Coordinator

The Upper Cumberland currently has three counties piloting a new program for the region aimed at preventing the incidence of Type 2 diabetes known as the Diabetes Prevention Program (DPP), or Prevent T2. This 12 month lifestyle change program is being implemented in Clay, Cumberland and Warren Counties and recently passed the 16 week milestone. Up to this point, 21 participants have already lost over 140 pounds as a group!

Developed by the CDC, the Diabetes Prevention Program encourages modest weight loss along with increased physical activity. Participants keep weekly logs detailing their exercise and eating habits and attend weekly or bi-weekly meetings the first half of the program. Meetings then become less regular and move to a monthly schedule to encourage participants to self-manage the lifestyle changes they have learned during the first half of the program. To facilitate increased physical activity, Upper Cumberland staff integrates organized walks open to all community members at each of the scheduled meetings. Pictured below are Upper Cumberland staff members recognizing program participants in Warren County for their achievements up to this point.
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<tr>
<th>CALLS TO ACTION</th>
<th>DATES TO REMEMBER</th>
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<tr>
<td><strong>Continuing Education Committee Needs Members!</strong></td>
<td><strong>TPHA Board Meetings</strong></td>
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<tr>
<td>TPHA provides CEUs for the following disciplines: Registered Dietician/Nutritionist Physicians Pharmacist Environmental Health education Nursing Dental Social workers</td>
<td>March 23, 2018, 10:00 AM - 3:00 PM (CDT) Mid Cumberland Regional Office, 710 Hart Lane, Nashville, TN</td>
</tr>
<tr>
<td>If you are in one of these disciplines and would like to serve on the committee, please contact Tammy Mansfield at <a href="mailto:tammy.mansfield@tn.gov">tammy.mansfield@tn.gov</a></td>
<td>June 15, 2018, 10:00 AM - 3:00 PM (CDT) Cool Springs Marriott, Franklin, TN</td>
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<td></td>
<td>September 11, 2:00 PM - 4:00 PM (CDT) Cools Springs Marriott, Franklin, TN</td>
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<td><strong>The Silent Auction Committee Needs Donations!</strong></td>
<td><strong>Regional Meetings</strong></td>
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<td>Contact Tatum Johnson at <a href="mailto:tatum.johnson@nashville.gov">tatum.johnson@nashville.gov</a> to donate an item that will be auctioned during the 2018 Annual Conference, September 12-14</td>
<td>April 6 - East Tennessee University Center, University of Tennessee 615 McCallie Avenue, Chattanooga, TN</td>
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<td>All money raised from the Annual Silent Auction goes to the scholarship fund for TPHA members.</td>
<td>April 13 – Middle Tennessee Williamson County Enrichment Center 110 Everbright Avenue, Franklin, TN</td>
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<td>April 20 – West Tennessee Southern College of Optometry 1245 Madison Avenue, Memphis, TN</td>
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<td><strong>The Kresge Foundation will soon be accepting applications for its Emerging Leaders in Public Health (ELPH) initiative.</strong></td>
<td><strong>Summit on Children</strong></td>
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<td>The ELPH Application Site opens at 12 a.m. Eastern Time on April 2, 2018 and the deadline for applications is 5 p.m. Eastern Time on April 30, 2018.</td>
<td>April 11 Niswonger Performing Arts Center Greeneville, TN <a href="http://www.leadershiptennessee.org/summit">http://www.leadershiptennessee.org/summit</a></td>
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<td>The Emerging Leaders in Public Health program is designed for leaders of local, governmental health departments. For more information, go to <a href="https://kresge.org/elp">https://kresge.org/elp</a></td>
<td><strong>Annual Educational Conference</strong></td>
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<td>The Healthiest Tennessee: Enduring Accomplishments that Matter for our Future September 12-14, 2018 Cool Springs Marriott Hotel and Convention Center Franklin, TN</td>
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