

Primary Prevention Plans Annual Report | 2018-2019

March 2020 Office of Primary Prevention | Tennessee Department of Health www.tn.gov/primaryprevention Report authored by: John Vick, PhD MS **Evaluation and Assessment Director** Matthew Coleman, MPH CHES Coordinator Leslie Meehan, MPA AICP Director Cover Photo: Youth participants in a physical activity club in Pickett County, Tennessee.

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Foreword

Dear colleagues,

Last year the Tennessee Department of Health developed a new strategic plan with two main focus areas: access and prevention. Concentrating our efforts on both of these areas is critical for helping Tennesseans get access to care when they need it, and for preventing them from getting sick in the first place. TDH is working hard and innovating on both of these fronts, and the Primary Prevention Plans are a critical tool for helping our county and regional health leaders to successfully plan and implement upstream prevention work in their communities.

The 2018-2019 Primary Prevention Plans marked the second year in a row that all 95 counties in Tennessee, including our metro health department partners, created and implemented a plan. Together, the initiatives in these plans are educating communities about Adverse Childhood Experiences (ACEs), mobilizing partnerships to reduce opioid addiction, getting kids outdoors and physically active to reduce youth obesity, working to reduce tobacco use and vaping among teens, encouraging healthy eating habits, and so much more.

Addressing the root causes of disease means we need to reach out beyond our clinics and even beyond public health to other government and community partners. Our partnerships are the key to ensuring we have healthy and livable communities across our state, in places both urban and rural. This past year, our Primary Prevention Plans were supported by over 1,100 organizational partnerships, and more than 1,900 community volunteers generously donated their time to these initiatives. We certainly could not do this important work without the tireless efforts of our partners and our county and regional health department staff each and every day.

We hope you enjoy this annual report which provides highlights and accomplishments from this past year's Primary Prevention Plans. Thank you for your contributions and your support!

Sincerely,

Lisa Piercey, MD, MBA, FAAPCommissioner, Tennessee Department of Health



The Primary Prevention Plans

The Tennessee Department of Health established the Primary Prevention Plans as a way to more clearly focus the department's primary prevention efforts. Each of Tennessee's 95 county health departments develops and implements an annual Primary Prevention Plan. The plans provide an opportunity for each local health department to assess health-related needs in their communities, then identify and implement strategies to address them.

Cross-sector and community partnerships are a key component of the plans. The plans are developed through a collaborative effort among health department staff and partners. Each plan considers local priorities developed through County Health Assessments led by each county's local health council, along with other community health priorities identified by staff and partners. These needs and priorities inform the selection of focus areas for each plan.

Counties can include any health related focus areas in their plan that aligns with local needs and priorities. However, the department recommends that each county include at least two of the following Tennessee Vital Signs as focus areas: Physical Inactivity, Tobacco Use, Obesity, or Substance Misuse. Counties develop implementation strategies for addressing each area, including SMART objectives and detailed action steps. Metrics for evaluating each strategy are also identified and included in each plan.

About This Report

This report provides an overview of the Primary Prevention Plans for 2018-2019, showcasing the important primary preventon work of health department staff and their partners over the past year. The report highights selected accomplishments, metrics, and case studies of local primary prevention work across Tennessee.

The Tennessee Department of Health prioritizes and engages in primary prevention work across the enterprise, The Primary Prevention Plans help focus these efforts at the local level but numerous programs across the department's offices and divisions work to address the social drivers of health, shaping policies, systems, and environments to make healthy choices easier in communities across Tennessee.

Every person who works at the Tennessee Department of Health has the opportunity to participate in primary prevention work as part of their county or region's Primary Prevention Plan. Health educators, clinical staff, directors, and administrative staff each play a role in their county or regional plan based on their interest or expertise.

Staff can assist in implementation through planning or facilitating activities, providing education to program participants, building relationships with the community and partners, developing policy changes, administering vaccines, leading trainings, presenting to community members or stakeholders, and evaluation.

1,573 health department

health department staff were involved in implementation of primary prevention initiatives

The Big Picture

Primary Prevention Plans

The Primary Prevention Plans outline the self-identified responsibilities of each local health department for engaging in primary prevention work. The plans are developed annually and reflect local priorities identified through local assessments including the department's County Health Assessments, and the resulting action plans that are developed and led by local county health councils. The Primary Prevention Plans are also informed by high-level strategic priorities developed by the state including the Tennessee Department of Health's Strategic Plan and Tennessee's Vital Signs.



Department Strategic Plan

In 2019, the Tennessee Department of Health developed a Strategic Plan that outlines key priorities and goals for the department for the coming year. The plan includes two areas of strategic focus: *prevention* and acces. Prevention remains front and center, as preventing disease before it occurs is fundamental to public health practice. *Access* is critical when people do need healthcare services. The department is focused on improving access through partnership, coordination, and innovation.



Tennessee's Vital Signs

Tennessee's Vital Signs are 12 metrics that measure the pulse of Tennessee's population health. Overall, they provide an at-a-glance view of leading indicators of health and prosperity in the state. The Vital Signs include health outcomes such as Youth Obesity and Preventable *Hospitalizations,* as well as metrics outside the direct control of public health such as Third Grade Reading Level and Access to Parks and *Greenways*. The Vital Signs metrics emphasize the importance of a collaborative primary prevention approach to preventing diease.





County Health Assessments

Last year the Tennessee Department of Health piloted County Health Assessments (CHAs) in 16 counties. Led by local county health councils, these assessments provide a structured and uniform process for local stakeholders to identify up to 3 shared priorities that are unique to each county. An additional 26 counties are currently conducting CHAs in 2020, with all counties in Tennessee scheduled to complete an assessment by 2022. Each county will conduct a CHA every 3 years.





Health Council Action Plans

Using the findings from the CHAs. each county health council develops an action plan to address the top health priorities in their county. The action plans are the responsibility of the each county health council to implement. Health councils are responsible for the implementation of their CHA action plans. However, county health departments play a role in development of the plan. Local health departments may be responsible for parts of the action plans, which can be included in the county's Primary Prevention Plan.

Filling in the Gaps

The Primary Prevention Plans allow each local health department to plan and implement initiatives that are important to the communities they serve. These initiatives can include portions of the health council action plans or activities outlined in the Department Strategic Plan, but also provide an opportunity to focus on needs identified during the CHA process or through other means. They provide an avenue for local health departments to implement work that may not be prioritized in other action plans or supported by existing funding sources, and allow local health departments to leverage the power of their staff and community partners to affect changes in their communities.

A Primary Prevention Approach

The Tennessee Department of Health is committed to accelerating population health improvement in Tennessee. The leading causes of death in Tennessee reflect an epidemic of preventable chronic diseases.

Health conditions that drive these leading causes of death are **obesity**, **physical inactivity**, **tobacco and nicotine addiction**, and **other substance misuse disorders**. Taken together, these health conditions represent the greatest health challenges facing Tennessee. The Primary Prevention Plans guide local health department efforts to address these conditions in their communities.

Contributors to Leading Causes of Death



Obesity



Physical Inactivity



Tobacco and Nicotine Addiction



Other Substance Misuse Disorders

Leading Causes of Death in Tennessee*

- 1. Heart Disease
- 2. Cancer
- 3. Chronic Lower Respiratory Disease
- 4. Accidents
- 5. Stroke
- 6. Alzheimer's Disease
- 7. Diabetes
- 8. Flu/Pneumonia
- 9. Kidney Disease
- 10. Suicide

*Calculated by the National Center for Health Statistics, U.S. Centers for Disease Control and Prevention, 2014

The Levels of Prevention

Addressing Tennessee's leading causes of death requires a primary prevention approach, targeting the **root causes of disease** so people are less likely to get sick and need clinical services. Primary prevention often requires changing policies, systems, and environments that influence our choices and behaviors. Creating healthier communities can reduce preventable illness by providing everyone with the opportunity to be heatlhy.

Primary Prevention

An intervention implemented before there is evidence of a disease or injury

Example:
Encourage exercise and healthy
eating to prevent obesity

Secondary Prevention

An intervention implemented after a disease has begun but before it is syptomatic

Example: Check Body Mass Index (BMI) to identify obese individuals

Tertiary Prevention

An intervention implemented after a disease or injury is established

Example: Help obese individuals lose weight

Assessing Need

Each county and regional health department assessed and prioritized the needs in their community to inform the focus areas for their Primary Prevention Plan. Based on the identified needs. each county or region developed goals and action steps to include in their plans.

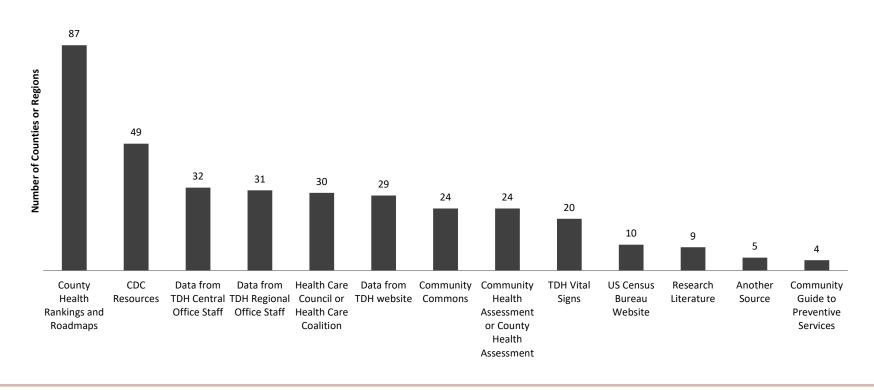
The most commonly-used resource for assessing community needs was County Health Rankings, followed by resources provided by the U.S. Centers for Disease Control and Prevention and resources from staff at the Tennessee Department of Health's Central and Regional Offices.



County Health Assessments

In 2019, the Tennessee Department of Health piloted County Health Assessments (CHAs) in 16 counties, with a goal of all 89 rural counties completing a CHA by 2022. Led by local county health councils, the CHA process engaged a broad base of community stakeholders to assess needs and identify priorities for the county. These priorities informed the development of the county Primary Prevention Plans. The Tennessee Department of Health developed a data profile for each county to use in their CHA in addition to any community data collected as part of the process.

Resources Used to Assess Community Needs



Health Focus Areas

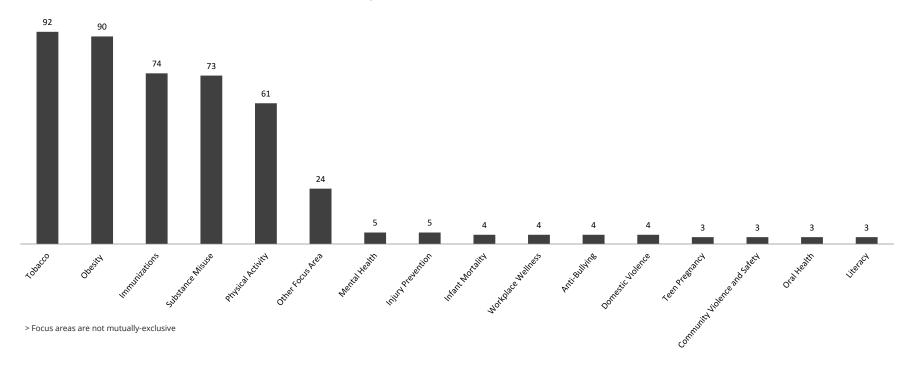
Each county and regional health department selected health focus areas to address the needs and priorities in their community. Each implementation strategy in the Primary Prevention Plans identified at least one health focus area targeted by the strategy.

The department recommended that each plan include at least two of the following Tennessee Vital Signs:
1) Physical Inactivity, 2) Obesity,
3) Tobacco Use, and 4) Substance Misuse. Health focus areas for the 2018-2019 Primary Prevention Plans are shown in the graphic below.

The focus areas are not mutually-exclusive, with some strategies targeting multiple health conditions. Tobacco was the health focus area targeted by the greatest number of strategies, followed by obesity, immunizations, substance misuse, and physical activity.

Other focus areas included mental health, infant mortality, workplace wellness, injury prevention, antibullying, suicide prevention, domestic violence, teen pregnancy, community violence and safety, oral health, and literacy, among others.

Primary Prevention Health Focus Areas



Primary Prevention Plan Highlighted Accomplishments

The Tennessee Department of Health Primary Prevention Plans for 2018-2019

The Tennessee Department of Health's Primary Prevention Plans for 2018-2019 included a wide range of initiatives to address health priorities in each county. Across the state, county and regional initiatives engaged communities and partners, built relationships and coalitions, and delivered prevention education and services. Some of the many accomplishments over the past year are highlighted below.



95
counties implemented primary prevention plans



406
strategies implemented
by local health departments



56
new groups or coalitions formed



50 policies adopted



1,149 organizational partnerships supported initiatives

1,911 volunteers supported initiatives



12,682
pounds of prescription drugs collected at sites and events

559
new prescription drug disposal sites



17,816
flu vaccines administered

9,808
children vaccinated at school located clinics



6,9/5 youth participants in physical activity clubs

10,782
participants in community fitness classes

Focus Area | Physical Inactivity

physical activity strategies implemented

organizational partnerships supported the initiatives

24 programs delivered

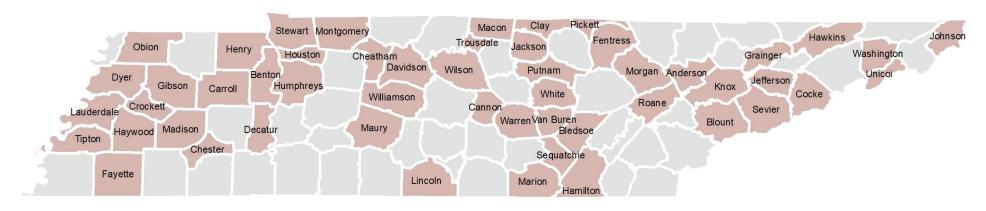
48
youth physical activity clubs

counties implemented physical activity strategies

volunteers supported the initiatives

Healthy Parks, Healthy Person park prescriptions written

6,975
youth participants in physical activity clubs





Healthy Built Environment Projects | Lincoln County

The McBurg Community Center in Lincoln County has invested in new built environment projects to promote healthy eating and active living in their community. Over the past 3 years the community center built a farmer's market pavillion and playground, installed outdoor exercise equipment, and added a water bottle refill station. A Project Diabetes grant from the Tennessee Department of Health funded the improvements. Community partners implement programming at the community center to compliment the new features, including the Lincoln County Health Department which sponsors a walking club and biking events, and Dining with Diabetes events in partnership with UT Extension. Additionally, the McBurg Community Center adopted several health-focused policies and practices, implementing smoke-free grounds, removing the soda machine, hosting fitness classes at least twice per week, and offering fruit and water at all public functions and events.

Focus Area | Obesity

90 obesity strategies implemented

261
organizational partnerships
supported the initiatives

10,782
participants in community fitness classes

18 community gardens and school gardens created

counties implemented obesity strategies

514
volunteers
supported the initiatives

new Breastfeeding
Welcomed Here businesses

34 new Gold Sneaker certified facilities





Hydration Campaign: Bring Tap Back | Campbell County

The Campbell County Health Department, in partnership with the Campbell County Health Council, Campbell Gets Fit!, and Campbell County Schools, helped to implement the Hydration Campaign: Bring Tap Back. The campaign involved providing nutritional educational sessions and water bottles to all 5,316 students in Campbell County Schools. Community partners donated funding for new water bottle refill stations in all 11 county schools. Teachers and school staff were trained on the health benefits of water and developing classroom routines for filling water bottles during the school day. Additionally, health department staff promote the importance of drinking water rather than sugar-sweetened beverages to children and families participating in the WIC program.

Focus Area | Tobacco Use

52 tobacco use strategies implemented 318 organizational partnerships supported the initiatives

18 tobacco-free facility policies enacted

new groups or coalitions formed

71 counties implemented tobacco use strategies

6/4
volunteers
supported the initiatives

smoke-free multi-unit housing policies enacted

35 media campaigns





Juvenile Court Alternative Tobacco Program | Loudon County

The Loudon County Juvenile Court Alternative Tobacco Program offers students cited for using tobacco or vaping products on school grounds an alternative to being processed through the juvenile court system. Through the program, students participate in a 6-week tobacco education course called Project Connect. During the 2018-2019 school year, a total of **139 students participated in the program** in Loudon County. The initiative was implemented through a **collaboration between the Loudon County Health Department and community partners** including the Loudon County Juvenile Center, Loudon County Sheriff's Department, and Coordinated School Health for Loudon County and Lenoir City.

Focus Area | Substance Misuse

substance misuse strategies implemented

organizational partnerships supported the initiatives

drug take back events

5,558
educated on Neonatal Abstinence
Syndrome prevention

counties implemented substance misuse strategies

466
volunteers
supported the initiatives

new prescription drug disposal sites

12,682
pounds of prescription drugs collected at sites and events





Regional Opioid Summit | West Regional Health Office

The West Tennessee Regional Opioid Summit **convened 102 community leaders** to discuss policies to prevent opioid misuse among student athletes in the region. The summit highlighted a mandatory drug testing policy for high school student athletes at Camden Central High in Benton County, Tennessee as a best practice that could be replicated in other schools and described the process the school district went through to adopt the policy. A survey of summit participants found that **91% were supportive of the recommended policy changes**. **A multi-disciplinary group of partners develped and supported the summit,** including the Madison County Health Department, the Tennessee Department of Mental Health and Substance Abuse Services, the Jackson-Madison County General Hospital, and Tennessee Commissioner of Health Dr. Lisa Piercey.

Collaboration and Partnerships

Collaboration and partnerships are key to primary prevention work. Many of the conditions that influence community health are complex and involve a number of factors not directly impacted by public health practitioners. These conditions require action from multiple sectors and disciplines to address.

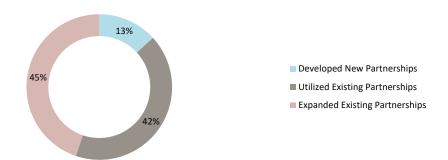
In 2018-2019, **1,149 organizational partnerships** supported county and regional primary prevention initiatives were supported by. Of these, 13% were new partnerships developed by the county and regional health departments to implement their initiatives, and 45% of partnerships expanded the scope of an existing partnership.

Overall, 87% of the inititiaves in the 2018-2019 plans were supported by at least one partnership. In addition, 1,911 volunteers across the state dedicated their time to support the implementation of primary prevention initiatives.

1,149
organizational
partnerships
supported
initiatives

community volunteers supported initiatives

Types of Partnerships Supporting Primary Prevention Initiatives





Health Equity

Considering and addressing health inequities is an essential part of primary prevention work. The Primary Prevention Plans include a number of initiatives for groups who may experience systemic and persistent health inequities. Groups include:

People with low-income or living in poverty People with a physical or mental disability Racial or ethnic minorities

Women

Children and youth

Aging adults

Adults without a high school degree

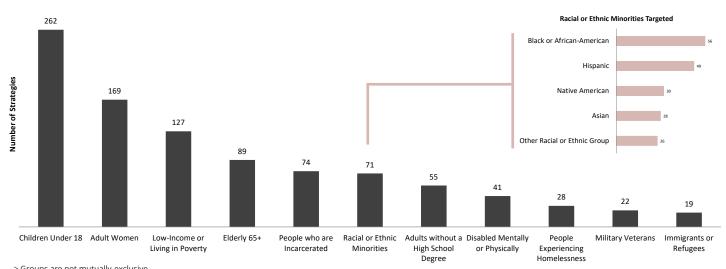
People who are incarcerated

Immigrants or Refugees

Military Veterans

People experiencing homelessness

Groups Targeted by Primary Prevention Strategies



> Groups are not mutually-exclusive



ACEs Committee | East Regional Health Office

The East Regional Health Office formed an Adverse Childhood Experiences (ACEs) working committee to help combat the growing number of children in their region experiencing a high number of ACEs. The idea for the committee was born out of concerns raised by Home Visiting Program staff who saw the impact of ACEs in their communities firsthand. Committee members include nurses, nutritionists, social workers, and others who interact with children through their work. The Tennessee Commission on Children and Youth trained health department staff to become Building Strong Brains facilitators, equipping them to bring awareness to ACEs in local communities. The committee presented on ACEs to all 15 local County Health Councils and to local Coodinated School Health staff in the East Region. All health department staff in the East Region have now received ACEs training and continue to educate community partners on the importance of preventing and addressing ACEs.

Bright Spot Awards

Once a year, the Tennessee
Department of Health recognizes
outstanding primary prevention
work in Tennessee with Bright Spot
Awards. A committee of public
health staff from across the state
review nominations and honor top
nominees with Platinum, Gold,
Silver, or Bronze awards.

In 2018-2019, twelve county or regional health departments received Bright Spot Awards for their innovative and impactful primary prevention work. They focused on a variety of areas including built enviornment, Adverse Childhood Expereinces, tobacco cessation, healthy eating, and injury prevention, among others.

"We used the opioid use data to justify that there was room for a primary prevention initiative that could address this need and get upstream of this potential problem."

- Catherine Sedergren West Regional Health Office

Gold Level Awardees

Lincoln County Health
Department
Healthy Built Enviornment
Projects

East Regional Health
Office
Stop the Bleed

Loudon County Health
Department
Juvenille Court Alternative:
Tobacco Program

Marion County Health
Department
Breathe Easy Track Meet

West Regional Health
Office
Regional Opioid Summit

"Trauma is the #1 cause of death in the US for persons between the ages of 1-46. Life threatening bleeding can be fatal within 5 minutes, and this is particularly disconcerting for rural areas were immediate medical response may not be available."

- Wanda Roberts East Regional Health Office

Silver Level Awardees

Campbell County Health
Department
Hydration Campaign:
Brink Tap Back

Carter County Health
Department
Storybook Trail

East Regional Health
Office
ACEs Committee

Franklin County Health
Department
Healthy Horizons

Bronze Level Awardees

Johnson County Health
Department
Helmet Use Safety
and Awareness

Lawrence County Health
Department
Healthy Kids Summit

Marshall County Health
Department
Soda Free Summer

"The work we are doing to address ACEs is focused on educating stakeholders in order to empower community members to make meaningful changes such as policy changes in the school systems and to help improve the health of their communities."

- **Jodi Stott**East Regional Health Office

"This initiative seeks to expand and bring expertise of health department clinicians outside the organization's walls to help influence physical activity along with safety for our youth."

- Caroline Hurt Johnson County Health Dept

About the Office of Primary Prevention

Mission

The Office of Primary Prevention works to educate others about the purpose and impact of primary prevention, support community primary prevention activities, and foster change through cross-sector collaboration within and external to the Tennessee Department of Health.

Vision

Everyone in Tennessee can make healthy choices wherever they live, learn, work, play and pray.

Website

Learn more about the Office of Primary Prevention at: www.tn.gov/primaryprevention



Cross-Sector Collaboration



Health + Built Environment



Resource Development



Evaluation + Assessment



Grant Funding



Partnership Building

Staff



Leslie Meehan MPA AICP Director



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Patti Scott DNP RN PMP NCSN Clinical Director



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