



*Serving
a growing community*

**Tarrant County Public Health
2007 Annual Report**

Director's Notes

In addition to the many interesting updates included in our 2007 Annual Report, let me mention a few other initiatives begun in 2007 and hopefully developing into robust programs in 2008. We convened a highly energized group of Public Health Ambassadors from across the county and provided them with information about Tarrant County Public Health and key health issues. The Ambassadors have done a wonderful job of spreading the word in their communities, offering feedback and ideas, and facilitating participation in various events.

After many months of hard work involving many partners, we are initiating the Fetal Infant Mortality Review team (FIMR). This effort involved research into best practices, site visits, partnering with the Medical Examiner's Office, and training community action team members. We also convened a Nurse Family Partnership Advisory Committee convened by Commissioner Roy C. Brooks and composed of very supportive members from University Christian Church, UTA School of Nursing, TCU School of Nursing, UNT School of Public Health, JPS, Cook Children's Medical Center, United Way, Catholic Charities, City of Fort Worth, City of Arlington, and Mental Health Mental Retardation of Tarrant County.

And finally, we continued to address our health equity goal by establishing a health equity coordinator position, promoting programs regarding health literacy and moving out of poverty, and volunteering to host town hall meetings in the spring to provide a community dialogue in response to the nationally televised series on PBS, *Unnatural Causes...is inequality making us sick?*

Yours in Health,



Lou K. Brewer, RN, MPH
Health Director



recognized as

Mission

Safeguarding our community's health

Vision

Healthy People and Healthy Communities

Internal Vision Statement

Tarrant County Public Health will be recognized as the public health expert within the communities it serves. Working in collaboration with partners in governmental and non-governmental organizations, we will be prepared for health threats such as chronic disease, health disparities and public health emergencies. We will achieve operational excellence through best business practices, data-driven decisions, customer orientation, a skilled, motivated workforce and sustainable funding.

the public health expert

Empowering people to improve their personal health care

Many people are afraid to question their doctor, which can sometimes affect their health status. But thanks to a fun, informative *How to Talk to Your Doctor* class, people are learning to open up and discuss important things about their health during their doctor's visit. The class, provided to county residents through a collaboration between Tarrant County Public Health (TCPH) and Baylor College of Medicine in Houston, teaches participants how to prepare for doctor visits, what to look for in choosing a doctor, and how to express their concerns to their doctor and get a better understanding of what they can do to improve their own health and recovery. Some statements that create a better understanding include: "Doctor, I made a list of three things that I need to talk to you about...;" "I've had this pain/problem for a week...;" "Will other medications affect what you're prescribing for me today?" Preparing for doctor's appointments by knowing what to ask helps people feel more empowered and makes better use of their time with the doctor. Better prepared patients also help doctors improve their effectiveness and treatment, which helps improve health outcomes.



Immunizations in the technology age

The new Tarrant County Immunization Registry database has allowed TCPH to quickly provide

individuals with on-the-spot, up-to-date electronic immunization records and to more efficiently monitor its vaccine inventory. In fact, the inventory component of the registry has allowed quick action on TCPH's part to locate recalled vaccine. In the past, it would have taken hours, if not days, to determine if any recalled vaccine had

been received and administered. With the registry, it takes only a few minutes for staff to locate recalled vaccine and confirm if any of the recalled vaccine has been administered. Such rapid response capability adds to TCPH's efficiency and effectiveness when dealing with critical health matters.

Convenient locations and extended hours are key to preventing disease

With school now starting on the same date across Tarrant County, it has become more important that parents get their children's "Back to School" immunizations at convenient—and sometimes innovative—locations. TCPH's Immunization Outreach regularly collaborates with community partners when selecting locations like area malls to provide immunizations during extended hours. Hundreds of children are able to get their shots at the mall. This is a great convenience for parents. This effort also helps TCPH vaccinate more children in a shorter period of time and keeps the child's immunization requirements up-to-date. The convenient locations also help parents and schools get students registered on time and prevent children from missing school due to a lack of immunizations.

During the floods in 2007, TCPH's Immunization Outreach went into flooded neighborhoods to administer tetanus and hepatitis A vaccine. Since most of the affected residents were busy cleaning up after the flooding and waiting for insurance adjusters and assistance agencies, Outreach's vans were easy to spot and able to go directly to the affected homes. This mobility and coordination also allowed many of the relief volunteers assisting in the disaster recovery to get needed immunizations.

achieving operational excellence

School health surveillance helps ease the effect of flu season

The launch of a new School Health Surveillance System in 2007, initiated by TCPH's Southwest Center for Advanced Public Health Practice (APC), now gives school nurses access to complete and summarized flu surveillance data. The system also allows them to easily and rapidly share their daily school health data with TCPH.

This sophisticated, Web-based computer portal, combined with a strong relationship with school nurses, has enabled TCPH to more quickly identify and report on specific geographic areas affected by the flu. This capability means TCPH is more prepared than ever to carefully monitor and appropriately respond to changing health patterns among the county's school-age children and youth — a population in which problems such as seasonal flu often emerge and spread rapidly.

In its first months of operation, TCPH received more than 700 health reports from school nurses. Because the system includes software that automatically analyzes school absenteeism data, TCPH has gained a timelier and a more complete view of community health data, including assessments from the school nurses regarding influenza-like illnesses.

Use of the surveillance system is part of a broader effort by TCPH to coordinate its resources to combat seasonal flu and other health problems. In a closely related development, these automated surveillance systems helped identify “hot zones” where flu emerged



or increased. This allowed TCPH epidemiologists and laboratory staff to collect and test flu specimens in targeted “hot zones” for earlier identification and typing of seasonal flu.

Planning is now underway with area partners for TCPH to expand the program throughout the Dallas-Fort Worth region and to include participation from daycare facilities and school-based clinics.

Pool safety is not just about clean water

During the hot Texas summer, many residents enjoy a refreshing swim. One important service provided by TCPH's

Environmental Health is the inspection of public and semi-public pools and spas. Inspectors perform a minimum of two inspections per pool, per season, and look at a number of items relative to the proper and safe operation of the pool.

For most people, the common item they notice is water clarity. But even if the pool looks fine, chemicals within it may be improperly adjusted, which can cause eye irritation or the possible spread of infections. While these issues can be serious, inspectors also check public and semi-public pools for suction or entrapment hazards that can drown or fatally injure a child. By working with the pool operators and performing periodic inspections, TCPH inspectors help identify potential problems.



Targeting childhood obesity

In response to a recent report by the United Way of Metropolitan Tarrant County, which revealed that one-third of Texas school children are overweight or obese, TCPH designed and implemented a *Kids Growing Healthy* program to focus on proper nutrition and physical activity. The program is offered as a four-lesson series, which includes an interactive journal and pre- and post-surveys.



Implemented and evaluated in three local independent school districts, *Kids Growing Healthy* has reached 521 fifth-grade students.

At the completion of *Kids Growing Healthy*, 79 percent of them began consuming more fruits and/or vegetables, and 90 percent reported becoming more physically active (i.e., walking the dog, riding bicycles and playing basketball). Additionally, 73 percent became more aware of how often they were consuming fast foods.

By providing this kind of instruction, TCPH hopes children become more aware of their health status and the importance of a healthy lifestyle. Positive health changes made in childhood can help prevent health problems in the future.

Appealing to the “senses” to fight obesity

Using an Obesity Prevention Grant from the Texas Department of State Health Services, WIC staff put together a special summer and fall class called *Cooking with Herbs Instead of Fat*. Taught at the WIC Center at the Resource Connection in south Fort Worth, the class participants experienced the sight, smell and taste of fresh herbs and learned how to substitute flavorful, low-calorie herbs for higher-calorie recipe ingredients.



Each participant received three herb plants from the Resource Connection Community Garden’s Master Gardeners. They also received information on how to care for and use their herbs to reduce fat in their cooking. American Heart Association cookbooks, measuring spoons, a *Guide to Herbs & Spices* brochure and Mypyramid.gov handouts were included in starter packets to help participants practice what they learned.

Surveys before and after the class indicated that the class was successful in helping participants identify herbs they can use in cooking, and they learned how to incorporate those herbs into their meals. Plans for 2008 include the expansion of the class to include the use of dried herbs.

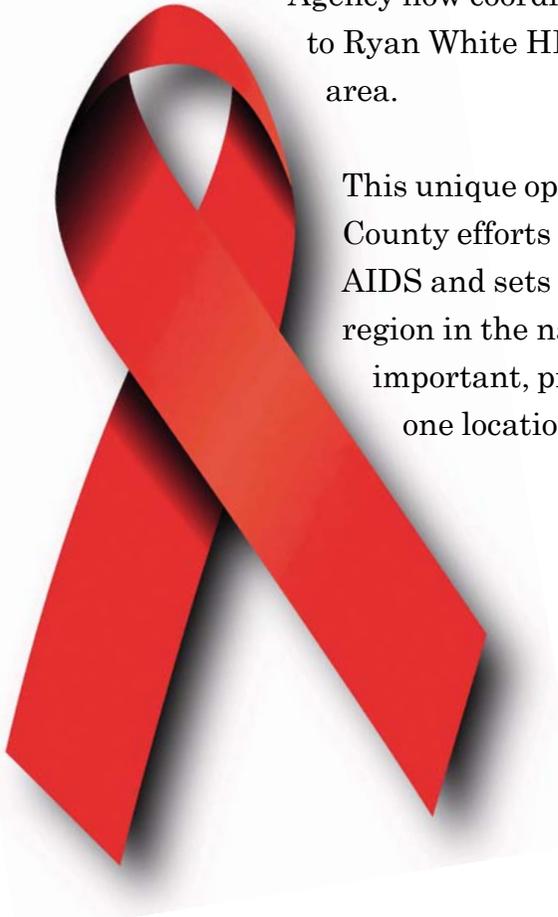
prepared for health threats

Tending those under care, reaching those not receiving care

The year 2007 saw new federal legislative mandates that will govern and fund HIV/AIDS services nationwide. The North Central Texas HIV Planning Council for Tarrant County and TCPH's Administrative Agency played a leadership role during this process to ensure local HIV services were included in that legislation. Area providers and consumers also were kept abreast of changes before they were implemented.

The revised legislation brought new funding opportunities. Through collaboration with area providers, TCPH's HIV Administrative Agency now coordinates all funding streams related to Ryan White HIV legislation for services in the area.

This unique opportunity showcases Tarrant County efforts to help those afflicted with HIV/AIDS and sets the county apart as the first region in the nation to coordinate such important, program-sustaining funding from one location.



The ongoing struggle against tuberculosis

In 2007, TB Elimination evaluated and treated 531 refugees for tuberculosis, providing them complete physical assessments, blood work, parasite testing and treatment, and an update of needed immunizations. Also in that year, three Arlington high schools had students with active infectious tuberculosis. All students at the schools who had close contact to those infectious students were tested for TB. Students who tested positive were provided with a chest X-ray, and they were evaluated by a physician. Students with infectious tuberculosis were placed on preventive therapy. Non-infected students were tested again 90 days later to reconfirm their non-infection. A team of nurses, epidemiologists, clerks, X-ray technologists, community service aides and the division manager worked with the school's administration to ensure that all student contacts had been identified and screened.

TB staff go where they are needed. In addition to the schools, TB Elimination conducted contact investigations at a nursing home, a dialysis center, a 'biker' bar and several businesses.

Tuberculosis Elimination routinely carries out TB research, including clinical trials and epidemiological task orders. This research is conducted jointly with the University of North Texas Health Science Center at Fort Worth and the U.S. Centers for Disease Control and Prevention, with partners at the University of Barcelona Spain. TB Elimination has worked closely with the Tarrant County Homeless Coalition, the Mayor's Advisory Commission on Homelessness, the Roy C. Brooks Healthcare for the Homeless initiative, the Arlington Taskforce on Homelessness and the Arlington Community Health Council to identify and treat people with potentially infectious tuberculosis.

recognized as the public health expert

Surveillance: a national eye with a local view

With the North Texas Regional Laboratory (NTRL) joining the National Respiratory and Enteric Virus Surveillance System (NREVSS) last year, TCPH has become one of only two public health entities in the state to contribute information to national health surveillance efforts. The NREVSS is a voluntary, laboratory-based surveillance system established in 1983 by the U.S. Centers for Disease Control and Prevention to track and provide critical health data to local, state and federal government officials charged with protecting the nation's health. Surveillance information is reported on a weekly basis by commercial, hospital and public health laboratories using an online format. Currently, 389 laboratories nationwide actively report to the NREVSS. In Texas, 21 laboratories report to the system.



For the last several years, the NTRL has participated in influenza surveillance by testing respiratory specimens for influenza A and B viruses through the use of a rapid molecular method called real-time polymerase chain reaction. As part of the NREVSS effort, the NTRL added the capability to test for additional respiratory viruses, including the parainfluenza viruses, respiratory syncytial virus, adenovirus and human metapneumovirus.

In the coming years, this expanded testing will provide epidemiologists and health care providers with valuable information to help them understand the trends and the disease burden caused by these respiratory infections in our community and the nation.

Keeping sexually transmitted diseases at bay

In 2007, Adult Health Services (AHS) located and identified five pregnant women who had been exposed to early syphilis. Each was examined, treated and informed of the risk, thereby minimizing their complications and possible expense to the county medical system. Twenty additional pregnant women infected with syphilis were monitored to ensure a positive outcome for the mother and the baby. Such STDs contribute to premature birth and may increase infant mortality.

These activities are carried out by AHS Disease Intervention Specialists (DIS) who conduct interviews with infected clients, perform individual case investigations and epidemiological follow-up. The DIS ensure that individuals exposed to a sexually transmitted disease (STD), including HIV, are aware of their situation and are medically assessed and appropriately treated for their exposure or infection.

Working with the County's Juvenile Detention System, AHS identified 133 youth (detained or in custody) under the age of 17, whom when tested were unaware of their infection. DIS oversaw their treatment and follow-up with their sexual partners. These efforts uncovered several clusters of STD cases linked to individuals in local high schools. DIS provided extensive educational sessions to share STD/HIV information with students and faculty at those schools so that they could better understand the potential problem and how to protect themselves.

Adult Health Services relies on education, investigations, interviews and appropriate clinical treatments to reduce levels of sexually transmitted diseases in the community.

achieving operational excellence

“Carnaval” focuses health services for immigrant and migrant families

Tarrant County Public Health’s second annual “Carnaval de Salud” (Carnival of Health) took place Oct. 13, 2007. The half-day event, in collaboration with the Mexican Consulate General Office in Dallas, provided preventive health services and educational programs to county immigrant and migrant families. Special emphasis was given to activities for senior citizens, children and teens. Twenty area providers participated, along with more than 50 TCPH

employees who volunteered more than 300 hours to make the event a great success. Along with screenings and educational programs, TCPH provided prizes and entertainment for more than 350 participants.



Binational Health Week Cultural Symposium

The eighth annual Binational Health Week Symposium, held in October, provided health care professionals with proven practices in dealing with disenfranchised populations in Dallas and Tarrant counties. Co-hosted by TCPH at the University of Texas at Arlington (UTA), TCPH staff presented five of the eight workshops to more than 200 health care professionals. TCPH coordinated these forums with the Area Health Education Center, UTA, El Centro College and the Mexican Consulate General Office in Dallas.

“Drive-thru flu shots”

Reprinted from the *Times Record Newspaper*, Thursday, November 15, 2007

Tarrant County Public Health along with community partners from Lake Worth planned and delivered a pandemic influenza exercise while simultaneously providing 200+ seasonal influenza vaccines. Persons drove thru the parking lot clinic, rolled down the window and rolled up their sleeves for this first-ever event in the Lake Worth community. The event proved to be a successful test of the system TCPH now has in place to do mass medication.



Nursing home director shares Hurricane Katrina experience

As part of a symposium for long-term care facilities in Tarrant County, Joseph Donchess, executive director for the Louisiana Nursing Home Association, gave a keynote speech that included a real-life account of his experiences dealing with nursing home care issues before, during and after Hurricane Katrina. The symposium, hosted by TCPH’s Public Health Preparedness, provided participants with checklists, educational materials and tools on how to better prepare their facilities for a natural or man-made disaster.

working in collaboration

Medication dispensing initiative wins award

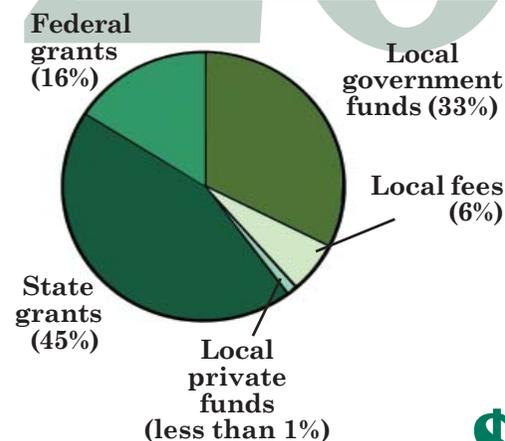
With the cooperation and involvement of large local corporations, TCPH launched a corporate point of dispensing (POD) initiative in fall 2006. The “Best Practice Award,” presented by the National Association of County and City Health Officials (NACCHO), cited the initiative as an innovative way to rapidly medicate a large portion of the county’s population. It is based on 1) rapid response; 2) business continuity; 3) building community partnerships and 4) reducing demand at public points of dispensing. These are four key factors in handling the large scale delivery of medicine to communities affected by a disease outbreak.

The dispensing sites provided by these corporations for their employees and their employee’s families reduce demand at local POD sites. The photo shows staff member Teresa Bates, center, accepting the award on behalf of TCPH.



Public Health Funds

Local government funds	10,197,726
Local fees	1,931,250
Local private funds	100,000
State grants	14,262,404
Federal grants	5,024,432



\$35,023,851.05

Total WIC grocery dollars that entered Tarrant County's economy in 2007.

Morbidity in Tarrant County

Tarrant County Selected Disease Morbidity Summary			
DISEASES	2005	2006	2007
Acquired Immunodeficiency Syndrome (AIDS)	117	102	81
HIV Seropositive	276	166	192
E. coli 0157:H7 Infection	1	8	2
Hepatitis: Type A	19	26	26
Type B	31	621	923
Type C	1,608	1,887	2,365
Meningitis: Aseptic	258	207	259
Meningococcal	30	4	2
Other Bacterial	8	6	4
Pertussis	86	42	68
Salmonellosis ²	127	171	197
Shigellosis	54	123	48
STD: Chlamydia	5,111	5,378	5,583
Gonorrhea	2,487	2,694	2,567
Syphilis: Congenital (<1 yr.)	2	6	7
Primary	29	25	25
Secondary	71	57	57
Other	193	108	180
Tuberculosis	128	108	61
West Nile virus ³	17	53	25

Information provided is for selected reportable diseases

Serious health threats and suspected bioterrorism agents also are reportable and include anthrax, smallpox, plague, tularemia, botulism, brucellosis, Q fever and viral hemorrhagic fever.

¹ Reporting of hepatitis B and C was changed in 2001 to require the notification of chronic cases as well as acute cases.

² Salmonellosis figures tend to fluctuate as a result of reporting and laboratory testing.

³ Increased numbers reflect change in case definitions for West Nile virus.

Workload Measures	2005	2006	2007
BCCCP ¹ - clients screened	900	1,084	1,084
BCCCP - case-managed clients	333	547	377
Pregnancy tests & referrals	1,269	1,081	1,210
Flu shots provided	18,359	13,721	9,560
Immunizations provided	130,488	142,980	144,959
WIC ² - visits	608,288	668,171	633,071
Chronic disease screenings	3,553	3,115	1,511
Health education - health events, presentations	131	202	775
Health education - referrals	744	707	1,948
Communicable disease reports investigated	3,477	3,841	5,108
New HIV cases reported	276	282	143
STD clinic visits	7,442	7,343	7,348
STD disease intervention field investigations	2,458	2,546	3,186
STD/HIV field screening of high-risk individuals	8,730	8,043	5,020
Individuals from target populations receiving HIV education and/or testing and counseling	1,002	1,064	1,556
HIV pre- and post-test counseling sessions	6,114	6,202	6,449
Clients provided HIV/STD prevention education	6,114	6,202	6,449
Clinical lab tests performed	53,426	48,148	47,698
HIV-1 lab tests performed	12,758	11,860	11,096
Clients tested for HIV	6,114	9,797	6,471
HIV/STD cases investigated, partners notified	452	659	951
Preventive Medicine Clinic (PMC) HIV care caseload	542	564	658
PMC clinic visits	3,811	3,719	5,298
Travel Health Services clinic visits	5,247	4,943	4,437
TB clinic visits	17,478	19,408	30,571
TB contacts screened as part of disease intervention investigation	1,650	980	1,375
TB cases in Tarrant County	147	108	106
Percent of foreign-born TB cases	47	51	55
Suspected TB cases treated preventively	275	276	334
HIV co-infections (cases only)	13	7	6
Drug-resistant cases (TB)	8	5	4
Directly Observed Therapy doses administered in the field (TB)	12,395	12,977	14,093
DOPT ³ doses administered (TB)	12,391	8,595	8,431
Contacts investigated (TB)	942	980	2,292
Total on therapy (TB)	422	408	455
Total with latent TB infection	1,096	1,003	1,030
Food establishment inspections	5,157	5,422	5,488
Swimming pool inspections	511	605	779
Onsite sewage facilities permitted	691	587	486
Food handlers trained/certified	14,443	17,926	18,232
High-blood-lead-level environmental inspections	11	12	7
Mosquito pools tested for WNV	482	378	338
Milk and dairy lab tests performed	20,673	24,184	25,834
Water lab tests performed	21,774	22,812	22,090

¹ Breast & Cervical Cancer Control Program

² Women, Infants and Children Program

³ Directly Observed Preventive Therapy



Tarrant County Commissioners Court

B. Glen Whitley	County Judge
Roy C. Brooks	Commissioner Precinct 1
Marti VanRavenswaay	Commissioner Precinct 2
Gary Fickes	Commissioner Precinct 3
J.D. Johnson	Commissioner Precinct 4
G.K. Maenius	County Administrator

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