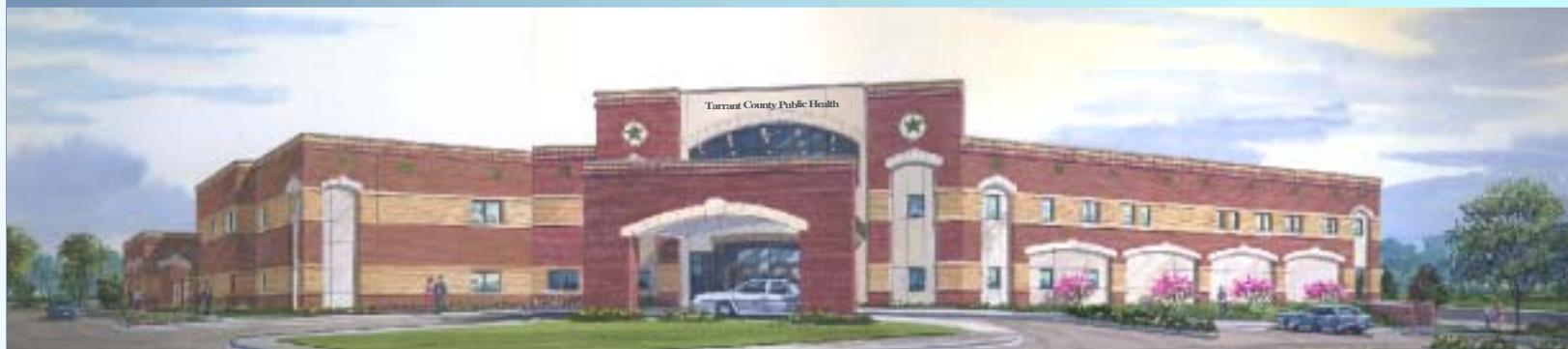


Tarrant County Public Health



Year in Review: 2001





From our director

The Tarrant County Public Health Department (TCPHD) started 2001 off with a strategic planning effort. Many of you were involved in the stakeholders part of this effort. Our “Year in Review” report is one of the responses to letting you and many others know more about what your full service county-wide health department does to make a difference for the health status of the county.

Originally, we identified three priority areas which included a health intelligence center for data analysis and dissemination, addressing health disparities, and operational readiness for the new facility. The first two priorities are well under development as you will read in the following pages.

The new building will allow us to expand many of our efforts, including laboratory testing, WIC immunizations, health education and professional development. Staff are working hard to make certain we maintain a high level of customer service and organizational excellence as we ready for the transition to the new location.

The last quarter of the year, of course was totally unpredicted. With September 11 and the ensuing anthrax events, we added a fourth priority: emergency preparedness and the necessary public health infrastructure to respond in the future. While our expertise and resources were greater than many local health departments, the demand for knowledge of an evolving situation kept us very busy. We learned a lot, strengthened a number of partnerships and are continuing to enhance our capacity.

As you read this report, I hope that you will know more about public health and how dynamic a full service public health department can be. Thank you for your interest in Tarrant County’s health and the department that provides your public health services.

Additional information and services can be found on our website:

<http://health.tarrantcounty.com>

Sincerely,

A handwritten signature in black ink that reads "Lou K. Brewer". The signature is fluid and cursive, with a long horizontal stroke at the end.

Lou K. Brewer, Director

Tarrant County Public Health Department

What is Public Health?

The mission of Public Health is to have a positive impact on everyone, everyday, everywhere by assuring conditions in which people can be healthy. Accomplishing this ambitious goal requires an integrated, multi-disciplinary approach that utilizes the broad and diverse fields of expertise within public health, engages the community to identify its needs, and facilitates effective partnerships to maximize community resources.

Bioterrorism Response



As with most Americans, public health practitioners can readily separate 2001 into two distinct time periods: pre-September 11 activities and accomplishments, and the wave of shifting priorities, responses, and the suddenly urgent threat of bioterrorism after that date.

Investigating and responding to disease outbreaks and other public health threats is a core function of full-service public health departments. The Tarrant County Public Health Department (TCPHD) has well-established, integrated systems in place to monitor the health status of the community, with top priority being to rapidly identify and respond to health threats.

By law, health care providers are required to promptly report specific diseases, conditions, and any unusual trends of illness to the public health department. Trained public health investigators are available around-the-clock to respond to these reports. The typical response includes establishing the potential for others to be at-risk, identifying those potentially at-risk, and facilitating preventive treatments. TCPHD's communicable disease reporting call center is the hub of investigation and response activity. On an average day, the call center receives between 50-75 calls, faxes and e-mails from health care providers, laboratories and citizens reporting a confirmed or suspected disease, a food-borne illness complaint or requesting health information. All confirmed and suspected disease reports are investigated. All requests for information are satisfied by staff or through referrals from staff.

Some of the more common investigations and interventions in 2001 included the identification of tuberculosis, meningitis and pertussis cases in separate school settings, hepatitis A infection of food handlers at local restaurants, a cluster of syphilis cases from a small geographic area, and a cluster of food-borne illness reports from attendees at a local business meeting.

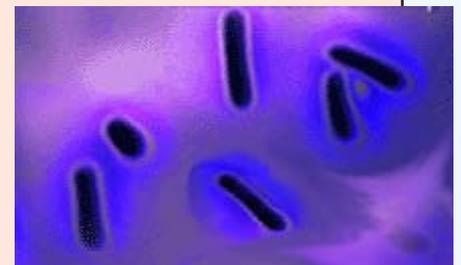
Additionally, the TCPHD has, for years, been a part of multiple city and county emergency planning groups in partnership with public safety, health care, transportation and other critical contributors to a comprehensive emergency response system. With this as a backdrop, the September 11 terrorist attack and subsequent bioterrorism threats stretched existing departmental and community-wide infrastructure to its capacity--and in some cases, beyond.

For the public health system, and TCPHD specifically, events of October 4, 2001 provided the trigger point for action. It was on this date that the first case of inhalation anthrax was diagnosed in Florida. From that point forward, public health was thrust into the spotlight and sought out as a primary resource by the general public, the media, health care providers, and public safety emergency response systems throughout the county. Incoming calls to the public health department doubled, with 90% of the inquiries and reports specific to anthrax. Within days, the threat of smallpox was also being discussed publicly throughout the country, and another wave of inquiries and requests followed. Staff from throughout the department were called upon to assist with fielding calls and responding to inquiries.

Armed with expertise in the field of bioterrorism, the TCPHD also responded on several other fronts. TCPHD's director contacted county and municipality officials to ensure their awareness of the department's systems for bioterrorism detection and response, and to facilitate enhanced communication links. The department's health authority and chief epidemiologist developed essential protocols, conducted numerous training sessions, and provided around-the-clock consultations to the medical community. TCPHD representatives also worked closely with numerous hospital emergency room and medical staffs throughout the county to educate and heighten awareness of bioterrorism agents and diseases, and emphasized the utilization of the department's strong public health reporting systems in the event of a suspected bioterrorism incident. Departmental representatives worked with hazardous materials teams to quickly evaluate suspected materials and, when appropriate, expedite laboratory testing. TCPHD also worked closely with the media, through television and radio news stories and talk shows, to educate the public regarding bioterrorism. Additionally, the department facilitated the dissemination of appropriate alerts and updates to the health care community and other stakeholders. Through partnering with emergency planning agencies and groups, TCPHD provided leadership to county and regional initiatives to strengthen bioterrorism detection and response plans.

Many lessons were learned during that prolonged state of heightened alert and intense public demand for public health expertise. Existing systems for identifying and responding to potential public health threats performed well. The inundation of those systems beyond capacity is where further planning and resources are required.

Amidst a renewed sense of urgency and importance, existing systems continue to be evaluated to enhance capacity and improve communications designed to assist with reporting and responding to public health threats, including bioterrorism.



Strategic Planning

During 2001, the Tarrant County Public Health Department developed a comprehensive three-year strategic plan. Eliciting input from internal and external stakeholders, the department updated its vision and mission statements, core values, priorities, goals and strategic objectives.

VISION:

Healthy people in healthy communities.

MISSION:

The Tarrant County Public Health Department applies the highest standards of personal and organizational excellence to promote community health, prevent disease and injury, and assure a healthy and safe environment.

PRIORITIES:

1. Establish a state-of-the-art Health Intelligence Center to provide health data and analysis of interest to community partners.
2. Strengthen local public health infrastructure for emergency preparedness.
3. Expand efforts to address health disparities in our communities.
4. Prepare for operational readiness during the transition to our new facility.

WE VALUE:

Prevention as the paramount means to promote optimal health and to deter disease and injury.

The environment for its role in sustaining life and healthy lifestyles.

Diversity and its contributions to finding solutions and facilitating health throughout all our communities.

Our relationships with our partners to mobilize the community to improve health.

Empowering people in communities to solve the health problems they face.

Sharing health data and information as an effective empowerment tool.

Encouraging and supporting employees to lead healthful and safe lives.

Essentials

In 1999 Texas became the first state to codify into law ten essential public health services to provide a working definition for local public health systems. This listing was originally created by a U.S. Centers for Disease Control and Prevention steering committee, working with representatives of U.S. Public Health Service agencies and other major national public health organizations.

The Tarrant County Public Health Department (TCPHD) adopted these ten essential public health services as departmental goals and identified strategic objectives and activities to address these services. Here, and on the next few pages, these essential services are outlined, along with an overview of department's corresponding activities and 2001 highlights.

Public Health's 10 Essential Services:

1. Monitor the health status of the community
2. Investigate & diagnose health problems & hazards
3. Inform & educate people regarding health issues
4. Mobilize partnerships to solve community problems
5. Support policies & plans to achieve health goals
6. Enforce laws & regulations to protect health and safety
7. Link people to needed personal health services
8. Ensure a skilled, competent public health workforce
9. Evaluate effectiveness, accessibility & quality of health services
10. Research & apply innovative solutions

1 Monitor the health status of the community

Health Intelligence Center--During the latter part of the year, TCPHD developed a comprehensive plan to establish a Health Intelligence Center. The Center, coordinated by the Department's research epidemiologist, will enable the consistent generation, storage, analysis and dissemination of health information. "Health intelligence" (i.e., health data that has been transformed into meaningful, comparable information) provides the foundation for effectively planning public health and health care services community-wide.

Health Monitoring & Assessment Project (MAP)--TCPHD received a Texas Department of Health Innovation Grant award in September. The award—\$238,060 for a two year time period—is for the development of the Health Monitoring and Assessment Project (MAP). MAP establishes a community health profile as a baseline for accurate, periodic assessment of our community's progress toward health-related objectives. The MAP team will produce a community health status 'report card' for Tarrant County utilizing established national, state and local public health benchmarks.

Immunization Registry--During 2001, the Tarrant County Immunization Registry grew to over 544,000 persons, with approximately 3.5 million individual immunization records. The registry is a compilation of immunization information that assists in the assessment of immunization needs. Quick access to these records by healthcare provides helps reduce duplication of immunizations, which decreases lost school and work time, while saving tax dollars.

TCPHD activities addressing this function:

- *Perform epidemiological surveillance*
- *Collect, analyze & report relevant health data*
- *Identify health problems & trends impacting the community*

Investigate & diagnose health problems & hazards

2001 Highlights

Health Alert Network (HAN)--The Health Alert Network, (HAN) is a special networked computer system that will enable approximately 64 local public health departments, 200 hospitals and the Texas Department of Health to connect to a statewide, secure intranet and to the U.S. Centers for Disease Control and Prevention. The network will allow for rapid distribution of health alerts, dissemination of prevention guidelines, distance learning, national disease surveillance and many other functions vital to safeguarding the community against health threats. The department's HAN will be up and running this spring.

Hepatitis C Screening--Hepatitis C is a blood borne disease found in populations at risk for both HIV and sexually transmitted diseases (STDs). To combat the emerging threat of Hepatitis C, TCPHD applied for and received funding needed to integrate Hepatitis C screening with HIV/Syphilis screening. It was added to the department's outreach screening program conducted in local jails, drug treatment centers, during street outreach, and also in the department's STD clinics.

As a result, in FY 2001, 1,200 high-risk clients were counseled and tested for Hepatitis C. Of those, 49% (588 persons) tested positive for Hep C. Those testing positive were counseled on risk reduction and referred to appropriate caregivers for additional testing and treatment.

TCPHD activities addressing this function:

- Conduct communicable disease investigation & intervention
- Conduct health threat investigations
- Screen high-risk populations for specific health problems
- Establish systems of timely response to public health emergencies

Inform & educate people regarding health issues



with cash and other prizes given to the winning teens. These videos are used in various health settings. "Teen Videofest" was chosen by the Texas Medical Association Foundation as their "2001 Champion of Health," which included a \$10,000 grant, \$5,000 of which would be used to seed other such projects in the state. So far, neighboring Denton County, and La Cross County in distant Wisconsin have initiated "Teen Videofest" programs.

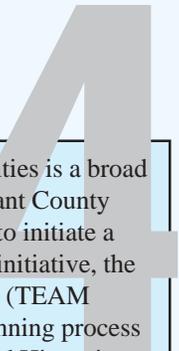
Teen Videofest--One of the department's premier programs epitomizing the objectives of our health education efforts continues to be the "Teen Videofest" project. Conceived in 1998 as a means of targeting health education to teens, "Teen Videofest" is a contest that challenges teenagers, age 13-19, to produce, act and star in a health video. Teens are required to make the videos on their own and submit them to an independent judging panel, composed of representatives from our community partners, as well as other youth. High scoring videos are screened at an Oscar-style awards night,

TCPHD activities addressing this function:

- Serve as a resource for health education & preventive medicine expertise
- Implement population-based health promotion initiatives
- Educate/counsel populations regarding public health risks & concerns
- Expand minority health outreach activities
- Communicate public health initiatives, activities & concerns to the public

2001 Highlights

Mobilize partnerships to solve community problems



TCPHD activities addressing this function:

- Provide leadership for health planning & citizen participation in addressing public health problems
- Collaborate with partners to develop public health education & awareness strategies
- Develop new collaborations & partnerships aimed at pressing, emerging public health issues

Health Disparities project--Eliminating health disparities is a broad goal of many public health agencies. In 2001, the Tarrant County Public Health Department (TCPHD) received funding to initiate a health disparities project in Tarrant County. From this initiative, the Tarrant Empowerment Association for Minority Health (TEAM Health) project became a reality. An eleven-month planning process ensued to elicit input from African American, Asian, and Hispanic groups to identify health improvement priorities. During the first year of the project, 21 separate focus group meetings were conducted

2001 Highlights

by TCPHD throughout the county. Collectively, the groups identified physical activity and nutrition as major contributors to poor health in their respective communities. Major health issues such as obesity, hypertension, cardiovascular disease and diabetes are all potential outcomes from poor eating habits and the lack of physical activity. In November, the department sponsored a kick-off campaign and workshop entitled, "Out of Many, One." Representatives from the three targeted communities attended to further define project objectives and discuss action plans. Plans are currently underway for a media campaign to promote the project and its objectives and to elicit a broad level of support from within the targeted communities.



Support policies & plans to achieve health goals



Public Health Policy Forum--In an effort to facilitate regular, open dialogues between local public health officials and state legislators, TCPHD regularly hosts a bi-annual, full-day Public Health Policy Forum. 2001 highlights included partnering with the Texas Association for Local Health Officials and the Texas Public Health Association to plan a March 2002 forum to discuss strengthening the public health system to respond to health threats. Targeted participants to these bi-annual events include state legislators, local and state public health leaders, and other state and local government officials. The forums are an opportunity for state and local collaborations to develop health policy recommendations, learn about the public health priorities of key lawmakers and policymakers, and explore emerging public health policy issues and proposed means to address these issues through interactive discussions and analysis.

Health Policy Partnerships--TCPHD staff serve on the Texas Medical Association's Council of Public Health in conjunction with the Texas Department of Health, Texas Association of Local Health Officials, the statewide Cardiovascular Taskforce, and the statewide Asthma and Allergy Research Advisory Committee.

TCPHD activities addressing this function:

- Influence public health policy at the federal, state & local level
- Provide effective leadership to strengthen public health infrastructure
- Work with community leaders & local officials to develop plans & policies addressing public health needs & problems

2001 Highlights

Enforce laws & regulations to protect health & safety

2001 Highlights

Environmental Health, North Texas Regional Laboratory--The department's Environmental Health and North Texas Regional Laboratory units perform the majority of regulatory service on behalf of the agency. Inspecting and testing for compliance of federal, state and local laws and regulations is conducted in the form of food establishment inspections, on-site sewage facility inspections and permitting, public and semi-public swimming pool inspections, high blood-lead level investigations, potable water testing for public drinking water systems and private well users, and milk and dairy analysis of raw and retail products.

Enhanced Blood-Lead Level Investigation Technologies--In 2001, the department's high blood-lead level investigation program, through enhanced technologies, dramatically improved its ability to detect environmental hazards, particularly in homes that could impact blood-lead levels.

Expanded laboratory testing during natural disaster--Due to flooding in Harris County in 2001, at the request of the Texas Department of Health, our laboratory took on milk and dairy product testing for that region for a six month period--performing thousands of additional laboratory tests.

TCPHD activities addressing this function:

- Review health statutes & regulations impacting public health services & infrastructure
- Promote compliance with federal, state & local public health laws, regulations & ordinances
- Enforce federal, state & local public health laws & regulations

Link people to needed personal health services

TCPHD activities addressing this function:

- Provide wellness services targeting underserved populations
- Prevent/treat communicable & infectious diseases of public health importance
- Assess/link clients to appropriate health & human services
- Facilitate accessible community-based health services throughout Tarrant County

Expanded Geographic Responsibilities: Northwest Texas HIV

Services Administrative Agency--Since 1991, the Tarrant County Public Health Department (TCPHD) has served as lead agency for administering Ryan White CARE Act and other federal, state and local funding for HIV services allocated to Tarrant and nine surrounding counties. As part of these responsibilities, the department maintains a network of participating service delivery agencies to link clients to appropriate health care services, and ensure collaboration for the provision of coordinated HIV services.

In 2001, the Texas Department of Health (TDH) consolidated HIV service delivery areas within Texas from 26 to 10. With this consolidation, TCPHD assumed expanded geographic responsibility for a 39-county area in northwest Texas. Extensive planning and coordination between TDH, TCPHD, the HIV Planning Council/Consortium, and

representatives from the 30 acquired counties ensued over a six-month transition period. This expansion of geographic responsibilities was accomplished successfully on September 1, 2001, creating the Northwest Texas HIV Services Administrative Agency. During 2001, 2,098 HIV-positive clients were linked to services through this network of participating service providers in the expanded geographic region.

Service Delivery Integration--Service Delivery Integration (SDI) is a pilot program of the Texas Department of Health that involves an internet-based eligibility, billing and reporting system. The pilot is in place at four county public health centers and our S.S. Dillow Elementary School clinic. The outcome of the first year of the pilot is that local health departments receive reimbursement faster. Also, statewide, funds for maternal and child health are more effectively reaching the eligible population. This effectiveness is attributed to the eligibility screening part of SDI, which strongly encourages participation in Medicaid and CHIP (Child Health Insurance Program), rather than using Title V dollars for persons who are eligible for other sources of health care.



2001 Highlights

8 Ensure a skilled, competent public health workforce

Student Rotations--In partnership with the University of North Texas Health Science Center (UNTHSC), student rotations through department programs have served to strengthen the educational experiences of future public health professionals. During 2001, eight UNTHSC School of Public Health students interned at TCPHD for a semester-long rotation. Each completed a special project assignment and enhanced the resources available to the department for other activities. Additionally, three medical students from the Texas College of Osteopathic Medicine (TCOM) rotated through the department's specialty clinic areas.

As part of a collaboration with Human Resources Services Administration (HRSA), an intern worked to enhance collaborations among our department, HRSA, and UNTHSC. One of the priorities of the project was to enhance the local public health workforce through the development of training curricula for public health professionals

TCPHD activities addressing this function:

- *Assist the local community to increase capacity & numbers of professionally prepared public health workers*
- *Ensure/enhance public health skills of department staff*
- *Improve intra-departmental communication*

accomplished through the sharing of ideas and resources from all three organizations. A fellow from the CDC completed the second year of his two year assignment with TCPHD. These competitive fellowships offer young, masters-prepared public health professionals the chance to gain hands-on knowledge in the field.

9 Evaluate effectiveness, accessibility & quality of health services

National Performance Standards--The Tarrant County Public Health Department (TCPHD) is one of 47 local health departments participating with the Texas Department of Health (TDH) in a pilot of the National Performance Standards (NPS) program. The NPS program was developed by the Centers for Disease Control and Prevention (CDC).

The purpose of assessing public health performance based on NPS is to increase involvement of agency stakeholders, facilitate effective communication and coordination among programs, and ensure that essential public health functions are tied to specific goals, objectives, strategies, outcomes and benchmarks.

TCPHD staff participated in NPS training sessions conducted by TDH and then trained 17 key leadership and program management staff needed to respond to the instrument. The NPS instrument has over 400 items that address key performance indicators for each of the 10 essential public health services. The leadership staff evaluated department activities by consensus and also obtained input from community partners to evaluate the broader public health system.

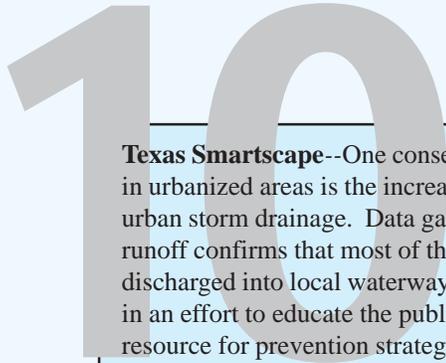
TCPHD, as a pilot participant, completed this instrument and will utilize the results to develop a Systems Improvement Plan (SIP). TCPHD's purpose in participating in this Texas NPS/SIP Pilot is to begin to develop a framework and community partnerships for a Tarrant County Public Health System Improvement Plan (SIP).

TCPHD staff participated in a TDH statewide conference to provide a status report and recommendations to CDC based on the Texas NPS Pilot, and to develop guidelines for local SIPs. TCPHD intends to complete the SIP through a team approach and in collaboration with community stakeholders. TCPHD leadership staff will work with the Texas Public Health Training Center at UNTHSC and TDH project staff to submit a finalized SIP to TDH in August 2002. Ideally, this plan will serve an integral role in identifying agency priorities and guiding system improvement initiatives.

TCPHD activities addressing this function:

- *Evaluate preventive care & population-based public health initiatives within the local public health system to determine effectiveness & responsiveness*
- *Evaluate accessibility & quality of the department's public health services from the community's perspective*

Research & apply innovative solutions



2001 Highlights

Texas Smartscape--One consequence of increasing population growth in urbanized areas is the increased amount of pollutants discharged into urban storm drainage. Data gathered from monitoring storm water runoff confirms that most of the pesticides, fertilizers and herbicides discharged into local waterways are from residential runoff. Last year, in an effort to educate the public about this problem and provide a resource for prevention strategies, a collaboration of 54 cities, counties and others (with TCPHD serving as project manager), developed the educational, interactive CD-ROM, "Texas Smartscape." The CD-ROM includes detailed information, along with colorful visuals on hundreds of varieties of attractive native and adaptive plants, shrubs and trees that require little or no pesticides and fertilizers, and also consume less water. A sophisticated search engine on the CD-ROM allows users to locate plants of specific type, size, color and other attributes. At this printing, 100,105 copies have been ordered/distributed at 91 local sites. Numerous nurseries, home builders and others have volunteered to assist with distribution. Inquiries for copies of the "Texas SmartScape" CD-ROM continue to come in from across the nation.

Geographic Information System (GIS)--Tarrant County began implementation of a countywide GIS initiative during 2001. The TCPHD is a part of the start-up phase, receiving equipment and personnel to establish a public health GIS program. This program will enable the geocoding and mapping of health data to better understand geographic relationships that affect health outcomes, public health risk, disease transmission, access to health care, and other public health concerns in Tarrant County.

TB Research Partnership--Since 1994, our department has collaborated in tuberculosis research with the University of North Texas Health Science Center (UNTHSC). Utilizing our TB Prevention and Control program caseload to conduct TB drug studies, the partnership has published numerous articles in both local and national periodicals, including the *New England Journal of Medicine*. In 2001, the partnership was involved in four active research projects.

TCPHD activities addressing this function:

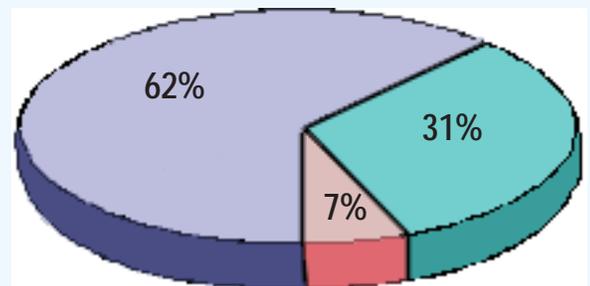
- Apply innovative knowledge management & emerging technologies to address public health issues
- Develop/expand applied public health research activities
- Systematically identify, select & implement best practices in public health

About TCPHD

- With a 2001 budget of \$22,425,703, the Tarrant County Public Health Department remains predominately funded through federal and state resources (62%). As the accompanying chart also details, 31% of total funding is derived from local governmental agencies and 7% from revenues generated from client fees.
- During 2001, TCPHD employed 303 individuals on a full-time basis, 22 as part-time/temporary employees.
- TCPHD provides services at 22 locations throughout Tarrant County

Another 2001 highlight:

- The "T," the City of Fort Worth Transportation Authority, named TCPHD the "Employer of the Year" for "implementing outstanding transportation demand management programs in an effort to improve our region's air quality."



| | |
|----------------------------|----------------------|
| Federal/State Funds | \$ 13,965,858 |
| Local Funds | \$ 6,933,197 |
| Revenue from Fees | \$ 1,526,648 |
| Total Funding | \$ 22,425,703 |

Community Health Information

Tarrant County Selected Disease Morbidity Summary: 1997 - 2001*

| Disease | 1997 | 1998 | 1999 | 2000 | 2001 |
|--|------|------|------|------|------|
| Acquired Immunodeficiency Syndrome (AIDS) | 198 | 224 | 132 | 167 | 140 |
| HIV Seropositive (anonymously reported until 1999) | 565 | 225 | 114 | 309 | 199 |
| E. coli 0157:H7 Infection | 0 | 6 | 4 | 13 | 16 |
| Hepatitis: Type A | 127 | 111 | 129 | 143 | 203 |
| Type B | 65 | 92 | 32 | 22 | 247 |
| Type C | 15 | 25 | 20 | 32 | 369 |
| Meningitis: Aseptic | 49 | 362 | 176 | 267 | 522 |
| Meningococcal | 13 | 17 | 14 | 5 | 20 |
| other bacterial | 10 | 29 | 29 | 12 | 26 |
| Pertussis | 55 | 13 | 24 | 15 | 21 |
| Salmonellosis | 34 | 131 | 151 | 165 | 185 |
| Shigellosis | 41 | 123 | 198 | 256 | 84 |
| STD: Chlamydia | 2039 | 4076 | 3711 | 4097 | 3970 |
| Gonorrhea | 1469 | 3324 | 2779 | 2730 | 2210 |
| Syphilis: Congenital (<1 yr.) | 10 | 2 | 3 | 3 | 6 |
| Primary | 13 | 8 | 10 | 8 | 18 |
| Secondary | 26 | 13 | 11 | 14 | 20 |
| other | 188 | 148 | 184 | 161 | 211 |
| Tuberculosis | 108 | 113 | 109 | 102 | 109 |

* 2001 data preliminary

- Information provided is for selected reportable diseases.
- **Serious health threats & suspected bioterrorism agents are also reportable, and include anthrax, smallpox, plague, tularemia, botulism, brucellosis, Q fever, and viral hemorrhagic fever.**
- In 2000, Texas began HIV reporting, retro-active from 1999.
- In its efforts to establish a national Hepatitis C registry, the CDC changed guidelines to make chronic Hepatitis reportable in 2001.
- The 2001 reporting guidelines also changed to include chronic cases of Hepatitis B.
- Fluctuations in Aseptic meningitis, Pertussis & Shigellosis are unexplainable at this time.

Breast & Cervical Cancer Control Program:

- 965 medically underserved women were screened. These women came from Tarrant, Parker, Johnson, Denton, Palo Pinto and Wise Counties.

Environmental Health:

- 4,600 food establishment inspections performed for county, DFW Airport, & 29 municipalities
- 769 on-site sewage facilities inspected/permitted
- 7,342 food handlers trained/certified

HIV/Sexually Transmitted Diseases:

- 18,349 clients educated/counseled for HIV
- 7,107 clients tested for HIV
- 4,445 HIV/STD cases investigated & partners notified
- 8,300 STD clinic visits
- 1,200 high-risk clients tested for Hepatitis C (49% tested positive)
- 583 client caseload for Preventive Medicine Clinic

Immunizations:

- Over 60,000 clients were immunized in public health centers, WIC centers, churches, malls, schools, and the Fort Worth Zoo immunization initiative.
- According to the 2000 Texas Immunization Survey by the Texas Department of Health, immunization rates for Tarrant County were among the highest at 73%, second only to Travis County (74%).

International Travel Clinic:

- Services were expanded to northeast Tarrant County with the addition of a service site at Southlake's Town Square.
- 4,756 clinic visits were provided from two sites

North Texas Regional Laboratory:

- 125,521 tests were provided to a 49-county region in north central Texas.

Tuberculosis:

- 109 Tarrant County 2001 TB cases
- 252 suspected cases treated preventively
- 12 HIV co-infections (cases only)
- 6 drug resistant cases
- 44% of cases foreign-born
- 19,093 directly-observed therapy doses administered by outreach staff

Women, Infant, Child (WIC)

Nutritional Supplement Program:

- Over 40,000 participants are served monthly in 20 locations throughout Tarrant County.
- The WIC Program contributed a monthly average of \$2 million to the local economy during 2001.

2001 Highlights

Tarrant County Public Health Department

Safeguarding our community's health



For more information, visit our website:
<http://health.tarrantcounty.com>