

Ector County Health Department



Annual Report

2014

Table of Contents

| | |
|---|----|
| Mission, Philosophy & Duty Statements..... | 3 |
| Administration..... | 4 |
| Nursing Services..... | 7 |
| Immunization Program..... | 10 |
| Food Service Program..... | 13 |
| Water Quality Program..... | 15 |
| Public Health Emergency Preparedness Program..... | 16 |
| Public Health Education..... | 24 |

MISSION

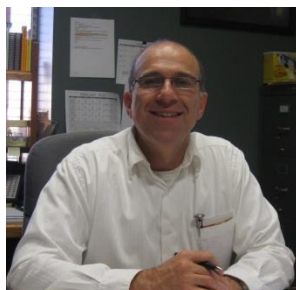
The mission of the Ector County Health Department is to promote and protect the health of Ector County citizens through health education, environmental and consumer health programs and communicable disease prevention services.

PHILOSOPHY

Employees of the Ector County Health Department believe in the integrity of the individual and the importance of the family. Likewise, this department affirms that individuals and families are deserving of respect and entitled to public health services without prejudice or malice. Courteous, professional public health assistance will be provided to citizens regardless of age, wealth, appearance, employment, cultural background, religion, color, political party affiliation, community influence of station in life.

DUTIES

To the limits of the Ector County Health Department’s funding and purpose, this department is responsible for the development, integration, and coordination of communicable disease control activities, environmental & consumer health protection programs, public health preparedness and public health promotion in Ector County. These community health services include the containment of the vaccine preventable diseases, sexually transmitted diseases, tuberculosis, and food borne illnesses. Food service sanitation, water and wastewater quality, and the investigation of sanitation complaints are environmental services performed by the Ector County Health Department.



Gino Solla, R.S.
Director



Nathan Galloway, M.D.
Health Authority

ADMINISTRATION



Personnel training, performance evaluation, employee welfare activities, staffing, property management, grant writing duties, reports and budgets are all administrative responsibilities of the Ector County Health Department. Proper and adequate funding for mission accomplishment is the number one priority of Administration. This department receives funding/support from county and state governments with the review and approval of the Ector County Commissioners’ Court. To ensure continued funding, these governmental entities require reports and budgets. Other documents, such as the reporting of communicable disease to the state health department, are mandated by law. Below is a breakdown of reports and budgets requested from this department.

ANNUAL REPORTS AND BUDGETS:

Required budgets

- 01-470 Budget (Ector County Health Department)
- 84-473 Budget (Community and Rural Health)
- 88-473 Budget (Immunization Fund)
- 90-473 Budget (Public Health Emergency Preparedness)

Annual reports

- ECHD's Annual Report-Ector County
- Annual Inventory of Fixed Assets-Ector County
- Immunization Annual Report–DSHS

Quarterly reports

- Immunization Quarterly Report-DSHS
- Community and Rural Health Quarterly report-DSHS

Monthly reports

- Monthly Distribution of Rabies Vaccine Report-DSHS
- Monthly Vaccine Report for ECHD - Immunization Division-DSHS
- STD/HIV Activity Summary–DSHS
- Tuberculosis Division Drug Inventory (ITEAMS) – DSHS
- Sexually Transmitted Disease Division Medication Inventory (ITEAMS)–DSHS
- PPD Summary Report–DSHS



Emma Hudgins
Office Manager

Biweekly reports

Ector County Payroll Report-Ector County

Weekly reports

Employee Time Sheets-Ector County
Reimbursement Forms Medicaid-TMHP

Daily reports

Daily Cash Report - Ector County
Daily Tally Sheet for Immunizations for ECHD-DSHS
ECHD Leave Request Forms-Ector County

2014 TOTAL BUDGET/REVENUES:

Budget

| | |
|--|------------------------|
| State Funding (Grants): | \$ 328,267.00 |
| Ector County Funding: | \$ 1,158,873.00 |
| Grantee Contribution (Adjustment) | \$ <u>-187,090.00</u> |
| Total Health Department Budget: | \$ 1,300,050.00 |

Clinical fees:

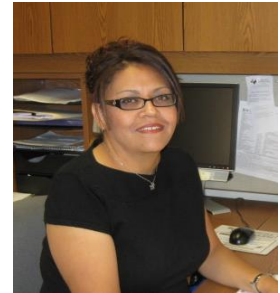
| | |
|-----------------------------------|----------------------|
| Immunizations (VFC/ASN) | \$ 49,980.00 |
| Private Vaccine | \$ 20,675.00 |
| Tuberculosis Testing/admits | \$ 3,850.00 |
| STD/HIV (Testing/Treatment) | \$ 26,200.00 |
| Medicaid (Justice Benefits) | \$ 37,105.00 |
| Medicaid (Vaccine Administration) | \$ 14,680.00 |
| Medicare (Adult Flu shots) | \$ <u>3,585.00</u> |
| Totals | \$ 156,075.00 |

Environmental Services fees:

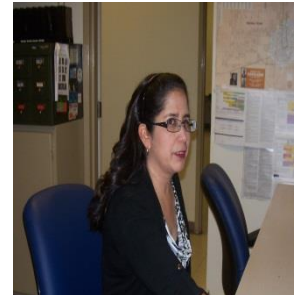
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|-----------------------|----------------------|
| Septic Permits | \$ 167,880.00 |
| Re-inspections | \$ 3,450.00 |
| Swimming Pool Permits | \$ 8,250.00 |
| Water Testing | \$ 647.00 |
| Food Service Permits | \$ <u>146,605.00</u> |
| Totals: | \$ 326,832.00 |

Total Health Department Revenues: \$ 482,907.00

Cost to Ector County Taxpayers \$ 488,876.00



Eunice Aramburo
Public Health Secretary



Jeanette Barrera
Receptionist/
Reimbursement Clerk

| | State Funded (Grants) | County Funded | Full Time | Part time |
|-------------------------------|--------------------------|------------------|--------------|--------------|
| Administrative Clerical | 1 | 3 | 4 | .50 |
| Inspectors/ Sanitarians | | 6 | 6 | |
| Registered Nurses | | 3 | 3 | |
| Ector County Health Authority | | .25 | | .25 |
| Immunizations | 3 | | 3 | |
| Public Health Preparedness | 1 | | 1 | .50 |
| TOTALS | 5 | 12.25 | 16 | 1.25 |

NURSING



The Ector County nursing staff is responsible for providing complete and confidential care to clients who present to the Health Department requiring the following services:

Sexually transmitted disease testing and treatment

Administration of children and adult immunizations

Tuberculosis testing for the general public and physician/hospital referral

Management of Tuberculosis patients and suspects including DOT (directly observed therapy)

Management of patients with latent tuberculosis infection and provision of their medications

Provision of a monthly Tuberculosis Chest Clinic to assess clients with a positive skin test

Tuberculosis admits for patients with active TB, TB suspects and those with latent infection

Investigation of communicable diseases reported electronically and locally to our Health Department

Data entry of all communicable disease reports into the National Electronic Data Surveillance System (NEDSS)

Dispensing of post exposure rabies vaccine

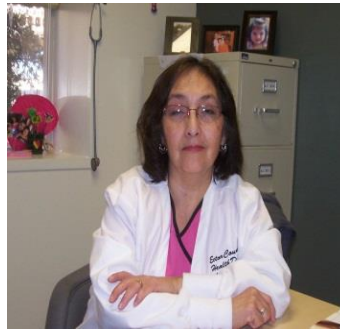
Provision of Yellow-fever vaccination for foreign travel clients (by appointment only)

Blood Pressure assessments

Patient counseling and education are provided on a daily basis.



Linda Cunha, R.N.
Senior Staff Nurse



Lydia Rodriguez, R.N.
Staff Nurse



Candace Barrera, R.N.
Staff Nurse

In addition to the above duties, staff RN's are responsible for monthly reports to the Department of State Health Services; maintaining the on-site Class D Pharmacy and CLIA laboratory and remaining in compliance with both the State Pharmacy Board and Laboratory board; ordering and receiving all medications through the Pharmacy Inventory Control System (PICS); participating in community activities such as health fairs, annual Influenza clinics and outside immunization programs; and attending conferences, classes and workshops to maintain the required continuing education credits required by the State Board of Nursing.

Services are conducted daily on a first come, first serve basis by three Ector County staff RNs. Testing fees vary for different services and some fees are waived when patients are unable to pay the required fee. The Health Department also conducts one evening immunization clinic held the first Thursday night of each month. Additional STD and TB services are also provided at the request of Disease Intervention Specialists who work for the Texas Department of State Health Services Regional office (DSHS).

| Sexually Transmitted Diseases Diagnosed/Treated at ECHD | Totals |
|--|----------------------|
| Gonorrhea Cases confirmed by laboratory testing | 170 |
| Chlamydia Cases confirmed by laboratory testing | 244 |
| Syphilis Cases confirmed by laboratory testing | 11 |
| Patients treated in our facility for the following: laboratory confirmed STD, Bacterial vaginosis, Trichomoniasis, Non-gonococcal urethritis, suspected cervicitis or as contacts to an STD positive person | 1047 |
| HIV Cases | 3 |
| Staff Nurse Activity | Yearly Totals |
| Patients seen for Sexually Transmitted Diseases | 1637 |
| Sexually Transmitted Disease Exams Performed | 1624 |
| STD Patients seen by referral | 49 |

| | |
|---|-------|
| HIV tests performed | 1269 |
| Syphilis tests performed | 1254 |
| Tuberculosis | |
| Active Cases | 5 |
| Suspect Cases | 1 |
| Monthly Tuberculosis chest clinics provided by ECHD | 10 |
| Clients referred to and reviewed in Tuberculosis Chest clinic | 97 |
| New clients admitted to our service for Latent Tuberculosis Infection Medication | 51 |
| Public tuberculin PPD skin tests provided | 340 |
| County tuberculin PPD skin tests provided for Human Resources/employment | 66 |
| State Tuberculin PPD skin tests provided for TB Case/suspect contacts | 10 |
| Labs drawn for patients on Tuberculosis medications | 40 |
| Patients seen for medication refills | 206 |
| Daily visits for DOT (direct observed therapy) | 555 |
| Immunizations | |
| Total # of doses of vaccines given | 8,521 |
| Total # of clients seen for immunizations (adults and children) | 3,249 |
| Private Vaccines Administered (Tdap, Hepatitis B, Meningitis, Shingles & Pneumovax) | 147 |
| Yellow Fever vaccines administered | 69 |
| Rabies Post-Exposure Patients Seen | 10 |
| Influenza vaccine administered | 185 |

IMMUNIZATION PROGRAM



Ector County Health Department offers “walk in” Immunization Clinics for Children / Adolescent & Adults Monday through Thursday from 8:30 - 11 AM & 1 - 4 PM; and an “Evening Clinic” is held the 1ST Thursday of every month from 5-7 PM.

Fees are \$20.00 per person for Children/Adolescents 2 months through 18 yrs. of age & \$10.00 per vaccine for persons 19 yrs. old & greater. No child/adolescent or adult is denied services related to an inability to pay the “administration fee.”

All clients must qualify for receipt of “State” supplied vaccines. Qualifications are as follows: Children / adolescents: Current Medicaid, No Insurance, Underinsured, Superior Chip, and/or being an American Indian or Alaskan Native. Adults: No Insurance

To view the most current “Summary of Recommendations for Child / Adolescents Immunizations”, please access the following website <http://www.immunize.org/catg.d/p2010.pdf>

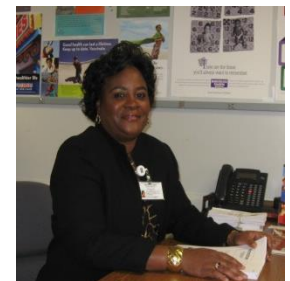
In April of 2008, the TVFC Program “Adult Immunization Expansion” was implemented & provides the following vaccines to qualifying adults over the age of 18 years: Td, Tdap “Adacel or Boostrix”, MMR, HPV, Hepatitis B, Hep A and a combination Vaccine -Twinrix (Hepatitis A & B).

Adult Immunization Clinics include County purchased “**PRIVATE**” vaccines: Seasonal Influenza, Tdap, Menveo (Meningitis), Hepatitis B, Yellow Fever and Typhoid.

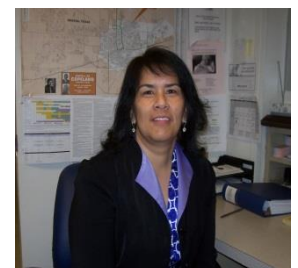
Seasonal Flu Vaccine is the only vaccine qualifying under Medicare Part B. Yellow Fever and Typhoid vaccine are the only vaccines requiring an appointment.



Rennia Geers
Immunization Program
Manager



Jackie Taylor
ImmTrac Outreach
Specialist



Helena Navarrete
ImmTrac Outreach
Specialist

To view the most current “**Summary of Recommendations for Adult Immunizations**”, please access the following website: <http://www.immunize.org/catg.d/p2011.pdf>

The Immunization Grant Program Staff consist of three personnel: Program Manager and two TVFC/ImmTrac Outreach Specialists; all of which share responsibilities ensuring compliance within The Immunization Grant Work Plan.

The program staff compiles & submits “Quarterly” reports to “State * Regional” offices for the following periods: September – November due in December, December – February due in March, March – May due in June, & June – August due in September. These reports provide evidence of compliance or non-compliance within the required Immunization grant mandates.

| <i>Immunization Program Activity</i> | <i>Totals</i> |
|--|--|
| NEW ECHD clients (children & adults) | 1936 |
| NEW ImmTrac consents ECHD <u>obtained</u> for children <u>UNDER</u> 18 yrs. & Adults <u>age 18 yrs. & older</u> | 1,010 |
| # of vaccine doses administered entered into TWICES & ImmTrac | 8,521 |
| # of ECHD clients served whose immunization record histories need recording into ImmTrac | 2,324 |
| Total # of histories entered into ImmTrac against ECHD clients | 37,715 |
| Total # of clients on ImmTrac Outreach List received 3 times a year from DSHS. | 6,359 |
| Total # of children outreach was attempted against said list. | 2,134 |
| Total # of vaccine administrations / histories validated & entered into ImmTrac | 2,510 |
| Total # of children brought “Up to Date” as a result of the entered administrations / histories. | 454 |
| Ector County TVFC Provider Sites, excluding ECHD, as follows: ECISD schools (9), Juvenile Detention Center (1), Pediatric, Family Practice and/or Nurse practitioner facilities (17), & (1) Hospital | 28 |
| TVFC Provider On-Site Audit “follow-up reviews” (required when a provider has any area on the audit with a NO response) * The initial audits are conducted by Texas Medical Foundation staff. | 19 |
| TVFC Tri-County Annual Provider Update Conferences Conducted (Midland County was hosting LHD for 2014) | 1 |
| Immunization “Validation” Audits | 1 |
| “Childcare” facility immunization record audits (all records) | 6 |
| “School” facility immunization record audit (all records within a certain age group or grade) | 1 |
| PERINATAL HEPATITIS B PROGRAM | |
| Facilities educated on Perinatal Hepatitis B & Case Management Program (includes area birthing centers) | 6 Student Nurses/7 Private facilities / 1 Hospital |

| | |
|---|---|
| “Suspected” Perinatal Hepatitis B cases reported | 4 |
| HBsAg (+) women identified & case managed | 3 |
| Infants receiving HBIG within 7 days of birth | 3 |
| Infants receiving Hep B vaccine birth dose within 12 hrs. of birth | 3 |
| Infants who completed Hep B vaccine series | 0 |
| Infants who completed post serology testing | 0 |
| Contacts identified (Household members) \leq 24 months | 1 |
| Contacts (\leq 24 months) who completed Hepatitis B vaccine series | 0 |
| Contacts (\leq 24 months) who completed Post Serology Testing | 0 |

FOOD SERVICE PROGRAM



The Ector County Health Department’s Food Service Sanitation program is responsible for the routine inspections of restaurants, bars, grocery stores, delicatessens, schools, nursing homes, foster homes and mobile food units in Ector County, Adult books stores, temporary establishments, day care centers, home care and unsafe structures are also inspected. Inspectors in this program are responsible for the investigations of food borne disease cases.

Foodborne Diseases

| | |
|-------------------------|---|
| Campylobacteriosis..... | 3 |
| Salmonellosis..... | 8 |
| Shigellosis | 3 |

Investigations

| | |
|-------------------------------|-----------|
| Truck Wrecks..... | 0 |
| Sanitation Investigation..... | 146 |
| Citations..... | 86 |
| Inspections Conducted | 2,435 |
| Total Fees Collected..... | \$146,605 |

| Establishments Inspected | East | West | South | Central | Total |
|---|------|------|-------|---------|--------------|
| Restaurants | 88 | 100 | 85 | 73 | 346 |
| Retail Food Stores | 52 | 63 | 42 | 60 | 217 |
| Establishments (Bakeries, Candy Shops, Manufacturers, Food Warehouses) | 5 | 7 | 23 | 29 | 64 |
| Clubs/Bars | 8 | 17 | 29 | 14 | 68 |
| Institutions (School Cafeterias, Nursing Homes, Jails, Detention Centers, Treatment Facilities) | 14 | 13 | 26 | 16 | 69 |
| Unsafe Structures | 7 | 22 | 34 | 18 | 81 |
| Seasonal Permits | 0 | 57 | 43 | 61 | 161 |
| Temporary Permits | 0 | 31 | 34 | 35 | 100 |
| Foster Care | 17 | 13 | 8 | 6 | 44 |
| Day Care Centers | 9 | 6 | 17 | 7 | 39 |
| Sexually Oriented Businesses | 0 | 2 | 1 | 0 | 3 |
| | | | | | 1,192 |

Food Service Special Event Inspections

| | |
|------------------|--|
| February | <ul style="list-style-type: none"> ➤ One sanitarian inspected the Midessa Boat and RV Show at the Ector County Coliseum ➤ Three sanitarians inspected the Shrimp Fest at the Ector County Coliseum |
| March | <ul style="list-style-type: none"> ➤ One sanitarian inspected the Wrights Amusements Carnival at the Ector County Coliseum |
| April | <ul style="list-style-type: none"> ➤ One sanitarian inspected the Mud Bug Event at the Ector County Coliseum. |
| May | <ul style="list-style-type: none"> ➤ Three sanitarians inspected the Cinco de Mayo Fiesta West Texas food booths at the Ector County Coliseum. ➤ One sanitarian inspected Texas Thunder event in Gardendale, Texas. |
| June | <ul style="list-style-type: none"> ➤ Three sanitarians inspected the Juneteenth food booths at Woodson Park. |
| July | <ul style="list-style-type: none"> ➤ One sanitarian inspected the July 4th Fandango in downtown Odessa. |
| September | <ul style="list-style-type: none"> ➤ Three sanitarians inspected the Permian Basin Fair at the Ector County Coliseum. ➤ One sanitarian inspected the Pow Wow at Odessa College. |
| October | <ul style="list-style-type: none"> ➤ Three sanitarians inspected the Permian Basin Blow Out in downtown Odessa. ➤ One sanitarian inspected St. John's Kooky Carnival at the Ector County Coliseum. ➤ Four sanitarians inspected the PB Oil Show |
| November | <ul style="list-style-type: none"> ➤ One sanitarian inspected the Tejano Low Rider Car Show at the Ector County Coliseum. ➤ One sanitarian inspected Hispanic Chamber of Commerce Barbeque in downtown Odessa. |

Presentations, educational meetings and workshops

| | |
|-----------------|--|
| February | <ul style="list-style-type: none"> ➤ Three sanitarians completed Certified Pool/ Spa Operator Class |
| March | <ul style="list-style-type: none"> ➤ Three sanitarians attended HSR 9/10 Regional Meeting ➤ Two sanitarians held food safety class at MCM Grande for Headstart |
| April | <ul style="list-style-type: none"> ➤ Three sanitarians completed FDA Class Control and Growth Factors Micro |
| July | <ul style="list-style-type: none"> ➤ One sanitarian attended Orientation to Environmental Enforcement |
| August | <ul style="list-style-type: none"> ➤ Three sanitarians attended Foodborne Illness Outbreak Environmental Assessment |
| October | <ul style="list-style-type: none"> ➤ Two sanitarians attended TEHA Annual Conference in Austin TX ➤ One sanitarian held Food Safety Class at Regan Elementary |



Bruce Cunha, R.S.
Chief Sanitarian

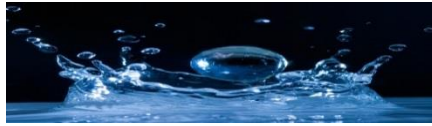


Jimmy Young, R.S.
Sanitarian



Divina Bongo
Health Inspector

WATER QUALITY PROGRAM



The Water Quality Program is responsible for the following activities:

- Reviewing the design of on-site septic systems
- Inspecting new septic systems
- Inspecting public and semi-public swimming pools annually
- Educating swimming pool operators by conducting “pool school” annually
- Investigating complaints
- Checking properties with new electrical connections for proper septic systems
- Interpreting Water Well Samples for homeowners
- Educating homeowners

Septic System Permits Sold:

| | |
|---------------------|---------------|
| Residential | 342(\$82,080) |
| Commercial | 195(\$85,800) |
| Re-inspections..... | 69 (\$3,450) |

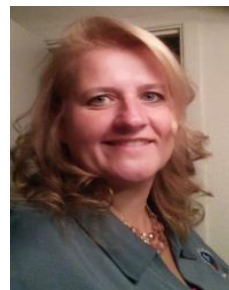
| | |
|---|-------------|
| Sewage/Pool Complaints Investigated | 436 |
| Swimming Pool Permits | 82(\$8,200) |
| Swimming Pool Inspections Conducted | 88 |
| New Electrical Connections Checked | 28 |
| Consultations with county residents, state and county officials | 5,840 |

The Texas Commission on Environmental Quality mandates that all septic systems in Texas be permitted to maintain quality control during the design and installation process. Employees of the Water Quality department are trained and licensed to inspect and issue operating permits for septic systems in Ector County.

Trained pool operators are mandatory at all public and semi-public pools in Ector County. The Water Quality Department conducts an annual Swimming Pool Operator School each Spring and the certificates are valid for three years.



Gregg Olberts
Water Quality Program
Manager



Helene Sickler
Water Quality
Specialist

Public Health Emergency Preparedness Program



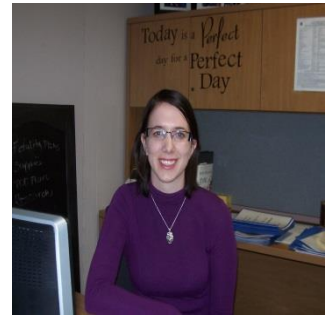
Public Health
Prevent. Promote. Protect.

Mission

The mission of the Public Health Emergency Preparedness Program is to provide preparedness planning and readiness assessment to establish leadership, direction, assessment and coordination of activities during bioterrorism events, outbreaks of infectious diseases, and other threats to community health.

Public Health Preparedness

Public Health Emergency Preparedness Planning provides guidance for responding to public health emergencies such as the intentional release or natural occurrence of a biological agent that poses a high risk of fatalities or serious long-term disabilities to large numbers of people. Should such an event occur, not only would the public's health be affected but there is also the potential for social and economic disruption.



**Amanda Robison-
Chadwell**

PHEP Program Manager

Bio-Terrorism Preparedness

Bio-terrorism involves the intentional or threatened use of viruses, bacteria, fungi, and toxins from living organisms to produce death or disease in humans, animals, or plants.

The Ector County Health Department has developed specific plans tailored to meet the geographical and population needs of Ector County by utilizing the Strategic National Stockpile (SNS). The SNS is a national repository of life-saving pharmaceuticals and medical material. It was created to respond to a large-scale public health emergency or terrorism event. It is uniquely positioned to:

- Provide rapid delivery of a broad spectrum of support, including pharmaceuticals and other medical supplies, in the early hours of an ill-defined threat.
- Provide large shipments of specific material when a threat is known.
- Provide technical assistance to help the affected area receive, distribute and reorder SNS material during an event.

The SNS Program

The SNS Program has been a work in progress for many years. In conjunction with National Incident Command System (NIMS), there is always ongoing planning that includes the participation of first responders, governmental and state agencies. It is a constant challenge that has taken years of commitment and collaboration to protect American communities.

The Ector County Health Department (ECHD) has begun to implement current plans by conducting drills and exercises at different locations to identify any gaps modify and strengthen the existing SNS plans. These plans provide guidance for setting up Points of Dispensing (PODs) where free medications or vaccinations for the threat at hand would be provided to all residents of Ector County.

Introduction

This report was assembled with the intention of providing a general picture of health for the year 2014 in Ector County. As a stand-alone report it is merely informational and will be further useful as a means of comparison for future reports.

This report showcases the counts for reportable conditions, STD's, and ER visits pertaining to asthma and Influenza-like-illness (ILI). Quarterly reports will be issued in 2014 with a final annual report at the beginning of 2015.

Reportable Diseases

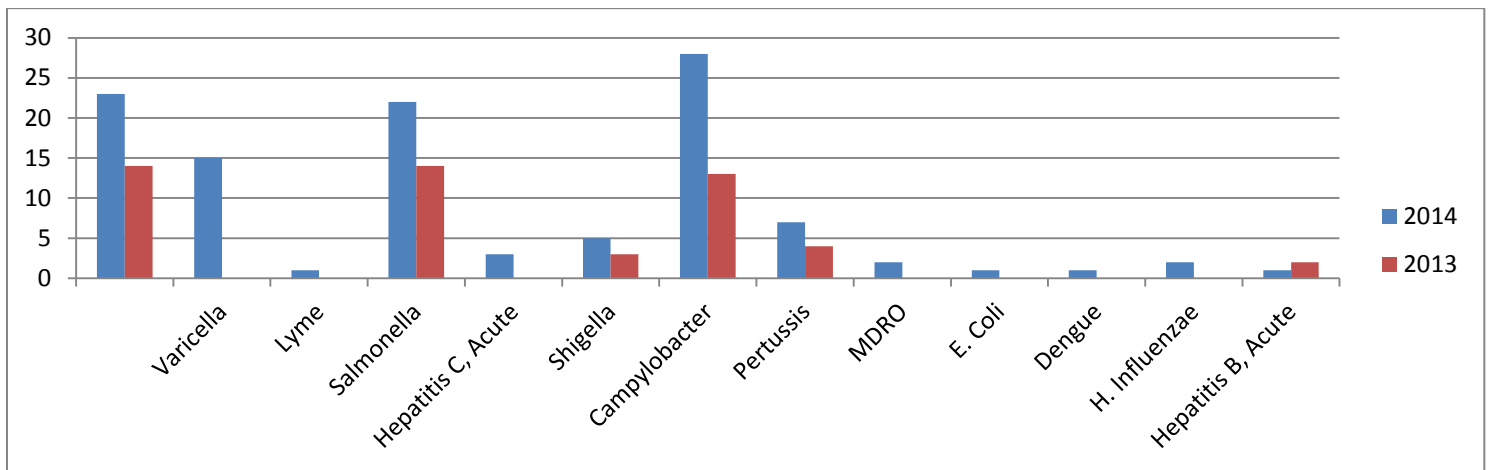
In comparing the numbers for cases between 2013 and 2014 (as seen on the charts and graphs on the following pages) it can be determined that several reportable conditions have seen increases or remain high this year:

Looking at the chart below we see increases from the previous year in all food and waterborne illnesses. We cannot stress enough the importance of education in food safety and we cannot limit this to restaurants as this education needs to be spread in the community due to the fact that the dangers of spreading such illnesses also exist in the home.

Streptococcal pneumonia has seen a strong jump in 2014 even compared to last year which saw an increase of its own from 2013. Influenza season has been severe leading to some of these cases, but many others occurred before flu season began.

We are also in line with the rest of the nation in seeing increases in cases of vaccine preventable diseases. Some of those on the following chart of note are Pertussis (a.k.a. whooping cough), Hepatitis B and C, and Varicella (a.k.a. Chickenpox).

While the numbers charted are low in frequency we must always remember that these are a sample of the true rates in the population. Often food and waterborne illness never gets positively identified due to patients not needing an office visit or not being tested. Some other illnesses are not diagnosed for a variety of reasons so we must remember that even low frequencies, particularly when numbers increase from year to year, can indicate a need for intervention and education.

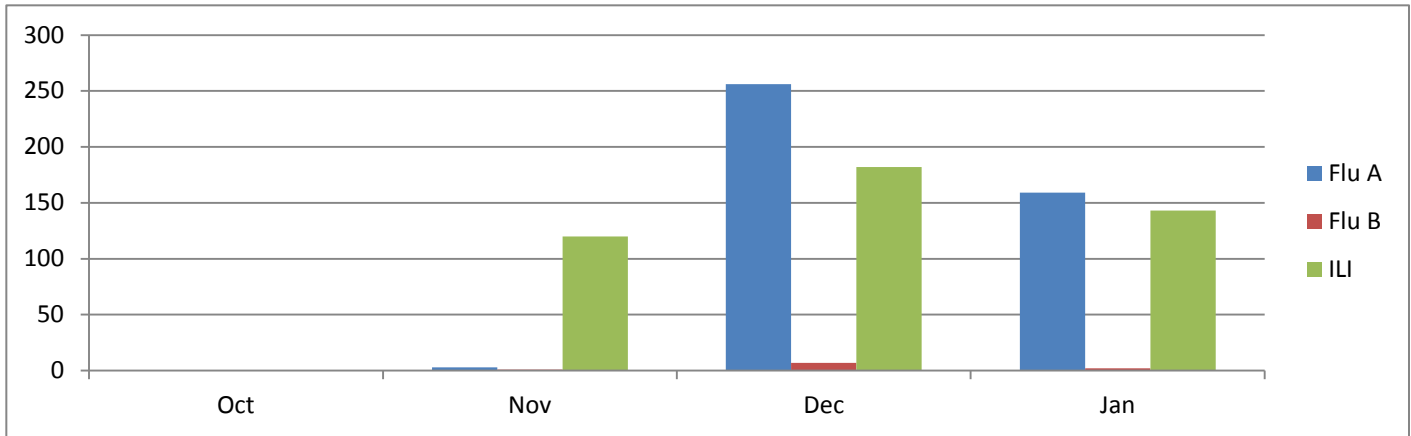


Reportable Conditions for 2013-2014
Last Edited 01/28/2015

Influenza and Influenza-like-Illness (ILI)

Included in this report are the numbers for Influenza as reported by MCH and Odessa Regional Medical Center as they are the main medical facilities in Ector County. There was an increase in incidence of influenza this season as compared to last season. The Centers for Disease Control and Prevention (CDC) did note that Texas influenza outbreaks were considered widespread. Influenza like Illness (ILI) is high this season as well and is above the national benchmark. In addition, several cases of H1N1 (the 2009 strain) were noted in Ector County and claimed lives here as well as elsewhere in the state and nation.

To prepare for next season an increase in education about the influenza vaccine is recommended.

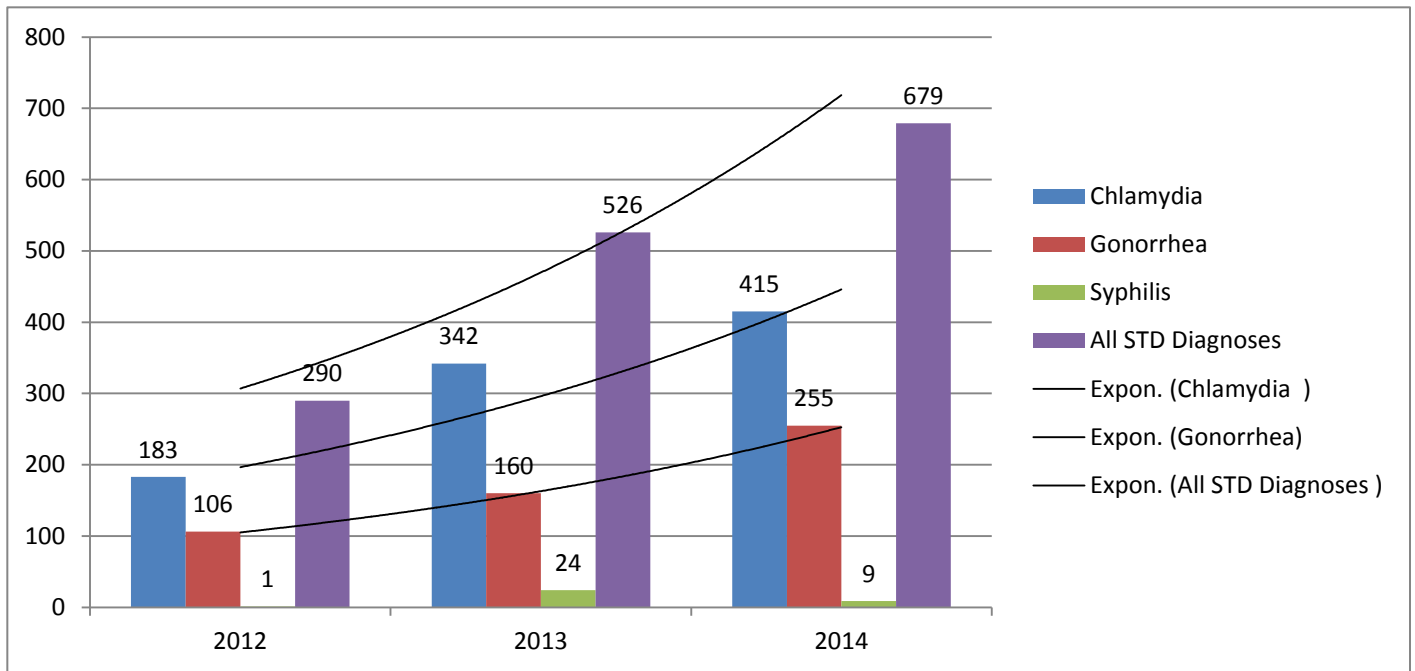


Influenza Tracking for 2014-15 Season
 Ector County Texas
 Data Acquired from MCH, ORMC
 Last Edited: 1/28/2015

Sexually Transmitted Diseases

Monitoring Sexually Transmitted Diseases (STDs) is not only a way of monitoring the health of the local community, but functions to monitor the efficacy of programs in place to institute preventative measures. One public health intervention might be a success in one place, but fail entirely in another and there is not always a clear understanding as to why. So, monitoring these trends and providing this picture can hopefully give the many valuable community entities and individuals the ability to review and, where necessary, alter their approaches based on what the reports show in terms of the public response. This data was collected from the Ector County Health Clinic and Odessa Regional Medical Center.

Here in Ector County we do see relatively high rates of Chlamydia and Gonorrhea and they have been on a steady rise since standardized surveillance procedures began as the graph below shows. Do keep in mind that this is only a sample of the population. Below is the number of STD's giving a reasonable sample image of the population.



Sexually Transmitted Disease Rates
 Data Acquired from MCH, ORMC and Ector County Clinic
 Last Edited: 1/28/2015

When utilizing the numbers in this report please consider the following:

- ❖ Due to delays in reporting by patients and/or providers the numbers here may not be an exact representation and may change in the reporting system after this date.
- ❖ Reportable data were collected through the NEDSS system
- ❖ ILI was reported utilizing MCH and ORMC reports from Infection Control.
- ❖ Influenza numbers resulted from reporting by ORMC and MCH infection control.
- ❖ Data represented in the charts are raw counts of cases and are not percentages or per 100,000 counts as the rates were not high enough to warrant this.
- ❖ Influenza season is still considered active at the time of this report thus numbers will change.

Resources

CDC (2012) *Seasonal Influenza (Flu)*. Retrieved 31 Dec 2012 from <http://www.cdc.gov/flu/weekly/summary.htm>

CDC (2012) Update: Influenza Activity—United States. Morbidity and Mortality Report (MMWR) 61(48), 990-993

The Public Health Emergency Preparedness Program prevents, promotes, and protects the health of Ector County residents.

Public Health Emergency Preparedness in 2014

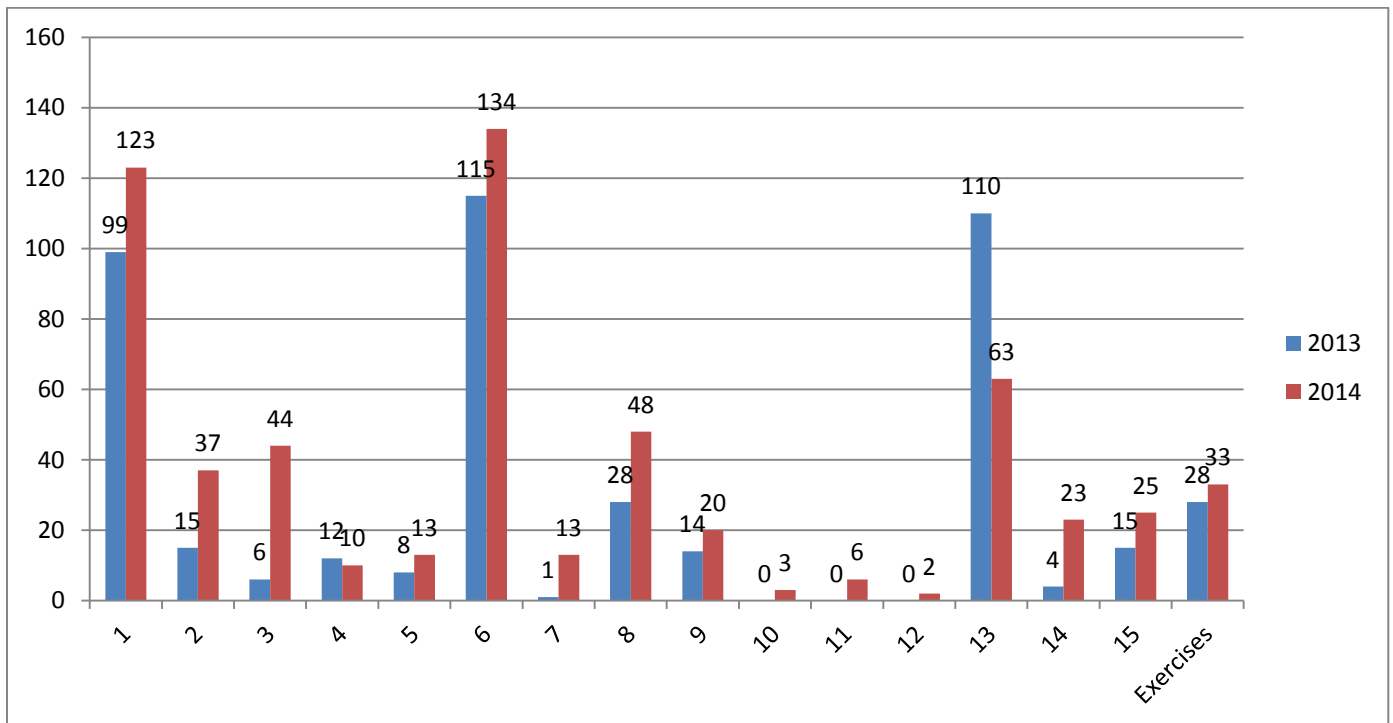
In the Ector County Health Department, we are recipients of a Texas Department of State Health Services grant that funds the public health emergency preparedness staff. Our staff members are responsible for development of plans for public health emergencies and practicing those plans.

One of the ways that the Centers for Disease Control (the ultimate authority on PHEP grants) determines preparedness is by judging preparedness levels on 15 capabilities. It is not possible (especially with a small staff) to practice every single capability every year, but the goal is to address the capabilities relatively evenly over a three-year period. Those capabilities are:

- 1. Community Preparedness:** Efforts to ensure that the community is prepared through emergency preparedness education, establishment of agreements with the community for medication/supply distribution, etc.
- 2. Community Recovery:** Efforts toward ensuring a smooth recovery from a public health disaster.
- 3. Emergency Operations Coordination:** Efforts to keep regular contact and share information with police, fire, EMS, hospitals, and other emergency management organizations locally and statewide.
- 4. Emergency Public Information and Warning:** Efforts to enhance public information and warning systems for public health emergencies.
- 5. Fatality Management:** Efforts to plan for potential mass fatality events.
- 6. Information Sharing:** Efforts to keep all relevant parties informed of goings on in PHEP and keep ourselves abreast of their efforts as well.
- 7. Mass Care:** Efforts to plan for and practice for mass care events (i.e. mass sheltering).
- 8. Medical Countermeasure Dispensing:** Efforts to plan for and exercise plans for mass dispensing of medications in a public health emergency (i.e., disease outbreak, bioterrorism event).

- 9. Medical Material Management and Distribution:** Efforts to plan for and practice (with the state of Texas) distribution of materiel from the Regional Strategic Stockpile location to smaller points of dispensing and treatment centers in public health emergencies.
- 10. Medical Surge:** Efforts to plan for and practice for events that result in medical surge in conjunction with hospital partners.
- 11. Non-Pharmaceutical Intervention:** Efforts to plan and practice for the distribution of materiel of the non-pharmaceutical variety in public health emergencies.
- 12. Public Health Laboratory Testing:** Efforts to plan for and practice for public health laboratory service usage in public health emergencies.
- 13. Surveillance and Epidemiological Investigation:** Efforts to maintain disease surveillance and epidemiological investigation on a daily basis and prepare for the handling public health emergencies (i.e., disease outbreaks, epidemics, pandemics).
- 14. Responder Safety and Health:** Efforts to safeguard first responder safety and health in public health emergencies.
- 15. Volunteer Management:** Efforts to build and maintain a database of volunteers whom can assist in public health emergencies.

To demonstrate how the Ector County PHEP Department focused its energies in 2013 and 2014 the data below is a compilation of the tasks completed throughout the years in each capability. This graph will also dictate how we focus our attentions in 2015.



Capabilities Task Graph
Last Edited 1/28/2015

It is important to note that this representation is only of the preparedness efforts by Ector County Health Department staff and is not a representation of preparedness efforts by other emergency management agencies or hospitals. Overall there were 2,611 preparedness capabilities tasks completed by the department in 2014 which is up by 143 from the previous year and this was paired with a reduction in staff from 3 full time employees to 1 full time employee and 1 part time employee.

HEALTH EDUCATION



In December 2010, the Department of Health and Human Services launched Healthy People 2020, a comprehensive, nationwide health promotion and disease prevention agenda. Healthy People 2020 builds on initiatives pursued over the past three decades. The 1979 Surgeon General's Report, *Healthy People, Healthy People 2000*, and *Healthy People 2010: National Health Promotion and Disease Prevention Objectives* established national health objectives and served as the basis for the development of State and community plans. ECHD supports and implements these plans at the local level through the Community Health & Wellness Education Program. Our goals are to help reduce health care costs for individuals and businesses, improve the health of Ector County residents by providing information to the community, and educate the public regarding health issues and potential health hazards that can impact the community. This is done through our partnerships with other agencies and via community outreach activities.

Community Education and Outreach in 2014

Sweet Expectations-Fundome-June 7, 2014
Senior Advantage at ORMC-May, 17, 2014
Permian Basin Health Fair –October 4, 2014