Bell County Public Health District
2016 Annual Report
Special thanks go to all of the staff of the Bell County Public Health District (BCPHD) for their work in serving the residents of Bell County.

Funding for the Bell County Public Health District is provided through the contributions of our Member Cities (Bell County, Killeen, Temple, Belton, Morgan’s Point, Rogers, Salado, Harker Heights, Holland, Troy, and Little River/Academy) and revenue from fees for service as well as through grants from the State of Texas and the Federal government.

We would like to thank all of our collaborators and stakeholders in the local community as well as with surrounding jurisdictions and the State of Texas.

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As the new Director for the Bell County Public Health District (BCPHD) I am thrilled to be providing the address for our first Annual Report. One of the cornerstones of public health is the importance of community engagement and it is my hope that this report and those following it will allow the public the opportunity to see our efforts at work. We work hard here at BCPHD to provide services to the citizens of Bell County, in particular, the underserved populations in our communities. It is our hope that, in doing this, we can help the citizens of Bell County lead longer, fuller, and healthier lives.

There are always challenges with local public health work due to the nature of public service being that we do much with very little. In order to mitigate some of those challenges a focus for BCPHD will be on the development of new community partnerships with our colleagues in schools, hospitals, local and state politics and community organizations. We are working toward creating more collaborative partnerships and hope to be able to provide ever more insight and better service to our citizens.

We are also working with our partners in surrounding jurisdictions in our partnerships with organizations like the Texas Association of City and County Health Officials (TACCHO) to learn from efforts they have undertaken and challenges that they have faced. All of this knowledge will help us be even better stewards of the health of those in Bell County.

I hope that this report is enlightening and provides valuable information about the Health District and what we are doing to better the health of those in Bell County. It has been an honor to serve Bell County thus far and I look forward to more work to come.

Bell County Public Health District
Director

Amanda Robison-Chadwell

Amanda Robison-Chadwell, MPH
The Bell County Public Health District was known as the Bell County Health Department until 1994 (having operated as the Health Department since 1942). In 1994 representatives in Bell County and the Director worked together to establish the Health District. A Cooperative Agreement was established which set the terms for the operation and oversight of the Health District.

The mission of the Bell County Public Health District is to promote healthy lifestyles in the communities served through education, service, and leadership; to prevent disease and protect the public’s health, and to serve as highly trained and skilled professionals dedicated to public health service.

The goals of protecting the public’s health cannot be achieved by just the staff of the Health District and require cooperation and coordination with the communities that we serve. In order to do this the Health District has and endeavors to continue to coordinate resource utilization with the local communities and stakeholders in order to achieve our mission.

The Health District recognizes the importance of promoting and maintaining a health community through education, prevention, and addressing the social determinants of health. The social determinants of health (SDH) are the conditions, in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems” (WHO, 2016).
The Bell County Board of Health is another important component of the operations of the Health District. The Board of Health is an administrative board of Directors appointed by the Member cities that govern the operation of the Health District. The Director is appointed by the Board of Health to carry out the policies and procedures adopted. Last, and certainly not least, the Health District operates in conjunction with a Board approved Health Authority who is a medical doctor within the community who offers valuable services and insight toward the accomplishment of our goals.

**Board Members**

**Commissioner Bill Schumann**  
Representative of Bell County  
wrschumann@gmail.com

**Ms. Kathryn Long**  
Representative of Bell County  
klong@umhb.edu

**Ms. JoAn Musick-Dillard**  
Representative of the City of Belton  
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**Mr. Wayne Carpenter**  
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Mr. David Broecker  
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daveb@broeckerfuneralhome.com
The main offices for the Health District are in our Temple location. Administration is the central component of the Health District in that their focus in the department is on coordinating the efforts of all of the different divisions. This is done through functioning as a primary communication hub between divisions, managing the budget and coordinating communication with external stakeholders. The division is composed of six employees.

**Amanda Robison-Chadwell**, MPH, Health District Director

**Judy Porubsky**, MPH
Chief Financial Officer/HR Director

**Stephanie Chavez**
Accounting Assistant

**Dr. Janice Smith**
Local Health Authority

**Charlsie Barfield**
Executive Secretary

**Tom Bennett**
Support
The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a health and nutrition program with a successful record for improving the diet of infants, children, and pregnant, postpartum, and breastfeeding women who are at risk for nutrition-related illness. The main focus of the WIC program is to educate mothers, families and caregivers on the proper nutrition for babies and young children.

Food benefits are issued for each WIC client. Both fathers and mothers can receive and spend the benefits for their children. Electronic Benefit Transfer (EBT) Cards are loaded with food benefits for clients to use at eligible stores such as HEB, Wal-Mart, Temple Nutritional Store, Killeen Nutritional Store, IGA and Commissaries. The monetary food benefit on an EBT card is approximately $60 per client each month. Based on program participation in 2015, approximately 207,919 benefits were issued to families in the Bell County community throughout the 4 locations. This amounts to $12,475,000 spent in area stores and contributed to the local economy this year.

WIC promotes a better quality of life for Texas' most vulnerable children by providing healthful foods, nutrition education for parents, support for mothers who breastfeed, and medical and social-service referrals. Through referrals, WIC is able to connect participants to job programs and other health and educational benefits.

The Bell County Public Health District WIC Program employs over 50 staff persons who provide services to the community in 4 locations: Temple, Killeen, Copperas Cove and Fort Hood. Staff includes the Division Director, 4 clinic supervisors, and clinic support staff comprised of nutritionists, Registered Dietitians (RD), Registered Nurse (RN), Licensed Vocational Nurses (LVN), Lactation Consultants (IBCLC), breastfeeding peer counselors and clerical staff.

Nikki Morrow, IBCLC
WIC Director
The Environmental Health Division is primarily responsible for regulating the sewage disposal of residential and commercial properties, not served by organized sewage systems in Bell County. Serving as the Authorized Agent for Bell County, the staff works closely with the Texas Commission on Environmental Quality (TCEQ), the county and multiple city staff members as well as designers, installers, builders, business owners and homeowners throughout Bell County. This department permits all new on-site sewage disposal systems (OSSF) and tracks maintenance contracts required on many systems. The staff responds to complaints or public health issues associated with these responsibilities. Municipalities often request on-site review and approval before building permits are issued for properties served by OSSF's. Many mortgage lenders request OSSF inspections for residences and businesses at point of resale. The Health District provides documentation as to conditions observed on the site that may affect future system operation. The Environmental Health staff also work closely with the Bell County Commissioner’s Court, multiple city staff and the County Engineer in subdivision of land served by OSSF’s.

Environmental staff also inspects and permit mobile home parks and trailer parks served by OSSF’s. Staff investigates these properties as well as many other sites within Bell County for public health nuisances associated with violations of the Texas Health and Safety Codes. The violations may include improper sewage or trash disposal, rodent/insect harboring, mosquito breeding and other potential health violations.

The Food Protection Division is dedicated to the prevention of food related illness through its primary goals of retail food operation compliance, education of food worker personnel in food safety and sanitation practices, and other food sanitation concerns that affect public health.

The division duties include food sanitation inspections for all retail food establishments, public and private school and college dining facility inspections, dining areas at assisted living facilities and hospitals. They also will investigate foodborne illness complaints, environmental health inspections for daycares and foster homes, bed bug complaints locations such as: public hotels and motels. The department works closely with cities to ensure compliance. If requested they may also participate in emergency investigations relating to fires, accidents and other emergencies that involve food or food related items. They can take on an investigative role for other events that fall within the scope of food sanitation and safety.
Table 1: Bell County Environmental & Food Protection Division Services

January 1, 2016 through November 30, 2016

<table>
<thead>
<tr>
<th>Type of Establishment</th>
<th>East Bell County</th>
<th>West Bell County</th>
<th>Total</th>
<th>Frequency of Inspections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concession</td>
<td>50</td>
<td>54</td>
<td>104</td>
<td>2 x year</td>
</tr>
<tr>
<td>Convenience Store</td>
<td>88</td>
<td>96</td>
<td>184</td>
<td>2/3 x year</td>
</tr>
<tr>
<td>Day Care</td>
<td>46</td>
<td>82</td>
<td>288</td>
<td>1 x year</td>
</tr>
<tr>
<td>Grocery</td>
<td>25</td>
<td>22</td>
<td>47</td>
<td>3/4 x year</td>
</tr>
<tr>
<td>Manufacturer</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>1/2 x year</td>
</tr>
<tr>
<td>Mobile Food Unit</td>
<td>98</td>
<td>70</td>
<td>168</td>
<td>1/2 x year</td>
</tr>
<tr>
<td>Non-Profit</td>
<td>12</td>
<td>8</td>
<td>20</td>
<td>1/2 x year</td>
</tr>
<tr>
<td>Restaurant</td>
<td>287</td>
<td>332</td>
<td>619</td>
<td>3/4 x year</td>
</tr>
<tr>
<td>Retail Food</td>
<td>29</td>
<td>38</td>
<td>67</td>
<td>2 x year</td>
</tr>
<tr>
<td>School</td>
<td>50</td>
<td>54</td>
<td>104</td>
<td>2 x year</td>
</tr>
<tr>
<td>Taverns/Clubs</td>
<td>25</td>
<td>57</td>
<td>82</td>
<td>2 x year</td>
</tr>
<tr>
<td>Warehouse</td>
<td>6</td>
<td>2</td>
<td>8</td>
<td>1/2 x year</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>717</strong></td>
<td><strong>815</strong></td>
<td><strong>1532</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Services Provided</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishment Inspections</td>
<td>3750</td>
</tr>
<tr>
<td>Foster Home Inspections</td>
<td>172</td>
</tr>
<tr>
<td>Complain Investigations</td>
<td>263</td>
</tr>
<tr>
<td>Food Worker Classes Taught</td>
<td>460</td>
</tr>
<tr>
<td>Food Worker Students Taught</td>
<td>12,520</td>
</tr>
<tr>
<td>Food Manager Classes</td>
<td>1</td>
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</table>

<table>
<thead>
<tr>
<th>Environmental Service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>OSSF Permits Issued</td>
<td>412</td>
</tr>
<tr>
<td>OSSF Design Reviews</td>
<td>462</td>
</tr>
<tr>
<td>OSSF Contract Tracking</td>
<td>5034</td>
</tr>
<tr>
<td>OSSF Court Cases Filed</td>
<td>304</td>
</tr>
<tr>
<td>Loan Inspections</td>
<td>275</td>
</tr>
<tr>
<td>Subdivision Evaluations</td>
<td>61</td>
</tr>
<tr>
<td>Mobile Home Park</td>
<td>27</td>
</tr>
<tr>
<td>Environmental Complaints</td>
<td>49</td>
</tr>
<tr>
<td>Building Reviews for Cities</td>
<td>0</td>
</tr>
</tbody>
</table>
Public Health Emergency Preparedness (PHEP) is a program that exists in a number of local public health jurisdictions. The intent is to prepare for large scale events that can impact the day to day function of the jurisdiction. Such events include: infectious disease outbreaks, bioterrorism events, chemical spills, contamination of drinking water, and natural disasters. Events such as those listed above, if not adequately prepared for, can cripple the function of government, business, healthcare operations and numerous other critical societal organizations. The focus of PHEP is to anticipate the threats facing Bell County and to conduct exercises to train for and thus prepare for response to such events. In so doing the fallout can be less severe.

Preparing for events such as these requires coordination with multiple local, state, and sometimes federal agencies. Only some of these agencies work together day to day and, without preparedness, may only interact during an emergency which complicates response efforts. Therefore, staff works to improve capacity in planning, epidemiological response, education and training, public risk communication and information dissemination, and the improvement of current information technology resources.

Cathy Brem
PHEP Division Director

Lacey Sanders
Epidemiologist

Gene Mikeska
SNS Coordinator/Public Information Officer (PIO)
Epidemiological Trends in Bell County for 2016

In Bell County there are several trends in disease reporting for 2016. Below find Figure 1 which displays incidence data for the top 5 reported notifiable conditions (not include STD’s) in Bell County with columns for the corresponding incidence rate in the State of Texas for those same conditions.

Worth noting is that these only represent those cases which were reported which may not represent the true burden of disease. Another important note is that low counts were utilized in some instances to calculate rates which impact the stability and thereby the reliability of these rate calculations. This data is just meant to provide an overview in order to provide a general impression as to the burden of these conditions in Bell County. More in depth analysis is required in order to gain any additional insights as to the cause and/or reason for these trends.
Figure 1: Bell County, Texas 2016 infectious disease rates with Texas 2015 rates for comparison. Rates are per 100,000 people. Data is through 11/15/16.

Streptococcus is invasive Group B; E. coli is Shiga toxin-producing E. coli

State of Texas Data Source: Texas Department of State Health Services (DSHS) (2016) Infectious Disease Control Unit (IDCU). Data Retrieved from: https://dshs.texas.gov/idcu/

Bell County Data Source: Texas Department of State Health Services (DSHS) (2016) NEDSS Reporting.
Given that Salmonellosis (a.k.a. Salmonella) and Campylobacteriosis (a.k.a. Campylobacter) are showcasing significantly higher rates of infection in Bell County when compared to the State of Texas we would like to utilize this report to provide some general information about each disease and means of prevention.

According to the Centers for Disease Control (CDC) (2016\textsuperscript{a}) Salmonella contributes to a significant disease burden nationwide and children under the age of 5 years are at the highest risk for infection with Salmonella. Older adults and individuals with weaker immune systems (i.e., asthmatics, diabetics, HIV, certain cancers and others) are more likely to suffer severe symptoms. Most commonly, symptoms include diarrhea and it requires blood or stool samples to be confirmed.

According to the CDC (2016\textsuperscript{b}) the best thing to do is to engage in same behaviors for preventing infection with Salmonella. Those include:

- Cooking poultry, ground beef, and eggs thoroughly. Do not eat or drink foods containing raw eggs or unpasteurized milk.
- If you are served undercooked meat, poultry, or eggs at a restaurant do not hesitate to send it back for further cooking.
- Wash hands, kitchen work surfaces, and utensils with soap and water immediately after they have been in contact with raw meat or poultry (this will aid in the prevention of cross contamination).
- Be particularly careful with foods prepared for infants, the elderly, and individuals with weakened immune systems.
- Wash hands thoroughly with soap after handling reptiles, birds, or baby chicks or after coming in contact with animal feces.
- Avoid direct or even indirect contact between reptiles (i.e., turtles, other lizards, or snakes) and infants or individuals with weak immune systems.
- Do not work with raw poultry or meat and handle an infant at the same time.
- Mother’s milk is the safest food for young infants. Breastfeeding prevents salmonella and many other health problems.

Campylobacter, like Salmonella, is a bacterial infection. The most common symptoms are diarrhea, cramping, abdominal pain and a fever within 2 to 5 days of exposure. Typically, the illness lasts about a week and it is one of the most common bacterial infections diagnosed in the United States. Also like Salmonella, a stool sample is required to confirm a diagnosis. The recommendations for prevention of Campylobacter are the same as those recommended for preventing Salmonella.

Bell County has the dubious distinction of holding the number one ranking for the number of Sexually Transmitted Diseases (STD) in the State of Texas. According to the County
Health Rankings and Roadmaps website which assesses the rank of counties in numerous states based on a number of benchmarks for public health, Bell County also boasts a rate higher than much of the nation. That incidence rate in 2013 was 1,082.2 per 100,000 people.

Bell county residents can seek STD testing and education at our Medical and Nursing clinics in Temple and Killeen. More information about STDs can be found at the [CDC website](https://www.cdc.gov). We also encourage citizens to speak with their primary physician about any concerns.

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**Figure 2**: STD Incidence rates in Bell County, Texas with Texas and national rates for comparison (Robert Wood Johnson Foundation, 2016)
Bell County Public Health District’s Medical and Nursing Division is responsible for providing quality nursing care in: immunizations, community education, family planning, STD testing and treatment, disease surveillance, tuberculosis testing/treatment, and pregnancy testing in the Health Districts Temple and Killeen clinics. The Director of Nurses (DON) serves as the program manager for all funded programs in the Medical and Nursing Division. The Texas Department of State Health Services (DSHS) provides funding for the Immunization section and a portion of tuberculosis operations. Women’s Health and Family Planning Association of Texas (WHFPT) manages the Title X grant, of which BCPHD is a sub recipient for family planning services. Health and Human Services Commissions (HHSC) provides state funding for a portion of the family planning program. The remainder of the Medical and Nursing Division is funded through revenues receive from fees and other revenues as well as grants from both the state and federal governments.

The Medical and Nursing Divisions goals include attempting to reduce the burden of sexually transmitted diseases (STD) in the county by providing education about STD prevention to all clients in the clinics receiving STD testing. In addition, the Medical and Nursing Division endeavors to reach more members of the community through outreach in order to educate the community about ways to live healthier lives.

The Temple and Killeen clinics see between 400 and 500 patients every month for family planning and STD related services. Below are some graphics depicting the breakdown of some of the services offered at our Temple and Killeen clinics. The data for the following charts were taken from “Title X Dashboard”, created by Women’s Health and Family Planning Association of Texas, 2017. [www.whfpt.org](http://www.whfpt.org). Used with permission. The creation of this dashboard was supported by grant number FPHPA066072-02-00 from HHS/OPA. Its contents are the sole responsibility of the authors.
Figure 3: Shows the % of women who chose a moderate birth control method (IUD, Depo, implant, etc.) versus those who chose other methods such as male condoms, oral contraceptives or abstinence. From “Title X Dashboard”, created by Women’s Health and Family Planning Association of Texas, 2017. www.whfpt.org. Used with permission.

Figure 4: Shows the % of clients tested for STDs including HIV. From “Title X Dashboard”, created by Women's Health and Family Planning Association of Texas, 2017. www.whfpt.org. Used with permission.

Figure 5: FPAR percent by age group at the Temple and Killeen clinics. From “Title X Dashboard”, created by Women’s Health and Family Planning Association of Texas, 2017. www.whfpt.org. Used with permission.
Resources

Centers for Disease Control (CDC) (2016^a) Salmonella. Retrieved from:  
https://www.cdc.gov/salmonella/

Centers for Disease Control (CDC) (2016^b) Salmonella. Retrieved from:  
https://www.cdc.gov/foodsafety/diseases/campylobacter/#diagnose

http://www.countyhealthrankings.org/app/texas/2016/rankings/bell/county/outcomes/overall/snapshot

Women's Health and Family Planning Association of Texas (WHFPT) (2016) Title X Dashboard.