

WILLIAMSON COUNTY AND CITIES HEALTH DISTRICT  
2015 SERVICE REPORT



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# 1 EXECUTIVE SUMMARY

The Williamson County and Cities Health District (WCCHD) has proudly served as the public health department for Williamson County member governments since 1943. Headquartered in downtown Georgetown at 312 Main Street, WCCHD operates four full-service public health centers (PHCs) in Cedar Park, Georgetown, Round Rock, and Taylor, providing convenient access for Williamson County residents regardless of where they live in the county.

*IN 2015, WILLIAMSON COUNTY RESIDENTS AND VISITORS HAD 228,054 PUBLIC HEALTH ENCOUNTERS WITH WCCHD.*

This report is provided as a service to our member governments on behalf of our eight-member Board of Health. The goal of this service report is to inform our members about the nature and impact of the public health services WCCHD provided during 2015. These activities support WCCHD's mission to "work in partnership with communities to protect and promote the health of the people of Williamson County."

The Health District is a cooperative effort of the member governments; each member is represented by a Board of Health member appointed by the governing body. The member governments are Williamson County (two Board members), Round Rock, Cedar Park, Georgetown, Taylor, Leander and Liberty Hill (one Board member), and Hutto. Together, the eight Board members provide input, guidance and direction for WCCHD policies, programs, and activities and ensure alignment of the District with the needs of each member's constituents.

In 2015, the Health District's total operating budget was \$8,242,208 with 65.3% of the money coming from state and federal sources. This equated to per capita public health spending of \$18.07 based on Census estimates. Williamson County contributed \$2,267,328 (27.5%), for an equivalent per capita cost of \$4.97. The seven member cities contributed a combined total of \$595,736 at a per capita rate of \$2.35 (with the exception of Round Rock at \$2.07 per capita). Together, the member governments' contributions totaled \$2,863,064, or 34.7% of WCCHD's budget. As such, Williamson County taxpayers, through city and county taxes, provided up to \$7.32 per resident to the Health District. In contrast, an average of \$18.07 was spent per resident – a return of 247%. This return on investment was accomplished through WCCHD's efficient leveraging of fees and state and federal grants. The following pages of this report provide a summary of what the taxpayers of Williamson County received in return for their investment:

- 9,044 clinical services encounters
- 6,795 immunizations
- 2,353 disease investigations
- 27 immunization program outreach events with 23,080 attendees
- 5,233 retail food establishment permits and inspections
- 4,123 on-site sewage facility permits, site evaluations, plan reviews, and inspections
- 19,059 social services encounters
- 17 emergency preparedness and response trainings and exercises
- 2,103 food handlers trained
- 275 sanitation inspections
- 137 food establishment complaint responses
- 136 restaurant floor plan reviews
- 447 mosquito surveillance traps set, with 28,251 mosquitoes tested for arboviral diseases
- 45 health promotion outreach events with 8,927 attendees
- 20 media responses and 12 monthly media campaigns
- 18 health education classes
- 81,693 WIC encounters, and much more.

## 2 CLINICAL PREVENTATIVE SERVICES

At each PHC and at outreach events throughout the county, our clients receive vaccinations, flu shots, sports pre-participation physicals, pregnancy testing and counseling, sexually transmitted infection (STI) screening and treatment, tobacco cessation, tuberculosis case management, testing, and treatment, as well as comprehensive well-woman exams. The fees charged for these services are as low as possible and vary according to the service provided; however, services are not denied if the client is unable to pay (except for pre-participation physicals). Some services require initial eligibility screening.

### 2.1 CLINICAL SERVICES ENCOUNTERS

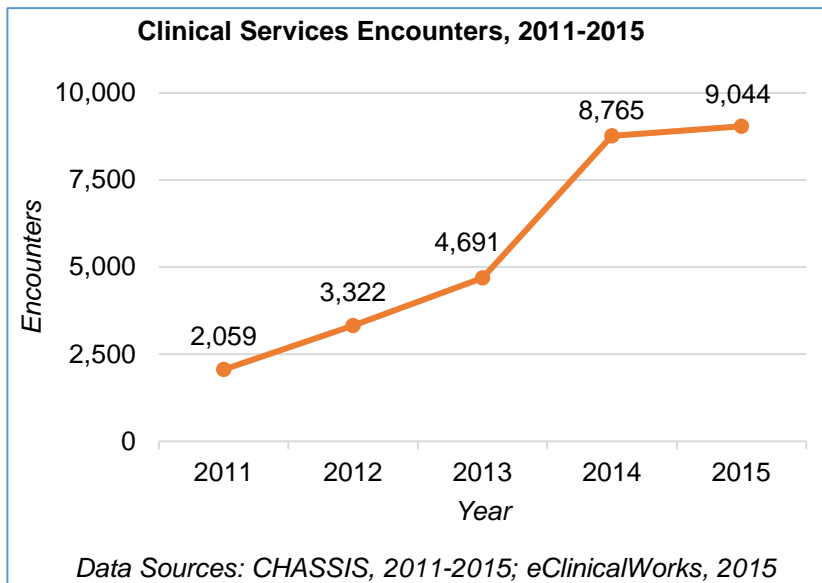
In 2015, there were 9,044 clinical encounters with the greatest number occurring at the Georgetown PHC, followed by Cedar Park, Round Rock, Taylor, and off-site outreach events as shown in Table 1. The number of clinical encounters has quadrupled in the past five years from 2,059 encounters in 2011 to 9,044 encounters in 2015 (Figure 1).

**Table 1: Clinical Services Encounters by Month and Public Health Centers, 2015**

Month	Georgetown	Cedar Park	Round Rock	Taylor	WCCHD-Off Site	Total
January	225	244	236	176	28	909
February	143	204	208	133	52	740
March	210	225	239	112	29	815
April	207	226	222	152	26	833
May	203	165	207	94	10	679
June	199	173	193	78	21	664
July	234	262	206	121	1	824
August	261	232	231	158	0	882
September	299	210	137	118	0	764
October	210	116	91	85	0	240
November	265	167	172	75	0	71
December	262	201	213	77	0	32
<b>Total</b>	<b>2,718</b>	<b>2,425</b>	<b>2,355</b>	<b>1,379</b>	<b>167</b>	<b>9,044</b>
<b>% Total</b>	<b>30.1%</b>	<b>26.8%</b>	<b>26.0%</b>	<b>15.2%</b>	<b>1.8%</b>	<b>100%</b>

*Data Source: Community Health and Social Services Information System (CHASSIS), 2015*

**Figure 1: Clinical Services Encounters, 2011-2015**



As Williamson County has continued to grow at a rapid pace, the number of tuberculosis (TB) infections has also increased. In order to improve TB case management for the surge in people needing testing and treatment services, the Clinical Services Division established a new Tuberculosis Management program in 2015 with one physician, two nurse TB case managers, and one public health technician. Funding is partially provided by state and federal grants, with the remainder of the funding provided by local tax dollars.

## 2.2 ADULT AND CHILDHOOD IMMUNIZATIONS

Immunization is a key strategy for protecting the public's health. According to the Centers for Disease Control and Prevention (CDC), immunization is the process whereby "a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease. Immunization is a safe and proven tool for controlling and eliminating life-threatening infectious diseases and is estimated to avert between two to three million deaths each year."<sup>1</sup> Multiple large studies have confirmed that there is no link between vaccinations and autism spectrum disorders.

In 2015, WCCHD nurses administered 6,795 doses of vaccine against potentially life-threatening diseases such as diphtheria, tetanus, pertussis, flu, hepatitis A and B, human papilloma virus (HPV), measles, mumps, rubella, rotavirus, chicken pox, and shingles (Table 2). Immunizations not only benefit those residents who are vaccinated but also contribute to the protection of the community as a whole through increased herd immunity. The number of doses administered was greatest in Cedar Park, followed by Georgetown, Round Rock, and Taylor.

**Table 2: Vaccine Administered by Vaccine Type and Public Health Center Location, 2015**

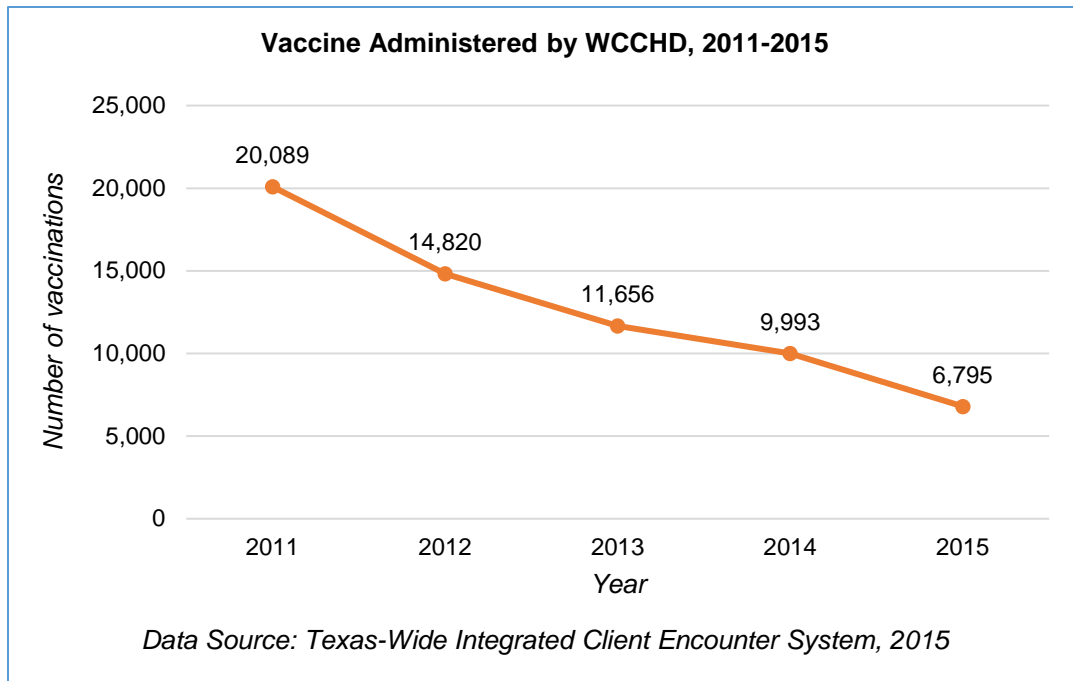
Vaccine	Cedar Park	Georgetown	Round Rock	Taylor	Total
Diphtheria, Tetanus, and acellular Pertussis (DTaP) ≤ 7 years old	59	37	47	47	190
DTaP/Hepatitis B/Inactivated Polio Vaccine (IPV)	11	16	14	18	59
DTap/IPV	38	26	12	20	96
DTap/IPV/Haemophilus influenzae type B (HIB)	36	28	17	26	107
Hepatitis A	272	231	195	132	830
Hepatitis B	156	144	107	58	465
HIB	31	26	30	35	122
Human Papillomavirus (HPV)	253	181	207	96	737
Influenza: Flu mist	72	54	49	37	212
Influenza: Shot	194	173	170	97	634
IPV	101	90	97	60	348
Meningococcal	245	185	177	137	744
Measles, Mumps Rubella (MMR),or with Varicella (MMRV)	285	160	134	120	699
Pneumococcal	77	54	48	53	232
Rotavirus	27	16	20	20	83
Tetanus and Diphtheria (Td)	19	32	22	7	80
Tetanus, Diphtheria, and acellular Pertussis (Tdap) booster for 11+ years of age	207	188	166	127	688
Varicella (Chickenpox)	151	125	118	72	466
Zoster (Shingles)	0	0	3	0	3
<b>Total</b>	<b>2,234</b>	<b>1,766</b>	<b>1,633</b>	<b>1,162</b>	<b>6,795</b>
<b>% Total</b>	<b>32.9%</b>	<b>26.0%</b>	<b>24.0%</b>	<b>17.1%</b>	<b>100%</b>

*Data Source: Texas-Wide Integrated Client Encounter System (TWICES), 2015*

<sup>1</sup> Immunization. [Internet]. World Health Organization. [cited 2016]. Available from <http://www.who.int/topics/immunization/en/>

However, WCCHD has continued to see declining trend in the number of vaccines delivered to clients. Changes in the rules at the Texas Vaccines for Children (TVFC) program have been largely responsible for this decline. Additionally, the Patient Protection and Affordable Care Act (PPACA, commonly referred to as Obamacare) has shifted the emphasis from direct service provision at the PHCs to linking clients to a patient-centered medical home for routine medical care. The net effect of these two factors has been a drastic decrease in vaccine administration from 20,089 in 2011 to 6,795 in 2015 as shown in Figure 2.

**Figure 2: Vaccine Administered by WCCHD, 2011-2015**



### 3 DISEASE CONTROL AND PREVENTION (DCP)

The Disease Control and Prevention Division is focused on tracking trends in infectious diseases in Williamson County, determining the causes of the infections, and implementing control measures to reduce the burden of disease in the community. To accomplish this mission, WCCHD investigates and responds to disease outbreaks and collects and analyzes data on over 80 diseases and disease syndromes to detect any unusual trends.

#### 3.1 COMMUNICABLE DISEASE MANAGEMENT TEAM

In 2015, the Communicable Disease Management Team responded to 2,352 reports of notifiable conditions, conducting in-depth epidemiologic investigations as appropriate to determine the cause of disease, prevent further disease transmission, and protect the public's health. The largest number of disease investigations involved sexually transmitted infections (STIs, such as Chlamydia, Gonorrhea) followed by foodborne and waterborne diseases (e.g. Salmonellosis, Shigellosis), and then Hepatitis (A, B, C, others).

Table 3 summarizes the investigations, organized by the city of residence based on the case's address. In 2015, epidemiologists also monitored nine persons for possible exposure to Ebola virus, although none of them turned out to be infected. DCP identified and referred for follow-up 19 pregnant women with Hepatitis B and managed the cases of 15 infants born to pregnant women with Hepatitis B to assure all infection prevention measures were taken in their perinatal care.

**Table 3: Disease Control and Prevention Investigations by Type and Location, 2015**

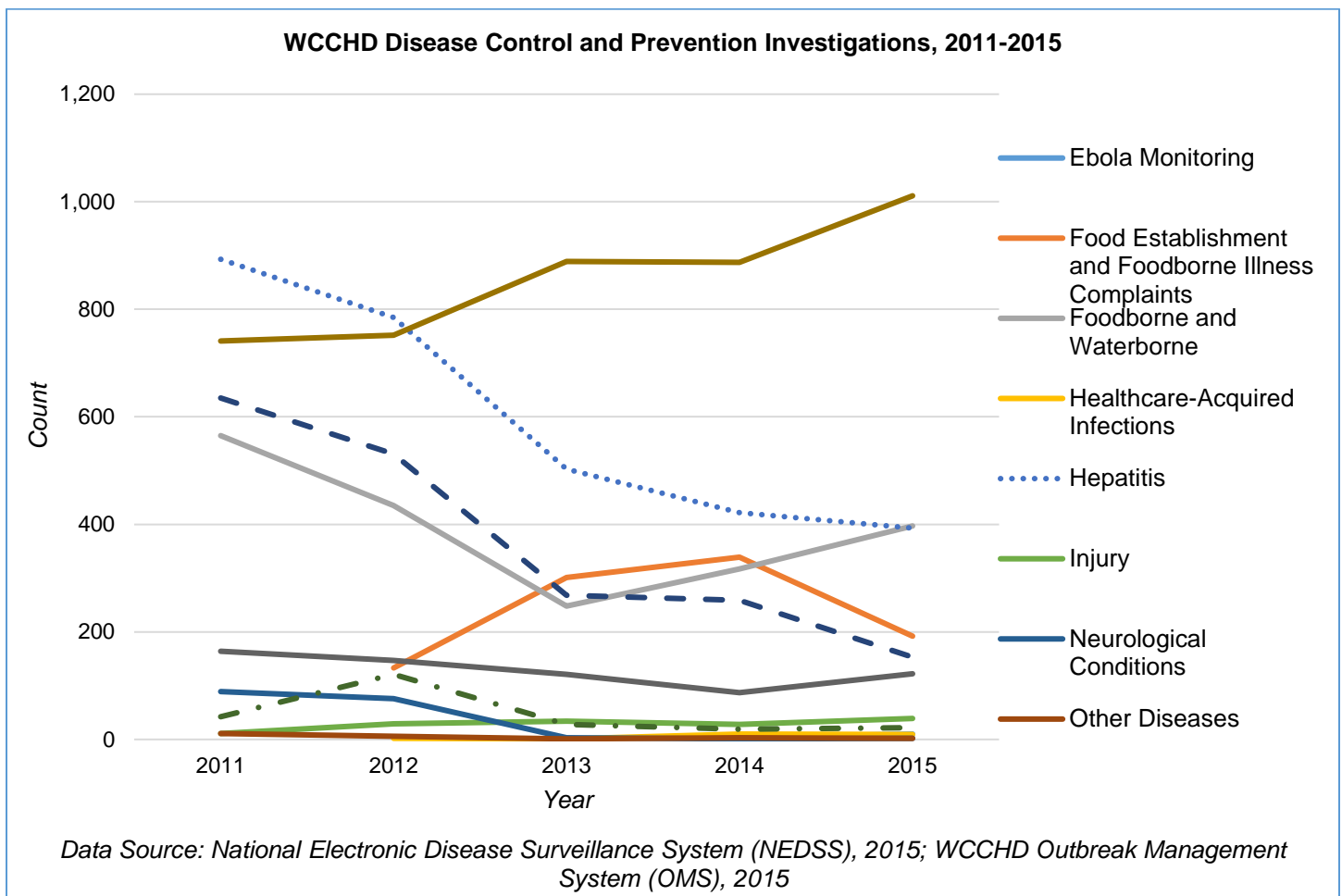
	Cedar Park	Georgetown	Hutto	Leander	Liberty Hill	Round Rock	Taylor	Other WilCo	Unknown	Out of County	Total
Sexually Transmitted Infections	103	119	60	73	19	315	67	70	4	181	1,011
Foodborne and Waterborne Diseases	45	73	24	37	7	115	12	73	2	9	397
Hepatitis (A, B, C, others)	55	68	24	36	12	107	26	60	2	3	393
Food Establishment and Foodborne Illness Complaints	27	34	12	11	6	67	13	12	1	9	192
Vaccine Preventable Diseases	25	15	9	19	3	51	10	19	1	1	153
Respiratory Infections	22	23	5	7	1	44	7	11	0	2	122
Injury*	6	8	4	1	1	8	1	5	0	5	39
Vector-borne Diseases^		6	1	1	1	5		7	0	1	22
Active Monitoring of travelers from countries with Ebola virus	1	1	1	1	0	3	1	1	0	1	10
Healthcare-Associated Infections	0	0	0	0	0	9	0	0	0	0	9
Other Diseases	0	1	0	0	0	1	0	0	0	0	2
Neurological Conditions#	0	0	1	0	0	0	0	1	0	0	2
<b>Total</b>	<b>284</b>	<b>348</b>	<b>141</b>	<b>186</b>	<b>50</b>	<b>725</b>	<b>137</b>	<b>259</b>	<b>10</b>	<b>212</b>	<b>2,352</b>
<b>% Total</b>	<b>12.1%</b>	<b>14.8%</b>	<b>6.0%</b>	<b>7.9%</b>	<b>2.1%</b>	<b>30.8%</b>	<b>5.8%</b>	<b>11.0%</b>	<b>0.4%</b>	<b>9.0%</b>	<b>100%</b>

Notes: \*(e.g., Animal Exposures, Drownings), ^ (e.g., West Nile, Chikungunya), # (e.g., Meningitis, Encephalitis)

Data Sources: National Electronic Disease Surveillance System (NEDSS), 2015; WCCHD Outbreak Management System (OMS), 2015

The types of disease investigations conducted have varied over the past five years. STI investigations have increased from 741 in 2011 to 1,011 in 2015. Hepatitis and vaccine-preventable disease investigations have decreased from 893 to 393 and 635 to 153, respectively. Foodborne and waterborne disease investigations dipped in 2013 from 565 in 2011 to 248 in 2013 and increased to 397 in 2015 (Figure 3).

**Figure 3: Disease Control and Prevention Investigations, 2011-2015**



Epidemiologists at WCCHD also monitored disease trends, responded to suspected outbreaks and clusters of disease, and maintained syndromic surveillance for unusual groupings of symptoms in aggregate 911 and hospital data. In 2015, staff investigated an outbreak of tuberculosis infections of unprecedented magnitude for Williamson County: one active case confirmed, 799 potential contacts reviewed, 435 true contacts identified and evaluated, and 54 persons with latent tuberculosis infections identified and treated. A majority of these latent infections were identified in a single residential treatment center facility and in staff and volunteers of the center. In addition, staff investigated a second large-scale contact investigation involving a healthcare worker with active TB infection. In the course of this investigation, one case of active tuberculosis disease was confirmed, 356 contacts were identified, 251 contacts were evaluated, and 28 latent tuberculosis infection cases were identified and offered treatment.



### 3.2 IMMUNIZATION PROGRAM

ImmTrac is the Texas immunization registry that securely consolidates and stores immunization records electronically for patients and providers. In 2015, the Immunization Program contacted 5,865 providers and parents to update ImmTrac immunization records, validated and entered 10,470 immunizations into ImmTrac, and brought records up-to-date for an additional 1,058 children. The Immunization Program audited compliance with vaccine requirements in 41 child-care facilities and 13 public and private schools. Moreover, staff provided 28 quality assurance visits and follow-ups with Texas Vaccines for Children (TVFC) providers (Table 4).

**Table 4: Immunization Program Activities, 2015**

Immunization Program Activities	Count
Immunizations validated and entered into ImmTrac	10,470
Providers and parents contacted to update ImmTrac records	5,865
Records for children brought up-to-date in ImmTrac children	1,058
Child-care facilities audited for compliance with vaccine requirements	41
Quality assurance visits and follow-ups on TVFC providers	28
Public and private schools audited for compliance with vaccine requirements	13
<i>Data Source: WCCHD Immunization Program, 2015</i>	

Throughout the year, the Immunization Program participated in 27 outreach events promoting the importance of child and adult immunizations and ImmTrac registration, reaching over 23,080 estimated attendees (Table 5). Exact numbers are not available for the number of attendees at each event; the potential reach is the expected number of attendees provided by each entity hosting an event.

**Table 5: Immunization Program Outreach Events and Potential Reach, 2015**

Outreach Event	Event Date	Location	Attendees
Twin Lakes Family YMCA Health Expo 2015	January 10, 2015	Cedar Park	700
Wellness Fair	January 30, 2015	Williamson County	200
Williamson County Community Ties 2015	April 15, 2015	ACC Cedar Park	175
Brazos River Authority Event	April 29, 2015	Taylor	50
Festival de Mayo	May 17, 2015	Travis/Williamson County	15,000
WIC Nutritional Educational Fair	July 16, 2015	Round Rock	230
First Responder events (nine)	July 2015	Cedar Park	50
Back-to-School immunizations	August 1, 2015	Cedar Park	250
Vida Fest	August 8, 2015	Hutto	2,500
WIC Nutritional Educational Fair	August 11, 2015	Cedar Park	100
First Responder Infection Control Officer	August 11, 2015	Williamson County	15
WIC Nutritional Educational Fair	August 12, 2015	Taylor	35
Back-to-School event	August 15, 2015	Florence	100
Leander ISD College Fair	October 21, 2015	Cedar Park	2,400
Haunted Health and Safety Fair	October 26, 2015	Round Rock	300
WIC Nutritional Educational Fair	November 9, 2015	Georgetown	175
Coordinated Approach to Child Health (CATCH) Event	November 17, 2015	Round Rock	600
WIC Nutritional Educational Fair	December 8, 2015	Cedar Park	200
<b>Total</b>	<b>27 Outreach Events</b>		<b>23,080</b>
<i>Data Source: WCCHD Immunization Program, 2015</i>			

## 4 EMERGENCY PREPAREDNESS AND RESPONSE (EPR)

The Emergency Preparedness and Response (EPR) Division leads planning and response activities for potential and active public health emergencies in the county and collaborates with local, state, and federal agencies to intervene in public health emergencies. Emergency preparedness is a four step process: 1. Planning and Coordination, 2. Equipment Acquisition and Project Management, 3. Training and Education, and 4. Exercises.

### 4.1 PLANNING AND COORDINATION INITIATIVES

EPR staff completed many planning and coordination initiatives throughout the year involving both internal and external partners. In 2015, EPR assisted WCCHD's DCP Division with two major TB outbreaks and contact investigations and implemented Incident Command System protocols for incident management and response coordination. All WCCHD emergency response plans were revised and updated to ensure alignment with current best management practices and address gaps in public health emergency planning. EPR also worked with community partners to successfully launch the FirstWatch data analysis system for 911 call data in partnership with Williamson County Emergency Communications and Wilco EMS, as well as configure and test the FirstCall emergency notification system. Additionally, EPR initiated an Isolation and Quarantine (I&Q) planning group and Mass Fatality planning group, initiated infection control programs in all fire departments and five police departments within Williamson County, and developed a Strategic National Stockpile (SNS) Point of Distribution (POD) plan for Seton Williamson Medical Center in the event that large amounts of medication need to be distributed to the public during an emergency.

### 4.2 TRAINING AND EDUCATION

EPR staff trained 535 participants on topics including (but not limited to) infection control, mental health, and disaster preparedness (Table 6). The attendees and participants at the 13 trainings included public health professionals, medical professionals, and first responders in Williamson County.

**Table 6: Trainings and Workshops Conducted, 2015**

Trainings	Date of Event	Participants
Basic infection control training	March 9, 2015	34
Basic infection control training	March 10, 2015	32
Mental Health workshop	June 1, 2015	17
Mental Health workshop	June 2, 2015	33
Mental Health workshop	June 3, 2015	26
Mental Health conference	June 25, 2015	66
Mental Health conference	June 26, 2015	108
Part II Basic infection control officer training	August 11, 2015	14
Basic infection control training	October 13, 2015	30
WCCHD Fall retreat agency-wide staff preparedness training	October 16, 2015	100
Infection control training administrative course	November 3, 2015	30
Advanced infection control training	November 4, 2015	30
Infection control Train-the-Trainer	November 5, 2015	15
<b>Total</b>	<b>13 Trainings</b>	<b>535</b>
<i>Data Source: WCCHD Emergency Preparedness and Response, 2015</i>		

### 4.3 PREPAREDNESS EXERCISES

In 2015, four exercises were planned and conducted by EPR staff along with local health professionals, responders, and agencies (Table 7). A full-scale exercise of the Seton Williamson Medical Center POD plan was conducted, with 327 participants (100% of hospital staff) receiving simulated post exposure prophylaxis (PEP) medications. A flu vaccine distribution functional exercise for first responder agencies was also successfully conducted, distributing 1,100 doses and ultimately administering 850 flu shots to first responders.

**Table 7: Preparedness Exercises Conducted, 2015**

Exercise	Date	Participants
Measles outbreak regional tabletop exercise	June 30, 2015	71
Foodborne outbreak regional tabletop exercise	June 30, 2015	46
Flu vaccine distribution functional exercise for first responder agencies	October 20, 2015	850
Seton Williamson Medical Center full-scale POD exercise	November 10, 2015	327
<b>Total</b>	<b>4 exercises</b>	<b>1,294</b>
<i>Data Source: WCCHD Emergency Preparedness and Response, 2015</i>		

## 5 ENVIRONMENTAL HEALTH SERVICES (EHS)

The Environmental Health Services (EHS) Division is committed to preventing illness due to environmentally-related diseases through monitoring, investigating, and responding to environmental public health threats. EHS provides many services through three programs: Retail Food Safety, On-Site Sewage Facility (OSSF), and Integrated Mosquito Management (IMM).

### 5.1 RETAIL FOOD SAFETY

The Retail Food Safety Program monitors compliance with local and state food safety regulations in restaurants, schools, mobile vendors, temporary establishments, farmers' markets, and all other retail food operations. The Retail Food Safety Program conducted a total of 2,894 inspections and issued 2,329 permits to retail food establishments in 2015 (Table 8).

**Table 8: Retail Food Establishment Permits and Inspections by Address, 2015**

	Cedar Park	Georgetown	Hutto	Leander	Liberty Hill	Round Rock	Taylor	Temporary Food	Mobile Food	Farmers Market Eggs	Other Cities*	Outside City Limits	Total
Permits	338	237	42	78	33	525	83	611	98	21	184	79	2,329
Inspections	520	417	92	189	73	947	157	198	83	0	376	123	2,894
<b>Total</b>	<b>858</b>	<b>654</b>	<b>134</b>	<b>267</b>	<b>106</b>	<b>1,472</b>	<b>240</b>	<b>809</b>	<b>181</b>	<b>21</b>	<b>560</b>	<b>202</b>	<b>5,223</b>
<b>% Total</b>	<b>16.4%</b>	<b>12.5%</b>	<b>2.6%</b>	<b>5.1%</b>	<b>2.0%</b>	<b>28.2%</b>	<b>4.6%</b>	<b>15.5%</b>	<b>3.5%</b>	<b>0.4%</b>	<b>10.7%</b>	<b>3.9%</b>	<b>100%</b>
<i>Notes: *Coupand Schools, Florence, Florence Schools, Granger, Granger Schools, Jarrell, Jarrell Schools and Weir Data Source: Service and Alarm Failure Expert (SAFE) Program, 2015</i>													

15.5% of inspections and permits involved temporary food establishments and 3.5% involved mobile food establishments. In addition, the program trained and certified 7,013 food handlers, conducted 275 sanitation inspections, addressed 137 food establishment complaints, and reviewed 136 new restaurant floor plans (Table 9).

**Table 9: Additional Services Provided by Retail Food Safety Program, 2015**

Additional Services	Total
Food handler training and certification	7,013
Sanitation inspections	275
Food establishment complaints	137
Food establishment floor plan reviews	136
<i>Data Source: Service and Alarm Failure Expert (SAFE) Program, 2015</i>	

In 2015, EHS staff worked with the established stakeholder Food Safety Working Group to adopt the latest state food code (the Texas Food Establishment Rules, or TFER). This working group convened on multiple occasions and drafted a consensus recommendation for consideration by the Board of Health. The Board voted to adopt the recommended TFER as the new set of food regulations for Williamson County. WCCHD worked to advise the Round Rock City Council as they adopted these new rules and increased permit fees for food establishments as a local ordinance. To ensure consistency and fairness across the county, the Board of Health responded by adopting Round Rock's ordinance countywide.

The Retail Food Safety program also worked with the City of Cedar Park to draft and adopt a “Dog-Friendly Patio” ordinance for restaurants within Cedar Park city limits. Additionally, staff worked with the Williamson County Sheriff’s Office, various fire departments, and Williamson County EMS to ensure the overall consumer safety at three very large mass gatherings (Brushy Creek BBQ Cook-off, Hairy Man/Spooky Fest, and Texas Firearms Festival). Each event had a successful outcome, with no reports of foodborne illness.

## 5.2 ON-SITE SEWAGE FACILITY (OSSF)

The On-Site Sewage Facility (OSSF) Program protects public health and the environment by minimizing the threat of surface and ground water contamination caused by failing or improperly designed, installed, or maintained on-site sewage systems (e.g., septic tanks). The OSSF Program conducted 3,325 site evaluations, plan reviews, and inspections of OSSF systems and responded to 798 permit applications (Table 10). In addition, staff worked with the stakeholder-led OSSF Working Group wrote a new comprehensive OSSF Order that was later approved and adopted by the Board of Health.

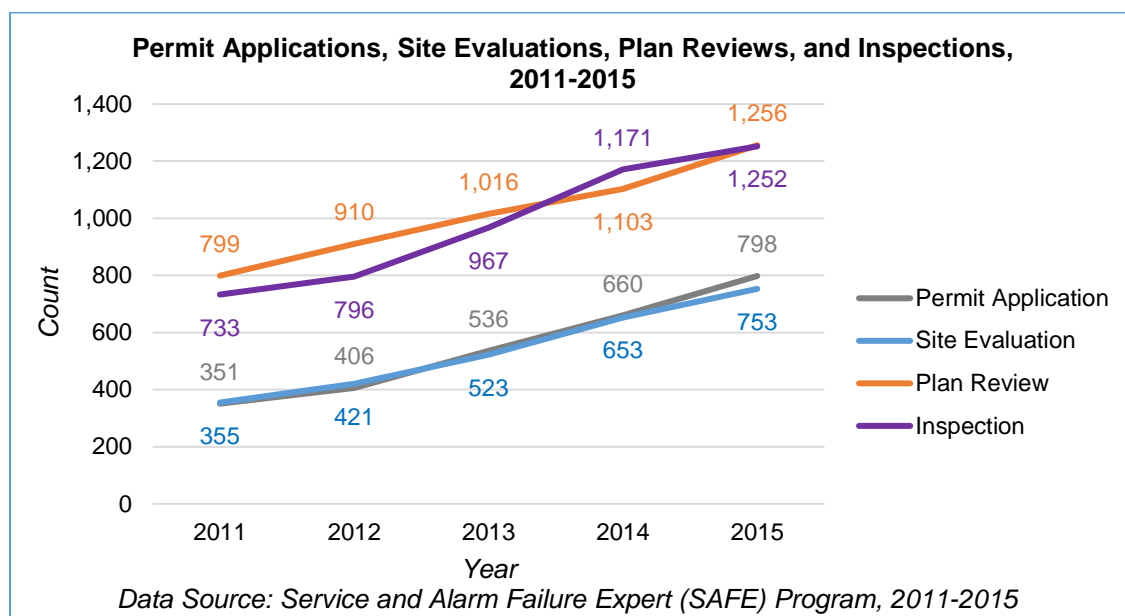
**Table 10: On-Site Sewage Facility Permits and Inspections by Address, 2015**

	Cedar Park	Georgetown	Hutto	Leander	Liberty Hill	Round Rock	Taylor	Other Wilco	Total
Permits Applications	6	307	63	87	169	23	29	114	798
Site Evaluations, Plan Reviews, and Inspections	16	1,351	295	333	686	114	111	419	3,325
<b>Total</b>	<b>22</b>	<b>1,658</b>	<b>358</b>	<b>420</b>	<b>855</b>	<b>137</b>	<b>140</b>	<b>533</b>	<b>4,123</b>
<b>% Total</b>	<b>0.5%</b>	<b>40.2%</b>	<b>8.7%</b>	<b>10.2%</b>	<b>20.7%</b>	<b>3.3%</b>	<b>3.4%</b>	<b>12.9%</b>	<b>100%</b>

*Data Source: Service and Alarm Failure Expert (SAFE) Program, 2015*

The OSSF program has grown rapidly over the past five years, following the trend of new construction in the county accompanying the explosive population growth. Between 2011 and 2015, permit applications have increased from 351 to 798, site evaluations have increased from 355 to 753, plan reviews have increased from 799 to 1,256, and inspections have increased from 733 to 1,252 (Figure 4). During this time, staffing has remained essentially flat.

**Figure 4: Permit Applications, Site Evaluations, Plan Reviews, and Inspections, 2011-2015**



### 5.3 INTEGRATED MOSQUITO MANAGEMENT (IMM)

The Integrated Mosquito Management (IMM) program placed and monitored mosquito traps within participating population centers in the county to collect and test locally abundant mosquitoes for diseases such as West Nile virus (WNV) throughout the mosquito season (May-November). In 2015, 25 permanent traps were placed based on population density and geographic dispersion, with approximately one trap per 10,000 population. Additionally, several temporary traps were placed based on complaints from local residents. The IMM Program collected mosquitoes from these traps 447 times, garnering a total of 63,019 mosquitoes. Because testing capacity at the state laboratory is limited, staff submitted 742 representative testing “pools” of up to 50 mosquitoes each; approximately 37,000 mosquitoes were tested. Individual mosquitoes are not tested; rather, mosquitoes are grouped into a “pool” of mosquitoes that are processed at the laboratory as a single sample. A positive test result means that one or more of the mosquitoes in the group had virus present. Georgetown had two positive West Nile virus test results resulting in targeted chemical control measures to mitigate risk of infection in the affected areas. Mosquitoes that could not be submitted to DSHS were still identified and counted by IMM staff (Tables 11 and 12).

**Table 11: Mosquito Trapping and Testing by Location, 2015**

	Cedar Park	Georgetown	Hutto	Leander	Liberty Hill	Round Rock	Taylor	Unincorporated County	Total
Number of Traps Set	105	122	55	60	18	0	55	32	<b>447</b>
<b>% Total</b>	<b>23.5%</b>	<b>27.3%</b>	<b>12.3%</b>	<b>13.4%</b>	<b>4.0%</b>	<b>0.0%</b>	<b>12.3%</b>	<b>7.2%</b>	<b>100.0%</b>
Number of Pools Tested	103	117	55	59	17	0	54	337	<b>742</b>
<b>% Total</b>	<b>13.9%</b>	<b>15.8%</b>	<b>7.4%</b>	<b>8.0%</b>	<b>2.3%</b>	<b>0.0%</b>	<b>7.3%</b>	<b>45.4%</b>	<b>100.0%</b>
Positive tests	0	2	0	0	0	0	0	0	<b>2</b>

*Data Source: Integrated Mosquito Management, 2015*

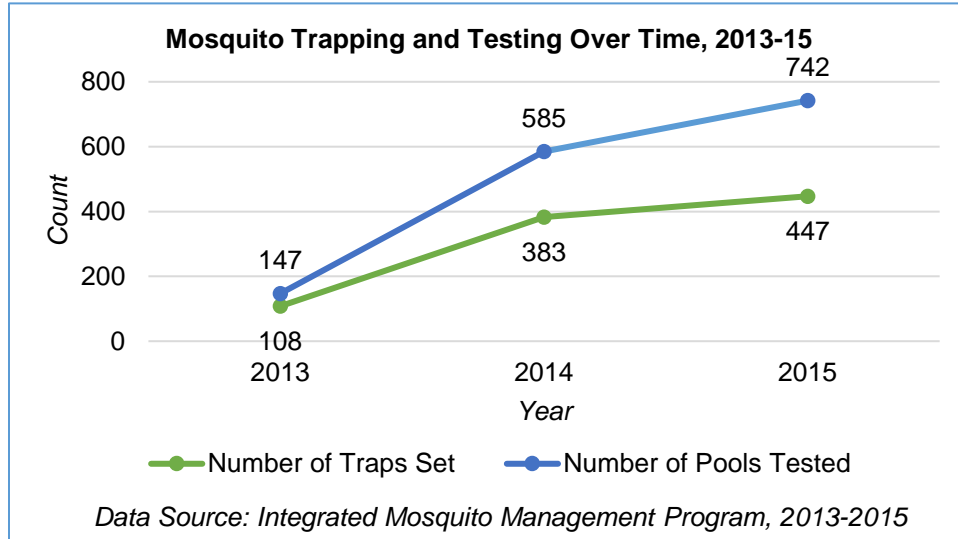
**Table 12: Mosquito Trapping and Testing, 2013-2015**

	2013	2014	2015
Number of traps set	108	383	447
Number of testing pools	147	585	742
Total mosquitoes submitted	2,107	~19,100*	28,251
Total mosquitoes trapped	2,107	20,100	63,019
# females	1,794	17,676	55,772
# males	313	2,424	7,247
% <i>Culex quinquefasciatus</i>	93.7%	87.3%	81.3%
Unsuccessful traps	10 (9.3%)	20 (5.2%)	15 (3.3%)
# of species	10	34	25

*Data Source: Integrated Mosquito Management, 2013-2015*  
 \*Note: The 2014 mosquito submission number is an estimate.

The number of traps set and pools tested have increased over the past three years (2013-2015) due to expanded trapping efforts (Figure 5, next page).

**Figure 5: Mosquito Trapping and Testing, 2013-2015**



In addition to trapping and laboratory surveillance, the IMM Program responded to numerous calls from the public, conducted environmental assessments, investigated mosquito complaints, provided mosquito repellent brochures and laminated posters for each city’s parks, managed the “Fight the Bite!” website and educational campaign, provided real-time data on mosquito activity and testing results throughout the county, and facilitated eight IMM Working Group meetings with representatives from all member cities. The IMM Working Group developed and promulgated consistent response guidelines and messaging across the county. The IMM Program also responded quickly to the Memorial Day floods that damaged Taylor and Hutto; staff performed enhanced trapping and testing and the Health District funded truck-based Ultra Low Volume (ULV) mosquito spraying for three nights in each city to reduce overall mosquito populations.

## 6 MARKETING AND COMMUNICATIONS (MARCOM)

The Marketing and Communications Division provides science-based, timely, and culturally competent health information and health alerts to the media and to the community, and is responsible for the social media and online presence of the Health District.

### 6.1 MEDIA RESPONSE

In 2015, MarCom staff responded to 20 requests from local media outlets through print, online, radio, and newscast to provide important health information and health alerts to Williamson County. Staff quickly responded to health concerns about the post-flood environment following the Memorial Day flooding event and about positive West Nile virus mosquito samples in Georgetown. Staff also provided important health information to the community concerning swimming pool inspections, HPV vaccinations, and food truck ordinances (Table 13).

**Table 13: WCCHD Media Responses, 2015**

Media Response	Date
KOKE-FM Radio Interview: Georgetown Group Bike Ride	May 14, 2015
Liberty Hill Independent Newspaper Interview: Mosquitoes in post-flood environment	June 6, 2015
KOKE-FM Radio Interview	June 6, 2015
KEYE-TV Interview: Hutto Mosquito Spraying	June 23, 2015
KXAN Print	
KVUE Print	
KOKE-FM Phone Interview	
KVUE Interview: Pool inspection	July 22, 2015
KVUE News, ABC TV Records Request: School cafeteria inspections by WCCHD	July 29, 2015
WilCo Sun interview: HPV vaccinations	August 18, 2015
KEYE TV: Food truck ordinance	August 29, 2015
KEYE-TV Print: Positive West Nile Virus tests in Georgetown	Week of Oct. 26, 2015
KXAN Print	
KLBJ Print	
Fox 7 Austin	
Statesman Print	
KXAN Newscast	
KVUE Newscast	
KLBJ-AM Phone Interview	
KOKE-FM Phone Interview	
<b>Total</b>	

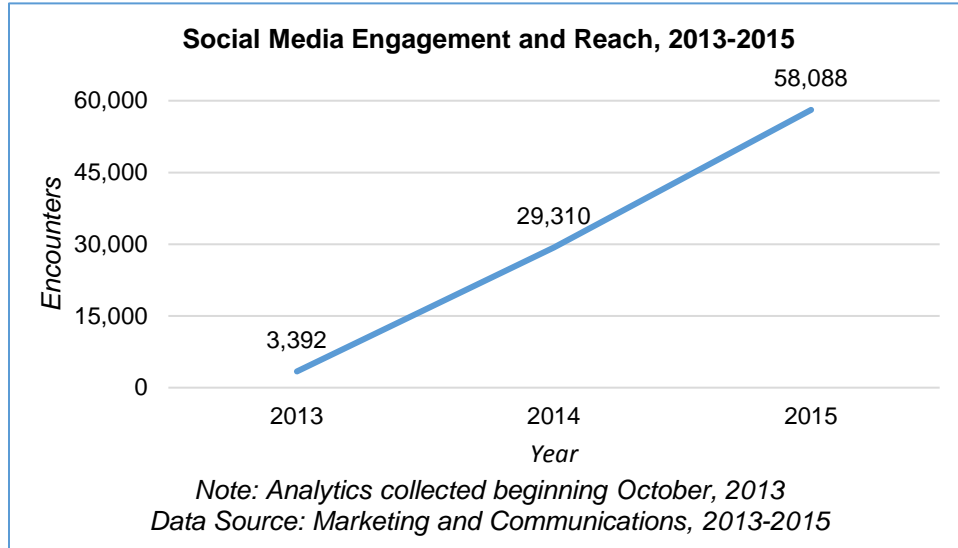
*Data Source: Data Source: Marketing and Communications, 2015*

### 6.2 SOCIAL MEDIA AND ONLINE PRESENCE

MarCom maintains the social media and online presence of WCCHD. In 2015, WCCHD had 301 Twitter followers and 240 Pinterest followers and both WCCHD and Wilco Wellness Alliance had a total of 724 Facebook followers. Through Facebook posts, Twitter blasts, and Pins on Pinterest, WCCHD had a reach of 58,088 encounters. Social media engagement and potential reach has increased substantially since 2013 as shown in Figure 6 on the following page.



**Figure 6: Social Media Engagement and Reach, 2013-2015**



Staff launched an e-newsletter with monthly campaigns focusing on issues important to the community including food safety, diabetes, and child and adult immunizations (Table 14). The e-newsletter reaches a wide variety of audiences including WCCHD staff, Wilco Wellness Alliance members, community partners and stakeholders, and Williamson County residents. In addition, staff facilitated a complete redesign of the Healthy Williamson County website and tracked 3,772 visits to the Health District website.

**Table 14: Monthly Campaigns, 2015**

Month	Campaign
January	Healthy weight loss
February	Know Your Numbers – Heart health
March	Public Health month
April	Child nutrition, infant immunization
May	Bike month
June	Men’s health
July	Food/BBQ safety
August	Back to school, vaccines/breastfeeding
September	Childhood obesity and EPR
October	Flu shots
November	Diabetes
December	Flu prevention

Data Source: Marketing and Communications, 2015

## 7 PUBLIC HEALTH INITIATIVES AND PLANNING (PHIP)

The Public Health Initiatives and Planning (PHIP) Division is the future-focused strategic arm of the Health District, conducting planning and project management for the District's services and activities, evaluating performance and outcomes, and leading continuous quality improvement efforts to enhance the efficacy of the agency in meeting the community's needs. In addition, PHIP develops partnerships with public and private healthcare providers and institutions, community-based organizations, and other government agencies to collectively identify and respond to public health problems through implement health promotion and health education programs.

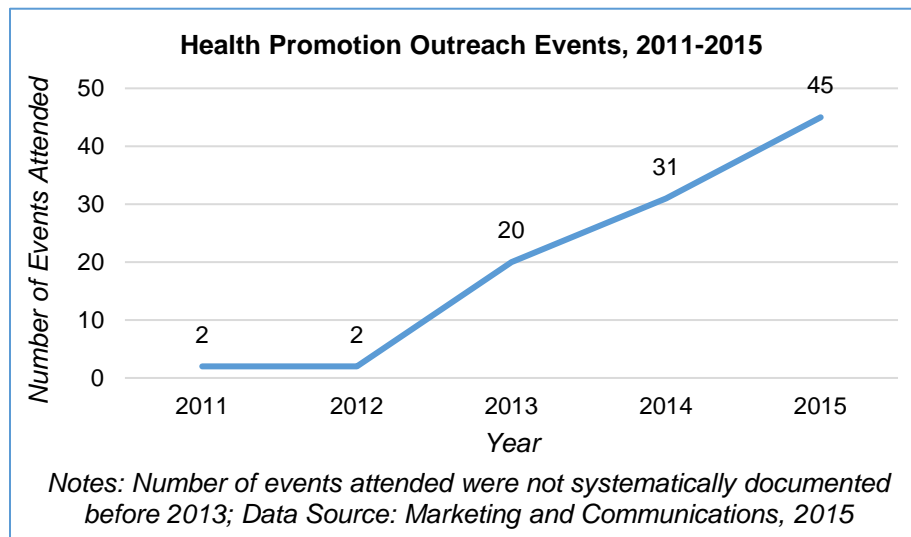
### 7.1 INITIATIVES AND PLANNING

Several public health initiatives were conducted throughout 2015. PHIP completed a detailed revision of the Health District's Strategic Plan, implemented a comprehensive new project management system for agency-wide projects, and managed all five Medicaid 1115 Waiver Delivery System Reform Incentive Payment (DSRIP) projects and reporting efforts. PHIP staff compiled, drafted, and submitted DSRIP reports for WCCHD in April and October (resulting in a DSRIP payment of \$3 million) and completed two Public Health Practice Review (PHPR) reports to compare WCCHD's current services and policies against national best practices. With WCCHD's community partners and stakeholders, PHIP led the Cooperative Agreement Work Group (CAWG) meetings during fourth quarter 2015 and created and published the WCCHD Internal Assessment Report for dissemination to the County Commissioners, Board of Health, and member governments.

### 7.2 HEALTH PROMOTION AND HEALTH EDUCATION

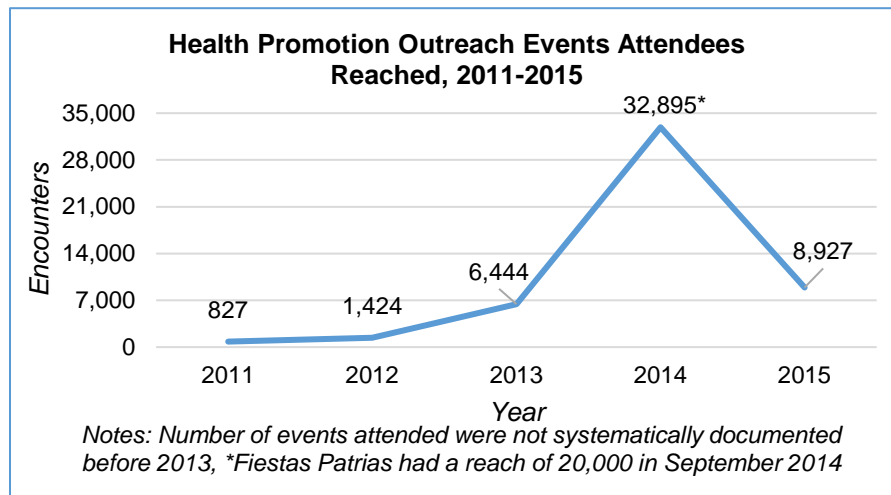
In 2015, PHIP provided 45 health promotion outreach events across Williamson County such as the Twin Lakes Family YMCA Health Expo 2015, Bluebonnet Trails Community Service Event, Healthy Kids Day: Hutto YMCA, and Vida Fest (Figure 7).

**Figure 7: Health Promotion Outreach Events, 2011-2015**



Health Promotion outreach events as well as attendees reached have increased consistently over the past five years from two outreach events and 827 attendees in 2011 to 45 outreach events and 8,927 attendees in 2015 (Figure 8).

**Figure 8: Health Promotion Outreach Event Attendance, 2011-2015**



The number of health education classes offered by WCCHD have also doubled. PHIP staff taught 18 series of health education classes ranging on subjects from gardening, physical activity, nutrition, to diabetes (Table 15). Health education classes reached 280 residents in Williamson County. The number of Williamson County residents taught has doubled from 136 in 2011 to 280 in 2015 (Figure 9, next page).

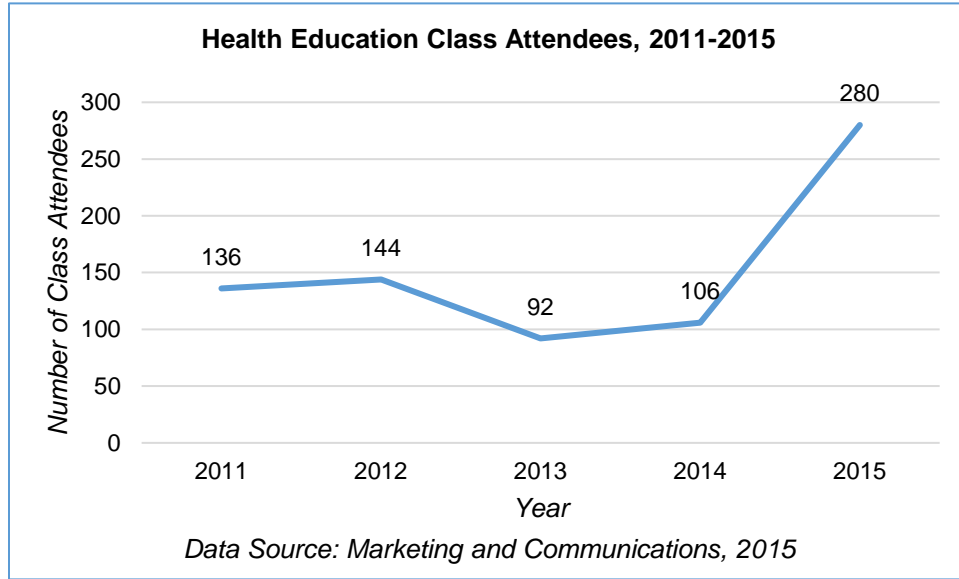
Additionally, PHIP planned and implemented the first Williamson County Health Education Summit, attracting 109 participants from health care, education, non-profits, local and state government, and the private sector. PHIP also planned and implemented the community group bicycle ride at Berry Springs Park, attracting over 80 community participants.

**Table 15: Number of Health Education Class Series Held, 2015**

Class Series	Class Location	Participants
Urban Organic Gardening Class	Georgetown	10
Step Up and Scale Down	Round Rock	14
Get Fit, Get Healthy, Get Movin'! (G3)	Georgetown	27
Step Up and Scale Down	Georgetown	10
Do Well, Be Well with Diabetes	Round Rock	11
Let's Cook with Colors	Round Rock	14
Step Up and Scale Down	Cedar Park	8
Let's Cook with Colors	Georgetown	9
Let's Cook with Colors	Taylor	10
Step Up and Scale Down	Round Rock	7
G3 Minicamp	Cedar Park	21
G3 Minicamp	Round Rock	5
Be Well with Diabetes	Round Rock	8
Be Well with Diabetes	Round Rock	7
Stanford CDSMP Leadership Training	Round Rock	13
MSI on the Run	Taylor	62
Anderson Mill Running Club	Austin (RRISD)	28
Step Up and Scale Down	Georgetown	16
<b>Total</b>	<b>18 Class Series</b>	<b>280</b>

Data Source: Marketing and Communications, 2015

**Figure 9: Health Education Class Attendees, 2011-2015**



### 7.3 WILCO WELLNESS ALLIANCE

Wilco Wellness Alliance is the county’s health and wellness coalition. It is comprised of community members and organizations from healthcare, school, government, business, non-profit, and faith-based organizations and is guided by the community health improvement process. In 2015, PHIP provided support staff for external partners within the Wilco Wellness Alliance.

In coordination with the Alliance, PHIP completed the first draft of the 2016 Community Health Assessment (CHA). New health priorities were established by the community through the CHA process, and the finalized CHA was approved by the Board of Health.

The top five health priorities for Williamson County in 2016 are:

1. Mental Health
2. Access to Healthcare
3. Awareness of Healthcare Resources
4. Active Living
5. Chronic Disease.

In 2016, WCCHD will work through the Wilco Wellness Alliance to engage the community and develop a Community Health Improvement Plan (CHIP) for 2017-2019.

## 8 PROGRAM ELIGIBILITY AND SOCIAL SERVICES

The Program Eligibility and Social Services (PESS) Division works with clients to navigate the health insurance market, screen for eligibility for assistance and programs, coordinate patient care across multiple providers, provide medical case management for persons living with chronic diseases, and make appropriate referrals to other partners within the Systems of Care in Williamson County. In total, residents in the county had 19,059 encounters with Social Services at the four PHCs to help them live healthier lives, manage chronic conditions, and find a medical home (Table 16).

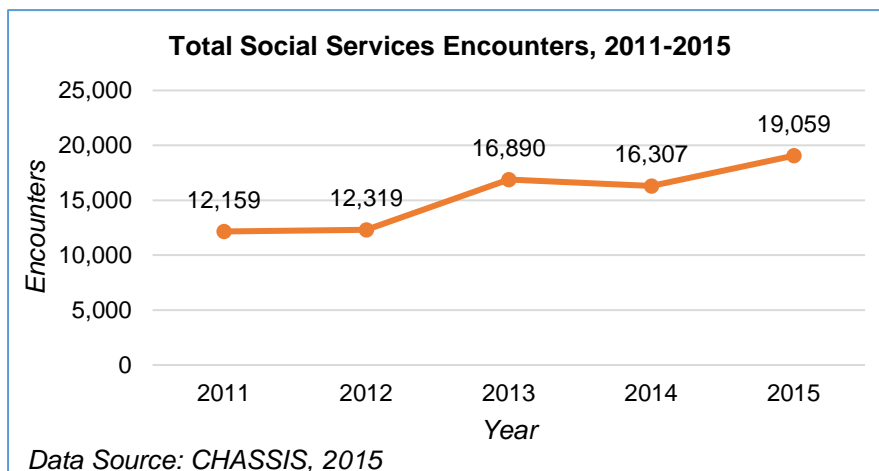
**Table 16: Social Services Encounters by Month and PHC Location, 2015**

Month	Cedar Park	Georgetown	Round Rock	Taylor	Total
January	355	211	596	184	1,346
February	373	177	578	181	1,309
March	263	159	685	230	1,337
April	291	93	844	291	1,519
May	332	99	825	311	1,567
June	347	203	892	320	1,762
July	370	182	1,083	292	1,927
August	256	131	863	261	1,511
September	313	167	1,020	265	1,765
October	230	126	1,067	233	1,656
November	208	195	1,009	278	1,690
December	175	158	1,010	327	1,670
<b>Total</b>	<b>3,513</b>	<b>1,901</b>	<b>10,472</b>	<b>3,173</b>	<b>19,059</b>
<b>% Total</b>	<b>18.4%</b>	<b>10.0%</b>	<b>54.9%</b>	<b>16.6%</b>	<b>100%</b>

*Data Source: CHASSIS, 2015*

The number of encounters has increased in the past five years from 12,159 encounters in 2011 to 19,059 encounters in 2015 (Figure 10). In 2015, eligibility screeners processed 2,304 applications averaging 1,245 enrollees per month through WilcoCare - the County Indigent Health Care Program (CIHCP). To facilitate better provision of services for chronic disease management, PESS created the Integrated Care Team (ICT) – an interdisciplinary group consisting of a social worker, a community health worker, and dieticians.

**Figure 10: Total Social Services Encounters, 2011-2015**



## 9 WOMEN, INFANTS, AND CHILDREN (WIC) AND COMMUNITY NUTRITION PROGRAM

The WIC and Community Nutrition Program provides nutrition education and healthy foods for pregnant women, new mothers, infants, and young children. WIC services are provided at the four PHCs in Georgetown, Taylor, Round Rock, and Cedar Park, as well as a part-time clinic in Bartlett. Mothers, babies, and children who receive adequate nutrition and proper nutrition education and counseling have been shown to live healthier lives.

### 9.1 WIC CLIENT ENCOUNTERS

In 2015, Williamson County residents benefitted from 81,693 encounters with the WIC Program, with an average of 6,808 individuals enrolled and receiving benefits per month (Table 17). At these visits, the clients received nutrition education, Supplemental Nutrition Assistance Program (SNAP) benefits, assistance from breastfeeding peer counselors, and counseling with registered dietitians.

**Table 17: WIC Encounters by Month and WIC Clinic Location, 2015**

Month	Georgetown	Taylor	Round Rock	Cedar Park	Bartlett	Liberty Hill	Total
January	1,663	1,002	2,342	2,031	16	18	7,072
February	1,640	981	2,302	1,996	14	18	6,951
March	1,626	957	2,275	1,942	14	17	6,831
April	1,607	961	2,224	1,950	12	17	6,771
May	1,619	937	2,233	1,886	14	13	6,702
June	1,617	946	2,290	1,890	14	14	6,771
July	1,627	943	2,276	1,890	14	14	6,764
August	1,655	1,005	2,246	1,853	15	15	6,789
September	1,691	1,001	2,215	1,913	13	19	6,852
October	1,674	966	2,166	1,920	10	20	6,756
November	1,618	934	2,200	1,911	9	16	6,688
December	1,602	973	2,239	1,910	6	16	6,746
<b>Total</b>	<b>19,639</b>	<b>11,606</b>	<b>27,008</b>	<b>23,092</b>	<b>151</b>	<b>197</b>	<b>81,693</b>
<b>% Total</b>	<b>24.0%</b>	<b>14.2%</b>	<b>33.1%</b>	<b>28.3%</b>	<b>0.2%</b>	<b>0.2%</b>	<b>100%</b>

*Data Source: Women, Infants, and Children (WIC) Program, 2015*

### 9.2 ADDITIONAL WIC SERVICES PROVIDED

In addition to client encounters, WCCHD was one of four Texas WIC local agencies to successfully pilot the Quick WIC Information Network (QuickWIN) which is now used throughout Texas. The Texas Department of State Health Services (DSHS) asked WCCHD WIC facilities and WIC staff and clients to participate in several DSHS WIC videotaping efforts, including a QuickWIN introductory video, Dietetic Intern recruiting video, and the *WIC Approved Foods: From Store to Table* DVD which is now being used throughout Texas. The WCCHD WIC program provided WIC and Community Nutrition dietetic internship rotation opportunities for eight interns (five from UT Austin, three from distance learning) over the course of 16 weeks from March through August 2015, and worked with several Healthy Community interns. WCCHD served as a local WIC training and observation site for several DSHS WIC staff and members of the Texas Integrated Network (TXIN) development team.

WIC lactation consultants provided technical support and professional expertise to groups of hospitals as they worked towards achieving Baby-Friendly Hospital recognition. According to Baby-Friendly USA, the Baby-Friendly Hospital Initiative (BFHI) is:

“a global program [launched] by the World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF) in 1991 to encourage and recognize hospitals and birthing centers that offer an optimal level of care for infant feeding and mother/baby bonding. It recognizes and awards birthing facilities who successfully implement the Ten Steps to Successful Breastfeeding and the International Code of Marketing of Breast-milk Substitutes. The BFHI assists hospitals in giving all mothers the information, confidence, and skills necessary to successfully initiate and continue breastfeeding their babies or feeding formula safely, and gives special recognition to hospitals that have done so.”<sup>2</sup>

In 2015, the WCCHD Community Garden Program was used as a model for the City of Gonzales, Texas. Gonzales City officials spent a day at the garden with the Community Garden Coordinator to prepare for the construction of their new two-acre community garden. In 2015, volunteers from Dell Computers worked with WCCHD, enjoying a day of service creating and installing a watering system for the memorial orchard at the WCCHD Heritage Community Garden. WCCHD’s community gardens serve the community with donations, garden opportunities, and organic production of food crops.

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<sup>2</sup> *Baby-Friendly Hospital Initiative. [Internet]. Baby-Friendly USA. [cited 2016]. Available from <https://www.babyfriendlyusa.org/about-us/baby-friendly-hospital-initiative>*

## 10 FUNDING AND RETURN ON INVESTMENT

Each member government's participation in the Health District directly benefits city and county residents and visitors. For 2015, the total operating budget was \$8,242,208. This equated to public health spending of \$18.07 per resident of Williamson County (2012 population), with 65.3% of the money coming from state and federal sources. The member governments' contributions totaled \$2,863,064, or 34.7% of WCCHD's budget.

Williamson County taxpayers, through their city and county taxes, provided up to \$7.32 per resident to the Health District but the Health District spent \$18.07 per resident providing public health services – a return of 247%. This was accomplished through leveraging fees and state and federal grants (Table 18).

**Table 18: Return on Investment by Member Government for FY2015**

Member Government	2012 Population Estimate	% of Wilco Population	City Per Capita cost	County Per Capita Cost	Total Per Capita Cost	FY2015 Contribution	Total FY2015 Contribution	Services Received	Return on Investment (per dollar contributed)
Williamson County Total	456,232	100.0%		\$4.97	\$4.97	\$2,267,328	\$2,267,328	\$8,242,208	\$3.64
Cedar Park	57,957	12.7%	\$2.35	\$4.97	\$7.32	\$136,199	\$424,245	\$1,047,041	\$2.47
Georgetown	52,303	11.5%	\$2.35	\$4.97	\$7.32	\$122,912	\$382,858	\$944,897	\$2.47
Hutto	18,765	4.1%	\$2.35	\$4.97	\$7.32	\$44,098	\$137,360	\$339,005	\$2.47
Leander	29,620	6.5%	\$2.35	\$4.97	\$7.32	\$69,607	\$216,818	\$535,110	\$2.47
Liberty Hill	1,012	0.20%	\$2.35	\$4.97	\$7.32	\$2,378	\$7,408	\$18,283	\$2.47
Round Rock	106,573	23.4%	\$2.07	\$4.97	\$7.04	\$220,542	\$750,274	\$1,925,329	\$2.57
Taylor	16,080	3.5%	\$2.35	\$4.97	\$7.32	\$37,788	\$117,706	\$290,498	\$2.47
Unincorporated Williamson County (includes MUDs and ETJs)	190,002	41.60%		\$4.97	\$4.97	\$944,250	\$944,250	\$3,432,543	\$3.64
<b>WCCHD Operational Budget</b>	<b>\$8,242,208</b>								

*Data Source: Williamson County and Cities Health District, 2015*

*Notes: \*The County per capita cost shown here is calculated for the sake of comparison only. The county funds the Health District from the county budget at an amount determined annually by the Commissioners Court, whereas the member cities fund the district based on their population sizes using a per capita rate determined by the Board of Health.*

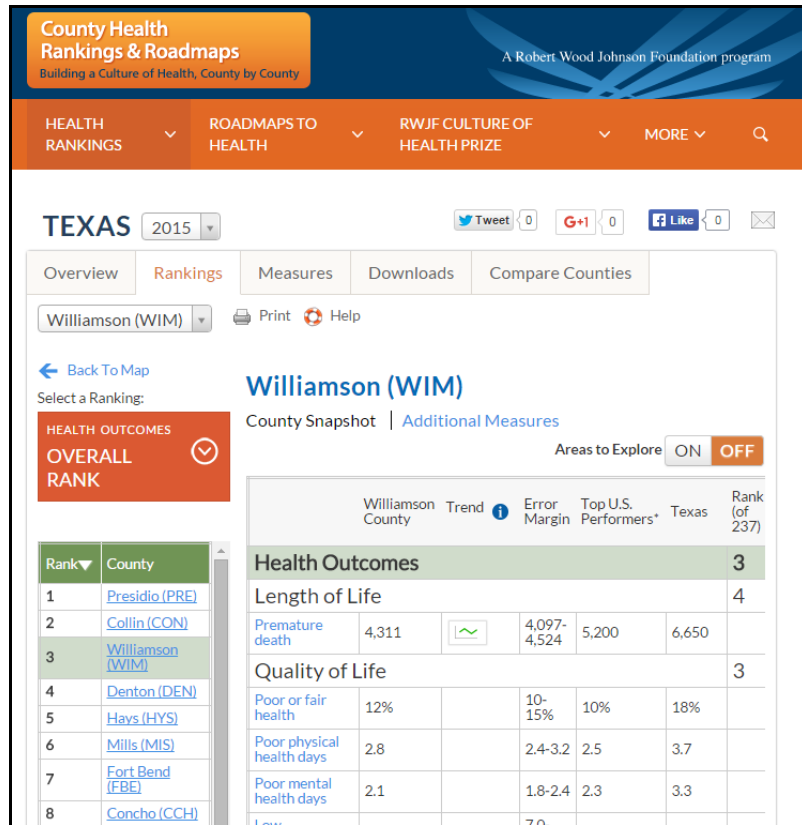
Williamson County government is not only a major source of funding for the Williamson County and Cities Health District (WCCHD), but also generously provides "in-kind" support in a number of areas, large and small. Some of this support, such as the provision of county-owned buildings and the associated maintenance and utilities, are straightforward and relatively simple to tabulate. Other support, like access to information technology (IT) subject matter experts for different software and systems, is more difficult to quantify. In other areas, such as salaries for county staff who provide payroll services, the information exists but is not available to WCCHD. As such, we do not currently have access to all of the data necessary to accurately and comprehensively calculate the value of these vital in-kind contributions provided by Williamson County.



# 11 RESULTS

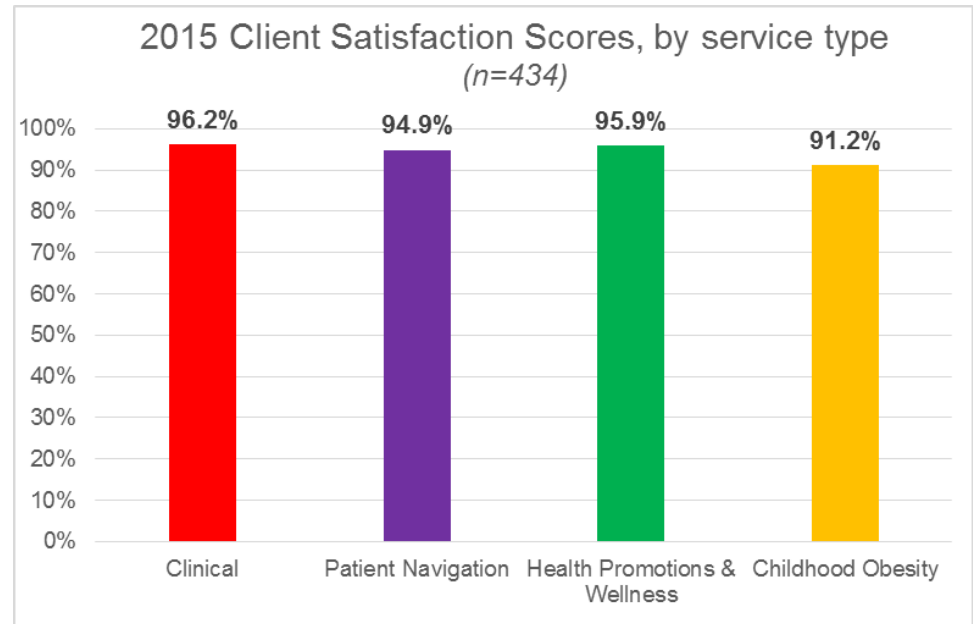
For the fifth year in a row, Williamson County has been consistently ranked in the top three healthiest counties in Texas by the County Health Rankings of the Robert Wood Johnson Foundation. There is a strong evidence base that our services and programs have measurable impact on the community.<sup>3</sup>

**Figure 11: County Health Ranking for Williamson County**



WCCHD also has an unrelenting focus on customer service. In the latest round of client satisfaction questionnaires, WCCHD got straight A's. The **lowest** score was 91.2% out of a possible 100%. Our clients love our services and are our best marketing force in the community.

**Figure 12: WCCHD Client Satisfaction Scores**



<sup>3</sup> <http://www.countyhealthrankings.org/app/texas/2015/rankings/williamson/county/outcomes/overall/snapshot>

## APPENDIX 1. BACKGROUND INFORMATION FOR SERVICE STATISTICS

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1. Services provided by WCCHD programs are documented in a variety of databases, some created locally and some provided by various state programs. The level of reporting detail varies according to the particular database and who has possession of that data. In this report, we have endeavored to provide as much detail as possible regarding the residence of those who received services from WCCHD during 2011.
2. Throughout this report, “Austin” refers to clients with an Austin address residing within Williamson County.
3. The statistical summaries in this report are generated using the city listed with the client’s residential address; therefore, the clients included in city counts may or may not reside within the city limits. Whenever possible, Geographic Information Systems (GIS) techniques are used to estimate the number of clients and services provided within incorporated areas. Limitations of GIS include the inability to precisely match and map all addresses (P.O. Boxes, private roads, incorrectly entered address data).
4. For disease investigations, this report focuses on investigations and other services provided rather than the number of diseases or conditions reported as “confirmed” or “probable” to the Texas Department of State Health Services (DSHS). Information on the number and types of diseases and conditions reported through our Health Authority may be found on the WCCHD website: [www.wcchd.org](http://www.wcchd.org). In 2015, the Austin Travis County Health and Human Services Department “ATCHHSD,” investigated all suspect cases of reportable diseases that fell within Austin’s city limits, including areas of Austin in Williamson County. WCCHD investigated all other suspect cases in Williamson County and Cities. WCCHD also investigated suspect cases that fell outside Williamson County but lie within the city limits of Round Rock, Cedar Park, and Leander.
5. This report does not attempt to quantify the amount of time spent delivering a service. The statistical summaries are simply a snapshot of the number of clients served and services delivered. In some cases, a service may be a short telephone consultation, while in other cases, such as “disease investigation” or “case management”, a single service may require extensive investigation and follow-up. Additionally, within each service category there can be wide variation from client to client in the amount of time spent providing the service.

## APPENDIX 2: TEN ESSENTIAL PUBLIC HEALTH SERVICES

**WCCHD programs strive to deliver the Ten Essential Public Health Services (EPHSs) every day.** The essential services provide a working definition of public health and a guiding framework for the responsibilities of local public health systems. The table below references examples found in the report of WCCHD providing one or more essential services.

Essential Public Health Service	Examples
#1 - Monitor health status to identify and solve community health problems.	Epidemiology and communicable disease programs track diseases and other conditions using various data sources (e.g. disease reporting systems, risk behavior surveys, vital statistics, hospital emergency room and discharge data).
#2 - Diagnose and investigate health problems and health hazards in the community.	Disease and outbreak investigation, food establishment and general sanitation inspections.
#3 - Inform, educate, and empower the community about health issues.	Community health education programs, WIC, food handler certifications, WCCHD website and social media, preparedness education.
#4 - Mobilize community partnerships and action to identify and solve health problems.	Coalition building (Wilco Wellness Alliance), Annual Children's Health Festival, Infection control workshops, Emergency Preparedness trainings and exercises.
#5 - Develop policies and plans that support individual and community health efforts.	WCCHD Board of Health and District leaders develop plans and strategies supporting community health efforts including emergency preparedness and response.
#6 - Enforce laws and regulations that protect health and ensure safety.	Statutory role of the Health Authority, Enforcement of statutes and ordinances related to food safety and public health nuisance laws.
#7 - Link people to needed personal health services and assure the provision of health care when otherwise unavailable.	Immunizations, access to healthcare services, WIC, program eligibility and social services.
#8 - Assure competent public and personal health care workforce.	Ongoing staff development and training programs supported at WCCHD.
#9 - Evaluate effectiveness, accessibility, and quality of personal and population-based health services.	Evaluation built into coalition activities and projects from the beginning. Strategic planning for ongoing program and service evaluation.
#10 - Research for new insights and innovative solutions to health problems.	Partnerships with universities, local community groups, state and federal agencies to research, innovate and keep WCCHD in the forefront of public health.

## APPENDIX 3: CONTACT AND LOCATION INFORMATION

Williamson County and Cities Health District  
100 West 3rd Street  
Georgetown, Texas 78626  
(512) 943-3600 – phone  
(512) 943-1499 – fax

[www.wcchd.org](http://www.wcchd.org)

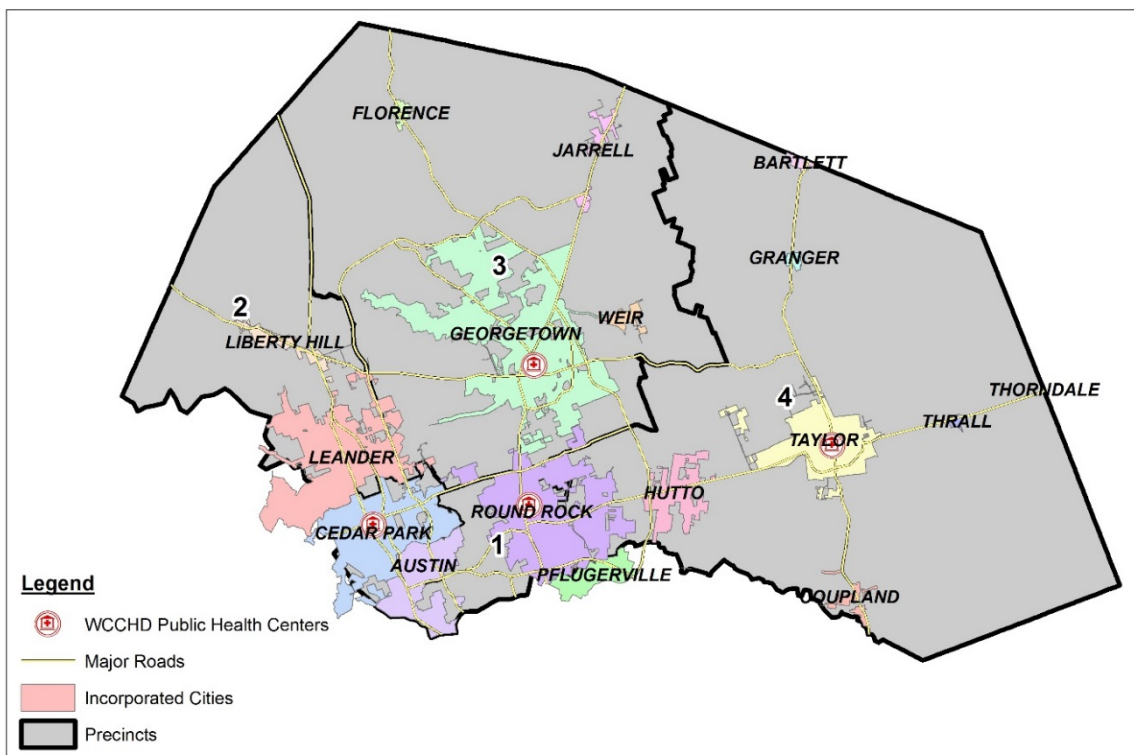
[www.healthywilliamsoncounty.org](http://www.healthywilliamsoncounty.org)

### Your Feedback is Important!

We love being YOUR Local Health Department and your feedback on the report is important to us. Please let us know if you have questions or comments by contacting:

Matt Richardson, MPH  
Director, WCCHD Public Health Initiatives and Planning  
512-943-3600  
[marichardson@wcchd.org](mailto:marichardson@wcchd.org)

### Williamson County, Texas



**Precincts, City Limits, and Williamson County & Cities Health District Public Health Centers in Williamson County, Texas**

Date: 10/25/16

If you have any questions about this map, please contact [gis@wcchd.org](mailto:gis@wcchd.org)

0 2.5 5 10 Miles

