INCREASE HEALTH TO SAVE MONEY

Hospitalizations for the following conditions are called “potentially preventable” because if the person hospitalized had been able to access appropriate healthcare, AND had followed doctor’s instructions, the hospitalization would likely not have occurred. Recognized Preventable Hospitalizations in Texas are:

- Bacterial Pneumonia
- Dehydration
- Urinary Tract Infection
- Angina (without procedures)
- Congestive Heart Failure
- Hypertension (High Blood Pressure)
- Asthma
- Chronic Obstructive Pulmonary Disease
- Diabetes Short-term Complications
- Diabetes Long-term Complication

These types of hospitalizations are costly to both the individual and the county and they are indicators of areas on which to focus public health improvement efforts.

For this reason, the Department of State Health Services (DSHS) has compiled reported hospital data from 2005-2007. The preventable hospitalization data is compiled using hospital discharge data that is provided to the state by all state licensed hospitals except those that are statutorily exempt. Hospitals with fewer than 100 beds are exempt from reporting; however, smaller hospitals may voluntarily report their discharge data in order to have their preventable hospitalizations and potential county savings determined.

Preventable Hospitalization data is located at www.dshs.state.tx.us/ph/default.shtm. The website explains each of the these conditions and provides suggestions for how communities might decrease the number of people that present with the condition and have to be hospitalized. The website also contains information on the estimated statewide cost, as well as individual cost to counties. Counties can also identify the conditions that are higher (or worse) in their counties than the State’s average. This information is provided on color coded maps that make it easy to identify the information.

This information can be used to detect savings in health care and it should be noted that the data is not an evaluation of hospitals or other health care providers. Counties may use the data to focus their efforts on specific conditions and identify health promotion activities.

<table>
<thead>
<tr>
<th>Program</th>
<th>Funding Agency</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outstanding Rural Scholar Recognition Program</td>
<td>Texas Department of Rural Affairs (Revolving application process)</td>
<td><a href="http://www.orca.state.tx.us/index.php/Rural+Health/Grant+Fact+Sheets/Outstanding+Rural+Scholar+Recognition+Program+%28ORSRP%29">http://www.orca.state.tx.us/index.php/Rural+Health/Grant+Fact+Sheets/Outstanding+Rural+Scholar+Recognition+Program+%28ORSRP%29</a></td>
</tr>
<tr>
<td>Cancer Prevention Micro Grants Program Request for Applications (RFA)</td>
<td>Cancer Prevention and Research Institute of Texas (CPRIT) (Closes on September 21, 2010, 3 p.m. CST )</td>
<td><a href="http://www.cprit.state.tx.us/pdfs/cprit-_rfa_p-11-_ppe1_final.pdf">www.cprit.state.tx.us/pdfs/cprit-_rfa_p-11-_ppe1_final.pdf</a></td>
</tr>
</tbody>
</table>
I hope that all of you are having an enjoyable summer. Earlier this year, several schools from your communities participated in our National Public Health Week Art and Composition Contests. Students demonstrated their value of prevention through contributions focusing on nutrition and physical activity, substance abuse, immunizations, and sanitation. Winners in the contests were from Archer, Clay, Erath, Fannin, Johnson, Parker, and Tarrant counties.

The Public Health Improvement (PHI) Team continues to recognize the privilege of being a part of health-promoting activities in your communities. Recently, Stephens County expressed interest and commitment to assessing its community’s health conditions through the Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS is the world’s largest, ongoing telephone health survey system. This endeavor is already underway and the surveys will begin in August.

Another summer activity of PHI is its sponsoring of scholarships to the Texas Teen Tobacco Summit. Together with the Texas School Safety Center at Texas State University-San Marcos, three scholarship recipients from Jack County were selected and will join over 700 individuals at the three-day summit that will take place in July in The Woodlands, TX.

Other activities and projects continue throughout the region and we thank you for allowing us to be a part of them. If we can provide technical assistance to you in the development of your public health infrastructure, please contact us.

- Sandra Cobb, Program Manager

---

**Frequently Asked Questions**

- **What is the purpose of the Local Health Authority (LHA) conference call?**
  To provide a communication network and additional resources that will assist LHAs in their roles to meet the public health needs of their community. It is used as a forum to highlight and identify health issues. Topics of last month’s conference call included a Flu Surveillance update; H1N1 Vaccine update; distribution of antivirals to LHAs; and an opportunity to receive free nicotine replacement therapy for patients.

- **When does the LHA conference call take place?**
  The LHA conference call takes place every quarter on the 3rd Thursday of the month. The next LHA conference call will take place on Thursday, September 16th, 2010 from 12:00 - 12:30 pm.

- **May I submit topics for discussion to be included in the LHA conference call?**
  To submit agenda topics for the LHA conference call, please contact Jamese Saif by email at jamese.saif@dshs.state.tx.us or fax to 817-264-4506.

E-mail or fax questions to the above e-mail address or fax number. Please include “PHI Newsletter” in the subject line when e-mailing.
After reading the article on the first page, you now know what preventable hospitalizations are, but exactly what does the information look like? Here is the case of one Texas county where the Health Coalition decided to look at the data more closely in order to plan prevention strategies and reduce the incidences of these conditions.

In 2005-2007 a Health Services Region 2/3 county was found to have at least two of the ten preventable hospitalization conditions that were significantly higher than the state’s average. These conditions were bacterial pneumonia and congestive heart failure. The county data for Bacterial Pneumonia, which is a serious inflammation of the lungs caused by an infection, was the following:

- 623 hospital admissions for adult (18+) residents.
- An average of a $23,391 charge per adult hospitalization for a collective county total of $14,572,371 for this condition.
- A county hospitalization rate of 220% higher than the state average.

Prevention strategies that could save money for this county are the administration of the Pneumococcal Vaccination, the Influenza Vaccination or the Tdap vaccination. The CDC also recommends handwashing as another form of prevention.

The county data for Congestive Heart Failure, a condition that prevents the heart from effectively pumping blood to the rest of the body and can result in pooling of blood in the extremities and congestion in the lungs, in this county was the following:

- 702 hospital admissions for adult (18+) residents.
- An average of a $32,808 charge per adult hospitalization for a collective county total of $23,030,898 for this condition.
- A county hospitalization rate of 201% higher than the state average.

Prevention strategies for Congestive Heart Failure include reducing the prevalence of diabetes, high cholesterol, and high blood pressure, promoting smoking cessation programs, reducing alcohol and drug abuse and maintaining an optimal weight and exercise.

After reviewing its preventable hospitalization information, this county chose to address Bacterial Pneumonia first. Through a vaccination drive, with the administration of Pneumococcal vaccinations, as well as Influenza vaccinations, this county hopes to reduce cases of Bacterial Pneumonia. The reduction of Bacterial Pneumonia will reduce emergency room visits and costs to individuals and the county.

For information regarding preventable hospitalizations data, you can reach Mike Gilliam, Jr., M.S.W., M.P.H., Centers for Program Coordination, Policy & Innovation at 512-458-7111 ext. 2708 or by email, mike.gilliam@dshs.state.tx.us.

Preventable Hospitalizations in a Texas County

In the spring of this year Public Health Improvement initiated conversations with Stephens County. Following visits pertaining to public health infrastructure with the Stephens County Judge and community stakeholders, it was collaboratively determined that the best way to gain local public health status information would be through the administration of the Behavioral Risk Factor Surveillance System (BRFSS) surveys. The BRFSS, established in 1984, is one of the largest, on-going telephone health surveys that tracks health conditions and risk behaviors in the US.

The Texas Department of State Health Services (DSHS) will initiate the telephone survey in Stephens County beginning August 10, 2010. The data gained from the survey can be used by communities, organizations and governments in Stephens County to plan and develop strategies to address health issues that are identified through the survey, in order to improve the health status of the community.

The survey will be conducted on behalf of DSHS by Clearwater Research, Inc., a health research company. Stephens County residents will be contacted through landline home phones only. Participation in the survey is voluntary and all information is confidential and anonymous.
The Immunization Branch resides within the Division of Prevention and Preparedness at the Department of State Health Services (DSHS) and is responsible for ensuring the immunization capacity within Texas. The Branch administers the Texas Vaccines for Children Program (TVFC); ImmTrac, the statewide immunization registry; and the Adult Safety Net Vaccine Services for DSHS regional clinics and contracted local health departments (LHDs). The immunization branch ensures school and child care immunization compliance. It also develops print, audio and video media.

The Regional Immunization Branch provides program oversight to 11 contracted health departments, 10 DSHS Field Offices, and 850 providers enrolled in the TVFC program. Activities are geared toward raising vaccine coverage levels of Texas children, adolescents and adults, including health care workers. Funding for immunization activities is a blend of federal and state funds. Immunization contracts with local health departments are based on the Texas DSHS Immunizations contract with the Centers for Disease Control and Prevention (CDC). The required activities of the CDC contract provide the focus and strategic goals of the program and are consistent with achieving higher vaccine coverage levels for the State of Texas.

The Immunization Branch web page is located at www.dshs.state.tx.us/immunize/.

---

### Upcoming Health Observances

**June, 2010**
- 1st - 31st: Home Safety Month  
  www.homesafetycouncil.org
- 27th: National HIV Testing Day  
  www.napwa.org

**July, 2010**
- 1st – 31st: UV Safety Month  
  www.aao.org/aaoesite/eyemd/uv.cfm

**August, 2010**
- 1st – 30th: National Children’s Eye Health and Safety Month  
  www.preventblindness.org
- 1st – 31st: National Immunization Awareness Month  
  www.cdc.gov/vaccines/events/niam/default.htm

---

<table>
<thead>
<tr>
<th>Clinic</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
</table>
| Archer | 511 S. Cedar  
  Archer City, TX 76351  
  940-574-2159 |
| Cleburne | 108 E. Kilpatrick  
  Cleburne, TX  
  76031  
  817-517-2306 |
| Gainesville | 715D E. California  
  Gainesville, TX  
  76240  
  940-665-6397 |
| Mineral Wells | 4113B Highway 180  
  E. Mineral Wells, TX  
  76067  
  940-325-7844 |
| Winters | 110 S. Main  
  Winters, TX 79567  
  PO BOX 567  
  325-754-4945 |

---

**The following are local Department of State Health Services clinics that provide immunizations in your area.**
Sexting or sext means sex texting or sending a sexually-explicit or sexually-suggestive text, images or video. As it relates to teens, sexting creates situations where youth render themselves vulnerable to emotional, psychological and physical victimization. These sexts may be intended to be flirtatious or provocative, or used to request or arrange an explicit encounter.

According to the Pew Research Center’s Internet & American Life Project, released in December 2009, 58% of 12 year olds own a cell phone, compared to only 18% in 2004. They also found that cell phone ownership increases dramatically with age. Currently, 83% of teens age 17 own a cell phone, compared to only 64% in 2004. Four percent of cell phone owners ages 12-17 indicated that they had sent sexually suggestive nude or nearly nude images of themselves, while 15% of that same group reported having been recipients of one.

Mr. Pruitt described a variety of sexting scenarios:

- A sext is sent between people in a relationship and it is non-malicious.
- A sext is sent and forwarded to friends and it is non-malicious.
- A sext is sent as a result of peer pressure or trickery done by a group as a bully activity, intended to cause harm to person depicted.
- A picture is taken where privacy is expected and then sent as sext to bully or humiliate the person depicted.
- A sext is sent between two people in a relationship. A breakup then occurs and the sext is shared with others intended to cause harm to person depicted.

He shared a real life example of the effects of sexting about a 13-year old Florida girl who committed suicide after sending a topless photo of herself to a boy in hopes of gaining his attention. The photo was disseminated throughout the girl’s school and the nearby high school. She was bullied by classmates continuously when the photo spread — it was so unbearable that this teen chose to end her life. The key is educating teens and parents about the ramifications of sexting, Mr. Pruitt said. In an instant, sexting or receiving a sext could have a lifelong impact on a teen’s life.

Accordingly, in a February 8, 2010 news release, Texas Attorney General Greg Abbott warned teens and parents about the danger of sexting. Mr. Abbott advised that sexting can be a crime. The owner of a computer or cell phone containing images of nude or semi-nude minors can be investigated, prosecuted for possessing and distributing child pornography and charged as a crime. Teens in possession of sexually suggestive images of classmates or companions under age 18 face up to 10 years in prison, Mr. Abbott said.

The RPRHP was formed with the assistance of the Region 2/3 Public Health Improvement Team in 2005. This coalition is comprised of Baylor, Foard, Haskell, Knox and Throckmorton counties. It addresses issues related to total wellness, which include: mental health, substance abuse, child restraints, domestic violence, teen pregnancy, underage drinking, and fall prevention. The RPRHP attempts to inform and educate its members and the community on public health issues at least once per quarter. It meets the third Friday of each month at 10:00 a.m. in one of the member counties.

For more information, please contact Marsha Waters at 817.264.4562 or Marsha.Waters@dshs.state.tx.us.