



BCPHD Task Force Report To Bastrop County Commissioners' Court

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ACKNOWLEDGEMENT

This report reflects many hours of dedicated time by the BCPHD Task Force. We thank all Task Force members for their hard work, dedication, and contribution. And we deeply express our gratitude to well over 100 community members who lent their voices to making this work a reality. The Bastrop County Public Health Department could not have come to fruition without the help of every single person who dedicated their time, effort, and ideas.

“For he who has health has hope; and he who has hope, has everything.”

— Owen Arthur

BACKGROUND

A robust public health department actively engages the communities it serves, adapts to evolving health and safety needs, and prioritizes prevention, promotion, and protection measures to enhance the health and wellbeing of its residents at every life stage.

Everyone has a stake in the health of their community. And health is everyone's business; that is, all sectors of a community - organizations, agencies, businesses, and populations, should contribute to and benefit from a thriving, healthy, and safe place to live, work, play, pray, and go to school. It is incumbent upon cities and county governments to promote health and prevent disease and disability by taking measures that protect its residents. As such, public health is a public service.

To be fiscally responsible, investments in public health infrastructure must reflect the benefits produced. Increases in public health spending are linked to declines in mortality and reductions in low birth weight, foodborne illnesses, and rates of sexually transmitted diseases, to name a few. Investing in public health also saves money in the long term: Every \$1 invested in public health yields improved health outcomes equivalent to as much as \$88 in expenditures saved by county public health departments.

Given the known return on investment in public health, the number of natural disasters and public health crises experienced by Bastrop County, and its fast and ever-growing, diverse population, [the Bastrop County Commissioners' Court unanimously voted in September 2023 to create a local public health department](#). This

public health department is designed to be an accountable, transparent central health authority for the county. Its mission is to serve as the trusted source for public health information, services, and resources and function as the central convener during times of public health crises and during times of routine public health activity. Its primary aims include preventing disease and disability, and promoting and protecting the health and safety of all residents of Bastrop County. Of critical importance, this local governmental public health agency has the capacity to open a pathway for acquiring state and federal funds which have been unattainable to date. State and federal funds typically comprise up to two thirds of the funding for local health department services and functions.

Actions that followed were essential to the development of the Bastrop County Public Health Department and are chronicled here as outcomes achieved and recommendations made during FY 23-24.

INITIAL DEVELOPMENTAL STEPS

Three critical steps, approved by the Bastrop County Commissioners' Court, followed the resolution which created the Bastrop County Public Health Department. They were:

1-Identify FY23-24 [transitional infrastructure funding and the public health team.](#)

- A. Bastrop County-\$50K
- B. Smithville Hospital Authority-\$25K
- C. TXA&M, SPH, Center for Community Health and Aging-\$40K (in kind support)

2-For FY 23-24, hire a part-time public health practitioner ([professional services consultant](#)) to focus on transition tasks.

3-Appoint a county-wide [Task Force](#) to recommend strategic and operational actions needed to begin development of the public health department for FY 24-25. Tasks assigned to the Task Force, and which were facilitated by the Bastrop County Public Health Department transition team included:

- A. **Identifying county infrastructure funding** needed to support future FTEs and an annual operational budget.
- B. **Recommending a governance and administrative structure**; that is, a public health advisory board and reporting structure to county government officials.
- C. **Assessing current workforce capabilities including documenting gaps and skills sets** among existing public health services in the county.
- D. **Determining options for the physical location** of a local health department.
- E. **Establishing public health service priorities** based on community assessment data.
- F. **Identifying core services and programs** and applying as appropriate for state and federal funding.

- G. **Exploring the viability of a re-designation as a public health district in 3-5 years.**

TASK FORCE SELECTION, ROLE AND RESPONSIBILITIES

The Bastrop County Public Health Department (BCPHD) Task Force included elected officials and community representatives from all four county precincts and the three municipal city councils. Each elected official appointed a community leader that resided in each of the 7 respective jurisdictions. Appointment approval for the community leader was formally sought through each city or county governmental body. [The community leader was tasked with bi-directional communication with their jurisdiction's residents.](#) A total of 15 (which also included the County Judge) members were seated for the first task force meeting in February 2024. The role of the Task Force was to help create a solid foundation for a public health department in Bastrop County by collectively sharing decision-making about critical services, programs, and activities along with setting the new department's strategic direction and operational plan. The question posed by the County Judge to the Task Force was, "What disease prevention, health promotion, and health protection efforts can we invest in that are impactful, sustainable and assure health equity and a quality of life for all?"

A total of 8 two-hour meetings were held from February 2024 through August 2024. These meetings were facilitated by the Interim Executive Director and the BCPHD Transition Team. An [orientation to public health](#) along with presentations given by [the Williamson](#)

[County and Cities Health District](#) and [Waco-McLennan County Public Health District](#) served to inform the Task Force of the scope of work for a local public health department.

Included in these presentations were key points that referenced essential public health services, workforce and operational budgets, public health priorities, local public health history and emerging needs, and the physical structure of a governmental public health agency.

The Task Force began its work by agreeing to [a set of guiding principles](#) to support how decisions were to be made as well as assuring that all official deliberations were open and accessible to the public and that a conflict-of-interest policy was instituted by the county, and was signed and dated by all Task Force members. The Task Force was recognized as a high-profile planning and policy development body for the county, its responsibility was structured around assigned tasks that were strategic and operational in nature and which required significant deliberation by the Task Force with input from county residents. Task Force recommendations were subsequently crafted to advance the development of the Bastrop County Public Health Department. [The summaries for all 8 task force meetings to date can be accessed here.](#)

TASK FORCE PROGRESS: FEBRUARY 22, 2024-AUGUST 22, 2024

The Task Force initiated its work by first discussing public health priorities for the county.

Over the course of several months, eight community discussion groups were held across

Bastrop County, across which there were a total of 113 attendees. The purpose of these

community discussion groups was to discover what public health services, information and programs residents of Bastrop County felt they needed, that the Bastrop County Public Health Department could provide. The information obtained from these community discussion groups would then be used alongside Task Force member input and secondary data to inform evidence-based decisions regarding the Bastrop County Public Health Departments priorities, services, and operations.

Texas A&M University doctoral students from the School of Public Health Adam Bradley, MPH, and Adriana Rodriguez, MA, were tasked with obtaining pertinent secondary data surrounding health in Bastrop County, identifying the common themes that emerged from the community discussion groups, and determining how the Task Force feedback, community feedback, and secondary data all aligned. In order to assess the secondary data, information was gathered at the county, state, and national levels in order to see how Bastrop County’s health compared to other locations, both near and far. The results for Bastrop County were as follows:

SECONDARY DATA: KEY FINDINGS			
High Income Disparities	High Child Poverty Levels	Long Commutes	Insufficient Medical Providers
High Smoking Behaviors	High Adult Obesity Levels	High Physical Inactivity Levels	Low Access to Exercise
High Excessive Drinking	High Alcohol-Impairment	High Cancer Rate Incidence	High Chronic Lower Respiratory Disease Rates
High Motor Vehicle Accident Rates	High Motor Vehicle Crash Deaths	High Injury Deaths	High Heart Disease Rates

For the purpose of identifying common themes across the community discussion groups, a thematic analysis was conducted. The thematic analysis process is a qualitative coding process in which the data is reviewed, placed into common categories or themes, compared with someone else’s categories and themes, and solidified into final themes to then be reported. Some of the emergent themes that were mentioned most frequently throughout the community discussion groups can be seen in the following table:

THEMES	TOTAL
Local Healthcare Access	54
Mental Health	36
Need for Health Information	33
Growing and Changing	22
Communication Problems	21
Need For Collaboration Across Organizations	21
Need for Youth Activities	19
Neighborly Community	19
Need for Health Education	17
Aging Population Needs	16

Finally, the secondary data and thematic analysis were compared to the most important problems as identified by the Task Force members, which can be seen in the table below:

PRIORITY CATEGORIES	TYPE	TYPE	TYPE	TYPE	TYPE
Chronic Disease and Injury-13	Heart Disease	Cancer	Obesity	Motor Vehicle Accidents	Healthy Eating / Staying Active
Infectious Disease-11	STI/STD/HIV	Vaccine Clinics	Respiratory Disease	Preventive Medicine	
Environmental Health-7	Safe Food	Air Quality	Water Quality	Septic Inspections	
Women, Children and Families-8	WIC	Wellness Exams	Prenatal Care	Family Health / Mobile Van	
Access to Care-5	Family Health Care	Chronic Care Management	Aging in Place		
Cross Cutting-3	Health Education and Information (3)				
Other-16	Mental Health (6)	Substance Abuse (10)			
Reminders-3	Apathy and Irresponsibility	Reach the hardest to find	Overcome specific priority to exclusion of all needs in funding and services		

KEY = Aligns With CDG Priorities Aligns With Secondary Data Mentioned In CDGs But Not a "Top Theme"

The information provided in this presentation was then used by Task Force members to establish public health priorities for Bastrop County. For a more detailed explanation of the Key Findings identified by Texas A&M, [the Bastrop County Public Health Department Key Findings PowerPoint may be accessed here.](#)

RECOMMENDATIONS FOR APPROVAL

Given all funding decisions and decisions about governance, core programs, services and workforce emanate from establishing county public health priorities, the Task Force first went through an extensive data analysis effort to reach consensus on Bastrop County's public health priorities. Secondly, the Task Force established key recommendations around a governance system based on legal authority (Chapter 121, Texas Health and Safety Code) for public health in Bastrop County. The following two recommendations are presented to Bastrop County Commissioners' Court for approval. They are:

Recommendation #1: The Public Health Priorities, as determined and approved by Task Force members at the July 11th meeting, are as follows:

A. Healthcare Access

1. Navigation
2. Coordination
3. Affordability
4. Sustainability

B. Health Promotion, Education, & Collaboration

1. Heart Disease
2. Cancer
3. Substance Abuse
4. Mental Health
5. Teen Health

C. Environmental Health

1. Air
2. Food
3. Water

D. Infectious Disease

1. Surveillance
2. Treatment
3. Response

Recommendation #2: The Governance System, as determined and approved by Task Force members at the July 11th meeting, includes the following:

An **Advisory Public Health Board** is to be appointed by the respective city councils (3) and the Bastrop County Commissioners' Court (6).

- A. Nine individuals will constitute the Advisory Board. One from each city and six by the Bastrop County Commissioners' Court.
- B. Geographic representation is highly recommended.
- C. Professional representation shall include medical professionals, legal and governmental officials, and community members.
- D. The role of the Board will include oversight of the Public Health Department including assuring outreach to underserved communities and informing the commissioners and municipalities of health issues.

- E. The Board will report to the County Judge, Commissioners and Municipal Councils.
- F. Length of term will be three years (staggered) with no more than three consecutive terms served.
- G. Board members must be collaborative and recognize outreach to underserved communities.
- H. Partnerships are encouraged and recognized as a method to leverage limited resources without duplication of efforts.
- I. The Executive Director of the Bastrop County Public Health Department and the Bastrop County Local Health Authority will serve as ex-officio members to the Bastrop County Public Health Advisory Board.
- J. Board member applications shall be solicited and submitted to the respective city council of each municipality and to the Bastrop County Commissioners' Court for selection and appointment.

TASK FORCE WORK TO BE COMPLETED in FY 24-25

During the August 22nd Task Force meeting, members agreed to continue to meet until which time the Advisory Public Health Board is selected, appointed, and seated. Remaining work to be accomplished by the Task Force includes deliberations and recommendations regarding:

- A. Core Services and Programs

B. Future Workforce

C. Future Funding

D. Future Redesignation, Location, and other Infrastructure Issues