PUBLIC HEALTH

FY 2015 Community Impact Report

Travis County Health and Human Services & Veterans Service

Research & Planning Division

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Public Health

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Research & Planning Division

County Executive
Sherri E. Fleming

Project Leads
Courtney Bissonnet Lucas
Lori Axler Miranda

Lead Writers
Jenny Horton
Courtney Bissonnet Lucas

Research & Planning Division
Lawrence Lyman, Division Director
Korey Darling, Planning Manager
Lori Axler Miranda
Courtney Bissonnet Lucas
Tara Carmean
Rachel Coff
Jenny Horton
Brook Son

Questions or Comments?

For questions or for more information, please contact the Research & Planning Division at HHS_R&P@traviscountytx.gov.

TRAVIS COUNTY
HEALTH and HUMAN SERVICES & VETERANS SERVICE

PURPOSE

Who we are:

A Department of Travis County that serves the community under the guidance of the Commissioner's Court

What we do:

Address community needs through internal and external investments and services

What we strive to accomplish:

Maximize quality of life for all people in Travis County

- Protect vulnerable populations
- Invest in social and economic well-being
- Promote healthy living: physical, behavioral, and environmental
- Build a shared understanding of our community

VALUES

We value helping people.

- We provide accessible, person-centered services with respect and care.
- We work to empower people through our service to them, always honoring the strengths and differences of the individuals and families of Travis County.

We value the accountability and integrity of our staff.

- We value the diversity of our staff and the experience each of us brings to TCHHS/VS.
- We honor our collective service to the public, including the careful stewardship of public funds.
- We value the quality services we provide to the community in a spirit of shared responsibility.

We value cooperation and collaboration in the community at large and within TCHHS/VS.

- We are interdependent and connected.
- We treat one another with respect and value effective communication and teamwork.
- We honor our partners in the community and engage with them to more efficiently and effectively serve our clients.

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Introduction

The Travis County Commissioners Court, through Travis County Health and Human Services & Veterans Service Department (TCHHS/VS), annually invests nearly $17.5 million in community-based social service programs. These Department investments align with and supplement our direct services to meet the needs of local residents. Community-based organizations are frequently geographically and culturally embedded in the communities they serve and are often best positioned to provide needed services.

Purpose of Report

The annual Community Impact Report provides an overview of TCHHS/VS investments in health and human services. The *FY 2015 Community Impact Report* offers highlights of community conditions most pertinent to the services purchased, and details investment, programmatic, and performance information on the Department's social service contracts. This information allows policy makers, program managers, and others to better understand these investments, recognize accomplishments, identify areas for improvement, disseminate lessons learned, and highlight areas warranting further research.

Organization of Report

This report addresses nine issue areas: Behavioral Health, Child and Youth Development, Food and Transportation, Housing Continuum, Planning and Evaluation, Public Health, Safety Intervention Services, Supportive Services for Community Living, and Workforce Development. The Investment Overview summarizes information from across all nine issue areas. Each issue area section begins with community conditions information and then provides performance highlights about the programs within that issue area. Each program is classified into the issue area most closely aligned to its goals and objectives.

Although this report highlights community conditions for individual issue areas separately, each issue area must be considered in a broader context. Community conditions related to a single issue area may have similar or related root causes and broad-level consequences. Current economic conditions also have a global impact on community conditions.

This report provides detailed information about each program covered by an issue area, including an overview of program goals, services provided, eligibility criteria, and funding. Also captured are each program's performance results, compared to its contractual performance goals, and explanations of notable variance (+/- 10%) between the performance results and goals.

Notes on Methodology

Community conditions discussed in this report reflect the most recent information available at the time of writing. The majority of the social service contracts included in the report followed a fiscal year calendar (October 1, 2014 through September 30, 2015) unless otherwise noted. Program and performance highlights are drawn from contracts and reports provided by contracted service providers. Estimates from the American Community Survey have been tested at a 90% confidence level for reliability. In some cases, all noted, estimates were unreliable due to small sample sizes.

Considerations When Reading This Report

Performance results provide only a starting point for understanding the impact of these programs. These summary statistics are not necessarily an indication of the programs' overall performance, but rather a snapshot of their performance over a one-year period. Within these reports, service providers offer explanations for variance in performance, which provides context and meaning to summary results.

Performance results do not reflect programs' full value to and impact on the community. Therefore, it is important to keep the following considerations in mind when reviewing program performance.

Readers should use caution when comparing output and outcome results across programs, as participant characteristics can significantly influence a given program's performance goals and results. For example, performance results may be lower for programs with clients who face considerable challenges (e.g., serious mental illness or addiction issues) and have little social support.

Factors beyond the program's control may also impact the program's performance. For example, the relative scarcity or abundance of jobs in the local economy will impact client employment rates for a workforce development program, regardless of the quality of training and support provided. Without controlling for these factors, the true impact or efficacy of the program on outcomes cannot be discerned.

Readers should also use caution when examining outcome results for programs with less than 30 clients, in which the outcome of just a few clients can greatly affect the program's total outcome result. In these instances, examining percentages may be less helpful than examining raw numbers.

Finally, this report captures a selection of performance measures, which may not reflect the program's full impact on participants and their families, peers, and neighborhood. Performance measures may not all be equal in importance or value to the community.

Community Conditions

Public Health Goals and Services

Programs and services within this issue area work to improve the health and well-being of community members by encouraging healthy behaviors; providing health education programs; enforcing regulations that protect from injury and illness; reducing the occurrence and impact of disease; and increasing public health emergency preparedness. Services may include: education; improving treatment, care, and support for persons living with or facing health concerns; case management and advocacy for additional or other client services; promoting environmental health; and animal control and shelter services.

Highlights of Community Conditions

Public health is the practice of promoting good health and preventing disease within groups of people. Travis County invests in disease prevention and surveillance, supportive services that promote access to health care, and other services that contain local health care spending and ensure the health, well-being, and productivity of Travis County residents.

The following sections outline data describing the public health status of Travis County residents. The Travis County population is slightly healthier than that of the state per almost every indicator examined below. Austin area residents in particular are known for their healthy lifestyles. However, an analysis of these health indicators at the sub-county level—either in smaller geographic units or by race/ethnicity—shows there are clear disparities in health status[a] in nearly all of the indicators. Single year data showing these disparities is not published here because it is not statistically reliable due to small sample sizes, although low-income pockets of the population show poorer health outcomes in general. Data included below is the most recent available at the time of publication. Public health data has varying and significant time lags; therefore, not all years of data are consistent across this report.

a The Health Resources and Services Administration defines health disparities as population-specific differences in the presence of disease, health outcomes, or access to health care.

General Health Status

Below are the percentage estimates of county and state adult residents describing health status, and how these figures compare with national data.

General Health Status

Indicator	*Travis County*	*Texas*	*U.S.*
A. Percent with fair to poor general health[1]	13.0%	19.5%	16.9%
B. Percent with poor physical health status[2]	13.4%	17.4%	N/A
C. Percent with poor mental health[3]	16.3%	17.1%	N/A
D. Premature death (age-adjusted mortality rate of residents under 75 per 100,000 population)[4]	5,094	6,650	7,681

Notes: Indicator A refers to adults reporting fair to poor health as opposed to good or better health. Indicator B captures the percentage of adults reporting that their physical health was poor on 5 or more days in the past 30 days. Indicator C captures the percentage of adults reporting that their mental health was poor on 5 or more days in the past 30 days. For indicators A, B, and C, the Travis County and Texas data is from 2014 and U.S. data, where available, is from 2013. Indicator D represents data from 2010-2012.
Created by: Travis County HHS/VS, Research & Planning Division, 2015
Source data: Behavioral Risk Factor Surveillance System and County Health Rankings

Leading Causes of Death

These 2013 data inform the direction and efficacy of current and future prevention and intervention efforts.

Leading Causes of Death, 2013

Underlying Cause of Death	*Travis County Number of Deaths[5]*	*Travis County Rank[6]*	*Texas Rank[7]*	*U.S. Rank[8]*
A. Malignant neoplasms (cancer)	1,056	1	2	2
B. Diseases of the heart	902	2	1	1
C. Accidents (unintentional injuries)	491	3	4	4
D. Chronic lower respiratory diseases	241	4	3	3
E. Cerebrovascular diseases (stroke)	236	5	5	5
F. Intentional self-harm (suicide)	139	6	*	10
G. Alzheimer's disease	128	7	6	6
H. Diabetes mellitus	120	8	7	7
I. Chronic liver disease and cirrhosis	96	9	10	**
J. Nephritis, nephrotic syndrome, nephrosis	82	10	9	9

Leading Causes of Death, 2013

*The eighth leading cause of death in Texas is septicemia. Suicide is not one of the ten leading causes of death in Texas.
**The eighth leading cause of death in the U.S. is influenza and pneumonia. Chronic liver disease and cirrhosis is not one of the ten leading causes of death in the nation.
Created by: Travis County HHS/VS, Research & Planning Division, 2015
Source data: Texas Department of State Health Services, Center for Health Statistics, and the U.S. Centers for Disease Control and Prevention

Chronic Diseases and Related Risk Factors

Chronic diseases are characterized by gradually worsening symptoms that frequently don't manifest themselves until they are somewhat progressed. They require daily management by patients, and once diagnosed, by caregivers/providers. Along with their related risk factors, chronic diseases account for 86% of the nation's health care costs.[9]

Chronic Diseases and Related Risk Factors

Chronic Disease and/or Related Risk Factor	*Percent with/at Risk of in Travis County, 2014*[10]	*Percent with/at Risk of in Texas, 2014*[11]	*Percent with/ at Risk of in U.S., 2013*[12]
A. Heavy drinking	6.3%	5.8%	6.2%
B. No leisure time physical activity	19.7%	27.6%	25.5%
C. Overweight or obese (BMI>25)	56.2%	67.8%	64.3%
D. Current smoker	10.7%	14.5%	19.0%
E. Heart attack	1.7%	3.7%	4.4%
F. Angina or coronary heart disease	2.5%	3.7%	4.1%
G. Stroke	1.2%	3.0%	2.8%
H. Diabetes	7.2%	11.0%	9.8%
I. Chronic obstructive pulmonary disease	4.1%	5.3%	6.3%
J. Asthma	5.4%	6.7%	9.0%

Note: U.S. data represents States, DC, and Territories.
Created by: Travis County HHS/VS, Research & Planning Division, 2015
Source data: Behavioral Risk Factor Surveillance System

Sexually Transmitted Diseases

Individuals engaging in unprotected sex may contract and spread these diseases. Sexually transmitted diseases often go undetected, and left untreated, can cause serious health consequences, including infertility, cancer, and chronic illness.

Sexually Transmitted Diseases, 2014

Sexually Transmitted Disease	*Travis County Number of Cases*	*Travis County Rate*	*Texas Rate*	*U.S. Rate*
A. Chlamydia[13,14]	7,230	628.1	475.0	456.1
B. People Living with HIV[15,16]	4,401	382.3	297.0	295.1*
C. Gonorrhea[17,18]	2,158	187.5	127.7	110.7
D. Primary and Secondary Syphilis[19,20]	184	16.0	5.9	6.3

*This rate is from 2013.
Note: Rates are per 100,000 population.
Created by: Travis County HHS/VS, Research & Planning Division, 2015
Source data: U.S. Centers for Disease Control and Prevention and Texas Department of State Health Services

Maternal and Child Health

The health of mothers and their children is an important barometer for the health of future generations and has critical predictive value in public health planning.

Maternal and Child Health

Indicator	*Travis County*	*Texas*	*U.S.*
A. Low birth weight (percent of live births for which the infant weighed less than 5 lbs., 8 oz.)[21]	7.7%	8.4%	8%
B. Infant mortality rate (number of all infant deaths within 1 year per 1,000 live births)[22]	3.8	5.8	6.0
C. Teen birth rate (number of births per 1,000 female population, ages 15-19)[23]	45	55	41.5

Notes: Indicators A and C reflect 2006-2012 data. Indicator B reflects 2013 data.
Created by: Travis County HHS/VS, Research & Planning Division, 2015
Source data: KIDS COUNT and County Health Rankings

Access to Care and Preventive Services

These data illustrate barriers faced by many individuals in seeking healthcare: lack of insurance, high cost of care, and provider shortages.

Access to Care and Preventative Services

Indicator	*Travis County*	*Texas*	*U.S.*
A. Percent uninsured of all ages[24]	17%	19%	12%
B. Percent kept from seeking medical help because of cost in the previous 12 months[25,26]	11.6%	17.6%	15.3%
C. Ratio of population to primary care physicians[27]	1,231:1	1,708:1	2,015:1
D. Ratio of population to dentists[28]	1,555:1	1,940:1	2,670:1

Notes: Uninsurance figures (A) are from 2014 and are estimates of all persons who had no reported health coverage or those whose only health coverage was Indian Health Service. For more information see: http://www2.census.gov/programs-surveys/acs/tech_docs/subject_definitions/2014_ACSSubjectDefinitions.pdf. For indicator B, the Travis County and Texas data is from 2014 and U.S. data is from 2013. Indicator C represents 2012 data. Indicator D represents 2013 data.
Created by: Travis County HHS/VS, Research & Planning Division, 2015
Source data: 2014 American Community Survey 1–Year Estimates, Table C27001, Behavioral Risk Factor Surveillance System, and County Health Rankings

Public Health Services/Resources in Travis County

1115 Waiver

The Texas 1115 Waiver operating in Regional Health Partnership (RHP) 7 as of December 2011 runs on a five year cycle. RHP 7 comprises a six-county area: Travis, Lee, Hays, Fayette, Caldwell and Bastrop Counties. While projects will have a regional impact, benefits to Travis County residents will be substantial. These projects focus on critical health needs, including behavioral health and chronic disease management and specialty care access. Read more about RHP 7 1115 Waiver projects at http://www.texasrhp7.org/.

The Community Care Collaborative

The Community Care Collaborative (CCC) is a partnership between Central Health and Seton Healthcare Family. The CCC is working to develop an integrated delivery system of health care in the Travis County community to manage care coordination, upgrade the use of technology, improve system efficiency, and focus on illness prevention, disease management, and health promotion. More information about the Community Care Collaborative can be found at http://www.ccc-ids.org/.

Dell Medical School and Dell Seton Medical Center at The University of Texas at Austin

Dell Medical School at The University of Texas at Austin will open to students in 2016. Construction on a new teaching hospital to replace University Medical Center Brackenridge has begun and is scheduled to open in early 2017. The new teaching hospital will be called the Dell Seton Medical Center at The University of Texas. The hospital will serve as the primary training facility for the new medical school and should ease some provider shortages in the region.

Expanded Austin/Travis County Health and Human Services Department Funding

The Austin City Council added $7.6 million in ongoing and one-time funds for public health and social services in FY 2016, including $2.5 million allocated for the health department and about $1 million to address health disparities.[29] To read more about the Department, see https://www.austintexas.gov/department/health.

Further Resources

Public Health has ties to the Behavioral Health issue area. Research has found that people who experience a physical health problem, such as diabetes or heart disease, are three times more likely to seek mental health care than those who report no physical ailment.[30]

Below are some selected resources that provide more information about public health data, research, and local planning efforts.

Austin/Travis County Community Health Assessment (CHA) and the Community Health Improvement Plan (CHIP)

www.austintexas.gov/healthforum

This community planning effort examines the health of the Austin/Travis County community. Work on CHIP strategies and objectives is ongoing.

Central Health

http://www.centralhealth.net/

Central Health is the hospital district for Travis County and is charged with improving access to quality health care for low-income residents.

City of Austin Critical Health Indicators Report

http://www.austintexas.gov/sites/default/files/files/Health/Info_to_Post/Critical_Health_Indicators_2015.pdf

The 2015 Critical Health Indicators Report includes information on the current health status of Travis County's population.

Healthy ATC

http://www.healthyatc.org/

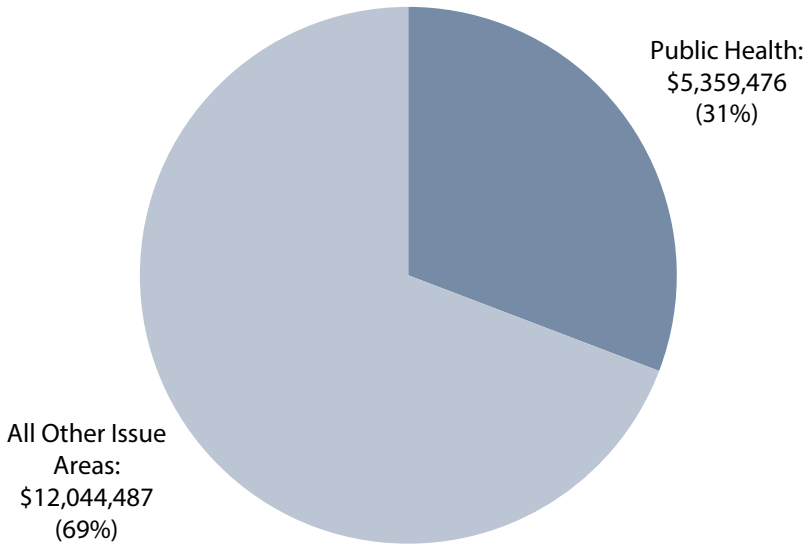
Healthy ATC is a partnership among Central Health, Austin/Travis County Health and Human Services Department, and Travis County Health and Human Services & Veterans Service. Healthy ATC works to help community members and policy makers learn about the health of the community by providing local health data, resources, best practices, news articles, and information about community events.

Investment Overview

Our Investment

TCHHS/VS has departmental and contracted programs that offer public health services. A significant portion of our Public Health investments go to the Austin/Travis County Health and Human Services Department, as they carry out the county's responsibilities for public health on our behalf. The City of Austin also provides Animal Services for the entire county. Other services contracted through non-profits in this issue area focus their efforts on prevention of teen pregnancy and HIV/AIDS and improving outcomes for people living with HIV/AIDS. Please note that the scope of this summary does not include the roles and responsibilities assumed by Central Health (the Travis County Healthcare District).

Investment in Public Health and Other Issue Areas, FY 2015



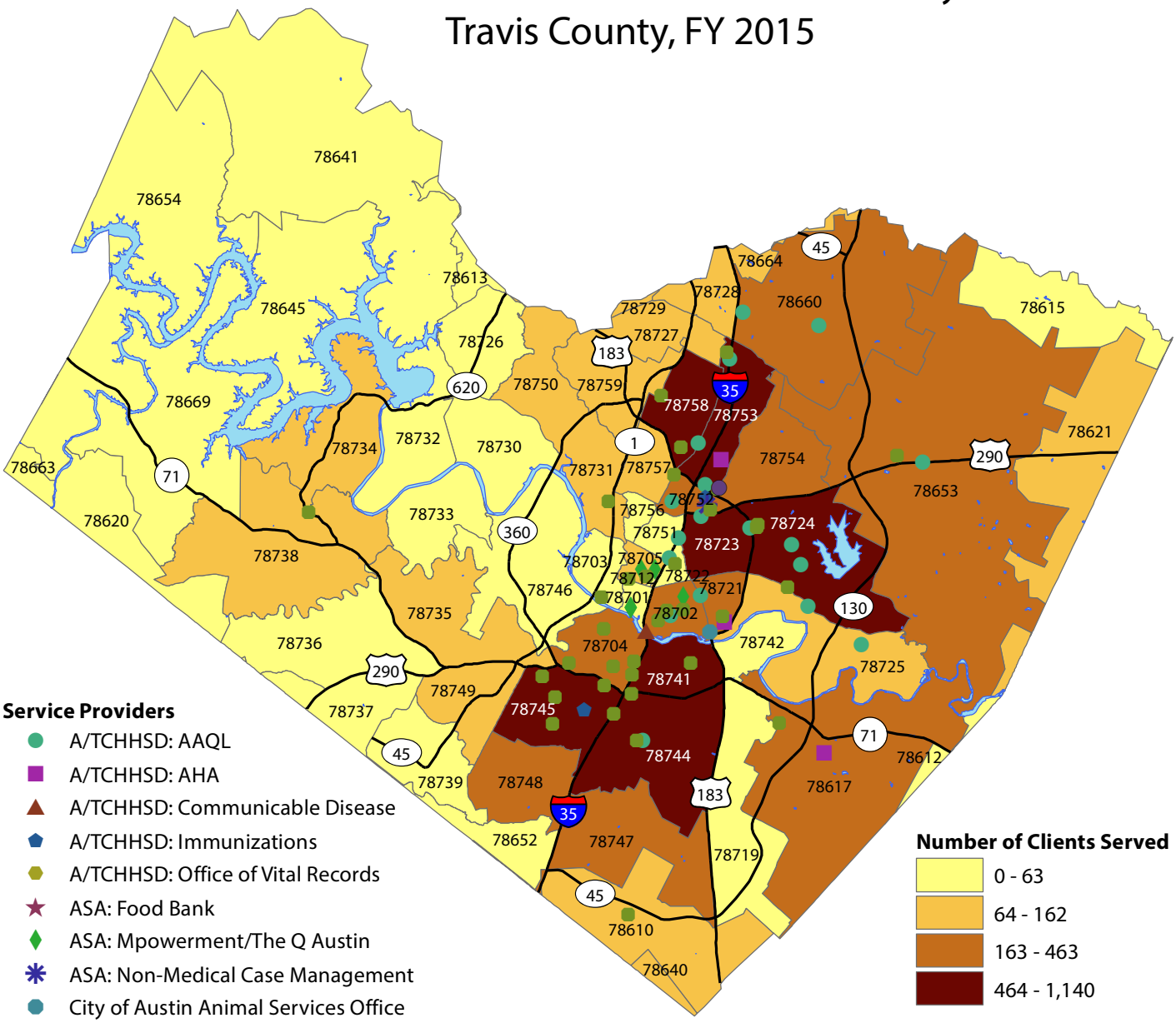
Funding Summary

The FY 2015 Funding Amount reflects 12–month funding (October 1, 2014 through September 30, 2015) unless otherwise noted.

Agency Name	Program Name	FY 2015 Funding Amount
AIDS Services of Austin	Food Bank	$62,500
AIDS Services of Austin	Mpowerment/The Q Austin	$135,000
AIDS Services of Austin	Non-Medical Case Management	$193,937
Austin/Travis County Health and Human Services Department	Public Health Interlocal	$3,368,475
City of Austin Animal Services Office	Animal Services	$1,494,263
Planned Parenthood of Greater Texas	Teen Pregnancy Prevention Program	$29,601
The Wright House Wellness Center, Inc.	Case Management	$75,700

Public Health

Service Provision Locations and Clients Served by ZIP Code
Travis County, FY 2015



Service Providers

- A/TCHHSD: AAQL
- A/TCHHSD: AHA
- A/TCHHSD: Communicable Disease
- A/TCHHSD: Immunizations
- A/TCHHSD: Office of Vital Records
- ASA: Food Bank
- ASA: Mpowerment/The Q Austin
- ASA: Non-Medical Case Management
- City of Austin Animal Services Office
- Planned Parenthood of Greater Texas
- The Wright House Wellness Center

Number of Clients Served

- 0 - 63
- 64 - 162
- 163 - 463
- 464 - 1,140

Service provision locations are not included for Austin/Travis County Health and Human Services Department's Chronic Disease Prevention and Control, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Injury Prevention, or Sickle Cell programs due to the nature of the services provided.

N

0 2.5 5 Miles

Notes: This map shows 10,992 clients by ZIP code. 272 (2% of the total) from all service providers were not included because their ZIP codes were unknown or outside of Travis County boundaries or they were homeless. Client ZIP codes are not included for AIDS Services of Austin's Mpowerment/ The Q Austin program or the City of Austin Animal Services Office. Client ZIP code data was only available for three Austin/Travis County Health and Human Services Department programs: Austin Healthy Adolescent, Immunizations, and Sickle Cell.

Source data: Contracted service providers, 2015.
This map was created using City of Austin shapefiles.
Created by: Travis County HHS/VS, Research & Planning Division, 2016.

AIDS Services of Austin

Food Bank

Program Description

The Food Bank offers quality food and personal and household hygiene products for people with HIV and AIDS who are at risk of declining health due to their inability to take in adequate food and nutrients. The primary goals of the program are to increase access to nutritional products and supplements that enable low-income HIV/AIDS positive persons to improve or maintain their health and to offer educational information on nutrition and healthy dietary options to low-income people living with HIV/AIDS to enhance overall well-being.

The Food Bank menu offers nutritionally sound choices for client selection. The Food & Nutrition Services Manager, with the support of the Food Bank Coordinator, plans menu selections, and orders and purchases healthy foods such as seasonal fruits; vegetables and herbs; whole grains and cereals; foods high in protein including meat, fish, beans, and legumes; dairy products; and nutritional products that are convenient to prepare yet nutritiously sound. In addition to quality nutritional products, the Food Bank offers personal and household products such as quality toothbrushes, floss, and toothpaste approved for patient care by ASA's Dental Clinic's Registered Dental Hygienist, deodorant, shaving supplies, body lotion, laundry detergent, household cleaning supplies, toilet paper, paper towels, foil, plastic food wrap, and garbage bags. These costly products help to offset the limited income of HIV positive persons accessing services at the Food Bank.

Funding

The total TCHHS/VS investment in the Food Bank program from October 1, 2014 through September 30, 2015 was $62,500. This investment comprised 22.9% of the total program budget. TCHHS/VS also funds the Mpowerment/The Q Austin and the Non-Medical Case Management programs, which are both described later in this report.

AIDS Services of Austin

Food Bank

Eligibility Criteria

The target population for the Food Bank program at AIDS Services of Austin (ASA) is low-income (i.e., annual income at or below 150% of the Federal Poverty Income Guidelines) individuals living with HIV/AIDS disease who reside in Travis County and who are case managed at ASA or a partnering AIDS service organization. Preference is given to individuals who are symptomatic with HIV/AIDS.

AIDS Services of Austin: Food Bank

The Food Bank program met the targeted range of performance for all measures. Staff reported that a client satisfaction survey typically occurs once per year through the City of Austin HIV Resources Administration. However, the City did not conduct a client satisfaction survey during the contract year, so AIDS Services of Austin conducted their own satisfaction survey. More clients took the survey than projected (see the outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	375	380	99%
Number of units delivered to unduplicated clients (unit of service equals food and hygiene products)	4,378	4,719	93%
Outcomes			
Percentage of clients surveyed who report satisfaction with quality of services	98% (159/163)	90% (81/90)	108%

AIDS Services of Austin

Mpowerment/The Q Austin

Program Description

Mpowerment is a community-level HIV prevention intervention for young men who have sex with men (MSM) designed to address social determinants (e.g., stigma, homophobia, isolation, lack of social norms around safer sex, lack of vulnerability, etc.) that continue to contribute to rising morbidity in the MSM populations. The Mpowerment program, referred to in the community as "Q Austin," implements the curriculum of the Mpowerment national model's evidence-based prevention education and outreach service approaches. The program offers a variety of support groups, psycho-educational groups, social events, and community involvement for MSM engaging in risky behaviors. Mpowerment takes a multi-level approach toward developing and supporting a gay-positive community where peers influence safer sex messages. To achieve this goal, the intervention relies upon young gay volunteers and peers to assist in providing HIV prevention messages to MSM ages 18-29 through social media, themed social outreach events, and relevant discussion groups for participants. Program activities include:

- Outreach: Formal outreach is conducted by outreach teams and includes interactive HIV prevention activities, online outreach, and use of social media in disseminating safer sex messages. Informal outreach is conducted by peer volunteers to promote HIV testing and safer sex to establish safer behaviors as the community norm. Peer outreach may consist of targeting groups of young men accessing settings frequented by young gay and bisexual men.
- Small group sessions: Below the Belt groups are peer-led, one-time meetings that last about three hours and focus on identified factors that contribute to unsafe sex among gay/bisexual men. This group occurs three times per month and seeks to recruit unduplicated MSM contacts for one-time participation. "The Whole Package" weekly topic-based support group and the "QPoz" peer-led support group for clients who are HIV positive are also available.
- Social events: Events create a positive venue for community building and safer sex promotion, and offer an alternative to the gay bar scene. Large events include dances, pool parties, and fashion shows, while smaller events include weekly video parties, sports activities, and field trips.
- Core Group: The Core Group is comprised of MSM peers ages 18-29 that are the decision-making body of the project. These men meet two times a month to design and implement all project activities with oversight from project staff.
- Ongoing publicity campaign: The campaign includes articles and advertisements in newspapers; a Q Austin website; social networking sites such as Facebook and Twitter; e-mails and weekly texts to interested participants; and "word of mouth" among Core Group members, volunteers and Q program participants within their informal social networks.

AIDS Services of Austin

Mpowerment/The Q Austin

Funding

The total TCHHS/VS investment in the Mpowerment/The Q Austin program from October 1, 2014 through September 30, 2015 was $135,000. This investment comprised 47.1% of the total program budget. TCHHS/VS also funds the Food Bank and the Non-Medical Case Management programs, which are both described in this report.

Eligibility Criteria

The program's target population includes African American, Latino, and White MSM, ages 18 to 29. However, all MSM that are in this age group of any race/ethnicity are eligible. Outreach is conducted in ZIP codes that are identified by the Austin/Travis County Health and Human Services Department as High-risk Zones for HIV/AIDS along with ZIP codes where MSM congregate via social venues: 78701, 78702, 78703, 78704, 78705, 78745, 78741, 78723, 78724, 78753, 78758, 78744, 78732, and 78752. Co-morbidities for this population include sexually transmitted diseases and Hepatitis A, B, and/or C. Substance use, such as injection drug use and substance abuse with alcohol, prescription medications, cocaine, and methamphetamines, also influence this population's risk behaviors.

AIDS Services of Austin: MPowerment/The Q Austin

This program exceeded goals for all but one performance measure. Staff noted that The Q has been successfully implementing the Core Group component of the intervention through innovative social media outreach as well as bar zap and event outreach. While many Core Group volunteers are duplicated participants, existing members are encouraged to bring in new potential members to expand the social networks that are reached through the program (see the first output).

Staff explained that they continually work at engaging young men in the single dose curriculum of safer sex. However, staff were unable to deliver the August Below the Belt session as there were not enough participants; this led to fewer men attending a Below the Belt session than projected (see the second output). With school out, summer months tend to be slower and it is more challenging to recruit during this time of the year. The Q had an Events Specialist vacancy, which also reduced the potential unduplicated audience for Below the Belt. Recruitment continues to be challenging with competing priorities for young gay men, particularly those who have not been to The Q before and may not understand the purpose or nature of the program. To address this issue, the program continues to host Below the Belt sessions off-site once a quarter (in collaboration with student organizations at The University of Texas) in addition to the monthly meetings at The Q to makes attendance easier.

In the last quarter of the year, The Q hosted another successful Queer Art Show. With this event and other regular small events like Q Book Club and Queer Yoga, the Q was able to report an increase in social event participants (see the third output). The Q Austin also added more bar outreach by partnering with AIDS Services of Austin testing staff and delivered a successful Baywatch-inspired outreach presence at the Austin Pride Festival and Austin Pride Parade. The Q's "Gaywatch" team of safer sex lifeguards impressed the crowds and staff/volunteers were able to collect more outreach data than ever before at this type of event (see the fourth output).

Finally, staff reported that they exceeded goals for the number of social event participants that report online outreach as their source of referral (see the third outcome) because of an expanded survey effort that captured responses from more attendees at events, as well as people who attend regularly-scheduled testing days hosted at The Q.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of Core Group participants (duplicated)	463	139	333%

AIDS Services of Austin: MPowerment/The Q Austin

Performance Goals and Results

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Number of unduplicated men who attend one Below the Belt session	76	102	75%
Number of social event participants	1,956	1,550	126%
Number of outreach activity participants	2,984	2,700	111%
Outcomes			
Percentage of men who attend a Below the Belt session and report a HIV risk reduction strategy they feel they can attempt when sexually aroused	78% (59/76)	75% (76/102)	104%
Percentage of men who attend a Below the Belt session and report a greater knowledge of their individual risk factors	84% (64/76)	80% (82/102)	105%
Percentage of surveyed social event participants that report online outreach as their source of referral	81% (324/402)	70% (271/387)	115%

AIDS Services of Austin

Non-Medical Case Management

Program Description

The Non-Medical Case Management program links clients to primary medical care and psychosocial, legal, financial, and other support services and coordinates and advocates for needed services. The goals of the Non-Medical Case Management program are achieved by:

- Providing eligibility screening and ongoing assessment to HIV positive individuals in order to link them to appropriate services and ensure clients receive the optimal benefits that they are eligible for;
- Facilitating the intake process for individuals eligible for the Non-Medical Case Management program and referring individuals to the most appropriate HIV case management services in the community;
- Assuring that HIV positive individuals have access to, enter into, and remain in primary HIV medical care in order to improve and maintain health;
- Linking HIV positive individuals to social and other support services in order to assist clients in remaining in primary HIV medical care;
- Providing ongoing eligibility and benefit screening to ensure that case managed clients maintain access to or become enrolled in eligible assistance programs and services;
- Working with clients accessing Health Insurance Continuation services to help them to maintain private insurance to ensure clients maintain access to primary medical care and have access to HIV related medications through either private insurance or other public benefits; and
- Working with clients to help them meet individualized service plan goals, and increase self-sufficiency by addressing barriers to client needs through advocacy, assisting in applying for social and primary medical services, and teaching clients the appropriate skills for successful self-advocacy and treatment adherence.

Funding

The total TCHHS/VS investment in the Non-Medical Case Management program from October 1, 2014 through September 30, 2015 was $193,937. This investment comprised 54.7% of the total program budget. TCHHS/VS also funds the Food Bank and the Mpowerment/The Q Austin programs, which are both described earlier in this report.

AIDS Services of Austin

Non-Medical Case Management

Eligibility Criteria

To be eligible for the Non-Medical Case Management program, clients must be HIV-positive, a resident of Travis County, and willing to work on HIV service plan goals. The target population is all people residing in Travis County and living with HIV disease. While most clients are at or below 200% of the Federal Poverty Income Guidelines (FPIG), there are currently no income eligibility requirements in order to receive services.

AIDS Services of Austin: Non-Medical Case Management

AIDS Services of Austin (ASA) exceeded both outcome goals but fell short of targets on one output measure. Staff explained that they served a higher than projected number of clients (see the first output) due to existing clients continuing in the program from the prior year as well as the addition of 148 new clients over the course of this contract year.

The program began the year with two key staff vacancies and ended with a 1.5 FTE vacancy in the last two months of the year, resulting in fewer units of service provided (see the second output) and a wait list for services. ASA's priority is to always remain client centered, and staff work to ensure the needs of clients are not interrupted during times of staffing transitions. ASA had anticipated utilizing an eligibility screener to work directly with clients on the completion of required eligibility documents biannually. However, as the agency "piloted" this measure, they learned that clients were better served by the case manager directly, as the eligibility review allowed for the case manager to provide a full review of what community benefits the client may be eligible for. Additionally, the time spent with the client and case manager allowed them to complete service plans and update assessments. Staff felt that combining the visits created a more uniform process that respects the client's time and ability to travel to the agency. ASA instead has utilized the eligibility screener to support the case manager in administrative tasks, such as copying and scanning documents into the electronic database, filing, and file organization. This allows for the case manager to support the direct client service and meetings, but does not fall within the guidelines of what are allowable units of service. Despite these vacancies, the program successfully assisted clients in progressing on their service plan objectives (see the first outcome) and receiving primary medical care (see the second outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	346	300	115%
Number of units of service	14,354	19,032	75%
Outcomes			
Percentage of clients making progress on service plan objectives	99% (343/346)	80% (240/300)	124%
Percentage of clients receiving primary medical care based on the "In-Care Verification Form" (ICVF)	96% (332/346)	85% (255/300)	113%

Austin/Travis County Health and Human Services Department

Public Health Interlocal

Program Description

The Public Health Interlocal with the Austin/Travis County Health and Human Services Department (HHSD) provides public health services through a number of programs: African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell. Information on each program is provided in the following pages.

Funding

The total TCHHS/VS investment in the Public Health Interlocal from October 1, 2014 through September 30, 2015 was $3,368,475.

Eligibility Criteria

Eligibility criteria vary by program. Please see the individual program pages for eligibility criteria information.

Austin/Travis County Health and Human Services Department

Public Health Interlocal: African American Quality of Life Unit

Program Description

The African American Quality of Life Unit works to reduce health disparities through community outreach and partnership. The program provides community-based health screenings as well as information and referrals related to issues presented or detected by screenings. Services include blood pressure exams, blood sugar exams, pregnancy exams, and referrals to support services. Community-based services are provided from a metro-sized mobile van fitted with exam rooms. Locations are selected by a ZIP code analysis of areas with high morbidity and mortality rates. Van staff are often joined by other service providers from Austin/Travis County HHSD as well as representatives from the private sector. These representatives set up tents around the mobile van to provide information and education to participants on a range of health issues and services. Information is also distributed via fliers and radio announcements.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Eligibility Criteria

Program services are free to all residents of Travis County. Youth under 18 years old need parental consent for screenings.

Austin/Travis County HHSD: African American Quality of Life Unit

The African American Quality of Life Unit met the targeted range of performance for all measures. Staff noted that the unit has had more of a presence at community events, resulting in an increase in the number of clients served (see the second output). Further, a concerted effort has been made to improve the quality of services being offered on the mobile van, particularly with client education and referrals, resulting in an increase of favorable survey results (see the outcome). Staff also made an effort to increase the number of mobile van clients that complete survey cards.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of units of preventative health services provided by AAQL	4,412	4,500	98%
Number of clients served by the AAQL Prevention Team Initiative	3,427	3,000	114%
Outcomes			
Percentage of clients that report improved awareness of health status resulting from the AAQL Prevention Team Initiative	99% (1,061/1,070)	95% (285/300)	104%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Austin Healthy Adolescent Program

Program Description

The Austin Healthy Adolescent (AHA) program works to positively impact the high rates of teen pregnancies and sexually transmitted infections through the dissemination and support of peer-to-peer education, youth engagement, and youth leadership. The goal of the AHA program is to increase the number of Travis County youth who are active decision makers engaged in improving their own health and the health of their communities. AHA achieves this by providing opportunities for youth to engage in leadership, increasing the awareness of Travis County youth concerning their personal health and the health of their community, and building the capacity of youth service providers to implement best practices in youth leadership programming.

The program provides direct sexual health education and skill development using the Cuidate curriculum for youth in the Neighborhood Conference Committee as well as youth enrolled in programming in the City of Austin Recreation centers and youth living in the Gardner Betts Juvenile Justice Center. The peer-to-peer health education model utilizes adolescents as community health workers to improve the sexual and reproductive knowledge of their peers. A full-time professional health educator works with a team of peer health educators to implement the six lessons of the evidenced-based sexual health curriculum.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Austin Healthy Adolescent Program

Eligibility Criteria

This program serves Travis County youth ages 12 to 17. The majority of youth served come from low to moderate income neighborhoods in central and eastern Travis County. Youth who have been placed into Travis County's Neighborhood Conference Committee as an alternative to incarceration in the Gardner Betts Juvenile Justice Center are served through the program, as well as youth participants in recreation centers and youth serving time in the Gardner Betts detention facility.

Austin/Travis County HHSD: Austin Healthy Adolescent Program

The Austin Healthy Adolescent Program exceeded goals for the number of sexuality education and skill development encounters provided to youth. Staff explained that more youth attended events than anticipated due to strong community outreach. Events included Peer to Peer Health Educator trainings and workshops, Reagan High School Black History Month, Live in Peace Week, and a Diversity Leadership Conference. The Young Artists Project and Youth Adult Council also hosted a Positive Youth Development Summer Concert Series.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of sexuality education and skills development encounters provided to youth ages 12-17	1,947	1,200	162%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Chronic Disease Prevention and Control

Program Description

The Chronic Disease Prevention and Control program strives to inspire people to take steps to adopt healthy lifestyles through promoting and modeling healthy behaviors, preventing and managing chronic disease, and promoting policy, systems, and environmental change. Program components include:

- Healthy Places, Healthy People-Community Transformation addresses the needs of Austin/Travis County with special focus on the populations that experience health disparities. Programs are implemented across multiple sectors addressing where people work, play, learn and live.
- Tobacco Prevention and Control efforts subscribe to the Centers for Disease Control model for comprehensive tobacco control programs with an emphasis on policy, systems, and environmental changes. Program goals are: prevent youth initiation of tobacco, increase cessation among youth and adults, ensure compliance with all tobacco laws, eliminate secondhand smoke, reduce health disparities, and ensure sustainability of the community coalition.
- Community Diabetes Program implements eight community walking/exercise groups through Walk Texas, provides 24 Diabetes Empowerment Education Program classes and 12 Road to Health diabetes prevention classes, and provides continuing education for 130 health care providers in the Travis County community.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Eligibility Criteria

Since strategies address policy, systems, and environmental changes, the target population is county-wide. However, all service-based strategies are targeted to those individuals, primarily adults and youth ages 5-17 years old, who suffer disproportionately from chronic disease or risk factors for chronic disease. Strategies are targeted in areas of Travis County with high rates of health disparities, and include more low socioeconomic health status individuals.

Austin/Travis County HHSD: Chronic Disease Prevention and Control

The Chronic Disease Prevention and Control program exceeded goals for public health activities (see the first output) and public health encounters (see the second output) but fell short of targets for community changes (see the third output). Staff noted that there were significant activities due to Housing Authority of City of Austin tobacco-free presentations as well as diabetes education and physical activity programs to meet Department of State Health Services grant requirements and implement Diabetes 1115 Waiver milestones. However, the loss of Community Transformation Grant funding led to fewer community changes.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of Public Health Activities (i.e., a one-time, planned learning experience based on sound theories that provide individuals, groups, and communities the opportunity to acquire information and the skills needed to make quality health decisions)	204	120	170%
Number of Public Health Encounters (i.e., persons reached through Public Health Activities)	3,350	2,000	168%
Number of Community Changes (i.e., a new or modified program, practice, environmental, systems, or policy in the community created through working with community partners, agencies/organizations, or other Austin/Travis County HHSD programs which may last six months or longer)	11	30	37%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Communicable Disease

Program Description

The Communicable Disease program provides Sexually Transmitted Disease (STD), Tuberculosis (TB), HIV prevention/outreach education, and refugee health screening services to prevent disease morbidity and to protect the community from the spread of these communicable diseases.

STD comprehensive clinical services include testing for HIV (rapid testing), syphilis, gonorrhea, and chlamydia. If a client presents with symptoms of herpes, testing is available at no additional cost. Treatment is provided at no additional cost for syphilis, gonorrhea, chlamydia, and genital warts (HPV). HIV and STD testing is also provided in satellite locations throughout the city and county to make testing accessible to all residents, and the mobile outreach van targets areas with high-risk populations.

Comprehensive TB clinical services include medical evaluation, on-site x-ray and treatment for latent TB infection and active TB disease at no charge. Field staff provide directly-observed therapy, where all clients on treatment for active TB and those suspected of having active TB are observed taking their medications by a public health staff person. A weekly TB screening clinic is conducted for the general public one afternoon a week. If a clearance chest x-ray is needed for entry into a rehab facility or for immigration applications due to history of a positive TB screening test and/or previous treatment, a clearance x-ray can also be provided.

Public health follow-up for newly-identified HIV, syphilis, and TB cases/suspects is conducted by Disease Intervention Specialists and TB Contact Investigators. Follow-up activities include interviewing clients to obtain necessary information on potentially-exposed individuals in order to conduct proper contact investigations, decrease morbidity, and reduce/prevent the spread of disease.

Social work intervention is provided on a case-by-case basis for STD and TB clinic clients. HIV prevention case management is provided for individuals identified as HIV positive who continue to engage in high-risk behavior, and HIV medical case management is available for individuals who are identified as being HIV positive and who may be homeless, pediatric cases, or pregnant women.

Public Health Interlocal: Communicable Disease

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Eligibility Criteria

The STD clinic and HIV outreach prevention serves all clients 13 years of age and older. The TB clinic serves all clients in the community requiring evaluation for TB infection and active disease. Individuals are not required to provide proof of residency or income, and no one is refused services due to their inability to pay for the services.

Austin/Travis County HHSD: Communicable Disease

All Communicable Disease program measures fell within the targeted range of performance. Staff reported that they had a vacancy and needed time to train a new social worker, as well as staff spring break absences and illness, which caused a small decrease in units of social work service provided during the second quarter of the year (see the fourth output).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of STD patient visits seen in clinic	13,722	13,000	106%
Number of TB clinic patient visits	9,808	10,000	98%
Number of STD tests provided in outreach settings	2,151	2,000	108%
Number of units of social work service provided to HIV clients (units are measured in 15 minute increments)	23,164	24,000	97%
Outcomes			
Percentage of clients who come into the STD clinic who are examined, tested and/or treated the same day	97% (13,134/13,594)	90% (13,000/14,444)	107%
Percentage of TB cases completing therapy in 12 months	100% (45/45)	100%	100%
Percentage of TB contacts evaluated	85% (1,015/1,189)	90%	95%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Comprehensive Public Health Planning

Program Description

The Austin/Travis County Health and Human Services Department (HHSD) has coordinated two out of three interconnected phases of public health planning in Travis County, creating a Community Health Assessment and a Community Health Improvement Plan. A Community Health Assessment (CHA) engages community members and local public health system partners to collect and analyze health-related data from many sources, informs community decision-making, prioritizes health problems, and assists in development and implementation of community health improvement plans. A Community Health Improvement Plan (CHIP) is an action-oriented plan that outlines the priority community health issues based on CHA findings. The community and partners work together to identify how issues will be addressed and how to measure progress. The long-term goal is to ultimately improve the community's health.

For the third phase of public health planning, Austin/Travis County HHSD, along with its partners, stakeholders, and community members, coordinated the Community Health Improvement Plan Implementation in order to:

1. Engage community members on health issues.
2. Address health disparities in communities.
3. Differentiate needs in various communities.
4. Enable leaders to allocate resources for the health priorities based on the community needs.
5. Assist local public health system to focus on programs/services that address community health needs.
6. Meet prerequisites for Public Health Accreditation.
7. Strengthen viability to successfully compete for funding opportunities.
8. Enable collaboration with partners and create opportunities for new partnerships.
9. Promote action planning among partners and stakeholders to achieve healthy communities and healthy behaviors.

Austin/Travis County HHSD activities related to CHA/CHIP include:

- Serve as a coordinator of the CHIP Implementation activities and information provider that helps CHIP partners and stakeholders optimize their resources;

Public Health Interlocal: Comprehensive Public Health Planning

- Coordinate CHIP Core Coordinating Committee meetings where partners and stakeholders will monitor and manage the CHIP Implementation;
- Coordinate CHIP Steering Committee meetings where executives representing partner agencies and stakeholders will review, discuss, and approve CHIP Implementation activities;
- Coordinate CHIP Community meetings where community members, partners, and stakeholders will review the CHIP and progress on the CHIP;
- Provide in-person training and presentations at conferences and/or meetings related to the CHIP Implementation;
- Facilitate meetings with community and partner work groups;
- Coordinate CHIP Implementation efforts in order to satisfy prerequisites for the Public Health Accreditation;
- Provide Travis County with ongoing written updates of the CHIP Implementation process, including an Annual CHIP Report on progress; and
- Share research, data, and information through the Austin/Travis County HHSD website, community presentations, media/press releases, and other appropriate venues.

Planning and Accreditation activities include:

- Provide Travis County with plans and/or progress of Accreditation including Workforce Development, Communication, Performance Management, Quality Improvement, and Planning;
- Provide presentations at conferences and/or meetings related to Accreditation and the Essential Public Health Services; and
- Share best practices, quality improvement, models, and tools with Travis County on any requested items pertaining to Accreditation and Essential Public Health Services.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Comprehensive Public Health Planning

Eligibility Criteria

The Community Health Improvement Plan (CHIP) Implementation does not provide direct social services to clients. It provides coordination for the CHIP implementation efforts and facilitates a professional forum for creative and collaborative problem solving, inclusive community participation, and community consensus building.

Preparing for Public Health Accreditation requires the cooperation and participation of representatives across Austin/Travis County HHSD and emphasizes the collaboration with partners and engagement with community members. While Accreditation preparation is administrative, the plans, policies, procedures, preparedness, and capacity that is strengthened will benefit the community and taxpayers.

Austin/Travis County HHSD: Comprehensive Public Health Planning

The Comprehensive Public Health Planning program met or exceeded the targeted range of performance across all measures. Staff reported that the Core Coordinating Committee convened more frequently this year than anticipated (see the first output). The Core Coordinating Committee met every month except for June, which was skipped because of the CHIP Year 3 planning Summit.

The number of accreditation presentations and/or communications to elected officials was higher than projected (see the fourth output) for two reasons: 1) the brand new 10–district City Council received their first Accreditation presentation in September 2015, and 2) due to the Accreditation Site Visit in October 2015, Council Members Houston and Garza volunteered to participate in a required governing entity meeting with the Site Visitors. As such, the Council Members received a letter and invitation to participate in a meeting with the Site Visitors, resulting in additional communication.

Attendance at the CHA/CHIP community forums and summit were greater than anticipated. Because the turnout was larger, more surveys were completed (see the first outcome). This allowed for more identifiable changes/proposed recommendations to be made; however, the rate of changes/recommendations made remained as expected. Finally, the turnout rate to Steering Committee and Core Coordinating Committee meetings was greater than anticipated (see the second outcome). Staff also developed a delegate system which ensures that even when executives are unable to attend, they may delegate to someone else from their organization.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
CHA CHIP Outputs			
Number of Core Coordinating Committee meetings convened	11	8	138%
Number of Steering Committee meetings convened	2	2	100%
Number of CHA CHIP engagement opportunities within a setting open to community members	4	4	100%
Accreditation Outputs			
Number of Accreditation presentations and/or communications to elected officials	5	2	250%
Number of partner engagements for planning or networking/collaboration opportunities	2	2	100%
Number of plans, presentations, and updates given on 5 focus areas: Communication, Performance Management, CQI, Planning, and Workforce Development	13	12	108%

Austin/Travis County HHSD: Comprehensive Public Health Planning

Performance Goals and Results

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outcomes			
Percentage of identifiable changes/proposed recommendations made based on surveys completed at CHA/CHIP community forums/events	19% (10/54)	20% (2/10)	93%
Percentage of entities represented at Steering Committee and Core Coordinating Committee meetings compared to how many entities make up each group at each meeting	86%	60%	143%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Environmental Health Services

Program Description

Environmental Health Services staff administratively perform inspections and investigate complaints to ensure compliance with various state laws and local codes in the City of Austin, unincorporated areas of Travis County, and other smaller municipalities throughout Travis County. Environmental Health Services programs include:

- Consumer Health: Staff Sanitarians inspect restaurants, grocery stores, food manufacturers, mobile food vendors, temporary event food vendors and custodial care foodservices. Requested annual environmental health and safety inspections of custodial care facilities are also conducted.
- Environmental Health: General environmental complaints involving improper disposal of solid waste, high grass and weeds, animal pens, junk and abandoned vehicles, substandard buildings, and other public health and nuisance issues are investigated and compliance actions taken when required.
- Rodent and Vector Control: The program performs routine vector (mosquito) control and provides consultative outreach to residents and community groups.
- Customer Service: City of Austin Customer Service support staff provide all of the administrative services and maintenance of the programs including permit application intake, complaint and request processing, reception services, cashiering, data entry, and records management.

Routine and requested inspections, and complaints investigated by the programs include:

- Retail food establishment permitting, inspection, and investigations;
- Food products establishment permitting, inspection, and investigations;
- Foodborne illness and food sanitation investigations;
- Food enterprise and public pool plan review and approval;
- Public and semi-public swimming pools and spas permitting, inspection, and investigation;
- Custodial care environmental health and safety inspections;
- Junkyard and automotive wrecking and salvage-yard permitting, inspection, and investigations;
- Public nuisance complaint investigations and abatement;
- Application of routine mosquito control measures in Travis County; and
- Miscellaneous health-related inspections, including mass gatherings, flea markets, farmers markets, and others.

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Environmental Health Services

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Eligibility Criteria

Environmental Health Services provides services to the following:

- Any persons operating or patronizing food enterprises located in Travis County that store, prepare, package, serve, vend, or otherwise provide food for human consumption, whether it is conducted in a mobile, stationary, temporary or permanent facility or location;
- Travis County residents using public or semi-public pools located in Travis County;
- Travis County residents submitting complaints concerning any general environmental or public health nuisance occurring within Travis County;
- Travis County residents wanting to adopt or foster a child, and day care operators; and
- Travis County residents requesting consultation and education on rodent and mosquito control measures.

Austin/Travis County HHSD: Environmental Health Services

The Environmental Health Services program had mixed performance results. Staff noted that they have seen a reduction in the number of mobile vending permits issued annually as the industry levels off and new regulations (fire inspections) are introduced, which impacted the number of renewal and routine inspections conducted (see the second output). Staff also explained that changes to the mosquito spraying policy and how surveillance activities have been calculated resulted in a significant decrease in the number of field activities counted (see the third output).

In addition to a lower number of field services, as described above, the Rodent and Vector program has increased efforts to emphasize education regarding non-chemical methods of reducing rodents and mosquitos. Control measures are only used after an assessment deems them necessary (see the third outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of food permits issued	12,779	14,000	91%
Number of mobile vending permit renewal and routine inspections conducted	1,586	2,200	72%
Number of field services conducted in the Rodent and Vector program	4,064	7,500	54%
Number of general environmental complaint investigations	607	600	101%
Outcomes			
Percentage of public pools and spas in compliance	91% (1,670/1,837)	95% (1,830/1,926)	96%
Percentage of food establishment inspections resulting in a score of 80 or greater	91% (9,382/10,284)	90% (8,989/9,988)	101%
Percentage of field services conducted that result in control measures being applied in the Rodent and Vector program	4% (160/4,064)	40% (3,000/7,500)	10%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Epidemiology and Health Statistics Unit

Program Description

The Epidemiology and Health Statistics Unit (EHSU) protects the public health of residents and visitors of Travis County through a number of activities including epidemiologic surveillance and investigation, data collection and analysis, toxicological evaluation and risk assessment, and emergency preparedness and response planning. EHSU supports Travis County by:

- Analyzing health data to examine the burden of disease within the county for a variety of diseases, conditions and risk factors;
- Providing epidemiologic support for disease and outbreak investigations, which includes study design, survey design, data collection, analyses and interpretation, and report dissemination;
- Identifying, monitoring, and preventing the spread of disease in the community through the implementation of preventative measures and interventions;
- Conducting epidemiologic response and preparedness planning activities related to diseases and conditions, and public health disasters (both natural and man-made) such as hurricane response, response to weapons of mass destruction, extreme weather events, and disease pandemics;
- Developing, revising, maintaining, and exercising public health emergency response plans; and
- Conducting and providing toxicological evaluations, consultations, and recommendations for environmental permitting, monitoring and enforcement activities to ensure the protection of human health.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Public Health Interlocal: Epidemiology and Health Statistics Unit

Eligibility Criteria

Persons served by EHSU are all residents or visitors of Travis County. For some emergency response plans, pre-established agreements exist for response activities (e.g., mass sheltering for citizens of Galveston County, TX). The EHSU supports follow-up services of all employed and volunteer first responders exposed to blood and body fluids resulting from transport exposures.

This program met or exceeded all but one performance goal. Staff explained that the decrease in rabies exposure consultations (see the first output) was due to the implementation of a new process which weeds out reports that have animals in quarantine and thus do not require nurse follow-up/consultations. The large number of cases investigated by Epidemiology and Health Statistics (see the second output) is due to an increased population that corresponds with an increased number of case reports, including Shigella and Cyclospora, and active case finding efforts. Staff explained that the larger than projected number of bioterrorism drills conducted (see the third output) was due to inclusion of real-time events related to investigation of persons to rule out Ebola. The number of permits reviewed (see the fourth output) greatly exceeded projections. Staff noted that this result is due to population growth and an increased number of companies coming into the Austin/Travis County area.

Staff reported that a vacant training coordinator position, continued decreases in funding, as well as unfunded Ebola response and direct active monitoring of travelers, all required use of preparedness staff to accomplish and took away from their usual duties; this resulted in a smaller number of emergency plans overall, although the percentage of plans reviewed and updated was within the range of expected performance (see the first outcome). The decreased incidence rate of vaccine-preventable diseases was due to prevention (vaccination) and control (treatment of contact) measures which resulted in fewer pertussis cases this year compared to previous years (see the fourth outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of potential human rabies exposure consultations provided	1,701	2,500	68%
Number of cases investigated by Epidemiology and Health Statistics	2,115	1,500	141%
Number of emergency bioterrorism drills conducted	11	8	138%
Number of air, hazardous waste, and water quality permits reviewed	92	30	307%
Outcomes			
Percentage of emergency plans reviewed and updated	86% (6/7)	92% (11/12)	94%
Percentage of all foodborne illnesses investigations initiated within 3 hours of notification	91% (67/74)	95%	95%
Percentage of all infectious diseases reported that result in intervention strategies implemented	82% (2,115/2,579)	75%	109%

Austin/Travis County HHSD: Epidemiology and Health Statistics Unit

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Incidence rate per 100,000 population of reported cases of Measles, Pertussis, Mumps and Rubella in community served	15	25	Met Goal

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Immunizations

Program Description

The Immunizations program works to improve immunization coverage levels and to prevent diseases which are vaccine-preventable. Program services include:

- Shots for Tots/Big Shots: Two immunization clinics located within (and in close proximity to) high need/low income ZIP codes serve children and adults.
- Information, referral and appointment phone line: The program accepts between 16,000 and 18,000 phone calls annually for appointments, information, and referrals pertaining to immunizations for Travis County.
- Population assessment and audits: The program regularly audits immunization records at private and public childcare centers and schools assigned annually by the Texas Department of State Health Services. The team reviews over 10,000 immunization records annually and provides a follow-up to each audited facility. Additionally, the team provides technical assistance and educational information to clients as needed or requested.
- Public education and awareness: The program supports over 15 community public health fairs and significant functions annually and collaborates with partners to raise awareness about the importance of immunizations and vaccine preventable diseases.
- High risk population vaccinations: The program provides on-site direct service to very high risk and high need clients seeking care, in collaboration with the Austin/Travis County HHSD STD clinics.
- Perinatal Hepatitis B prevention: The program provides specific harm reduction outreach to pregnant mothers at risk for transmitting Hepatitis B to their children. A Nurse (RN) Senior provides case management to clients in addition to providing technical assistance and educational sessions to local hospitals.
- Vaccines for Children: This federal program guarantees vaccine availability for uninsured and low-income children. Vaccines are distributed to enrolled providers free of charge, and Austin/Travis County HHSD provides technical assistance and support to 100 Travis County Vaccines for Children providers. The program provides special training and assistance to ensure proper storage and handling techniques to providers.
- Mass Flu Clinics: The program plans and implements on average five mass flu or strike-team clinics throughout Travis County. Two of these clinics are targeted toward "Travis County only" population centers (i.e. Del Valle and Pflugerville Fire Hall) located within the unincorporated areas.

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Immunizations

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Eligibility Criteria

All eligible clients in Travis County are potentially served through the Shots for Tots and Big Shots clinics and Vaccines for Children (VFC) community providers. Eligibility guidelines follow the Texas Department of State Health Services VFC eligibility requirements.

Austin/Travis County HHSD: Immunizations

The Immunizations program met two of their three performance measure goals. Staff reported that the total number of children seen at Shots for Tots is slightly higher over the past two years; however, children overall may be being seen in their primary care offices versus Shots for Tots clinics, resulting in a smaller number of client visits (see the first output). Staff also noted that Austin ISD has resigned as a Vaccines For Children provider, which will likely increase the number of children served in 2016 and beyond.

The number of adults seen at Big Shots clinics (see the second output) continues to exceed goals, which staff believe is likely due to the historically underserved vaccination services offered to adults as well as additional vaccinations being made available for low/no cost through the Department of State Health Services.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of client visits (children) at Shots for Tots clinics	7,541	10,000	75%
Number of client visits (adults) at Big Shots clinics	2,484	2,000	124%
Outcomes			
Percentage of referred Perinatal Hepatitis B clients who receive follow-up education within 60 days of referral	100%	100%	100%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Injury Prevention

Program Description

The Injury Prevention program strives to reduce the frequency and severity of injuries by adopting evidence-based programs and by assisting community partners with incorporating injury prevention strategies into their ongoing efforts. Services include:

- Car Seats: Child Passenger Safety Fitting Stations provide free car seats to clients who need them. The stations are held at Austin/Travis County HHSD Neighborhood Centers, which provide the site and staff for the monthly event. The program also conducts classroom presentations on car seat safety and conducts a 32–hour Child Passenger Safety Certification training to increase the number of Child Passenger Safety Technicians in Travis County.
- Bike Safety: The program staff is certified by the League of American Bicyclists as a league cycling instructor and conducts Youth Instructor Training quarterly to school staff, nonprofits, agencies, and individuals. The program also conducts bike safety classes and bike skills rodeos for elementary schools.
- Infant Suffocation: The program staff is an active participant in the Safe Kids Austin Safe Sleep Task Force, which analyzes infant suffocation deaths to determine exact causes and identify prevention activities.
- Drowning Prevention: The program staff is an active participant in the Central Texas Water Safety Coalition, which completes analysis of drowning deaths to determine exact causes and identify prevention activities.
- Child Fatalities: The program works with the Travis County Child Fatality Review Team, which reviews all child deaths in Travis County.
- Safe Kids Austin: The program was a founding member of the Coalition, which focuses on bringing together stakeholders for Travis and surrounding Counties to identify specific causes of unintentional injuries and provides networking opportunities with partner agencies to strategize and implement injury prevention activities for children.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Injury Prevention

Eligibility Criteria

All Travis County residents are eligible.

Austin/Travis County HHSD: Injury Prevention

The Injury Prevention program met one of its two performance goals. Staff explained that the number of health promotion and education encounters (see the first output) was lower than expected due to the shift of the program's focus to child passenger safety events where attendance is somewhat unpredictable. Additionally, these events require 30 minutes for each car seat checked, so clients are receiving a longer "dose" than encounters made at a health fair. This shift also resulted in the program not participating in a number of events that would have accounted for a substantial number of contacts. However, the number of health promotion/health education activities or programs conducted (see the second output) is higher than expected due to the expansion of child passenger safety events being held in Austin. These events included multi-day child passenger safety technician trainings that counted as an activity each day.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of health promotion and education encounters in the area of injury prevention (i.e., the number of individuals reached in events; each person visiting the table and getting information is an encounter)	1,799	2,500	72%
Number of health promotion/health education activities or programs conducted and/or facilitated in the area of injury prevention (i.e., a one-time, planned learning experience based on sound theories that provides individuals, groups, and communities the opportunity to acquire information and the skills needed to make quality health decisions)	46	35	131%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Office of Vital Records

Program Description

The Office of Vital Records (OVR) is the Local Registrar for the City of Austin. The Registrar of Vital Records ensures proper registration of every birth, death, and fetal death within the city limits of Austin to record occurrence of event and to capture demographic and medical data used in public health planning. The OVR also provides a location alternative to the Department of State Health Services for added customer accessibility in obtaining certified copies of City of Austin deaths and births that occur within the State of Texas.

The OVR registers, archives, and issues certified copies of birth, death, and fetal death records, and reports demographic and medical data for the City of Austin area that falls in Travis, Hays, and Williamson Counties. Supplemental to these duties, OVR offers multi-level technical assistance to the general public as well as social workers in order to facilitate navigating the legal systems associated with the modification and/or proper use of these documents. These systems include issues on paternity, dual citizenship, apostilles, adoptions, amendments, name changes, jurisdictional boundaries, and more. Technical assistance expands to multi-jurisdictional agencies and organizations; some of the most prevalent customers are law enforcement representatives who call for verifications on fraud-related issues.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Eligibility Criteria

The Office of Vital Records office serves the general public without consideration of residency, income level, or age; the medical community; funeral home/mortuary representatives; and city, county, state, and federal agencies and organizations.

Austin/Travis County HHSD: Office of Vital Records

The Office of Vital Records met or exceeded both performance goals. Staff explained that the number of certified copies of death and birth certificates issued (see the first output) exceeded anticipated totals due to an increase in certified birth certificate copies sold to individuals utilizing Matricula Consular cards as part of their identity documentation. Media coverage of issues related to the Matricula Consular card created an awareness of the possibility that the document may no longer be accepted, which would make it more difficult for those individuals to establish identity in order to obtain a birth certificate.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of certified copies of death and birth certificates issued	42,699	36,675	116%
Number of birth and death records registered or amended	28,594	28,580	100%

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Sickle Cell

Program Description

The Sickle Cell Anemia Association of Austin (a subcontractor for Austin/Travis County HHSD) is the only referral organization to provide resources, peer navigation assistance and education to populations affected by sickle cell disease in the Austin/Travis county region. Sickle Cell Anemia Association of Austin staff acts as navigators to help individuals, caregivers, and family members to gain access to resources, respite, newborn sickle cell trait notification, and other support. By educating those affected, along with at risk populations, the program provides resources that are essential to public health. The agency provides services in two categories:

1. Notification, Hemoglobinathy Education and Navigation Services: intake and navigation services, including doctor recommendations and hospital or clinic referrals for treatment; financial assistance for prescription medications, life situation hardships, and bereavement; monthly support group meetings for adults and children; liaison for clients and their medical doctors or nurses; newborn screening notification and education to new parents whose newborns have tested positive for sickle cell trait; sickle cell summer camp opportunities for children; and certified hemoglobinapathy education (in English and Spanish) for parents, individuals, groups, and families about sickle cell disease and sickle cell trait in regards to symptoms, treatment and management.
2. Community Based Education: health education about sickle cell disease and sickle cell trait through facilitation of heath fairs and health presentations to community organizations; and outreach, awareness, and advocacy.

Funding

The total TCHHS/VS investment in the Public Health Interlocal, which includes African American Quality of Life Unit, Austin Healthy Adolescent Program, Chronic Disease Prevention and Control, Communicable Disease, Comprehensive Public Health Planning, Environmental Health Services, Epidemiology and Health Statistics Unit, Immunizations, Injury Prevention, Office of Vital Records, and Sickle Cell, from October 1, 2014 through September 30, 2015 was $3,368,475.

Austin/Travis County Health and Human Services Department

Public Health Interlocal: Sickle Cell

Eligibility Criteria

The Sickle Cell Anemia Association of Austin program is targeted to the City of Austin/Travis County parents of newborns, children, adults and individuals with sickle cell disease, those that carry sickle cell trait, or those who may carry the silent trait. All individuals with sickle cell disease or sickle cell trait are eligible to receive program services.

Austin/Travis County HHSD: Sickle Cell

The Sickle Cell program exceeded all performance goals. The number of clients provided community-based education (see the first output) was larger than projected due to increased educational opportunities and community-based education activities, including presentations at the Southeast Metro Wellness Center, The Elks Club, and the East Travis Metropolitan Park. Staff also participated in the Huston Tillotson Fall Career Expo and Internship Health and community fair, held a "Cell-A-Bration in the Park" event, and partnered with the African American Alliance's community outreach efforts.

Staff reported that there has been an increase in the number of newborns born with sickle cell trait, which contributed to a much higher than projected number of clients with sickle cell trait or sickle cell disease provided with notification and education (see the second output).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients provided with community-based education	2,705	1,813	149%
Number of unduplicated clients with sickle cell trait or sickle cell disease provided with notification and hemoglobinathy education	383	73	525%
Outcomes			
Percentage of unduplicated clients with sickle cell disease or sickle cell trait who were provided with navigation services	95% (363/383)	92% (67/73)	103%

City of Austin Animal Services Office

Animal Services

Program Description

The Animal Services program allows the City of Austin and Travis County to combine resources and capabilities in providing a collaborative animal control enforcement and shelter services program that serves a regional populace in the identification and vaccination of domestic pets, the maintenance of shelter facilities, and the control of animals at large (both domestic and wild). The program has three components:

- Animal Control Services: rabies control activities; training Animal Control and Travis County Sheriff's Office personnel; responding to calls for sick and injured stray animals and transporting those animals to the shelter or after hours emergency clinic for care; conducting dangerous dog investigations and hearings; providing customer service either by telephone or directly to residents who visit the shelter; dispatching personnel to resolve customer complaints/calls associated with enforcement of the "Regulations of Travis County, Texas Governing Animal Control" and referring customers to the appropriate agency when the issues or service request is outside the scope of the regulations or when the service required to resolve the issue is provided by another agency; and providing dispatch services, including management of field resources while in the field, distribution of service requests to field resources, customer service resolution by telephone, filing of citations, and bite report tracking for all reported animal bites requiring rabies quarantine.
- Shelter Services: The Austin Animal Center accepts every Travis County lost animal delivered to the shelter by animal control, emergency service personnel, and those brought in/dropped off by residents. Each animal is provided food, water, shelter, waste management, and veterinary care. Additional shelter services include acceptance and maintenance of animals, quarantine, medical care, vaccinations, sterilization and immunization, euthanasia, and adoption. Sterilization and immunization is performed in the shelter and at clinics in low-income areas of Travis County. Pet owners in low-income neighborhoods can receive free rabies vaccinations and microchip if they are residents of Travis County. A mobile veterinary service provides sterilization services; animals are sterilized and also receive a rabies vaccination and microchip at no cost to the owner. Services are provided in convenient locations within the neighborhood in order to eliminate transportation barriers.
- Prevention Services: education/outreach and prevention programs to impact animal welfare and reduce shelter intake. Programs are designed to improve the conditions and standards of care that animals experience, as well as reduce the number of unwanted animals coming into the shelter. Programs include: responsible pet owner class, providing speakers for education opportunities in neighborhoods (e.g., group meetings, newsletters, church meetings, schools, clubs, etc.), free rabies vaccinations in economically disadvantaged neighborhoods (education about pet responsibility issues and animal welfare issues is offered while conducting the clinic), free sterilization services in east Austin neighborhoods on a weekly basis, and free microchips and identification tags for all Travis County residents so that pets can avoid being impounded at the shelter.

City of Austin Animal Services Office

Animal Services

Funding

The total TCHHS/VS investment in the Animal Services program from October 1, 2014 through September 30, 2015 was $1,494,263.

Eligibility Criteria

The Animal Services program serves residents of and animals within the City of Austin and Travis County. Sterilization and immunization clinics target low-income neighborhoods with large numbers of stray animals. Pet owners in low-income neighborhoods can receive free rabies vaccinations if they are residents of Travis County.

Animal Services met all but one performance goal. Staff explained that the number of citations issued (see the first output) and citations processed to Court (see the second output) both exceeded goals due to a number of factors. Field Services issued more citations for Failure to Quarantine on first contact, rather than giving a set period of time to come into compliance, in order to lessen the impact of multiple activity sequences and contacts that require additional field officer trips; this places the onus on the public to come into compliance by following officer recommendations. Further, in the summer, Improper Care citations were most often processed to court, likely as a result of hotter weather and more witnesses outside to report concerns.

The average response time (see the fourth output) was longer than projected. Staff reported that increasing call volumes outpaced Field Services staffing levels. The first quarter saw an increase in bite cases, which takes longer than average because the victim and dog owner must be located first, and the third quarter saw an increase in the number of stray animal service calls, which can also be time consuming when the officer tries to reunite an animal with its owner in the field versus impounding the animal.

Staff's continued efforts to reunite animals with their owners, including an ongoing lost pet awareness campaign and promotion of free microchips and tags at Austin Animal Center contributed to the rise in the number of animals returned to owner (see the seventh output).

Finally, the program exceeded goals for the number of animals sterilized at community clinics (see the ninth output). Animal Services promoted the free day clinics via staff referrals, media outlets, and social media. An increased focus on trap-neuter-release programs included more spay/neuter surgeries for community cats, and a rabies vaccination clinic held in February also increased the number of sterilizations.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Animal Control Services			
Number of citations issued for violations	2,009	1,300	155%
Number of citations that are processed to Court (as opposed to dropped due to compliance with officer-provided alternatives to Court)	1,447	600	241%
Number of attendees at responsible pet ownership classes	140	150	93%
Average response time (in minutes)	269*	145	Did Not Meet Goal

City of Austin Animal Services Office: Animal Services

Performance Goals and Results

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Shelter Services			
Number of companion animals sheltered	17,750	18,000	99%
Number of animals adopted	7,211	7,900	91%
Number of animals returned to owner	3,353	2,800	120%
Prevention Services			
Number of spay/neuters performed at Austin Animal Center	6,065	5,800	105%
Number of animals sterilized at community clinics	10,182	7,500	136%
Number of spay/neuter community clinics	189	200	95%
Outcomes			
Percent response to priority calls completed	96% (16,420/17,031)	94% (14,100/15,000)	103%

*The average response time reflects data from the first three quarters of the year, as fourth quarter data was not provided.

Planned Parenthood of Greater Texas

Teen Pregnancy Prevention Program

Program Description

The Teen Pregnancy Prevention Program provides teens, their parents, and other adults who routinely interact with teens with the information needed to successfully avoid teen pregnancy. Health educators provide age appropriate, medically accurate health education in English or Spanish. Health education routinely includes abstinence, healthy relationships and dating, birth control methods, identification and prevention of sexually transmitted diseases (STDs), and communication skills to help teens prevent unplanned pregnancy. Health education is provided through interactive one to three hour sessions at schools, community based organizations, and social service agencies in Austin and other areas of Travis County.

Planned Parenthood also implements a promising program[b] called *Get REAL* with the Ann Richards School for Young Women Leaders. This semester-long, weekly curriculum for eighth grade girls addresses knowledge, values, and skill building for the refusal/delay of sex, as well as communication with parents and other trusted adults, two critical skills for healthy sexual decision making. Content includes medically accurate, age appropriate information about human anatomy and sexuality, as well as identifying the qualities of healthy and unhealthy relationships, addressing obstacles to abstinence, methods of contraception, STD/HIV transmission, refusal skills for sexual activity, and goal setting and decision making. Girls have the opportunity to work with their parents on up to nine optional parent-child homework assignments.

Funding

The total TCHHS/VS investment in the Teen Pregnancy Prevention Program from October 1, 2014 through September 30, 2015 was $29,601. This investment comprised 18.5% of the total program budget.

b As defined by the CDC, a promising program is one that has begun formal evaluation and has most of the characteristics of programs that have shown to be effective.

Planned Parenthood of Greater Texas

Teen Pregnancy Prevention Program

Eligibility Criteria

The Teen Pregnancy Prevention Program provides health education to teens, their parents, and other adults who routinely interact with adolescents, focusing on the central Austin area, in schools and neighborhoods at high risk for teen pregnancy. Health education sessions are regularly provided to diverse audiences across the Austin area and include public, charter, private, and vocational schools, religious institutions, youth and social service agencies, civic organizations, detention and probation service facilities, treatment centers, and agencies for the disabled.

Planned Parenthood's health education staff provides educational sessions for several Austin ISD schools, as well as Austin area charter schools. Most of the schools serve students that live in ZIP codes identified by the Austin/Travis County Health and Human Services Department as areas in which residents are at high risk for unintended pregnancy, have a higher concentration of adverse health risks, have a greater likelihood of dropping out of school, and have high proportions of youth categorized as economically disadvantaged.

Planned Parenthood of Greater Texas: Teen Pregnancy Prevention Program

The Teen Pregnancy Prevention Program met or exceeded goals for all performance measures. Staff reported that due to increased community demand, Planned Parenthood is conducting more multi-lesson, evidence-based, and promising programs, which are best practices and result in a larger number of presentations per client group (see the third output).

The classroom teacher's high expectations around the completion of parent-child homework influenced the higher than anticipated percentage of participants reporting that they are more likely to discuss issues related to sex with a parent (see the second outcome) as well as the percentage of participants completing three or more parent-teen homework activities (see the third outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated participants served	1,414	1,400	101%
Number of unduplicated participants from Output #1 participating in promising programs at the Ann Richards School	149	150	99%
Number of educational presentations provided by health educators	129	100	129%
Outcomes			
Percentage of participants who demonstrated increased knowledge about how to protect themselves from an unplanned pregnancy and STDs	86% (1,218/1,414)	80% (1,120/1,400)	108%
Percentage of promising program participants at the Ann Richards School who report that they are more likely to discuss issues related to sex with a parent	95% (141/149)	70% (105/150)	135%
Percentage of promising program participants at the Ann Richards School who complete 3 or more parent-teen homework activities designed to promote communication about sexual health, prevention of teen pregnancy, and STDs, and healthy relationships with their parents	99% (148/149)	70% (105/150)	142%

The Wright House Wellness Center, Inc.

Case Management

Program Description

The Wright House Wellness Center's (WHWC) Case Management program assists HIV-positive clients in accessing and maintaining primary medical care and adhering to medical treatment regimens to improve health outcomes, increasing self-sufficiency (as defined by the client and case manager in each client's individualized care plan), reducing the spread of HIV, and maintaining or improving quality of life for individuals and their communities. The program takes a client-centered, whole-person approach. The client and Case Manager collaborate to identify barriers to achieving the client's goals and develop an individualized care plan that serves as a road map for overcoming those barriers. Common issues experienced by clients include housing instability, poor physical health, inconsistent medical adherence, mental illness, substance abuse, unemployment, high-risk behaviors, weak or nonexistent social support networks, language and cultural barriers, and difficulty navigating systems of care. Case management activities include intake and assessment, care planning, housing assistance, medication adherence and health literacy education, care coordination, logistical support such as transportation assistance, information and referral, client advocacy, psychosocial support, and follow-up/re-assessment. Services are primarily provided at WHWC offices, but a significant percentage of services are delivered in other locations such as in clients' homes, at client medical appointments, and in other community social service settings.

Funding

The total TCHHS/VS investment in the Case Management program from October 1, 2014 through September 30, 2015 was $75,700. This investment comprised 31.2% of the total program budget.

Eligibility Criteria

Services are offered to HIV-positive individuals living within Travis County who are not enrolled in any other HIV case management program. The Wright House Wellness Center's target population includes: men, women and transgender persons; White, African American, Latino/a, and others; individuals with current or previous substance abuse, including injection drug users; individuals with current or previous mental illness; and recently incarcerated individuals.

The Wright House Wellness Center, Inc.: Case Management

Performance Goals and Results

The Case Management program did not meet performance goals in FY 2015. The program experienced staffing issues throughout the year. Staff explained that hiring for vacant positions has been difficult due to a low number of qualified candidates. Staff illness caused other case management staff to assume additional duties, resulting in fewer clients being seen during the contract year (see the first output). Further, the smaller number of staff focused on clients with high medical and/or mental health needs, and lower need clients were not seen unless they requested assistance. Finally, the two new case managers who were hired at the beginning of the year had limited capacity to provide units of service during their training period, which contributed to an overall lower number of case management units of service provided (see the second output). These staffing conditions led to lower numbers of Care Plans developed and/or updated (see the first outcome) and lower numbers of clients who had two or more medical visits in an HIV medical setting (see the second outcome).

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of unduplicated clients served	93	157	59%
Number of case management units of service provided	7,136	8,183	87%
Outcomes			
Percentage of HIV+ clients who had a case management Care Plan developed and/or updated two or more times during the reporting period	65% (60/93)	95% (149/157)	68%
Percentage of HIV+ clients who had two or more medical visits in an HIV medical setting during the reporting period	73% (68/93)	95% (149/157)	77%

Appendix

2015 Federal Poverty Income Guidelines

Most TCHHS/VS contracts require programs to serve participants with household incomes at or below 200% of the Federal Poverty Income Guideline (FPIG) level. Some programs have chosen to follow a more stringent threshold. The following table presents the federal poverty thresholds by household size and income.

Household Size	Income Limits by Household Size				
	50%	100%	125%	150%	200%
1 person	$5,885	$11,770	$14,713	$17,655	$23,540
2 persons	$7,965	$15,930	$19,913	$23,895	$31,860
3 persons	$10,045	$20,090	$25,113	$30,135	$40,180
4 persons	$12,125	$24,250	$30,313	$36,375	$48,500
5 persons	$14,205	$28,410	$35,513	$42,615	$56,820
6 persons	$16,285	$32,570	$40,713	$48,855	$65,140
7 persons	$18,365	$36,730	$45,913	$55,095	$73,460
8 persons	$20,445	$40,890	$51,113	$61,335	$81,780
For families/households with more than 8 persons, add $4,160 for each additional person.					

Data source: "2015 Poverty Guidelines," Office of The Assistant Secretary for Planning and Evaluation, U.S. Department of Health & Human Services, January 22, 2015, http://aspe.hhs.gov/poverty/15poverty.cfm.

2015 Austin Median Family Income Guidelines

The Blackland Community Development Corporation and Foundation for the Homeless contracts require participants in their programs to have a household income at or below 50% of the Austin Median Family Income (MFI) level. Other programs may also use Austin MFI guidelines when measuring client incomes. The following table presents the median family income limits established by the U.S. Department of Housing and Urban Development (HUD) for the Austin-Round Rock-San Marcos, TX Metropolitan Statistical Area (MSA).

Household Size	Income Limits by Household Size		
	30% (Extremely Low)	50% (Very Low)	80% (Low)
1 person	$16,150	$26,900	$43,050
2 persons	$18,450	$30,750	$49,200
3 persons	$20,750	$34,600	$55,350
4 persons	$24,250	$38,400	$61,450
5 persons	$28,410	$41,500	$66,400
6 persons	$32,570	$44,550	$71,300
7 persons	$36,730	$47,650	$76,200
8 persons	$40,890	$50,700	$81,150

Data source: "Austin-Round Rock-San Marcos, TX MSA FY2015 Income Limits Summary," U.S. Department of Housing and Urban Development, http://www.huduser.org/portal/datasets/il/il15/FY2015_IL_tx.pdf.

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