

Annual Report Region 8

2024

DSHS South Central Texas

Public Health Region 8 Serving You

D'Hanis Sunset - Photographer: Laurie Henefey

Message from Regional Medical Director

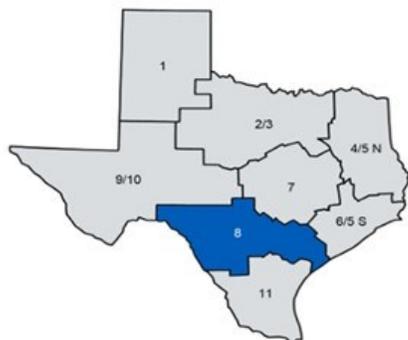
I am proud to present the 2024 Annual Report for Public Health Region 8 of the Texas Department of State Health Services. This report highlights the many ways our dedicated staff collaborate with community partners to promote and protect the health of Texans in our region.

We have offices located across the region so that our staff understand the communities we serve, know the community leaders, collaborate with partners and address local public health needs.

On behalf of the dedicated employees of DSHS Region 8, I hope you enjoy reading about our efforts and commitment to health.



Chuan Rodriguez, MD, MPH



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Public Health By the Numbers

- 4,130 doses of adult and childhood vaccines administered
- 1,821 individuals attended Preparedness and Response training, including Stop the Bleed and Ready or Not
- 878 people identified as contacts and evaluated for tuberculosis infection or disease
- 839 clients received services from Specialized Health & Social Services
- 514 students received limited oral healthcare evaluations
- 476 fluoride varnishes and 93 sealants provided to low-income students
- 323 retail food inspections conducted
- 224 school cafeterias inspected
- 109 rabies investigations conducted
- 105 people treated for latent tuberculosis infection
- 85 animals tested positive for rabies
- 76 people diagnosed with and treated for tuberculosis disease
- 55 youth camps inspected
- 37 animal control officers trained
- 33 animal quarantine facilities inspected
- 1.68% of students with a conscientious exemption to vaccines, up from 1.60% last year



Helping the Helpers

How do you cope when your everyday tasks routinely include devastating events? To find out, the Region 8 Preparedness and Response (PAR) team participated in the newly formed First Responder Peer Support Group in partnership with the South Texas Regional Advisory Council (STRAC). The group is composed of emergency personnel in Region 8 trying to address the mental health crisis in responders by focusing on mental health before, during and after a response. The group plans to expand and establish a resource hub for all first responders.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the federal agency that works to advance the behavioral health of the nation. The agency points out that depression, stress, post-traumatic stress disorder (PTSD), substance abuse and suicidal ideation are huge concerns for first responders.

In September, PAR provided several mental health related courses for Region 8 staff. Employees attended courses on Compassion Fatigue, Trauma Informed Care, and Identifying the Signs of Addiction in a Loved One to learn how to better take care of themselves and their coworkers during times of crisis.

PAR also went out into the community to attend the following:

- **Mental Health First Aid** to learn how to support peers going through crisis and connect them to mental health resources.
- **Language Matters**, a course provided by the Health and Human Services Commission (HHSC) and the State Suicide Prevention Team to discuss how we talk about suicide to both provide support and raise awareness.
- **Lessons Learned: Sutherland Springs and Uvalde**, a session provided during the Southeast Texas Regional Advisory Council (SETRAC) 2024 Symposium that brought in first responders from both attacks to discuss the trauma and mental health toll they experienced during and after these responses.

Through our efforts we learned that overtaxed EMS, fire, dispatch and law enforcement departments in Region 8 border counties were experiencing overwhelming mental health needs. DSHS Region 8 went to Maverick County to help connect these departments to mental health providers who specialize in first responders and their unique challenges. By partnering with Health and Human Services (HHS), the Texas A&M Engineering Extension Service (TEEX) and Sam Houston State University, DSHS created new avenues for these responders to learn to cope with their jobs' daily stressors.

While our first responders focus on taking care of the community, Region 8 has worked hard to make sure we take care of them in return. As new trainings, groups and initiatives pop up the Preparedness and Response team is ready to share their expertise and experience to help the helpers.

If you would like more information about available trainings and resources, please reach out to the Region 8 PAR team at Region8.Operations@dshs.texas.gov

If you are or someone you know is in crisis, call 988, the National Suicide and Crisis Lifeline.



Bird Flu

Highly pathogenic avian influenza, or bird flu, is caused by flu viruses that usually only infect birds. Since 2022, avian influenza outbreaks have impacted millions of commercial poultry in the United States. Recently, humans have also been exposed to bird flu through new infections in dairy cattle.

Current Situation

Spread of bird flu viruses from mammal to mammal is rare. However, in March 2024, the avian influenza virus named H5N1 was found in dairy cows in Texas and Kansas for the first time. Flu outbreaks in dairy cows and other animals are important to public health because when flu viruses infect new animals, the virus can change in ways that make it more likely to infect humans.

Prior to 2024, avian influenza had never been passed to humans from other mammals. In April 2024, a Texas resident was infected with H5N1 after contact with dairy cows that were likely infected. More human cases of avian influenza were later identified in the United States. Most of these infections were spread to humans from dairy cows.

Most human infections with avian influenza are mild, but severe infections resulting in death are possible. Public health organizations continue to monitor the situation and work to prevent the spread of bird flu infections.

Public Health Actions

Region 8 is offering free seasonal flu vaccine for people who work with livestock, poultry or dairies and their families. Receiving a seasonal flu vaccine reduces the chance of a person being infected with both bird flu and seasonal flu at the same time, which could allow the virus to change and become more dangerous to humans.

In addition, DSHS will provide personal protective equipment (PPE) to dairy farms, poultry farms and slaughter facilities to protect workers at higher risk of exposure.

(continued next page)



PROTECT YOURSELDF AND YOUR FAMILY FROM BIRD FLU

Do not touch sick or dead animals or their droppings and do not bring sick wild animals into your home.

Keep your pets away from sick or dead animals and their feces.

Avoid uncooked food products such as unpasteurized milk or cheese.

Do not feed raw diets to your pets or allow them to eat dead animals.

If you get sick after contact with sick or dead birds, contact your doctor.

Report sick or dead waterfowl (5 or more in one place) by calling the Texas Parks and Wildlife Department (TPWD) at 1-800-792-1112.

Report sick or dead poultry by calling the Texas Animal Health Commission at 1-800-550-8242.

To request PPE or an on-site seasonal flu vaccine clinic for farmworkers and their families, send an email to Region8.Operations@dshs.texas.gov or call 210-949-2000.

Bird Flu

(continued from page 4)

Confirmed Human Cases of Avian Influenza since 2024

	Exposure Associated with Commercial Agriculture and Related Operations		Other Animal Exposure [†]	Exposure Source Unknown [‡]	State Total
	Dairy Herds (Cattle)	Poultry Farms and Culling Operations			
California	36	0	0	1	37
Colorado	1	9	0	0	10
Iowa	0	1	0	0	1
Louisiana	0	0	1	0	1
Michigan	2	0	0	0	2
Missouri	0	0	0	1	1
Oregon	0	1	0	0	1
Texas	1	0	0	0	1
Washington	0	11	0	0	11
Wisconsin	0	1	0	0	1
Source Total	40	23	1	2	66

NOTE: One additional case was previously detected in a poultry worker in Colorado in 2022.

[†]Exposure was related to other animals such as backyard flocks, wild birds or other mammals

[‡]Exposure source was not identified

Table shows case counts as of 1/6/2025

Oral Health Preventive Care for Low-Income Children

The Region 8 Oral Health Team, consisting of one dentist and one dental hygienist, works with schools, preschools and community organizations to bring preventive dental services to low-income children in our area. The team works closely with school staff especially nurses and health services directors. Our Oral Health team provides limited oral evaluations and preventive services such as fluoride varnish and sealants. The team rotates through schools in Region 8. In



2024 they held clinics in Bexar, LaSalle and Frio counties. Five hundred and fourteen children participated with four hundred and seventy-six receiving fluoride varnish to strengthen tooth enamel and ninety-three receiving sealants to protect the chewing surfaces of teeth from bacteria and cavities. Of the children seen, 31% had untreated cavities. Only 14.8% had evidence of having previous preventive sealants. For some children, Region 8 dental services clinics are the first time they received dental care. The fact that it was a relaxed and fun experience for the children filled with laughter and encouragement will impact their future dental encounters.

What Are Cottage Foods?

People prepare cottage foods in their home kitchens and sell them directly to consumers. Cottage foods are unlikely to cause foodborne illness and do not require temperature or time controls to prevent bacterial growth. The person who prepares and sells these foods must complete an accredited food handler’s training program. Each item must be labeled with the name and address of the operation, the common name of the product, whether the food is made with any common allergens and state that, “This food is made in a home kitchen and is not inspected by the Department of State Health Services or local health department.”

Cottage Food Production

The foods listed below *may* be prepared in a private home kitchen for sale directly to consumers. Any food items not on this list require an inspection and a permit from DSHS or a local health department. Some of the items listed below may be required to have further testing or meet special recipe requirements.



- Breads, rolls, biscuits, sweet breads & muffins
- Cakes (birthday, wedding, etc.), pastries, cookies & fruit pies
- Canned jams & jellies
- Dried herbs & herb mixtures
- Candy



- Coated and uncoated nuts, unroasted nut butters & fruit butters
- Popcorn & popcorn snacks
- Dehydrated fruit or vegetables, including beans
- Cereal, granola & dry mix
- Dried pasta



- Vinegar, pickled fruits & pickled vegetables
- Mustard
- Roasted coffee & dry tea
- Plant-based acidified canned goods (e.g., salsa, BBQ sauce & ketchup)
- Fermented vegetables, frozen raw and uncut fruits or vegetables

Point your camera here to find the health inspector who can help you become an approved retail food establishment.



TEXAS Health and Human Services | Texas Department of State Health Services



Out-Foxing Rabies

In 2024, foxes infected with rabies were responsible for 26% of rabies positive animal cases in Region 8, compared to only 6% of cases in 2023. The Region 8 Zoonosis Team worked with local partners to spread awareness about avoiding contact with wild animals and prompt reporting of animal bites or exposures. The actions of public health stakeholders including animal control agencies, animal welfare organizations, veterinary clinics, and state and local health departments helped keep our communities safe.



What is Rabies and How is it Spread?

Rabies is a serious disease that affects the brain and spinal cord of mammals, including humans. It is caused by a virus and is almost always fatal once symptoms appear.

Rabies is usually spread through the saliva of an infected animal, often through a bite. It can also be spread if infected saliva gets into an open wound or the eyes, nose or mouth. Wild animals including bats, raccoons, skunks and foxes are the main carriers of rabies in Texas. After being exposed to rabies, animals and people can prevent infection with rabies vaccination.

Preventing Rabies in Pets and Humans

Rabies is preventable with the right precautions. Here's how you can protect yourself, your family and your pets:

- **Vaccinate Your Pets:** All dogs and cats should receive regular rabies vaccinations as required by Texas law.
- **Avoid Wild Animals:** Never approach or handle wild animals, especially if they seem unafraid of humans or act strangely.
- **Secure Your Home:** Keep garbage and pet food indoors to avoid attracting wildlife.
- **Report Stray Animals:** Call animal control if you see stray animals that could pose a risk.
- **Seek Help if Bitten:** If you or your pet is bitten or scratched by a wild animal, wash the wound thoroughly with soap and water and contact your doctor or veterinarian immediately.

Stay Vigilant

Rabies is a deadly but preventable disease. By taking precautions and staying informed, we can reduce the risk of rabies in pets, humans and the community. Together, we can make Region 8 a safer place for everyone.

Positive Animal Rabies Cases in Region 8, 2024

County	Bat	Cat	Coyote	Fox	Raccoon	Skunk	Grand Total
Bexar	12						12
Comal	5	4	1	13		2	25
Gillespie	2					1	3
Gonzales						2	2
Guadalupe	6						6
Kendall				6		2	8
Kerr	2	1		2	2	7	14
Lavaca						2	2
Medina	2						2
Uvalde	1						1
Victoria	2			1		7	10
Grand Total	32	5	1	22	2	23	85

Healthy Communities Summer Program

Thirty-five (35) students attended the Healthy Communities Summer Program hosted by the Maverick County Child Injury Prevention Coalition (MCCIPC). The MCCIPC is coordinated by the Region 8 Office of Border Public Health (OBPH) and aims to reduce the number of injuries to children in Maverick County. As part of this effort, OBPH partnered with community agencies to provide education on important health and safety topics.

During the fall of 2023, the members of the MCCIPC participated in a prioritization activity to identify injury related priorities in Maverick County. These topics were incorporated into the summer program. The Summer Program included four cohorts during the months of June and July. Students, ages 12-17, attended the two-week sessions where they earned certifications in Cardiopulmonary Resuscitation (CPR) and Teen Mental Health First Aid. They learned how to recognize signs of mental health crises in their peers and how to refer those in need during their time of crisis.

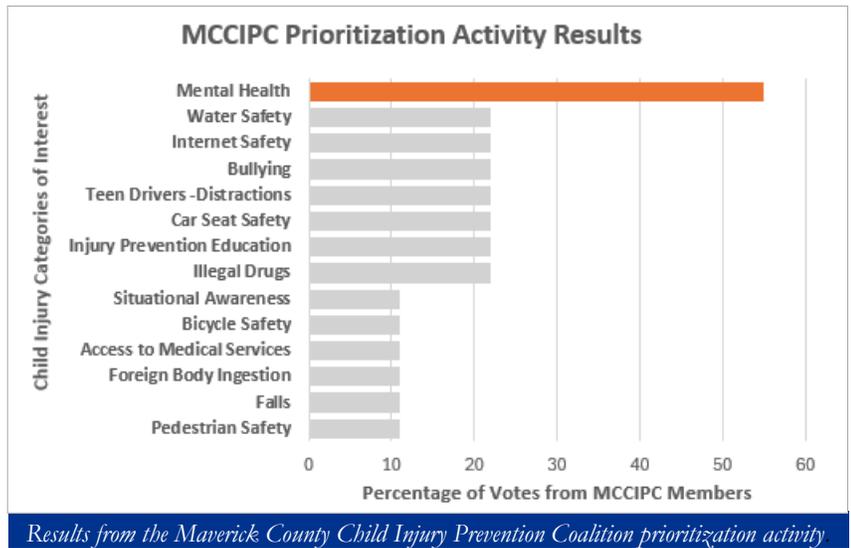
Students also learned about other health and safety topics: substance abuse awareness, emergency preparedness, Civilian Response to Active Shooter Events (CRASE), water safety, fire prevention, road safety, dental hygiene and bike safety.

Program participants learned skills to keep themselves and other community members safe. They learned how to access local and community resources to address substance abuse and mental health issues. City of Eagle Pass firefighters showed them how to properly use a fire extinguisher and students practiced their new skills during a fire safety demonstration.

To gauge participant satisfaction, each student completed a survey at the end of the course. Results showed that 91% of the participants enjoyed the summer program.

The students particularly liked the mental health sessions with 87% listing them as their favorites.

The Maverick County Injury Prevention Coalition will offer the Healthy Communities Summer Program again in June 2025.



Cindy Rogers, Mental Health First Aid Outreach Worker, presenting students their Teen Mental Health First Aid certificates at the end of the course.

Whooping Cough On the Rise

Recently, local, state and national public health agencies have reported large increases in the number of cases of whooping cough. **In Region 8, cases have increased by almost 900% over the past four years.**

Whooping cough (pertussis) is a very contagious disease caused by bacteria. The disease is spread when a sick person coughs or sneezes and the people near them breathe in the bacteria. It is especially dangerous to babies, who are at risk of apnea (life-threatening pauses in breathing) and pneumonia if they are infected with whooping cough.

When someone is diagnosed with whooping cough, Region 8 epidemiologists call them to learn more about how they might have been infected. Epidemiologists also make sure that anyone who was exposed gets medicine to prevent them from getting sick. This medicine is called post-exposure prophylaxis or PEP. In 2024, Region 8 epidemiologists confirmed that 142 exposed people received medicine to prevent them from getting pertussis.

The best way to prevent whooping cough is to stay up to date on vaccines. The vaccine for whooping cough also protects you from diphtheria and tetanus. **CDC recommends whooping cough vaccines for babies, children, preteens and adults – and during pregnancy.** Talk to your doctor to make sure you are up to date and protected.

Whooping Cough in Region 8, 2024¹



109 Cases

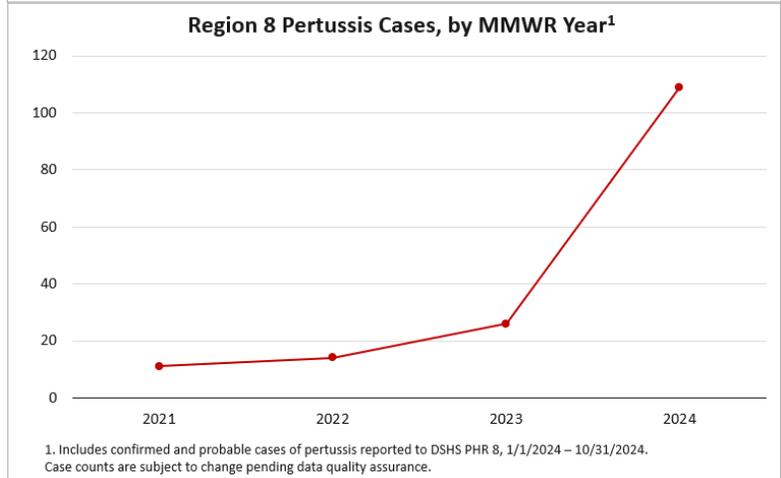


**142 Contacts
received PEP**



890% Increase since 2021

1. Includes confirmed and probable cases of pertussis reported to DSHS PHR 8, 1/1/2024 – 10/31/2024. Case counts are subject to change pending data quality assurance.



People of all ages need WHOOPING COUGH VACCINES



DTaP for young children	Tdap for preteens	Tdap for pregnant women	Tdap for adults
<ul style="list-style-type: none"> ✓ 2, 4, and 6 months ✓ 15 through 18 months ✓ 4 through 6 years 	<ul style="list-style-type: none"> ✓ 11 through 12 years 	<ul style="list-style-type: none"> ✓ During the 27-36th week of each pregnancy 	<ul style="list-style-type: none"> ✓ Anytime for those who have never received it



Healthcare providers can prescribe pertussis PEP for a sick person's close contacts, even if they are not the contact's primary doctor!

Learn more!



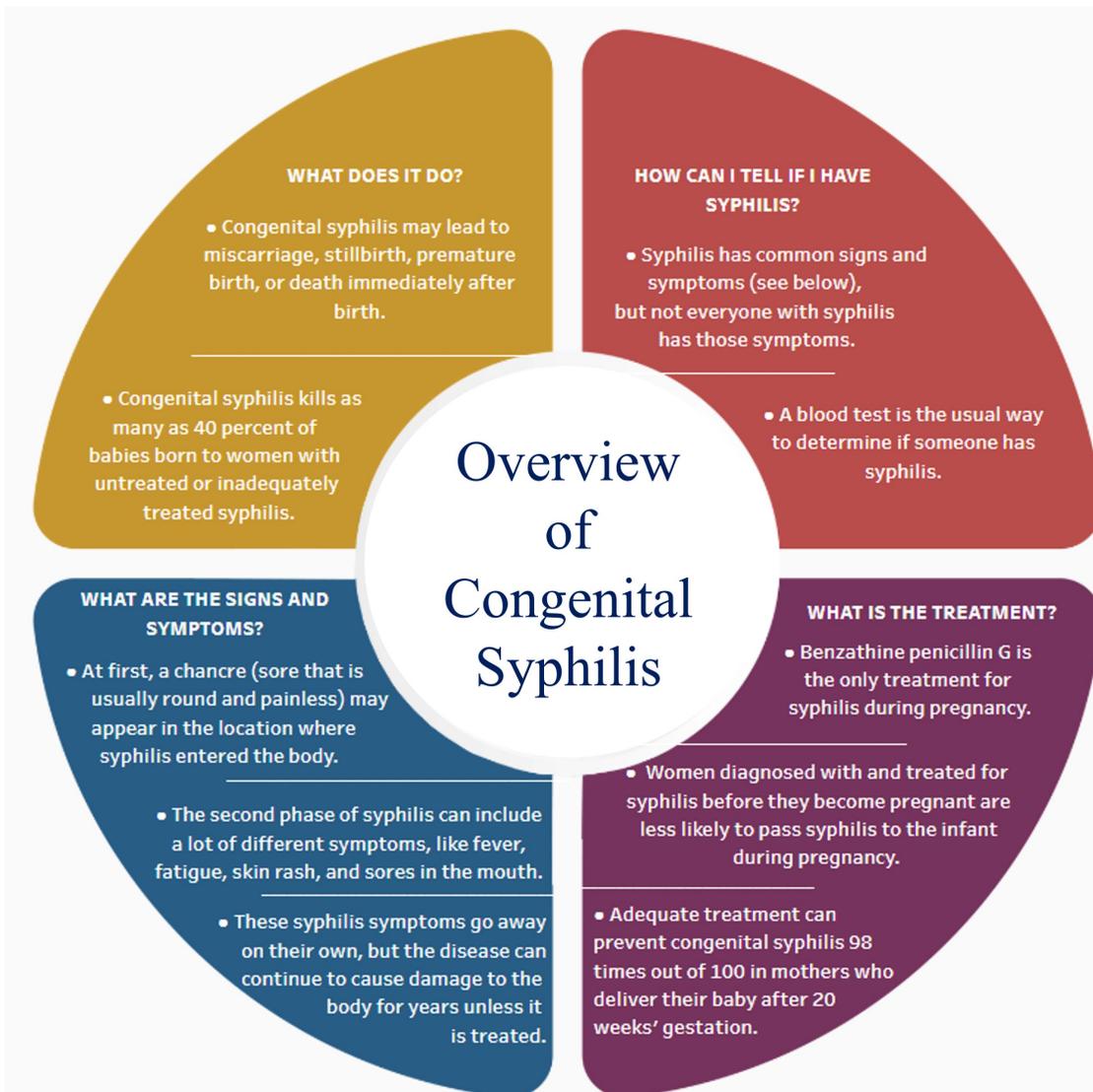

If you have questions about whooping cough, or want to report a case, please contact the Region 8 Epidemiology Program at 210-949-2121 or email Region8.Epi@dshs.texas.gov

Preventing Syphilis in Babies

Syphilis is a sexually transmitted disease (STD) caused by bacteria. Congenital syphilis occurs when a pregnant mom transmits the bacteria to her baby during pregnancy or at birth. The Region 8 STD team tests and treats people with syphilis to prevent it spreading to others. Syphilis can be life-threatening for babies but is preventable when the mothers receive adequate treatment. Syphilis during pregnancy can lead to miscarriage, stillbirth, premature birth or death immediately after birth. It kills as many as 40% of babies born to women who have syphilis during pregnancy and are not treated.

Syphilis and congenital syphilis are on the rise in Texas and in the United States. In 2022 Texas had 230 cases of congenital syphilis compared to 17 cases in 2016. To prevent congenital syphilis, Texas law requires that pregnant women be tested at the first doctor visit during pregnancy, again in the third trimester and at delivery. Unfortunately, not all women get prenatal care.

The Region 8 STD team tests and treats people who have syphilis or have been exposed to it. In 2024, the team identified two large groups of cases in rural areas in the Region. We offered testing and treatment in these areas and found two pregnant women who were infected. Because of the quick action of our STD team, these mothers were successfully treated and their babies were healthy at birth.



Public Health Case Management

The main role of the Region 8 Specialized Health and Social Services (SHSS) program is to support people with special health care needs. We assist them in navigating complex systems of care and accessing health services. Our licensed social workers also provide public health case management to patients or families served by other Region 8 programs. For example, we provide public health follow-up for people diagnosed with a sexually transmitted disease or HIV infection.

Many of these patients are in difficult financial situations. They may need clothing or do not have access to medical care. To find out exactly what a patient needs we do a thorough assessment of the psychosocial needs of the client and the client's family.

We recently learned about a pregnant client who needed STD treatment, prenatal care and social services. Her barriers included homelessness, no health insurance, poor nutrition and limited family support. Over the course of several months, the social worker visited the client, connected her with community and state agencies, and worked closely with our STD staff to discuss follow up needs. Through our efforts the client received temporary housing, medical coverage, prenatal care, WIC services, SNAP benefits and baby supplies. She was also successfully treated for her STD.

Successful public health case management requires a comprehensive approach. In the example above, we met the patient because she needed treatment for an STD. Because of our collaborative approach, she also received other much needed services. The unique interaction between the Region 8 SHSS and the STD program offers a balanced approach for people who need treatment as well social services.



Region 8 social workers providing information on case management services

Reporting

Texas law requires certain communicable diseases to be reported to local or regional health departments. To report a condition to the Region 8 STD team, call 210-949-2000 or fax lab results to 210-949-2059. For questions about reporting please call 210-949-2000 or email our staff at Region8.STD@dshs.texas.gov.

A Triumph Over TB: Outbreak Prevented in a Nursing Home

Tuberculosis (TB), a disease once thought to be a relic of the past, remains a significant health concern. TB is spread through the air when a person with TB disease coughs, sneezes, speaks or sings, releasing tiny droplets containing TB bacteria. People who share the air with the patient are at a greater risk of getting sick. In areas where many people live or work together closely (such as jails, hospitals or nursing facilities), the risk for exposure is greater.

In a nursing home, residents often share common spaces and may have close contact with staff and visitors. Elderly residents in nursing homes are also more susceptible to TB due to aging and the weakening of their immune systems, the presence of chronic conditions like diabetes or lung disease and a higher likelihood of having latent (inactive) TB infection from earlier in life. Because of these factors, stopping the spread of TB disease in nursing facilities is very important.

In 2024, one person living in a nursing home in Region 8 was identified as having TB disease. Prompt action to prevent TB from spreading in the nursing home required a unified approach from Region 8 and nursing home personnel. The patient with TB was admitted to the local hospital until the patient was no longer able to spread TB. Region 8 and the nursing home promptly started a contact investigation to determine which nursing home residents had been in contact with the patient with TB.

One hundred and one (101) nursing home residents and staff had been exposed to the patient. Eighty-eight percent of the identified contacts were screened, tested and evaluated for TB infection to prevent TB spread. Since most of the contacts had weakened immune systems, the facility assisted with arranging chest X-rays to ensure no TB disease was in the lungs of the residents. Our staff and the nursing facility staff coordinated collection of necessary blood tests. Region 8 and the facility efficiently and successfully worked together. As a result of their efforts, no other resident was diagnosed with TB disease within the nursing home and three completed treatment for latent TB infection.

Region 8 is proud to work with our local partners to stop the spread of TB. To learn more about tuberculosis, to request an educational session or to ask about TB guidelines, email Tuberculosis.Region8@dshs.texas.gov.



Reining in West Nile Virus – Protecting Humans and Horses

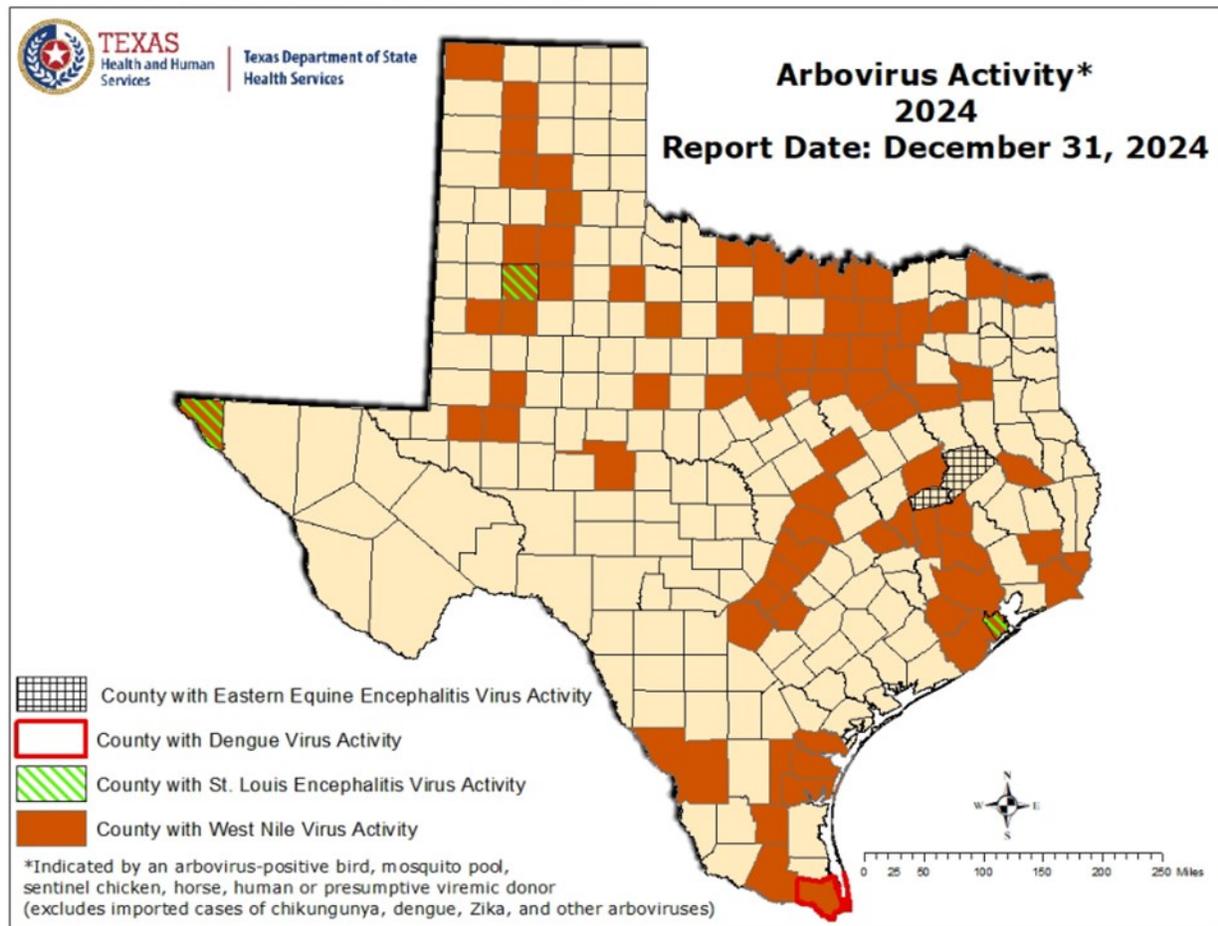
In 2024, Texas faced challenges with the West Nile Virus (WNV), a disease spread by mosquitoes. The Texas Department of State Health Services (DSHS) reported 169 human cases of WNV in 2024, including 127 severe cases affecting the nervous system and 25 deaths.

West Nile Virus also impacts other animals, especially birds and horses. Horses are particularly vulnerable to WNV, which can cause severe neurologic issues and sometimes death. In 2024 there were 22 reported cases of WNV in horses. While there is not currently a vaccine for humans, there is a vaccine for horses. Vaccination is one of the most effective ways to protect horses from WNV. Horses that are properly vaccinated have a much lower risk of becoming seriously ill.

Humans cannot get WNV from horses or other animals; we can only be infected by the bite of an infected mosquito or, in rare cases, blood or tissue transplantation. To stay safe from WNV, it is important to use insect repellent and wear clothing that covers your skin when outdoors. You can also prevent mosquitoes from breeding by removing standing water in and around your home. By vaccinating horses and protecting both people and animals from mosquito bites, we can reduce the impact of West Nile Virus in Texas.

If your jurisdiction would like more information about mosquito disease surveillance or other outreach materials, please contact the Region 8 Zoonosis Team at Region8.Zoonosis@dshs.texas.gov.

Figure 1. Texas Counties Reporting Arbovirus Activity, Week 52



The ABCs of Safe Sleep for Babies

Recognizing the importance of safe sleep for infants, Region 8 field staff provide safe sleep education for parents and caregivers. Staff researched and developed a Region 8-specific safe sleep education and outreach plan using evidence-based strategies and safe sleep recommendations. Staff promote safe sleep practices at community events and offer classes at local organizations, including childcare centers.

Unsafe sleep environments continue to be a leading cause of infant death in the United States. Approximately 3,700 infants died of sleep-related deaths in 2022. Many of these tragedies can be prevented by following the ABCs of Safe Sleep.

Alone: Babies should sleep by themselves, not in bed with anyone else.

Back: Babies should always be placed on their backs to sleep.

Crib: Babies should sleep in a crib or bassinet with a firm mattress and no extra blankets, pillows or toys.

The Maternal and Child Health Unit of the Texas Department of State Health Services developed and launched a Safe Infant Sleep Campaign in the summer of 2024. This campaign spreads the word about safe sleep practices through a variety of methods, including:

- Information Sharing: Distributing flyers, educational videos and social media posts for organizations to easily share infant safe sleep practices.
- Healthcare Provider and Community Training: Offering training for healthcare providers and community members about safe sleep practices that includes learning how to discuss safe sleep practices with parents and caregivers.
- Parent and Caregiver Classes: Giving presentations specifically for parents and caregivers. These presentations are interactive and easy-to-understand.



Safe Sleep Clear the Crib Activity: During the Safe Sleep Awareness class, participants are asked to ‘clear the crib’ to create a safe sleep environment for infants. This activity reinforces the ABCs of Safe Sleep.

Safe Sleep Awareness Class

Date: _____
Location: _____

Hosted by: Texas Department of State Health Services

This training will focus on providing a safe sleeping environment for infants and children to reduce the risk of Sudden Infant Death Syndrome (SIDS).



Safe Sleep is as simple as ABC!
Babies should sleep Alone*, on their Backs, in a Crib!
 *Room sharing is recommended until at least six months of age.



TEXAS
Health and Human
Services



Texas Department of State
Health Services

For more information or to request a class for your organization or event, please contact the Region 8 Community Health Improvement: Maternal and Child Health Strategies Specialist at (210) 949-2000 or Region8.CommunityHealth@dshs.texas.gov.

Let's Reduce Vaping by Young People

Region 8 staff presented classes aimed at reducing e-cigarette use to over one thousand youth and adults who work with young people in 2024. We have also provided education and resources to healthcare providers, who are valuable partners in helping people of all ages quit tobacco use. Most electronic cigarettes (e-cigarettes) or vapes contain nicotine and should not be used by youth or adults. Nicotine is highly addictive and is a health danger.

The DSHS Tobacco Prevention and Control Program has launched a toolkit, "Reducing E-Cigarette Use Among Youth and Young Adults for Health Care Providers." The toolkit assists healthcare providers in supporting young people to quit vaping. Topics in the toolkit include "About E-Cigarettes," "Health Effects," "Screening and Assessment," "Pharmacotherapy," "Billing Codes," and other quit resources. The target age population is 17-24. Point your camera at the QR code to download the tool kit.



Healthcare providers can effectively assist and motivate young people to quit using tobacco by the ACT Method--Ask, Counsel and Treat.

Ask: Screen for tobacco use among youth and young adults ages 11 and older during a clinical encounter.

Counsel: Advise youth and young adults who use tobacco about quitting, regardless of the amount used, and have them set a quit date within two weeks.

Treat: Refer youth and young adults to appropriate behavior support and prescribe cessation medication.

The Texas Tobacco Quitline at 1-877-YES QUIT (1-877-937-7848) assists with counseling and nicotine replacement therapy (NRT). You can also contact the Quitline at [yesquit.org](https://www.yesquit.org).

Substances in e-cigarette aerosol

- Volatile organic compounds (Warning icon)
- Nicotine (Molecular structure icon)
- Flavorings (Bar chart icon)
- Cancer-causing chemicals (Biohazard icon)
- Ultrafine particles (Particle cloud icon)
- Heavy metals such as nickel, tin, and lead (Metal pieces icon)

Source: U.S. Surgeon General Report, 2016

[CDC.gov/Vaping](https://www.cdc.gov/Vaping)

Working with Community Partners

The Region 8 mission is to improve the health, safety and well-being of those who live or work in Region 8. This is a huge task! We rely on partners and community organizations to expand our reach.

Cooperation happens at many different levels. It may be as simple as sharing information and referring clients to partner agencies. It could also involve coordinating activities or developing joint programs. We provide public health services from thirteen field offices around the Region and respond to local public health needs. Our staff learn about health needs from community members and local organizations in daily activities and by attending meetings and events.

Representatives from state agencies and community service organizations often meet to network and talk about services and projects they provide. Region 8 staff participate in interagency meetings, Community Resource Coordinating Groups (CRCGs), Translational Advisory Boards (TABs), School Health Advisory Committees (SHACs) and others. This networking often leads to identification of needs and joint projects that respond to those needs.

We collaborate with Safe Kids SA on topics related to injury prevention, co-hosting Safe Kids child car seat check-ups across the region using staff and car seats from both organizations. In the summer, Safe Kids provides literature and a large digital temperature display for Region 8 staff to demonstrate the hot temperatures inside vehicles and raise awareness to prevent heat-related deaths.

We also frequently collaborate with Texas A&M AgriLife combining efforts for larger projects such as planting a community garden and teaching about healthy foods in Bandera. A multi-year project in Calhoun County is bringing together a variety of organizations, community members and leaders to develop an action plan to address health needs in that county.

Working together has many advantages. Because agencies and programs address different audiences on similar issues, our collaboration helps us focus messaging to various groups. Additionally, working together leads to less duplication. When we work together to implement programs, we extend the reach of the involved organizations and help ensure the health of our communities.



Kerrville Car Seat and Heat Awareness Event with DSHS staff and Kerrville First Responders

Examples of Region 8 Partners
Texas A&M AgriLife Extension Service
Texas Wesley Nurses (a Methodist Healthcare Ministry program)
Area Health Education Centers (Southwest Border, South Central and Victoria East)
Pregnancy centers
Food banks
WIC (Special Supplemental Nutrition Program for Women, Infants and Children)
Safe Kids SA
SJRC - Belong
Local Mental Health Authorities
Libraries
Schools
Churches
Chambers of Commerce Businesses
Social organizations



AgriLife, Region 8 and local volunteers build a community garden

Partnerships, Education and Vaccination: Meningitis and Flu

The meningitis vaccine has been required for incoming college students under the age of 22 since 2014. For many Texas students this vaccine requirement is met during high school when they receive the recommended second dose at age 16. For others who may not enter college right out of high school this requirement may be more difficult to meet. During the summer of 2024, Region 8 partnered with United Medical Center to offer meningitis vaccine to incoming students at Southwest Texas College in Del Rio and Eagle Pass. They also educated students about vaccines and the Texas Immunization Registry, ImmTrac.

During new student orientation, Region 8 staff provided vaccines to uninsured students and United Medical Center gave vaccines to those with insurance, ensuring everyone who sought the vaccine was able to receive it. Region 8 staff provided education on all vaccines and ImmTrac during the orientation. We provided consent forms to participants to ensure their vaccination records were saved and protected in ImmTrac. We also provided immunization schedules and educated students and staff on the importance of all vaccines, encouraging them to plan for their annual influenza and other routine vaccines.

During the five orientation events held in June, July and August, Region 8 gave 141 vaccines. We gave 96 doses at the Eagle Pass Southwest Texas College campus and 45 doses at the Del Rio campus. In addition, 226 students and staff consented for their records to be saved in ImmTrac.

This partnership was so successful that it continued in the fall when we offered influenza vaccinations at the same campuses. We added the Uvalde campus of Southwest Texas College to provide influenza vaccinations to students and staff there. We held clinics in October and November at each campus giving 213 doses of influenza vaccine. With the success of both clinics, we plan to continue these partnerships, educational opportunities and vaccinations in 2025.



Keeping Medicaid Doctors and Dentists on Board

Region 8 provider relations (PR) representatives with the Texas Health Steps Program (THSteps) provide technical support to over 300 medical and almost 500 dental facilities in south central Texas. Through these facilities, doctors and dentists provide comprehensive health services for children on Medicaid from birth through age 20. Almost 330,000 children in Region 8 are enrolled in Medicaid.

The PR representatives monitor the provider network and work closely with the Texas Medicaid and Healthcare Partnership (TMHP) to support health care providers, especially those practicing in rural communities. PR representatives recently identified an increase in provider disenrollments, due to providers letting their enrollment lapse. To help maintain this provider pool, our provider representatives watch enrollment timelines.

The TMHP provides enrolled Medicaid providers with reminders of the enrollment deadlines starting six months before they reach their revalidation (or re-enrollment) date. These reminders are sent by email and by phone.

If the provider does not renew their enrollment, children lose their access to care. When they lose their enrollment, providers cannot be reimbursed for services until they re-enroll, which can take up to a few months. In the meantime, the children on Medicaid are left without a primary care doctor or a dentist.



Working towards the goal of keeping providers enrolled, THSteps PR staff are:

- Including provider education about re-enrollment during office site visits
- Encouraging office staff to read banner messages on the TMHP portal
- Using TMHP's Provider Enrollment Management System (PEMS) to identify providers up for renewal
- Conducting targeted provider outreach for those who are due to revalidate
- Coordinating virtual training to address important and trending issues related to THSteps

THSteps acknowledges that providers are ultimately responsible for their re-enrollment. PR staff work to remind Medicaid providers of the re-enrollment process and deadlines to avoid the challenges of disenrollment.

One provider who was recently disenrolled had this to say:

"Our office sees 70% Medicaid patients. We already have days booked through October with Medicaid patients. We also see several chronically ill Medicaid patients. With an enrollment gap, our patients would have to go to urgent care for sick visits, and all of our patients with scheduled well visits would have to delay care and their vaccines. We would not be able to write for medications for our chronically ill patients. Therapies would be delayed, and medical supplies would be denied until our revalidation applications are approved."

Assessing Community Health Needs

Calhoun County is piloting Region 8’s community health assessment process. The goals are to:

- Engage with the community in an effort to build trust with residents and local partners
- Protect area residents with improved vaccine rates
- Create a partner directory
- Address local needs and reduce the impact of future pandemics with community-driven plans

With our focus on these goals, staff have worked with community partners to run information sharing town hall meetings and develop a strategic plan. Moving forward we will work with county residents and stakeholders to recommend evidence-based plans to address community needs. We will also provide leadership development training in the community.

A community health assessment provides a snapshot of the current health, determines the risk factors for poor health and identifies resources available to a specific community. The assessment combines information **from** a community (conversations and surveys) with information **about** a community (statistics).

Community health assessments allow members of a community to share their concerns about health needs. Using those concerns, action plans are developed with the community to meet their specific needs. The larger the number of local participants (residents, civic leaders and local clubs), the more likely the action plan will meet community needs.

Using lessons learned in Calhoun County, Region 8 plans to select additional counties for a community health assessment. If you are interested in conducting a community health assessment, please send an email to Region8.AHI@dshs.texas.gov or scan the QR code.



Helpful Phone Numbers

Program	Contact Name	Phone	E-mail Address
Notifiable Conditions	On-call staff	(210) 949-2121	Call to report notifiable conditions or public health emergencies
Community Health Improvement	Katherine Velasquez, RN, PhD	(210) 949-2091	Katherine.Velasquez@dshs.texas.gov
Epidemiology	Elise Rush, MPH, CIC	(210) 949-2095	Elise.Rush@dshs.texas.gov
HIV/STD Program	Lauren Mata, MACMHC	(210) 949-2151	Lauren.Mata@dshs.texas.gov
Immunizations	Laurie Henefey	(830) 591-4386	Laurie.Henefey@dshs.texas.gov
Office of Border Public Health	Rosy De Los Santos	(830) 758-4241	Rosy.Delossantos@dshs.texas.gov
Oral Health Improvement Program	Cynthia King, RDH	(210) 949-2106	Cynthia.King@dshs.texas.gov
Preparedness & Response	Sammy Sikes, CHS, EMT-B	(210) 949-2040	Sammy.Sikes@dshs.texas.gov
Retail Foods & Public Health Sanitation	Maricela Zamarripa, RS	(830) 591-4389	Maricela.Zamarripa@dshs.texas.gov
Specialized Health & Social Services	Diane Bernal, LMSW	(210) 949-2147	Diane.Bernal@dshs.texas.gov
Texas Health Steps	David Garcia	(210) 949-2159	DavidC.Garcia@dshs.texas.gov
Tobacco Prevention & Control	Rick Meza	(210) 867-7634	Rick.Meza@dshs.texas.gov
Tuberculosis (TB) Control Program	Elvia Ledezma, MPH	(210) 949-2177	Elvia.Ledezma@dshs.texas.gov
Zoonosis Control	Amanda Kieffer, DVM, MPH	(210) 949-2048	Amanda.Kieffer@dshs.texas.gov

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