

**MAYOR SYLVESTER TURNER  
TRANSITION COMMITTEE ON PUBLIC HEALTH**

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Marlen Trujillo, Co-Chair**

**Transition Team, Executive Committee:**

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Debra Tsuchiyama Baker  
Bill Baldwin  
Stephen Costello  
Maya Ford  
Ginny Goldman  
Paul Puente  
Bobby Singh  
Armando Walle  
Gerald Womack

**For media inquiries, please contact David Mincberg.**

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Januari Leo

Daniel Montes

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Dr. Daryl Knox

Leticia Ablaza

Dr. Lois Moore

Sarah Santiago

**SUPPORTING MEMBERS**

Royce Brooks, Executive Transition Team Staff

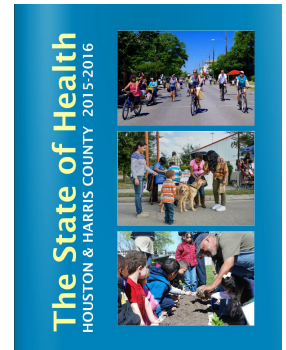
Kathryn McNeil, Executive Transition Team Staff

Stephen Linder, Texas Medical Center/UT Health

Dr. Deborah Banerjee, Houston Dept. of Health and Human Services

## EXECUTIVE SUMMARY

Public health is the endeavor of protecting and improving the health of communities rather than individuals. As a discipline, public health engages environmental issues, nutrition, public safety, the law, and much, much more. Mayor Sylvester Turner’s Public Health Transition Committee researched, reviewed, and developed a comprehensive strategy to address and measure Houston’s **capacity to address issues** that significantly affect Houston’s health, both physically and economically. This committee did not focus on prioritizing health issues or edification of health outcomes.



Houston currently boasts a robust, advanced public health platform that involves industry leaders across many sectors. For example, the **State of Health Report for Houston & Harris County**, largely considered the best attempt at a holistic, collaborative approach to identifying health needs, involved:

<u>City Entities</u>	<u>Other Agencies</u>	<u>Private/NGO/Civic Entities</u>
Houston Health Department	Harris County Healthcare Alliance, Harris County Public Health & Environmental Services, Harris County Control Services Department, MHMRA of Harris County, Harris Health System, Harris County Pollution Control Services Department, Harris County Hospital District, Houston Independent School District	Episcopal Health Foundation UT School of Public Health Lesbian Health Initiative Baylor College of Medicine UT Medical School at Houston

Thus, **Public Health in Houston is a partnership-driven area where the Houston Health Department is but one important pillar.** Under this assumption, the Public Health Transition Committee specifically investigated the following areas through presentations, fact-finding informational sessions and SWOT analysis:

- HHD structure & operations
- HHD funding
- The status of GoHealthyHouston as the city’s largest scale public health campaign to date
- The inter-departmental relationships held by HHD
- The status of relationships/partnerships among HHD, Texas Medical Center, various academic institutions, private organizations, and health sector non-profits.
- The data frameworks employed by HHD

Upon investigation, the committee ultimately elevated feasible opportunities to *connect the dots* of Houston’s health by asking three key questions:

<b>What is COH’s capacity to address public health issues?</b>	Partnerships (Internal & External)	Education & Communication	Data Access & Management	Recommended Initiatives
<b>What is its current strength?</b>	Weak	Weak	Weak	Assessment
<b>How do we improve capacity and outcomes?</b>	Advocacy & Problem Solving	Education & Communications	Organizational Transformation	Recommended Implementation

Based on this discussion, we arrived at the following recommendations.

## RECOMMENDATIONS

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### 1. Immediate steps to organizational transformation within HHD through an audit

#### a. Opportunities

- i. Ensure HHD serves as a centralized delivery hub that connects Houstonians with public health services more than being a health care services provider.
- ii. Ensure HHD collaborates meaningfully with other departments and assesses PH needs within shared data frameworks; specifically geographics/demographics with low involvement and high risks.
- iii. Ensure all existing or potential partnerships in the area of public health funding, advocacy, and collaboration are actively engaged by HHD.
- iv. Mandate involvement of an objective external subject matter expert prior to the launch of the Healthy Communities Institute data platform to ensure it can be a useful tool to many, if not all COH departments and the Mayor's Office.
- v. Audit the human and financial assets for the department, which currently possesses a complex, sometimes overlapping structure of grant funding. This audit will improve transparency of services to the public, realign priorities across all in the sector, and free resources to be applied towards the growth of the city.
- vi. Include the Houston Health Foundation in this audit.

#### b. Steps

- i. This committee has recommendations for a small post-transition working group to audit the HHD *within one month following transition*.

### 2. A role-based model for PH advocacy & problem-solving outside the HHD and close to the Mayor's Office

#### a. Opportunities

- i. Diminish the many silos that characterize PH efforts in Houston.
- ii. Develop a comprehensive, inter-agency, multi-year plan, situated above the HHD, that is directly tied to health outcomes that emerge from shared data frameworks.
- iii. Better utilize the Houston Health Foundation as a development mechanism for inter-sectional and transformative projects with increased transparency and a board appointed solely by the Mayor's Office.
- iv. Serve as an advocate for environmental justice against inequities in air/water quality as well as policies such as Complete Streets and the Houston Bike Plan.
- v. Interface with outreach organizations, including GoHealthyHouston

#### b. Steps

- i. This committee offers a job description for this role with variable implementation methods *within two months following transition*.

### 3. City investment into GoHealthyHouston as permanent integrated communications platform for PH Education & Communications

#### a. Opportunities

- i. Re-draft and re-issue the GoHealthyHouston Executive Order with a broader mission.
- ii. Renew leadership of GoHealthyHouston for the short- and long-term.
- iii. Provide GoHealthyHouston with the resources for a comprehensive marketing plan with deliverables, measurements, and improvable outcomes.
- iv. Unify messaging and outreach capacity to all constituents.

#### b. Steps

- i. This committee also offers a comprehensive plan to overhaul and reframe the GoHealthyHouston initiative *to begin immediately following transition*.

## CRITICAL NEEDS

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In any outcome following Transition, this committee recommends that the following be considered critical needs, areas that are not to be compromised.

1. **Re-issue and re-draft of the GoHealthyHouston Executive Order**, modified to include a wider definition of health issues in addition to obesity (e.g. environmental quality) through interim leadership, at minimum.
2. **An inter-departmental assessment of the City's capacity to address environmental health issues** led by the HHD Bureau of Pollution Control and Prevention with involvement from a designee of the Mayor's Office.
  - a. *Please see addendum 1 for policy issues to explore.*
3. **Mandate external subject matter expert involvement in the city's coming implementation of the Healthy Communities Institute data platform** to ensure it meets the widest needs of the city in the realm of Public Health.
  - a. *Please see addendum 2 for data recommendations.*
4. **A financial audit of the health department to determine when current priorities of the department will become untenable due to funding limitations** (e.g. Houston Health Foundation reserves, MBK grant funding, 1115 Waiver Program), and how the department plans to respond to those challenges.
  - a. Discussion of the Houston Health Foundation

**INITIATIVE: Organizational Transformation****Recommendation: Immediate steps to organizational transformation within HHD through an audit**

The department's mission is to prevent Houstonians from contracting disease, to promote an active well-balanced lifestyle, and to protect from potential hazardous health influences on the general public. The purpose of this recommendation is to urge the HHD to realign the methodology and organizational structure by which it carries out its mission and measures performance.

**We recommend that an independent audit of HHD's infrastructure for services, collaborations, and environmental programs examine opportunities to improve outcomes while remaining fiscally responsible.**

**IMPLEMENTATION**

1. **An audit committee composed of:**
  - a. **One (1) senior HHD employee**
  - b. **One (1) representative from the Mayor's Office**
  - c. **Two (2) subject matter experts (Health Care + Public/Environmental Health)**
  - d. **One (1) representative from the Department of Finance**
  - e. **One (1) representative from the Department of Planning & Development**
  - f. **One (1) community member**
2. **To begin within one month of Transition**

This committee identified that Public Health executive management within the city should:

- Align organizational management, structure, personnel and information systems.
  - **Is this true of HHD?** *Yes, but in a somewhat opaque manner where there is a distinct institutionalized culture that seems to disincentivize innovation and collaboration, though a clear desire and stated intent to innovate/collaborate exists.*
- Develop a working style that meets Houston's needs for global health improvements and verifiable outcomes without being mired in the delivery and administration of health services.
  - **Is this true of HHD?** *This is unclear. The department has a stated intent to focus on global health outcomes rather than delivering services, but a cursory analysis of the department's personnel does seem to indicate that a significant amount of resources directly support the delivery of health care services. It is also unclear whether this is a factor of following easily accessible funding streams or if this is the department's overall interpretation of its mission.*
- Improvement of outcomes through external partnerships. With Houston as the home to a globally leading medical center, top-tier research institutions, and a robust non-profit/NGO sector, opportunities can be leveraged for partnerships to form and implement best practices. Consideration of promotion and navigation to shared audiences and goals presents a potentially high yield of success with these organizations.
  - **Is this true of HHD?** *No, this committee finds that the HHD has had difficulty maintaining long-term partnerships with key stakeholders in the area of public*

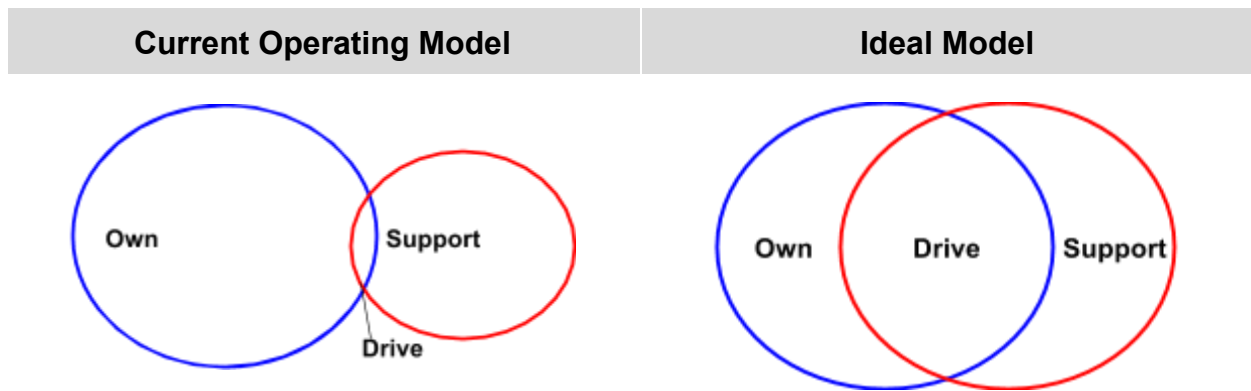
health. Where partnerships do exist, there are opportunities for them to be strengthened and better regulated to meet the needs of Houston’s residents and grant funders.

- Allow the City to meet objectives through grants or tax revenue when we do not have the resources for them via the general fund.
  - **Is this true of HHD?** Yes, the department has excelled in securing federal and state funding for many of its programs. However, this committee has concerns about the Department’s ability to set priorities that are uniquely Houstonian or that are meeting the needs of our citizens when at some points it seems to be “following the dollars.”

Example:

HHD is responsible for the implementation of nine core HIV prevention components in the area: 1) HIV testing, 2) comprehensive prevention for people living with HIV, 3) condom distribution, 4) policy initiatives, 5) jurisdictional HIV prevention planning, 6) capacity building and technical assistance for providers of HIV/STD services, 7) evidence-based HIV prevention interventions for HIV - negative persons at highest risk of acquiring HIV, 8) social marketing, media, mobilization and 9) pre-exposure prophylaxis and non-occupational post-exposure prophylaxis services (PrEP & PEP).—HHD Response Briefing to **Background and Framing Document**

This is clearly an area where there is a room for collaboration and an array of other providers sharing in this mission, and a verifiable outcome that is the shared mission of many. Yet there is no clear ongoing partnership between the Department and other entities providing these services.



## **INITIATIVE: Advocacy & Problem-Solving**

### **Recommendation: A role-based model for PH advocacy & problem-solving outside the HHD and close to the Mayor's Office**

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Beyond the day-to-day operations of HHD, this committee finds the need to address the lack of visibility of existing health programs and services in the greater Houston Community, which limits organic information sharing and amplifies community apathy. The purpose of this recommendation is to have a highly visible, formal mandate to integrate COH health initiatives with inter-departmental, inter-governmental, public-private, academic, and other NGO efforts in order to eliminate gaps in service linkage, continue collective needs, and decrease wasteful spending and resources from taxpayers and/or grants.

This committee also believes that the Mayor has an important role to fill in promoting community health in Houston through words and deeds. To ensure that the Mayor takes full advantage of the opportunity, **we recommend that Mayor Turner implement a staffing mechanism for a Special Advisor for Community Health**, whether this be as a full-time staff member through the general fund, a grant-funded fellowship, as an officer of the Houston Health Foundation, or a hybrid model funded through public-private partnership.

#### **IMPLEMENTATION**

- 1. A short series of meetings to finalize the job description and funding possibilities for this role involving:**
  - a. The Mayor's Office,**
  - b. Public Health Transition Committee Co-Chairs Maya Ford & Marlen Trujillo,**
  - c. Up to two (2) additional members from the Public Health Transition Committee or its recommended Subject Matter Experts, and**
  - d. One (1) representative from the Department of Finance.**
- 2. To begin within two months of Transition, following the HHD audit.**

The opportunity is ripe for the Mayor to build an integrated, interagency, citywide culture of health by establishing leadership through personal example, using the bully pulpit of his office to educate the general public and mobilize and engage community leaders through strong messaging in word and deed.

It will be equally important to include public health promotion through a key Mayoral advisor, if not to establish a single purpose Health Czar. The Mayor's new team needs to fully apprise themselves of the work that's gone before and what programs other cities have successfully implemented.

Example:

*How do we elevate efforts beyond connecting to care under ACA and instead become champions of transformative initiatives like TMC's Health Policy Institute Texas-Care Initiative? This committee believes that a dedicated full-time staffer will be able to address such large issues.*

**See next page for a draft job description of the *Special Advisor for Community Health*.**



## **[Draft] JOB DESCRIPTION: Special Advisor for Community Health**

The Special Advisor for Community Health drives innovation and initiatives by working across city departments, with external partners in the public, private, and nonprofit sectors. These duties are intended to ensure cohesive, visionary and strategically sustainable outcomes for maximizing community health. The creation of this position and the broad deployment of the Special Advisor will also signify the importance of the Mayor's support to community health, which in turn, will advance opportunities for broad collaborations necessary to achieve community health.

### **Responsibilities:**

- Work with the Mayor on establishing and implementing a unified and holistic vision for public health for Houston with a comprehensive plan
- Provide policy and budget analysis relevant to public health systems and services in Texas
- Make policy and budget recommendations and drive public education
- Oversee and expand the GoHealthyHouston initiative to include identified health disparities facing the city
- Other duties as assigned

### **Main Functions:**

- Undertake policy research to improve access to public health services in Houston
- Monitor county, state and federal public health policy that will impact Houston
- Make policy recommendations
- Write policy reports and other policy communications
- Work with national organizations to incubate innovative solutions in Houston, first
- Make public presentations
- Establish and maintain relationships with key policy and opinion leaders such as Harris County Commissioner's offices, City Council Committees, Division and Department Directors.
- Provide data and information to assist others in their efforts to improve public health systems and services
- Serve as a media resource, liaison, and expert on public health policy issues
- Work with coalitions of public health providers, consumers, advocates, and other stakeholders to improve public health systems and services
- Write grant proposals and reports for foundations and other funders

## **INITIATIVE: Education & Communications**

### **Recommendation: City investment into GoHealthyHouston as permanent integrated communications platform for PH Education & Communications**

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The direction of the GoHealthyHouston initiative is stagnant relative to the original intent and purpose. It is a priority clarify and reignite the educational promise GHH was built upon. The opportunity to identify the audience, tailor the message, and deliver for results requires a realigned infrastructure that includes messaging, clarified roles and responsibilities, and a delivery plan.

**We recommend that the Mayor capitalize on the existing GoHealthyHouston framework, brand, web and social media tools, using it as a platform for widespread collaboration and an integrated city-wide communication and education tool.**

#### **IMPLEMENTATION**

- 1. The Public Health Transition Committee will provide the Mayor's Office with a redline version of the existing GoHealthyHouston Executive Order and interim leadership to assess its current state immediately following transition.**
- 2. Re-issue and re-draft of the GoHealthyHouston Executive Order to incorporate and launch the following:**
  - a. An expanded charge beyond obesity that is intended to foster inter-agency, inter-departmental, and public-private communication and collaboration (including HIV/AIDS prevention, environmental risks and improvement, and access to care)**
  - b. Newly-appointed chairs**
  - c. Refreshed membership of the GoHealthyHouston committee**
  - d. Clear points of contact for logistical support within the HHD**
  - e. Funding source and deliverables for a comprehensive marketing campaign to promote healthy behavior and educate Houstonians about the resources already available to them through:**
    - i. Messaging**
    - ii. Content Delivery**
    - iii. Data**
    - iv. Measurement**
    - v. Improvement**
- 3. Kick-off TBD by interim GHH leadership.**

*The overall goal should be to reposition GHH as a public-private partnership rather than a task force. Consideration should be given to linking it directly with the Houston Health Foundation so that simultaneously the latter entity will have a renewed focus for development. Since resources do not apparently seem to exist for GoHealthyHouston promotion and marketing, the committee recommends HHF be considered as the chief development arm for those purposes. However, this is just one possibility.*

**Please see pages 10-11 for draft timeline and further explanation of the need to revive GoHealthyHouston.**

## REVIVING GoHealthyHouston

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Guided by the national campaign to *Make The Healthy Choice the Easy Choice*, the GoHealthyHouston committee must represent a cross sector group of agencies, NGOs, non-profits and community leaders. This process can be supported by a professional marketing and communications agency to create an integrative campaign that addresses every level of user experience and is synthesized vertically throughout the community. This promotes integration of every aspect of healthy behavior and well-being across sectors including brick and mortar infrastructure, transportation, housing, quality of life and education.

A reasonable budget should be established to support an integrated GoHealthyHouston marketing and communications campaign. This budget could be supplemented by in-kind gifts of goods, services and financial grants. A direct representative of the Mayor (not an agency head), can actively serve on the GoHealthyHouston committee, will be responsible for keeping the Mayor informed, engaging other city executives and departments, and oversee GoHealthyHouston operations, fundraising and budget.

The Mayor's ability to lead the way by actively exemplifying the GoHealthyHouston messaging in word and deed is a simple way to build trust and "live the brand". Using his personal lifestyle choices to regularly and publically "bear witness" and promote his healthy lifestyle and healthy choices via appearances at key events, kick-offs, press conferences, etc. engages others to follow by example and the desire to replicate the successes of a healthy leader.

We suggest the following process:

### **Year One**

1. Mayor appoints refreshed GoHealthyHouston Chairs and Committee
  - a. Establish an advisory committee to GoHealthyHouston comprised of a representative of each city department charged with educating constituency, amplifying and supporting the committee goals and objectives
2. Mayor designates executive (reportable only to Mayor) and staff to support efforts of the GoHealthyHouston Committee (with clear reporting lines that are free of other agency influence).
3. Conduct a citywide inventory of existing public service and education campaigns that highlight public health resources and promote healthy behavior; identify gaps and opportunities to :
  - a. Establish a regular opportunity for county-wide cross sector reporting and collaboration with GoHealthyHouston Committee
  - b. Explore reallocation of existing resources to fund a GoHealthyHouston public service campaign
4. Mandate organic incorporation of GoHealthyHouston logo in all available city collaterals and signage (reprints of brochures, METRO property, billboards, etc.) as available
5. Identify and secure funding for staff support, design and launch of a multi-year marketing and information campaign to
  - a. Identify the audience
  - b. Tailor the message
  - c. Establish the methods & tools

- d. Deliver the results
- 6. Establish a sub-committee for Marketing & Communications Agency search
  - a. Write a request for proposal outlining services for agency tasked with creating a community-wide public service campaign that utilizes traditional and non-traditional media platforms, and leverages partnerships to effectively close the communication gap with members of our highest risk citizens

**Year Two**

- 1. Recruit and orient new committee members
- 2. Establish support framework with combination of interdepartmental staff, dedicated staff, volunteers and interns with clear reporting lines to execute and support elements of the GoHealthyHouston campaign
- 3. Establish measurable goals for an integrated marketing campaign
- 4. Secure a competitive marketing and communications agency to design and deliver an integrated multi-year campaign to Make the Healthy Choice the Easy Choice:
  - a. Develop comprehensive messaging specialized to engage multiple audiences
  - b. Identify and develop a plan and schedule for the most effective and far-reaching content delivery
  - c. Design and support infrastructure to collect data from day one
  - d. Establish measurement processes, tools, and dashboards to enhance and/or leverage results for alignment of the project's initiatives
  - e. Review opportunities for improvement and teach processes for best practices in order to support a sustainable campaign without being cost prohibitive

**Year Three**

- 1. Recruit and orient new committee members
- 2. Measure, report and adjust

## Addendum 1

### Addressing Environmental Health Issues

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This committee recommends as a critical need within 2016 an **inter-departmental audit of the City's capacity to address environmental health issues** led by the HHD Bureau of Pollution Control and Prevention with involvement from a designee of the Mayor's Office.

This audit should examine existing environmental health priorities held by the HHD, the impact of each to Houston's population, and our ability to drive measurable outcomes within the scope of municipal operations and policy statements.

Areas to investigate for infrastructure and policy positions are Air Quality, Water Quality, and Emissions.

#### Why?

- 2015 was a "bad year" for ozone with levels exceeding 80 ppb for an 8 hour period, the current EPA standard. Further, EPA has recently set a new health-based standard of 70 ppb over an 8-hour averaging time.
- Researchers such as Alex Cuclis at HARC maintain that we do not have an accurate inventory of ozone formed by emissions from the Houston Ship Channel and moving from east to west across the City—that our current estimates of VOC emissions from tanks and other industrial sources may be off by a factor of five.
- There are almost no enforceable air quality standards for air toxics. Instead, they are regulated, if at all, by an amalgam of more general requirements and some specific regulations applicable to larger sources.
- Air toxic emissions are particularly dangerous for neighbors living adjacent to facilities handling these toxics, which include benzene, formaldehyde and other organic chemicals as well as heavy metals.
- Often, hot spots of air toxics exist within communities. This is an important public health area that can and has been overlooked by City administrations in the past.
- Environmental justice issues generally arise in the context of minority or low income communities being subjected to higher levels of pollution than the public at large. Environmental justice issues should be seriously monitored and the City might consider establishing a strong liaison with the EPA's environmental justice initiatives.
- The major water quality problem within most bayous is bacterial contamination, often associated with overflows from sewage collection lines during rainfall events. These issues are in the process of being addressed by Public Works Department and the Legal Department.
- Many "new" pollutants are beginning to emerge in drinking water, most notably pharmaceuticals. When we use pharmaceuticals, our bodies expel them. Unfortunately, our typical wastewater treatment plants are not designed to treat these chemicals that are dissolved in the water system. Lake Houston receives effluent from about 300 sewage treatment plants, and Lake Houston is a primary drinking water source for the city of Houston. Under the federal Safe Drinking Water Act, no testing for pharmaceuticals is required for drinking water in the United States.

## Addendum 2

### Meaningful Data Centralization & Collaboration

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This committee recommends that the City, through the HHD or Mayor's Office, consider becoming the central coordinating body to pull together the disparate agencies who have either launched or are planning to launch health data assessments and platforms. Different agencies and stakeholders all ostensibly working toward the same goal have up until this point used highly unique reporting methodologies and platforms with limited knowledge sharing or deliverable outcomes.

There is a definite need for a centralized data platform in Houston and **institutionalized knowledge sharing methods in the form of a summit or conference initiated by the Mayor's Office**. Although Rice University and other research institutions may be interested in filling this role, discussions should take place regarding the best site for such considering there is a strong public and economic development interest in this area for the City of Houston.

Ultimately, data should be collected at the lowest level of geography, Census Block Groups and Census Tracts. From a macro visualization standpoint, this committee does find that superneighborhood boundaries can function as an ideal level of geography to report on a smaller community level.

#### Known data platforms:

##### City Entities

- Healthy Communities Institute
  - Owned by HHD
  - Will have an inter-agency governance committee
- HPARD data from Parks Master Plan
- BG2020 data
- Market Value Analysis
  - Housing & Community Development Report

##### Other Agencies/Inter-Agency

- Harris County Healthcare Alliance (dissolved)

##### Private/NGO/Academic

- UH
  - Dr. D. Price
  - HUD-funded
- UT School of Public Health
  - Dr. S. Linder
- Rice Houston Area Survey
  - Kinder Institute
  - Dr. S. Klineberg
- Rice Urban Data Platform
  - Kinder Institute
- Rice Houston Education Research Consortium
  - Kinder Institute
  - Dr. R. Turley
- Rice Houston Sustainability Indicators
  - Shell Center for Sustainability
  - Dr. L. King

**In the meantime, we recommend a critical need the immediate intervention through the Mayor's Office into the launch of the Healthy Communities Institute platform to ensure it is a satisfactory product for public health planning in the City across departments.**