

Members of the Health Coalition of Lubbock were asked to respond to the following statement that has come from the city leadership.

Moving health dept services out into other non-governmental agencies will not change those services and Lubbock will still have a health dept.

The following responses were received...

Continuity of Care and Linkage to Care are two essential concepts to successful public health. Continuity of Care addresses the quality of care over time. Linkage to Care is concerned with the successful referral and access to needed services for the whole patient (Immunizations, medical tests, access to records, etc.). By dismembering the Lubbock Health Department, patients seeking public health services will be met with added barriers to Continuity of Care and Linkage to Care by requiring them to further navigate public health services in Lubbock. Rather than going to one place for most of their public health needs, patients will be forced to travel to different clinics and agencies, fill out more paperwork, provide more documentation, pay more office copays and fees, and spend more time in waiting rooms than they would with a central public health location.

Ricky Waite

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In my mind there are 2 things wrong with the comment.

1) From my understanding, there are no local non-governmental agencies that are adequately equipped to take over the necessary services that the current health department provides. From the docs on the county medical society public health committee and others speaking at the Public Health Coalition meeting, there does not seem to be any confidence in the top alternative facilities (Combest Center?). Moreover, the physical site of the current health department seems idea or a strength at the very least. To truly offer a similar level of service provision, there would need to be a serious effort to have equivalent outreach so that no patient loses care due to inability to access the NGOs. Otherwise, there is a substantial loss in quality of these services.

2) Even if local non-governmental agencies WERE able to provide these services at the same level of quality as the current health department, losing a central coordinating body could be detrimental to the city health infrastructure and the health of the citizens of Lubbock. Public health challenges are complex and require collaboration among many community members. But there must be central leadership. Public health requires public policy. Public policy requires the leadership of public health authorities. Dismantling the public health department to be a single person with a supporting nurse simply cannot adequately supply the complex role that a community needs to address the public health challenges of Lubbock. If nothing else, it is a

symbol that local officials do not prioritize health or do not understand the importance of a central public health department.

Fragmentation will harm public health coordination. Central coordination is the way to ensure the level of services do not diminish. The Hub city needs a public health hub.

Justin Berk, MPH

Ricky,

Your words are so true!!! This is what I want is one central location for all public health services. It may not be at Texas Ave & 19th Street, but it does not need to be subcontracted out because then we have no central authority. This was very apparent this past week with the Hep A outbreak. The "Health Department" used every resource available (Surveillance Nurses, STD Nurses & Immunization Nurses) besides agency nurses, Fire Department personnel and anyone else they can find to give the immunizations to the 7,700 individuals exposed to the Hep A infected individual.

If we subcontract out the services and we have health disaster, there will not be a central authority to oversee what needs to be done. Plus, will subcontractors be the central notification for STDs, reportable diseases, outbreaks, etc?

These are my concerns and should be the concerns of every person in Lubbock and Lubbock County.

Linda M. Brice, RN, Ph.D.

Can you supply evidence of a single entity capable of completely supplying any one of the services currently under debate (STDs, Immunizations, or Surveillance)? From what little is know about the groups that responded to the call for proposals, no single group has stepped forward wanting to provide all of this needed and necessary care. Individual groups have shown interest in each part, but do they really have all components in their organization to provide coverage of the care currently supplied by the health department? and if so by who's assessment? Further, in the area of immunization, it is not uncommon to have the young and old of a family seek the shots at the same time. Is it desirable or wise to have that function split at several sites based on patient age. It is not necessary to keep the Health Department in its current location (although care should be given to place it in an area accessible to the population it serve), it may not even be necessary to keep a traditional Health Department format, but what is necessary is a continuation of serves. We can not afford to experiment with the health and safety of our community in order to save a few dollars up front. The long term consequences and costs will be devastating.

Sam Prien, M.D.

my primary professional concern is the epidemic (not just endemic) protection afforded by an administratively “united” health dept.; as Linda reminded us, they recently [Cheddars incident] worked so well together; make no mistake: that’s the result of *past* organization & training ... the model of what a 21st Century metropolitan health dept. should look like, and how we expect it to function. My prediction: in a city of > 250,000 folks (plus many other county residents working, eating, & shopping here) + significant college populations & many international connections ... an agent more-serious and -rapidly moving, than hepatitis A, will appear. The most likely, by far, a re-assorted influenza A or other upper respiratory virus; it’s simply a matter of when ...

Ron Warner

I am a newcomer to this group, so I don’t know a lot of details about what’s happened, but let me say that when I first learned last week that Lubbock was doing away with its public health department, I was quite shocked. My concerns are, first and foremost, related to my role as a parent of three young children. However, I am also a researcher who specializes in health communication, so I have other concerns related to that as well.

I learned about the plans through a petition that was circulated on Facebook. When I tried to do some Internet research to learn more details, it was not easy to piece together exactly what had happened. I was very glad to finally come across this coalition’s website because it is the most coherent and credible source of information I could find.

As a communication researcher, I am intensely aware of the central role that communication can play in relation to health, especially in the crisis situations that others have already mentioned but also in ordinary health-related behaviors and choices (like immunizations). A public-health department is responsible for designing, distributing, and monitoring the effects of messages about health-related matters that affect the citizens in a community. As a response to the challenge statement, I am most concerned that if public health in Lubbock becomes increasingly fragmented, there will be no person or entity responsible for this type of strategic communication that is so crucial to public health. If my own difficulty in locating information about the series of events that have unfolded in Lubbock over the last several months can be taken as any indication, effective communication between policy-makers and Lubbock citizens has not been a primary concern in the events that have unfolded so far. I would ask, then, what is the plan to ensure consistent, credible, and efficient communication in times of health-related crises? I know that with the increasing availability of communication technologies, there is a tendency sometimes to think we don’t need to worry about communication anymore, but it is quite the opposite; as the means and channels of communication continue to proliferate, it becomes even more challenging for communication professionals to strategize and make sure they are effectively reaching their target audiences.

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