Public Health in Galveston County
A Historical Recollection by the History Council Committee of the Galveston County Health District
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Early Years

The Galveston County Health District is the culmination of many initiatives to address local public health needs, many dating back to the founding years of Galveston County.

Texans experienced many epidemics during the nineteenth century including; Cholera, yellow fever, smallpox, dengue fever, measles, diphtheria and whooping cough. Galvestonians experienced at least nine yellow fever epidemics between 1839 and 1867 which terrified the entire community. During that time doctors did not understand the role that mosquitoes played in transmitting yellow fever. Many thought that garbage and stagnant ponds produced airborne particles that caused the disease.

In an early public health effort leaders pushed for sanitary cleanups when epidemics appeared or threatened. People began to push for the use of quarantines to prevent the spread of the disease even though a prominent local physician believed the fever was not contagious. Coastal residents became confused when these efforts did not stop the spread of the disease. During the epidemic of 1853, approximately 60 percent of the island’s 5,000 residents became sick and 523 died.

In March, 1850 Galveston voters passed quarantine regulations which were strengthened in 1853. During that same year money was appropriated and the first quarantine station in Texas was built. In 1856 the Texas Legislature also authorized the creation of local quarantine regulations across the state. This action is said to be the beginning of the current Department of State Health Services.

The first Catholic hospital, St. Mary’s, was opened in Galveston in April 1867. During that same year between July and November both St. Mary’s and the Island City Hospital were filled to overflowing with yellow fever patients.
The strict, sometimes draconian control measures did prove effective. In 1876 there was no yellow fever in Texas despite the fact that neighboring New Orleans had an outbreak. In 1848 it was suggested that mosquitoes transmitted yellow fever which was finally proven in 1900 allowing the community to take measures stopping its spread.

During these early years between 1875 and 1881 the Galveston City Health Department was organized. Employees worked tirelessly to curtail mosquitoes, control the rat population and pick up trash. The city actually hired “rat catchers” to trap rats on the wharves and merchant ships in an attempt to control disease.

In March 1881 the Seventeenth Texas Legislature authorized the establishment of the University of Texas Medical School and decided that Texans would determine its location by popular referendum. The legislators also decided that Texas could locate the medical school in a city that was not the same as the one selected for the main campus and in an election held in September of that year 70 percent of the voters selected Galveston over Houston for the location of the medical school. The City of Galveston deeded the “Island City Hospital” to the State of Texas thus establishing the first medical school in Texas.
1900 – A Mighty Storm

By 1900 the institution had graduated 259 men and six women as physicians, seventy-six men and six women as pharmacists, and fifty-four women as nurses. In 1919 it was renamed the University of Texas Medical Branch.

In September of 1900 the Great Galveston Storm struck the island which remains the nation’s deadliest natural disaster ever with an estimated death toll over 6,000. With the tremendous number of corpses left on the island community leaders quickly realized they must do something to control the spread of disease. Efforts to dispose of bodies at sea were unsuccessful when many washed back to shore. Eventually large funeral pyres burned night and day to dispose of the remains.

It is estimated that more than 6,000 lost their lives to the 1900 storm, presenting a public health emergency.

One of the leaders in addressing the health needs of the community was Jean Coventree Scrimgeour Morgan a native Galvestonian. One of her efforts was the Women’s Health Protective Association founded in 1901 to help clear the debris and rebury the dead from the 1900 storm. She also advocated the establishment of a public health nursing committee which was instituted in 1919. She continued to work with the committee until 1936 when it became the Galveston Public Health Nursing Service, and she became president. The agency set up a visiting-nurse service and opened medical clinics on the east and west ends of the island for mothers and babies. (1)
Early 1900’s

In the early 1900’s the Galveston City Health Department’s primary concerns were mosquito control, rodent control and garbage problems. In the 1940’s their focus changed with some assistance from the Texas State Health Department. Services including public health nursing, food inspections and venereal disease control were conducted in the community.

Due to the presence of military installations on the island the U. S. Government announced plans to expand Galveston’s John Sealy Hospital and build a Marine Hospital serving all merchant marines, veterans, longshoremen, and other special classifications. The Marine hospital complex was completed in November 1931, and operated for more than twenty years when it became a public facility in 1951.

During the hospitals remaining years it saw much growth and served many civilian cases. Locals remember it playing an instrumental role in the historical Texas City explosion of 1947. Upon closure of the facility in the 1980s, it was transferred to the County of Galveston which used the buildings to house public health offices of the Galveston County Health District and the 4C’s Medical and Dental Clinics.
Galveston County Grows

During the 1940’s growth was also taking place on the Galveston County mainland and the need for a public health service was recognized. Some of America’s men were stationed at Camp Wallace in Hitchcock, a training center for antiaircraft units in World War II. Soldiers were also stationed at the Hitchcock Naval Air Station for lighter-than-aircraft also known as blimps. At the request of the County Commissioners Court a committee of citizens was appointed to investigate local eating establishments and businesses. This came after military leaders contemplated declaring certain eating establishments “off limits” to their men (3).

A leader of the committee, Dickinson banker Walter Hall, recognizing the economic impact such a decision would have recommended in no uncertain terms that a health department be created in Galveston County. On August 18, 1943, a budget of $13,200 was approved for the Galveston County Health Unit which began operation on the first day of September that same year. In the beginning the unit was located in La Marque’s “Old Red Brick School” building with two grades of primaries still being held upstairs.

The Mainland Cities Galveston County Health Department was supported by the State of Texas Department of Health as were services in Galveston. This remained the system for providing public health services in the county for several years to follow.

While growing in population and a framework of public health in place there still remained many challenges for providing public health through the 1940’s. One early employee, Reid Martin RS remembers being known as the “Rat Man” for his efforts in controlling the
rodent population in Galveston. Due to the port and ships arriving from around the world rats were a major problem in Galveston. Some estimated that they may have outnumbered the human population by a 20:1 ratio. Issues contributing to the problem included people still having chickens and cows on property, poor refuse services, and other sanitation problems.

Health Inspectors at the time had difficult and wide ranging assignments. Besides conducting food inspections and rodent control they were also charged with enforcement of State Health and Sanitation Laws as well as local health policies. Further, they were often called to enter the local sewers and identify leaks.

The first major change came in 1957 when the City of Galveston Board of Health was formed. This board ultimately combined the separate public health activities of the Galveston City Health Department, the State of Texas Public Health Nursing Program and UTMB into one department under the direction of a single health authority for the city.

During these early years disaster related health services provided by the Galveston County Health Department were important. This was particularly true following Hurricane Carla in 1961.

Health officials notified all county residents that they should be inoculated against typhoid fever or get their booster shots after the storm. If private physicians had been the only source for the shots, they would have been too busy to take care of their sick patients. The material and equipment was provided by the health department, as were the nurses who gave the shots.

These events and others underscored the need for enhanced public health services in Galveston County through the years. In 1959, the Galveston County Health Department building located on Oak Street in La Marque was constructed.
Dr. Louis Riley was named as the interim Director of the Galveston County- Mainland Cities Health Department from 1968 to 1971. Following the dismissal of Dr. Riley, Dr. John Reeves was named as the interim Director from 1971 to 1972. As a result of these community needs leaders decided to create the Galveston County Health District in 1971 which required state legislation. Governmental agencies comprising the District included the County of Galveston, seven cities and one water district; Texas City, La Marque, League City, Kemah, Hitchcock, Galveston, Clear Lake Shores, and WCID No. 1 of Dickinson. At that time, the City of Galveston elected not to participate in the agreement, but would hire the executive director of the District as their health authority.

A search was started to find a director for the district which would have two branches, one in Galveston and another servicing the Mainland. The two health clinics, one on Galveston Island and one on the Mainland were established in 1970 by Dr. Riley while he was the interim director.

The duties and responsibilities of the director were determined to be the following:

- Chief executive and medical officer of the Public Health District offices on the Island and Mainland
- County health officer
- Budget officer for the health district, being responsible for all budget requests submitted to the participating governmental agencies.

It was proposed that a board of health would be selected to oversee the district made up of nine members. It would include three medical doctors, one veterinarian, one dentist, one engineer, one nurse, and two citizens at large.

While negotiations continued Texas City became the first to approve the agreement on January 20, 1971. (5) Other cities on the mainland also approved the district over the next month. On February 4, 1971 members of the Galveston City Council finally approved
the district on a five-to-two vote. This took place after Galveston County Judge Ray Holbrook and Commissioner Earl Llewellyn met with the council to discuss the district and the need for Galveston to join. (6) Galveston County Commissioners went on to approve the district on February 8, 1971.

Galveston County’s Judge Holbrook was named the Commissioners Court representative to work with a group in selecting the nine-member Board of Health. Local physician Dr. John Reeves the previous director of the Galveston County-Mainland Cities Health Department became the acting director of the Galveston County Health District and planned a nationwide search for a permanent director. (7)

Plans began to move quickly and on March 8, 1971 architects presented plans for an expansion of the county health unit in La Marque. Proposed enlargement of the existing facilities was estimated to cost approximately $160,000. (8)

Names of potential Board of Health members also began making the rounds of member agencies and cities. On April 5, 1971 the first Board of Health was approved and included the following: (A) Dr. John P. Reeves of Texas City, (B) Dr. Edgar Jones III of Galveston, (C) Dr. Milton Hejtmanck of Galveston, (D) Dr. Ned Dudney of League City, (E) J. Nolte, DVM, of La Marque, (F) dentist Dr. M.W. Brantford of La Marque, (G) Dave Dunn, Civil Sanitary Engineer of Texas City, (H) nurse Ruth Bender of Galveston, and Citizen at Large nominees (I) Hall Dansby of Galveston, and (J) J.B. Hayes Jr. of Kemah. (9)

In January of 1972 the new United Board of Health (UBOH) announced they had selected their first Executive Public Health Director, Dr. Walter W. Kemmerer Jr. Kemmerer had worked extensively in the NASA space program. He explained his desire to work in public health, “Most people have a common misconception that public health has something to do with public restrooms, but today there is a much broader context.” (10)

Public health services provided by the District began to expand. In September 1972 the UBOH passed a two point recommendation concerning tuberculin screening for school employees in Galveston County. The board recommended that all school employees receive a skin test, and offered to provide mass screenings at school districts. The Board also announced that a venereal disease clinic would open in La Marque October 1972.

That same year the Galveston City Health Department was given a grant to fight gonorrhea which at the time was the number one venereal disease (VD). Six employees, two federal and four city/state, were hired for the VD program to find cases and conduct surveillance activities. Although the employees were located on the third floor of City Hall the VD clinic in Galveston was located at 4200 Avenue Q and operated two days a week. It was staffed by employees of the Galveston City Health Department and they were paid through the Texas Department of Health. The physicians were from the University of Texas Medical Branch Galveston and they worked part-time rotating through the clinic.
Prior to the formation of the District air pollution control activities had been a separate department within county government since 1968 funded with federal and local funds. The District continued to establish itself as an agency for the entire community by working with city and county leaders on a myriad of programs. At the beginning of 1970 it was announced the Galveston County Health District had been awarded a $61,445 air control grant from the Environmental Protection Agency. The Air Control Division came under the umbrella of the District in 1972.

After a brief time in existence county-wide services operated by GCHD included a full range of health and environmental activities- air and water pollution control, solid waste regulations, sanitation and sanitary regulations and animal control services, two health clinics providing medical and dental care for the medically indigent, a mass immunization program, a venereal disease control program, as well as maternity, well-baby, and TB specialty clinics. In addition rabies control services were managed for Galveston, Texas City, La Marque, and the unincorporated areas of Galveston County.

The State Legislature had previously given counties the capability of passing ordinance regulating sewage, solid waste and animal control, and in 1974 the Galveston County Commissioner’s Court passed the first “On-Site Sewage Facilities Ordinance” for Galveston County. It was the first in the state of Texas and existed prior to the state taking over this program. The ordinance regulated the size of septic systems, and it also required that all homeowners get their plan approved by a sanitarian prior to having a septic system installed. After installation, the operation had to be approved and permitted by the District.

Septic System Inspection
A significant reduction in air pollution complaints also occurred in 1975. The 372 citizen calls received by the air pollution department was the lowest figure in five years and less than half of the 789 complaints received in 1974. The county received an award from the National Association of Counties for the air control program.

Another 1975 public health highlight was the handling of a typhoid fever outbreak in the county during October. The district reported, investigated and supervised the follow up of the illness outbreak. In less than 36 hours after the first suspected case, epidemiologic investigation pointed to a Texas City restaurant as the source, and action was taken. Further investigation confirmed a local restaurant cook as the typhoid carrier. Dr. Kemmerer was the epidemiologist on this typhoid fever outbreak. He led a team of sanitarians, public health nurses and lab personnel.

The City of Galveston had an ordinance regulating milk, ice cream and soft mix and required that samples be taken monthly from trucks coming into the city to deliver milk and ice cream. The soft mix ordinance required that a sample be taken from each soft mix machine in the city and all of these samples were taken to the district’s State Lab in La Marque and tested to make sure they were safe for consumption. A sanitarian from La Marque went to Galveston three Mondays out of each month to pull these samples. This program continued until the Texas Department of Health took over the milk and dairy program.

In February 1976 the United Board of Health was given the authority to pass and enforce health regulations. The UBOH approved this requiring that any proposed regulations be submitted to all contributing agencies and/or member cities for their recommendation and approval before the board could enact regulations.

One of the first regulations enacted by the board was a Food Handlers Training regulation requiring a six hour training course for food service workers. While there was some industry opposition the regulation was eventually passed. The first Food Handlers training classes were given by Health District staff at Texas City’s Nessler Center.

Galveston County and El Paso County had the first mandatory Food Handler’s Training Courses in Texas. The Board of Health passed other regulations addressing many public health issues. These included a Water Well Ordinance, an On-Site Sewage Facilities Ordinance, a Swimming Pool Ordinance, a Food Service Establishment Ordinance and a Retail and Wholesale Food Store Ordinance. These regulations were later amended and updated by the Board of Health. These regulations addressed problems such as fences around swimming pools to protect children, approval of plans for construction of private water wells and septic tank systems, and registration of septic tank installers in order to work in Galveston County.
In February '76 a satellite health center was opened in League City. The clinic offered walk-in immunizations, health card check-ups, family planning, well-child clinics and even a stop smoking clinic.

County Commissioners also approved the hiring of an architect to develop plans for a new environmental health center building in La Marque with a price tag of $450,000. The need for the new building was stressed by members of the United Board of Health and others in the community.
March 1976 saw community protests with the announced closing of the U.S. Public Health Service Hospital in Galveston. The Galveston County Commissioners Court passed a resolution opposing the closing of the hospital but balked on a local council of government’s recommendation to move it to the Space Center Hospital in Clear Lake. Despite the strong community protest the hospital did close. (2)

A possible swine flu pandemic was also making news as the 1976-1977 flu season approached. Public health nurses with the district prepared to administer the shots which could be given individually or combined with the regular seasonal flu vaccine. Plans continued as a national debate on the effectiveness of the vaccine raged on. The District received the first of 7,900 doses of the vaccine in October. District officials estimated the county would need 100,000 to 115,000 doses to adequately protect residents.

In July 1976 the Galveston County United Board of Health exercised its policy making powers again by proposing a law regulating tattoo parlors in Galveston County. At the time there were no parlors in the county but a request to establish one had been received.

Groundbreaking for the District’s new environmental health service building which the District started planning in 1976 took place in November 1977. The building was designed to serve as a training facility, housing for Air and Water Pollution departments, Sanitation and Animal Control Departments, and would contain a comprehensive public health bacteriological and chemical laboratory. The new building was to be built with county and U.S. Department of Labor funds and named the Walter and Helen Hall Environmental Health Building.

The new building would come at a time when progress was being made toward achieving clean air goals in Galveston County. This progress was marked by lower industrial and vehicular emissions of hydrocarbons, sulfur dioxide and particulates which produced lower levels of these pollutants in the air.

1977 was an active year for the Water Quality Control Section who conducted a countywide water pollution control and abatement program and a public drinking water system oversight and surveillance program.

In December 1977 the United Board of Health approved the tattoo policy proposed earlier. According to the District’s chief sanitarian at the time it likely was the first of its kind in the nation. It required tattoo artists to pay a licensing fee and use sterile equipment or be subject to a $200 fine. The policy was sent to city governments and County Commissioners for recommendations before a second and final reading.

The first lead poisoning program came to the Sanitation Department in the late 1970’s when the Chief of Pediatrics at UTMB found a number of children with high lead levels in
their blood. She requested that a sanitarian, Janet Greenwood, work with her on this program and visit the homes of the children and take paint scrapings from the chipping paint in their houses and submit these to the State Lab in Houston. If the paint came back with lead in it, the sanitarian put the owners of the homes on notice to scrape off the lead paint and repaint and the child could be treated for lead poisoning.

1978 started off with three Galveston County residents being diagnosed with botulism. Members of the same family had been buying damaged canned goods from a Galveston grocery store. Suspecting one of the damaged products could have been the cause of illness GCHD impounded the store’s damaged goods inventory. GCHD officials requested assistance from the Centers for Disease Control and the Food and Drug Administration. (15) Following a lengthy investigation a definite source of the contamination was never identified.

In 1978, GCHD introduced a telephone service offering citizens information on a variety of medical subjects in September. The service “Tel-Med”, offered information on some 250 medical topics. Residents would call an assigned telephone number and request a taped message. Tapes covered such subjects as cancer, meningitis, vasectomy, and family planning. The program was financed by a grant from the Health, Education and Welfare Department. A report given to the United Board of Health at the end of the month noted the Tel-Med program was receiving over 100 calls per day.

There was a large explosion in May 1978 at the Texas City Refinery that killed five. Many expressed concern that those near the facility may have experienced lead poisoning as a result of the explosion so the District conducted lead tests in the community. After testing 39 residents with no abnormal lead levels detected the District announced that no health threat existed. Environmental Protection Agency representatives came to the same conclusion.
Another hot issue in 1978 was air pollution and whether Galveston County would be considered rural, which required fewer federal regulations, or be included with Houston as an urban area. Community debate on the best possible action took place, and in July the United Board of Health took a stand and endorsed a proposal that designated Galveston County a rural county separate from Harris County for purposes of meeting federal air pollution control standards. It was the opinion of District officials that the rural designation would pose no health threat for the general population.

The Texas Water Quality Control Board reported a Dickinson Bayou fish kill in September 1978. It was determined that an increasing amount of nutrient concentrations along the bottom of the bayou along with an ongoing algal bloom caused the death of more than two million fish in August.

Talks were also taking place in 1978 between City of Galveston and Galveston County officials concerning consolidating health care services. At the time Galveston’s city health department remained semi-autonomous from the county’s health district. City officials were concerned that too much money was being spent on care for the poor which they deemed a county responsibility. County officials told city council members the reason the city had a health department was because in 1971, when the Health District was formed, the city was suspicious of the new district and insisted its health department remain separate from any county health functions.(16)

During this time the City of Galveston did not participate fully in the county Health District even though the county was paying nearly all of the bills and the city was handling only animal control and EMS. In particular the city had a rodent-control employee. The rodent officer regularly inspected parks and public areas, including beachfront rock areas, and put out a poison safe for use around pets and children.

January 12, 1979 the District’s new Environmental Health Center which was approved in 1976 was finally dedicated. The building was named the “Walter & Helen Hall Environmental Health Center” after the Halls who were the driving force behind making sure the facility became a reality. The new building housed all environmental and sanitation personnel and included a teaching auditorium for the district’s food handler’s training course. A comprehensive public health laboratory allowing the district to do in-house testing for water, air, microbiology and dairy products was also included. The building was completed at a cost of $664,000.
At a March 1979 meeting the United Board of Health considered increasing the number of members on the board. Proposed changes would increase the board by the addition of a restaurateur and a person in the grocery business. Also included on the board would be three practicing physicians and a dentist.

July 1979 brought widespread flooding to the county following Tropical Storm Claudette which dropped over 30 inches of rain in 24 hours in the Dickinson and Clear Creek watersheds. Some of the areas that experienced major flooding included those along Dickinson Bayou, Highland Bayou and Clear Creek. It was the worst flood experienced in Galveston County since Hurricane Carla in 1961 and flooded over 500 homes in Dickinson, Friendswood, League City and Hitchcock.

The health district’s public health laboratory worked to test drinking water systems to make sure water was fit for consumption. Over 45 community public water systems in the County were surveyed and cleared, where necessary by laboratory analysis.

Free Tetanus immunization clinics were quickly established for anyone cut or injured during the floods. Teams of sanitarians were sent out by the district to monitor food contamination primarily in the Friendswood, League City, Dickinson and Kemah areas. In some cases sanitarians would actually follow grocery stores to the dump and make sure contaminated food was disposed of.
A proposal to dispose of radioactive waste from South Carolina at Todd facilities in Galveston prompted the United Board of Health to pass a resolution at an emergency meeting in November 1979 declaring the issue a public health threat. Board members urged the State of Texas, through its governor and State Health Department to declare a moratorium on the storage of nuclear waste material generated outside Galveston County until provisions were made to transport and dispose of the material at an approved permanent disposal site elsewhere. (17)

Financial challenges faced by the District also remained newsworthy. On several occasions Health District officials appeared before Galveston County Commissioners requesting additional funding, and the consensus on whether it was needed was far from unanimous.

Attempting to deal with the budget deficit, United Board of Health members received a report that outlined work done by each department and broke it down by the man-hours spent in various cities doing everything from checking for pollution to rounding up stray dogs to testing for percolation of septic tank fields. Members declared it would be difficult to cut any services to save money and stated that they would just have to let the people who use the services decide what they could do without. Unknown what services were actually cut.

District staff was also investigating complaints about care being provided in area nursing homes in 1980. On several occasions staff from the Consumer Health department would visit the facilities after families of patients alleged inadequate care was being provided.
The District’s League City Clinic was closed in 1980 and relocated to the North County building in Dickinson. The clinic provided immunizations, blood pressure and diabetes screening for the citizens in the north end of Galveston County.

General sanitarians remained busy inspecting over 700 food establishments in the cities and unincorporated areas on the mainland. Through the year revisions of several ordinances were proposed to address public health needs including the water well ordinance, swimming pool ordinance, and the retail and wholesale food store sanitation ordinance.

Galveston County took over full financing of the Health District beginning in 1981 after a year-long study by all of the cities in the County and considerable controversy. A Memorandum of Agreement was approved by all the mainland cities, City of Galveston and Galveston County to streamline District operations and enable it to operate in a business-like fashion.

Several District offices were combined into two regional public health centers, one located in La Marque and the other in Galveston. Additionally mosquito control operations were incorporated into the Health District as a major part of its operation.

Distinguished performance in the health field earned an Achievement Award from the National Association of Counties for the Board of Health and District staff in 1981. At the annual National Association of Counties conference in July, the Achievement Award was presented on the basis of outstanding and distinguished performance for a local public health agency, innovative programs in air and water pollution, the 4C’s Clinics, and for the unique accomplishment of bringing all local governments together in the Health District. (19)

As previously noted the District assumed management of the Mosquito Control District in August 1981. Heavy infestations of mosquitoes were experienced in September and October which necessitated hiring part-time operators to man the mosquito spray units 24 hours a day.

Since the City of Galveston was now a full-time member of the District there was much activity on the island during 1981. Nuisance complaints accounted for a large number of the services requested. The complaints were everything from neighborhood fights to trash and litter complaints.

The District Pollution Control Department continually investigated complaints that arrived in their office. The Galveston Channel and upper reaches of Dickinson Bayou also generated much interest in the 1980’s. Pollution Control staff worked to control and eliminate a large number of fish kills in Dickinson Bayou, and to stop periodic waste oil discharge from the City of Galveston’s storm drains into the channel. Because of the age
of the city’s system and uncertainties as to the actual flow path for storm water, this was an unusually difficult problem to eliminate.

Pollution Control staff worked with the Texas Parks and Wildlife and the Department of Water Resources to address water quality problems in Dickinson Bayou. (20)

Several previously mentioned proposed policies were approved by the United Board of Health in 1982. A Water Well Ordinance was passed by the Board on February 24, 1982. It was enacted to provide regulatory construction standards of private water supplies for the public and to protect water supplies from possible contamination.

A Swimming Pool Ordinance was adopted by the Board of Health on June 30, 1982 to assure that the Health District could require and enforce minimum health and sanitization standards on public and semi-public pools to protect the public from waterborne diseases. The first Certification Course for Swimming Pool Operators was held July 8, 1982. 37 pool operators were certified at the first class.

1983 marked the 15th year of the District’s Air Pollution Control Program. Mr. James M. Aldridge, the first man hired into the program in 1968 would tell of the days when he almost needed a court order to gain admission to a plant or refinery for an investigation. There were many stories of industry appeals to U.S. congressman to “get them off our back.”

In the early years Pollution Control was handling over 1000 investigations per year. By their fifteenth year that number had decreased to two or three hundred and the nature of the complaints had changed. Instead of addressing a general “the air stinks” type of complaint they were addressing specific incidents.

In 1983 the district’s Health Promotion Program was gaining recognition. Efforts were concentrated on a Safe-Ride infant seat project and on expansion of the Tel-Med health education services. These efforts were quite successful. The program received an Outstanding Community Health Promotion Award from the Texas Department of Health and similar national recognition from the Department of Health and Human Services.

Board members also amended the Grocery Store and Food Establishment Policies. They made it a violation of the law for a store to sell food with expired date codes in Galveston County. The Swimming Pool Ordinance was also amended twice to address concerns expressed by hotel, motel and apartment owners.

Three public hearings were held with temporary non-profit and seasonal concessions to discuss permits or licensure of such organizations. Caterers and fruit and vegetable stands were permitted for the first time in Galveston County in 1983.
Hurricane Alicia in August 1983 had quite an impact on the District. Mainland sanitarians pulled 53 food establishment permits and condemned more than 50 tons of food due to loss of refrigeration. Emergency procedures for Food Establishments and Water Systems were prepared and distributed to all restaurants, grocery stores and water systems as a result of Alicia.

The debris left by Hurricane Alicia impacted mosquito control operations by increasing drainage problems in many areas of the county which resulted in increased mosquito breeding areas. Spraying activities after the storm were concentrated in areas which were more heavily damaged and in the areas left without electricity.

The Village of Tiki Island joined the Health District in 1984. The agreement forming the district was also rewritten to simplify the funding structure. The County of Galveston agreed to fund all the basic public health functions, and all partners agreed to allow the District to collect fees for services and members were allowed to contract with the District for services not covered under the basic public health services provided by the county.

The City of La Marque, Village of Dickinson, San Leon, Bacliff and Bayview all conducted clean-up campaigns in the spring and summer months of 1984. Environmental inspectors assisted all of them with any serious public health concerns.

Mosquito Control had another busy year in 1984. Heavy mosquito activity began in May and peaked in October. This held true along the whole Texas and Louisiana coast. There were 3,400 requests for spraying during the year.

A British tanker, the Alvenus, ran aground 11 miles off the Louisiana coast and cracked its main deck, spilling 2.8 million gallons of crude oil into the Gulf of Mexico on July 30, 1984. The large floating patch of oil flowed westward with the current into Texas, coming ashore along the Bolivar Peninsula, and into Galveston Bay. The spill affected 90% of
Galveston's West Beach, including 80% of the Galveston seawall and the associated rock groins and pilings.

Owners of the ship, Lloyd’s Leasing Ltd. Of London, accepted responsibility for the cleanup and by all accounts performed well. The last of the oil from the Alvenus spill was removed from the Seawall in Galveston by October. An Environmental Services report indicated the shore areas recovered completely, and except for the removal of hundreds of thousands of yards of oily sands, beaches were in excellent condition. (22) Despite what many called an adequate response tourism losses were estimated at $1 million per day. Efforts to recover lost funds by some in the community were rejected by the courts. (23)

1984 ended on a sad note for the District when Director Dr. Walter W. Kemmerer suffered an untimely death in October while attending a Texas Public Health Association convention in Galveston. Kemmerer’s death stunned his friends and co-workers. Shortly after his death the United Board of Health welcomed Texas City Physician, Dr. Clarence Porter as Interim Director while they started the search for a new full-time director. In order to recognize Dr. Kemmerer’s contributions to the district the United Board of health renamed the offices in La Marque, the W. W. Kemmerer, MD, MPH Community Health Center.

Ralph D. Morris, MD, MPH was named the Health District’s new director in March 1985. Morris had previously been with the Texas Department of Health in Austin and also had worked for the U.S. Public Health Service unit in Galveston.

A survey of septic tank systems in the unincorporated community of Freddiesville near Hitchcock found that 84% of the systems were discharging wastewater above ground or directly to the ditches. During the year 95% of the systems were repaired. The environmental conditions in the community improved considerably as a result.

In 1986 Sanitarians assisted the Texas Department of Health and the U.S. Food and Drug Administration who were recalling canned milk that was linked with heptachlor insecticide contamination and Tylenol capsules linked to cyanide contamination. County establishments were also notified to pull milk and cheese products which were found to contain Listeria Monocytogenes.

GCHD sanitarians assisted the Texas Department of Health Food and Drug Division and the U.S. Food and Drug Administration in a statewide recall of suspected tainted bottles of Children’s Liquid Tylenol, and Mexican style cheese from county stores and restaurants. There was a possibility the products could cause Listeriosis poisoning.

The District established an Adult Health Risk Program in ‘85. The program operated in conjunction with Health Promotion to assess health needs by performing a Health Risk Profile. It was a preventive health program conducted primarily on worksites in conjunction with employers.
As part of the program Public Health nurses provided hypertension screenings any time. The service was offered at nutrition centers and shopping centers on a routine basis combined with health education and diabetic screenings yearly as needed.

Pollution Control staff worked with the City of Hitchcock addressing concerns about Highland Bayou. A gas recovery company had been discharging brine into the bayou that the city claimed was the reason for deteriorating water quality. The District agreed with the city but the company continued to discharge the brine even after the city revoked their permit. (24)

The community was very concerned about a proposed hazardous waste incineration facility near Campbell’s Bayou in Texas City. If the facility ultimately gained approval the District agreed to aid the Gulf Coast Waste Disposal Authority with independent monitoring and health surveys. The incinerator was never built.

The District implemented an adolescent substance abuse program in 13 Galveston County school districts in ’86. The program received a national award for excellence from the National Association of Community Health Centers in September. The program consisted of a 10 day substance abuse curriculum for teachers supplemented by Tel-Med bookmarks that listed substance abuse topics and a phone number that would allow students to listen to a recorded message. Topics included: Saying No Strategy, Cocaine, Marijuana, Alcoholism, as well as tapes on sexually transmitted diseases and pregnancy. 13,954 bookmarks were distributed to students, and school nurses together with a directory listing services available for teens in trouble.

The district’s Tel-Med service received 5,239 calls in 1986. 2,383 were calls from adolescents using their bookmarks. (25)

Sanitarians assisted the Galveston County Extension Agent with a county-wide fire ant bait distribution effort. GCHD provided 1,417 pounds of the insecticide to residents.

Sanitarians also assisted the Texas Department of Health and the U.S. Food and Drug Administration by checking retail outlets for recalled ice cream bon-bons and fruit nuggets after the presence of Listeria Monocytogenes was found in the products. They also checked for Epicure Salt, a curing salt accidentally shipped in spice racks, dried rattlesnake meat products possibly contaminated with Salmonella Arizona bacteria and George’s Aloe Eyes eye drops contaminated with mold and bacteria.

The Pollution Control Division became an active participant in the Local Emergency Planning Committees in 1987. The two committees were established by County Judge Ray Holbrook in response to a federal law requiring states to establish planning districts and LEPC’s. The requirement was part of the federal Title III (Community-Right-To-Know) of the Superfund Amendments and Reauthorization Act (SARA) of 1986. The
LEPC’s were charged with developing emergency response plans to deal with hazardous material incidents in the community.

The work of the LEPC was useful on the evening of October 30, 1987 when Texas City was invaded by a plume of hydrofluoric acid vapor. An area of nearly one square mile was evacuated while the City of Texas City, refinery staff, Industrial Mutual Aid and Health District staff responded to minimize the damage to residents. Although over 850 people were treated at local emergency rooms and more than 150 were admitted, there were no fatalities.

In the incident after a crane accident at Marathon Petroleum, 40,000 pounds of acid spewed into the air. Hydrofluoric acid, strong enough to etch glass, is used as a catalyst to speed separation of hydrocarbons into lighter products, such as benzene.

1987 was a very unusual year for mosquito control. Instead of a traditional fall infestation the county experienced a spring influx that according to staff almost carried the county off. This was due to a wet spring and dry fall which resulted in a 13% increase in requests for spraying from the previous year. The increase occurred entirely in the month of June.

In 1987, the Health District took an exciting new role in helping the community understand the issues of public health and safety.

The Volunteer Services Program was established as a way to involve individuals in the delivery of services, but also as a means of making those individuals, and the general public more knowledgeable about health care, the environment, and the services the District provided. In the first year it was estimated the program realized over $35,000 in volunteer services. (26) The program made news when the National Association of Counties chose the program to be a recipient of their 1988 NACO Achievement Award. The program was cited for its innovative approach to providing services to the county.

1988 brought some changes to the District. The community along with the rest of the country was taking a great interest in HIV/AIDS. In April the Health District began a joint project with Community Care for AIDS, Inc., a nonprofit group of citizens concerned about
AIDS in Galveston County. The joint project, called the Galveston AIDS Program, was administered through the GCHD Volunteer Program. It focused on providing education, information and supportive assistance to persons in the county with HIV/AIDS related concerns.

GCHD was awarded a grant from the National Cancer Institute in 1988 to help prevent breast, cervical, and lung cancers. The program focused on breast and cervical cancers in Galveston African American women between the ages of 50 to 70. The program relied on “grass roots” support from the community to promote regular check-ups.

The Health District received recognition in 1988 from the National Association of Counties for Volunteer Services in Public Health Programming. The popular Tel-Med program was discontinued in “88 due to lack of funding. The information system had been very popular with students and teachers often seeking answers to questions about sex and drugs. Over 25,400 calls were received during the time it operated.

An employee at a restaurant in Hitchcock was confirmed as having hepatitis A which required a response from Environmental Sanitation staff. All restaurant personnel received gamma globulin shots. Public health investigators were unable to isolate the source of the infection but everything indicated the infection had not spread beyond the identified employee.

Health District employees were well prepared when Hurricane Gilbert threatened the Texas Gulf Coast September 1988. The threat allowed further evaluation of the District’s disaster preparedness plan. Gilbert made landfall well south of the county causing little damage with the exception of some shoreline erosion.

The United Board of Health also stayed busy during the year. Board members amended the District’s Rules on Swimming Pool Sanitation, Rules for Private and Non-Community Water Wells, and Construction Standards for On-Site Sewerage Facilities to comply with changes made at the state level.

A Galveston County measles outbreak ushered in 1989 prompting Health District officials to call on area residents to take more precautions. It was recommended that people vaccinated between 1955 and 1967 be revaccinated because earlier vaccines were not as effective as that which was being used at the time. Eight cases of measles were confirmed in the County, most involving preschoolers, but two school age children and a 24 year-old were also infected.

A study was conducted in the Texas City community to determine how many people were actually exposed to hydrofluoric acid during the 1987 leak. The study indicated that more than 4,000 people were exposed which was a greater number than originally expected.
Several hundred Texas City residents were treated for exposure the night of the leak while upwards of 3,000 were evacuated from the southeast part of town. Many residents could not return to their homes for two days because of the mishap. (27)

Galveston County lost one municipality in 1989 when residents of Crystal Beach voted to disincorporate. As a result of the vote the county took control of Crystal Beach and responsibility for services previously provided by the city.

At a United Board of Health meeting in June 1989 members voted to create a full-time epidemiologist position in the District. The position was designed to help deal with disease control in Galveston County. (28) The first epidemiologist was Chuck Chambers.

Consumer Health staff took on some new duties in 1990. Representatives of the District took a leading role on the inspections of two cruise vessels docking in Galveston. The Department worked with the City of Galveston, the CDC Vessel Sanitation Program, and the Coast Guard. Health District employees worked with the ships’ staff to achieve improvements and maintenance on both ships.

Local festivals and events also continued to keep Consumer Health busy. The 1990 Mardi Gras was held and eighty-nine temporary food service establishments were permitted. The Galveston Historical Foundation’s Dickens on the Strand festival also kept staff busy with over 80 vendors permitted to operate food booths.

Many other festivals also were taking place including the Port Bolivar Crab Festival, Galveston’s Blessing of the Shrimp Fleet, Earth Day, Galveston County Fair and Rodeo, Hitchcock Good Old Days, and Village Fair just to name a few.

There were a total of 873 temporary food permits issued in 1990. The ever increasing number of events began to take a toll on the department with educational conferences and permit approval being required for each vendor.

Environmental staff worked monitoring seafood taken from Galveston Bay in July ‘90 after a major oil spill occurred. They also worked closely with Texas Department of Health staff to provide information to the public on bay closures and re-openings. The Texas Department of Health did sampling and testing of shrimp, fin fish, oysters and other seafood to determine when the bay could be reopened for fishing.

A report from the new Epidemiology Department to the Board of Health revealed that the number of documented AIDS cases in the county passed the 100 mark in ’90. The number of cases reported since the epidemic began increased to 102. At the time Galveston ranked sixth in the number of AIDS cases among Texas counties.

As a result of the increasing numbers of HIV/AIDS cases the District began to publicly encourage people to receive an AIDS test offered confidentially. A sign of the times the
tests were done with total anonymity. In fact people were encouraged to use an alias when getting tested.

The National Association of Counties (NACO) recognized the 4C’s Clinics Perinatal Initiative with a NACO Achievement Award as a model program at their annual conference in Miami in 1990. The program was recognized for getting help and resources from the private sector, county, federal government and the University of Texas Medical Branch to expand badly needed services for family planning and perinatal care at the public clinics.

Of primary concern was the high rate of late entry into prenatal care, resulting in increased risk for both mother and infants as demonstrated by low birth weight and higher infant mortality. In just a few months, the project led to a 40 percent increase in prenatal patients seen in the clinics, a 54 percent increase in first-trimester entry to care, and a 33 percent increase in family planning users.

Pollution Control staff were dealing with a proposed copper smelting facility in Texas City. Public hearings were conducted and many residents were concerned with the impact on Galveston Bay if the facility was constructed. At the first hearing held in the Captain’s Room of the Nessler Center in Texas City as many as 125 concerned and interested citizens showed up to voice opposition or support.

In June the company proposing the smelting facility received a five year permit from the Texas Water Commission to use 23.3 million gallons of bay water a day for cooling the facility. Despite the permit the copper smelter was far from being a done deal.

The United Board of Health accepted an invitation to tour a copper smelter in Japan operated by the same company proposing the Texas City facility. Members authorized the Pollution Control Director, Dr. Ed Ibert to accept the invitation to travel to Japan. Board members decided that Health District officials needed more information about the environmental impact of existing smelters. Ultimately the proposed shelter was never constructed.

In December Health District employees collected over 700 canned goods and other food items during a Christmas food drive for the Ronald McDonald House in Galveston. The food was used to replenish the house’s emergency food pantry.
In 1991 another issue being addressed in the county was an ongoing effort to provide AIDS and STD education. To stem the trend of rising numbers county and state health officials focused much of their energy on educating young people about AIDS and other preventable diseases.

Educators from the Health District would frequently visit schools. Fifth- and sixth-graders would get poster board presentations about sexually transmitted diseases, and how to avoid them. Starting with seventh-graders students were shown slides of warts, sores and lesions and other effects of sexually transmitted diseases.

There were objections from parents in the community that the District was providing sex education. District officials countered that it was consequence education being provided and not sex education. The issue was never resolved.

A new environmental issue also landed in the news in 1991, illegal sewage discharge from an old collection system and residents septic tanks in High Island. Environmental staff determined that some of the illegal discharges had been occurring for more than 30 years.

Sewage illegally discharged into ditches and inadequate sewage collection from the areas only system resulted in standing pools of sewage. With the pools also came the potential transmission of mosquito-borne diseases including hepatitis, encephalitis and dysentery.

In addition to the problem with septic systems there also existed an old collection system connected to the High Island school district and a few other homes that were dispensing sewage through a septic tank into the marsh area surrounding the community. (30) This would become an issue that was dealt with for many years. Finally in 2010 funds became available to individuals that qualified for the installation of permitted septic systems.

At the August '91 meeting of the United Board of Health members approved a $6.55 million budget that included a 16% increase in spending. The budget contained a request for county appropriations totaling $5.38 million up from $4.5 million. The $900,000 increase was attributed to three major areas: personnel costs, indigent care and expenses. Included in the amount was $300,000 to provide additional funds to UTMB for indigent care.

An outbreak of Hepatitis A was reported in August with 24 confirmed cases among residents in Dickinson, San Leon, Bacliff and League City. The first case resulted from a teen-age boy playing in rainwater. The boy spread the virus to another youngster who attended an area day care center. Public Health Nurses from the District visited the day care center and gave 132 vaccinations to children and workers.
A proposal to raise the District’s food service operators permit fee to $150 from $40 drew criticism from the industry at a UBOH meeting in September. The increase was based on a food-service evaluation survey from the Texas Department of Health that found the county Health District charged significantly less than other districts for permits. The $40 fee had not been raised for seven years.

A representative from the Galveston Hotel-Motel Association at the time stated the proposed fee increase was too much and suggested a permit fee of $75 be approved instead. The proposed policy also included a provision that all establishments have a state-trained food service manager on duty at all times.

Eventually a compromise was reached with the industry and the proposed policy was changed to include a three-tiered classification system that would charge $50, $75 and $100 for permits, based on the amount and type of food the establishment handled. The system would take effect in 1992 with $25 annual increases over the next two years.

The hydrofluoric acid leak which occurred four years earlier remained newsworthy as late as 1991. The Health District issued an in-depth report on December 3rd concerning the effects of exposure to hydrofluoric acid. The report was the second of three prepared by the District, and showed that some people exposed to the acid in the 1987 incident were still complaining two years later of resulting medical complications.

The principal investigator in the study found the most serious medical complications were suffered by those more highly exposed to the acid, those with pre-existing pulmonary conditions and those smoking two or more packs of cigarettes a day. 10,811 were surveyed, 6.7 percent were heavily exposed while 51.3 percent were not exposed.

In 1991, the State Legislature passed a Nuisance Abatement Law granting more heavily populated counties the power to demolish neglected properties harboring vermin and drug addicts. In 1992, Galveston County Commissioner Wayne Johnson approached State Representative Mike Martin to amend this law to allow counties with smaller populations to pass the Nuisance Abatement Law.

The State Legislature amended the law in March 1993. Galveston County passed the law and the Environmental and Consumer Health Department was awarded this program which was also referred to as the “crack house bill” since it could be used to destroy suspected crack houses in unincorporated areas.

The Health District was eager to begin improving the community by destroying these nuisances but soon realized that demolishing a few “crack” houses would be more costly than realized under the new provisions.

Staff approached County Commissioners requesting funds for extra personnel who could devote their efforts toward implementing the crack house bill. The district sought to hire
an additional sanitarian and a part-time clerk to handle the program. The request for funds was approved.

By 1996, the county had demolished 52 structures in the unincorporated areas. If the owner of a derelict property failed to clean up after receiving a notice, the county would demolish the building and the county’s legal department would place a lien on the land to recover the demolition costs and the administrative fees.

Changes to the local food service policy first discussed in 1991 were finally approved in ’92. Under the changes the district would classify businesses as having low, medium or high risk of food-borne illness outbreaks, according to the type and volume of food handled. The increase in permit fees which some of the restaurant industry opposed was also approved.

Prevention of AIDS again became a hot topic when Galveston’s School Board approved a plan to distribute condoms to high school students. According to the plan a student’s parents would have to approve them receiving the condoms, and the student would also have to attend an educational counseling session that would include abstinence education. Unsurprisingly this created uproar in the community. Many felt that doing this would only encourage students to have sex and increase the already high teen birth rate which at the time was higher than the national average.

The district did take a position on the subject and fully supported Galveston school official’s efforts to prevent the spread of disease. The State Commissioner of Health also chimed in with an editorial in the Galveston Daily News which supported the program. He urged the school board to view the matter as a health issue, not as a political issue and to base their decision on facts and knowledge, not emotion. Condoms were eventually given out through the Teen Health Clinic located at Ball High and the student had to have parental consent.

1993 ushered in a new issue when UTMB proposed to take control of the Galveston County Health District if their bid to lease the Mainland Center Hospital was successful. This proposal disturbed district leaders and at least one County Commissioner. Many in the county viewed UTMB’s proposal as simply a way to totally control health care in Galveston County. UTMB eventually dropped their plans to take control of the hospital and district after a study they commissioned determined it would not be a profitable or prudent move for the university.

Wastewater pits operated by a private company, McGinnes Industrial Maintenance Company, south of the city of Santa Fe had residents upset in ’93 who claimed they were an odor nuisance. Several residents along with La Marque’s Dr. James Parker visited County Commissioners Court in an effort to get something done. County Judge Ray Holbrook wanted to hear what the district had to say about the pits since some had alleged that the district was doing nothing. Executives let the court know that countless
visits had been made to the site, finding no odor, because shifting winds can create brief odors. Another problem was the fact the site was licensed by the state and was designed to smell. The pits and their contents were officially closed in 1994, but still exist surrounded by protective berms.

Once again the district became involved in sex education when the Santa Fe Independent School District requested input on the issue as they were considering a new policy. They were being encouraged by some residents to adopt an abstinence only policy. Representative from the district encouraged them to take a pro-active protection approach. A concern expressed by Health District officials was the spread of HIV infection among teens and teen pregnancy. A Health District nurse informed school board members that younger and younger children were seeking birth control.

AIDS remained an issue in the community and for the first time confidential HIV testing was offered at the teen health centers in Ball High School and Central Middle School. In 1993 Galveston County had:

- The sixth highest number of AIDS cases in the state
- 22.8 cases of AIDS per 100,000 residents in the county compared to 20.4 cases statewide
- 324 residents diagnosed with AIDS since 1988
- 758 reported cases of sexually transmitted diseases among 10 to 19 year olds in the county

During the summer of '93 district officials were also faced with the possibility of cutting a third of its staff and half the services offered in the La Marque clinic if it did not receive an additional $300,000 to $500,000 in the new county budget. There was agreement something needed to be done but no clear solution. No mass layoffs of employees ever occurred.

Childhood lead poisoning reemerged as an issue when more than 220 Galveston County children were found to have elevated blood lead levels since October 1992. About 81
percent were in the city of Galveston and 86 percent were under five years old according to the District's epidemiologist. In Galveston an ordinance was proposed that would mandate education and lead paint abatement to help solve the problem. There was community support but many also disagreed with the need for such an ordinance.

Lead contamination forced Galveston Catholic School to ban children from their playground after testing showed it was moderately contaminated. This prompted Galveston’s city manager to have all city parks, particularly those in the historic neighborhoods, tested for contamination. GISD already had plans to test all of its playgrounds and athletic fields. Health District staff found lead levels at Galveston Catholic School of 1,200 parts per million in the soil. The standard for lead in playground soil is 400 ppm by weight. This all came at the same time the city was considering the ordinance designed to ensure safe removal of lead-based paint.

After testing city parks two were closed because of lead contamination. Officials urged parents of children who had played in the park to have their children tested for lead. All of the city’s 31 playgrounds, athletic fields and parks were tested for lead contamination. In November Galveston’s city council approved a new lead ordinance that placed strict rules on the removal of lead-based paint from the exterior of homes.

The District also lost a program in the waning days of 1993 when the County Commissioners voted to take control of Mosquito Control away from the District. The Mosquito District which was created in 1953 by a vote of 1,200 people was transferred to the health district in 1981. Commissioners Court felt the health district was not being responsive to residents when they called demanding something be done about mosquito infestations. A United Board of Health member at the time commented, “They obviously don't know what they're getting into. And that's perfect.” Responsibility for the operation was placed upon the Mosquito Control Board. The transfer has proven to be successful.

A warning against skin contact with water in Clear Creek which had been issued in '93 was lifted in early '94. Environmental Services had issued the advisory for Clear Creek upstream of State Highway 3 after fish samples were found to contain at least two cancer-causing chemicals and another chemical that had been shown to cause nervous disorders. As a result residents were told not to eat fish from the waterway and not to swim in it.

A Texas Department of Health study eventually determined the no fishing advisory should stay in place but contact with the water should not be harmful. They recognized that people using the creek for recreation might accidentally swallow small amounts of water. But, according to the state report ingesting small quantities posed no health risk.

Flu season was also hitting the county hard with a new strain H3N2 circulating in 1994. In January it was estimated there were at least 1,500 cases in Galveston County. District officials and community health nurses encouraged people in the community to receive a flu shot.
GCHD Epidemiology released a report in February that showed 61% of the county’s preschoolers did not have all of their immunizations. Officials stressed that not having a child immunized would leave them vulnerable to diseases that could be prevented.

Galveston County’s immunization rate, while low, was still better than the state average which was 70% of toddlers needing at least one shot to be completely immunized. The survey of children was conducted after the health district received federal funding to study immunization rates.

The district also decided to work with a community effort to address the continuing issue, lead poisoning. During Infant Immunization Month in April free lead testing would be offered at 12 sites along with immunizations. More than 300 Galveston County children had tested positive for lead poisoning. 30% of the children testing positive were in zip code 77550 and 39% in 77553.

The district’s epidemiologist reminded people that many children on the mainland should also be tested, especially those living in older houses and buildings. UTMB agreed to pick up the cost of lead testing.

In a Galveston Daily News editorial published April 8, 1994 the managing editor stated, “lead poisoning can have a terrible lifelong debilitating impact on a person. A child with moderately elevated levels of lead is six times more likely to have learning disabilities. Damage from lead poisoning is irreversible.” (31)

Lead remained in the news after two men working on a downtown building suffered severe lead poisoning. At the time Galveston’s mayor, Barbara Crews indicated she would like to strengthen the lead ordinance passed in 1993 to include interior sanding and painting. (32)

While education was seen as the best AIDS prevention tool it also drew criticism after a part-time HIV/AIDS educator for the district made a presentation at Texas City High School. While not on duty at the time the educator allegedly used inappropriate and vulgar language and visuals getting the prevention message across. District executive management assured the community they would work harder to be sensitive to community values but still felt strongly the only way to fight AIDS was through education.

The nuisance abatement law to deal with run-down and abandoned properties passed by the state in 1991 was enhanced in 1994. The changes increased the county’s power to clean up trash-ridden lots and other property that could pose health hazards.

The law basically allowed the county to force residents to clean their property under threat of fine or even jail time. If the owners were absent, the program allowed the
county to clean up the property and then put a lien on it to recover the cleanup cost. $60,000 was set aside to demolish property in various areas around the county.

An ammonia leak from a Texas City chemical plant also caused problems for local residents in May with the mainland hospital treating over 750 people for exposure. In response the district considered levying fines against the company as the local representative of the Texas Natural Resource and Conservation Commission.

Mosquito control which was no longer a part of the district was drawing attention after they requested a 29% increase in funding from the county. One of the reasons given by Commissioners for removing it from the district was that the district was doing an inadequate job. Many felt that anyone including the Health District could have done a better job with 29% more funding. County Judge Ray Holbrook told mosquito control district representatives they might have to settle with a compromise. While they did receive a budget increase it was not what was originally requested.

Lead poisoning remained in the news as the county entered 1995. The District’s epidemiologist released a report that showed the number of island residents poisoned by lead dropped 11 percent in 1994, the year after the city passed an ordinance to regulate lead-based paint. 227 island residents – mostly children – tested positive for lead poisoning in 1994, down from 256 cases in 1993. (36)

In April for National Public Health Week the District sponsored their first ever Public Health Awareness Day in Texas City. The event was also used to kick off “Shots Across Texas,” a weeklong immunizations awareness program. Free activities included water testing; cholesterol screening; blood-pressure screening; pregnancy testing; educational classes with topics such as breast self-exam, food pyramid, breast feeding and fats in foods; immunizations and numerous other informational displays and booths.

Activities for children included a MASH tent, a simulated bandage station, safety identification fingerprinting, massage therapy, tours of a Life Flight helicopter, ambulance, magic and balloon clowns. Over 1,000 county residents attended the event.

The county welcomed a new County Judge in 1995, Jim Yarbrough, elected to replace Ray Holbrook who retired after 28 years as County Judge.

The county continued efforts to prevent water pollution in 1995 when the Health District applied for a $318,000 grant to fund a three year “Nonpoint Source Pollution Prevention Project.” Nonpoint source pollution is a form of water pollution that occurs when material such as animal wastes and automotive fluids are carried by rainfall runoff and ground water into adjacent surface and ground water resources.

The proposed program would create a partnership with cities, water districts, area industry, business councils and the District to sponsor a collection day for many nonpoint...
pollutants. The program would also examine the integrity of local storm sewer systems, map sanitary sewer system overflows and bring them to the attention of responsible parties. The district’s request for grant funding was approved.

An unexpected crisis that could have had a public health impact arose in September 1995 when a major water line providing water to the state Highway 6 area and Galveston Island ruptured. A full-blown emergency lurked as parts of the county faced the threat of waking up without drinking water. At least one mainland community, Omega Bay, lost all water service.

Health District staff worked with county emergency management staff to bring in potable water for the affected communities. Galveston’s Mayor requested that businesses shut down at noon and there was a major run on bottled water at local grocery stores. UTMB sent approximately 3,500 students and nonessential employee’s home in order to ensure adequate water supplies for patients. The water line was finally repaired and water service returned to normal after approximately two days.

At the December 1995 United Board of Health meeting members approved an increase in health inspection fees over the objections of representatives from the hotel and restaurant industries. The increases included a $50 increase in health inspection fees for all establishments that served food. The fees were also hiked to $150 for high risk establishments, $125 for medium risk and $100 for low risk.

The District also received a $93,000 grant from the Environmental Protection Agency to hire two people to conduct a septic system survey aimed at reducing bacterial pollution in Dickinson Bayou. The Environmental and Consumer Health Division also received a $46,000 Texas Natural Resources Conservation Commission grant to pay for an investigator to identify illegal dump sites and educate people about the proper disposal of waste. They also received the large nonpoint source pollution grant they had applied for in 1995.

HIV/AIDS was still a major concern in the community and a June ‘96 feature story in the Galveston Daily News profiled the efforts of Health District AIDS Outreach Workers. These employees funded by money from the Texas Department of Health would attend festivals and events at bars and other businesses to reach target populations.

Nearly 13 years after the first case of AIDS was reported in Galveston County, the disease was still a death sentence for those infected. Workers one day each week would head into the poorer section of the county and talk to an average of 60 to 70 people each day about prevention.

The educators would pull out condoms and demonstrate their proper use. They would also show women how female condoms worked. They would also provide education
about abstinence and monogamy as the best ways to avoid getting HIV/AIDS and other sexually transmitted diseases.

In July ’96 the District opened a clinic in Hitchcock especially for needy pregnant women and young children. The clinic dispensed education and free food vouchers to medically and financially qualified pregnant women, mothers of children less than a year old and their babies. The service was part of the District’s Women, Infants and Children Program. Staff also provided immunizations and “well child” exams under the Early and Periodic Diagnosis, Screening and Treatment Program.

A vaccine preventable illness made the news in August ’96 when the District reported a case of measles in a 7-month-old boy in Texas City. In response the District offered free measles vaccinations to children six months and older. The announcement came on the heels of an outbreak in neighboring Harris County that reported 12 confirmed cases.

At the time children usually received their first vaccination at one year of age and were required to have their second injection before age 12. Children receiving the free shot were still required to receive another shot after age one. The District’s Epidemiologist cautioned people an outbreak was not imminent and the free vaccinations were only a prevention measure. (38)

Restaurant inspections provided by the District were also in the news after a study conducted by the Center for Science in the Public Interest determined that many states and localities did not meet standards. In a Galveston Daily News article it was reported the District followed guidelines established by the Texas Department of Health which were based on FDA codes. The District’s Director of Environmental and Consumer Health noted that in some cases the county exceeded FDA standards. (39)

1996 was a busy year for other departments as well. 244 disease cases were investigated by the Epidemiologist. 347 elevated blood lead cases were documented, reported and investigated as appropriate.

In mid-February 1997 a mysterious red dust made the news that resulted in numerous calls to Pollution Control. People from Galveston to the Clear Lake areas reported a strange rust-colored substance on their cars. While it may have seemed strange to some it was determined by Pollution Control to be only dust. A storm that moved through the area had carried the red dust in from West Texas.

About the same time as the red dust scare the Galveston County Health District released a survey that showed county vaccination rates were below the national average. Records indicated the 67.4 percent of children had received diphtheria, tetanus and pertussis, (DTP4) oral polio vaccine (OPV3) and measles, mumps, rubella (MMR1) vaccinations by age two, and only 53.1 percent were adequately immunized with DTP4, OPV3 and MMR1 by age two.
Health District officials used this information to encourage people to make sure their children were adequately immunized. Efforts were made since federal officials had established a goal that by age two a minimum of 90 percent of all children were to be properly immunized. Much of the problem was attributed to the lack of a universal vaccination data system.

In March the Director of Environmental and Consumer Health, Janet Greenwood, initiated a program to recognize food service providers that maintained high kitchen standards. There were about 1,500 food service establishments in Galveston County at the time and 16 of those received the first “Gold Ribbon” awards in a program that would become an annual event. County Judge Jim Yarbrough, Health District Director Dr. Ralph Morris and Director of Environmental and Consumer Health Janet Greenwood presented the awards as sanitarians, politicians, families and the media watched. This is still a well received and popular program within the food industry and was the first of its kind in Texas.

In April 1997 the District joined forces with Mainland Medical Center in rolling out a grassroots effort called Health Quest 2000 to help Galveston County residents improve their health. The community wellness effort was based on a proven national model for healthier communities and utilized education and wellness in everyday living.

In August it was announced the Galveston County Health District was chosen as the 1997 recipient of the “Children & Healthcare Week Award” for excellence. The award given by the Association for the Care of Children’s Health recognized the District’s efforts to support children’s public health awareness.

Water made the news in Galveston County late in ’97 when a resident who lived in the far west county near Alvin on FM 517 discovered his water could be ignited with a match. Testing indicated the water did contain methane, ethane and propane. While the levels were not cause for alarm the District did issue a warning to 150 property owners in the area. They were advised to use bottled water for drinking and cooking purposes if the well water appeared milky or ignited. After testing which was conducted by the Texas Natural Resource Conservation Commission it was determined the water was safe to drink, but residents were told to avoid keeping it in an enclosed space as it could pose a safety hazard because of its combustibility. The gases naturally occurred in the geologic formations in that area and still exist today.

The Health District regularly participated in large events by inspecting food vendors and other activities, but in February 1998 Epidemiology became involved in Galveston’s Mardi Gras when a parade participant was diagnosed with meningococcal disease. Many people that participated in the parade and balls at the railroad museum and a local hotel had to be contacted. This was a difficult task since Mardi Gras participants came from all over the country.
For the 1998 Observance of National Children and Healthcare Week the District Community Health Nurses sponsored a community health fair. The fair featured a puppet show, ambulance tour, moonwalk, hand painting wall, sickle cell screening and free refreshments. Information on lead poisoning, well child exams, childhood development and immunizations was also provided.

Recognizing another public health program, tuberculosis, the Galveston County Commissioners Court proclaimed National Tuberculosis Week in the county. The number of diagnosed TB cases was steadily rising in the county. In 1994 and 1995 the incidence rate for TB was 9.7 per 100,000 persons. In 1996, the rate jumped to 16.2 per 100,000. The number of cases treated by the county was still relatively small, about 20 to 40 persons per year, but a source of concern nonetheless.

A Galveston Daily News editorial praised the District for TB prevention efforts saying, these extra steps to correct the problem are an example of how a Health District should work to improve the overall well-being of the people in the community. (40)

As part of National Public Health Week the Health District offered a free community CPR training course in cooperation with the American Red Cross. 30 people signed up to take the valuable training.

During Public Health Week the District also released information that indicated the county’s health status compared unfavorably with that of the state and nation for 12 out of 18 indicators. Indicators included infant mortality, total mortality, motor vehicle crash deaths, work-related injury deaths, suicide, homicide, lung cancer mortality, breast cancer mortality, cardiovascular disease mortality, low birth weight, births to adolescents and air quality.

The report did contain some good news. Although Galveston County ranked higher than average in the number of cardiovascular disease deaths, the number of stroke deaths was lower than the state, and even the national, average. Likewise the reported incidence of AIDS in Galveston County was lower than the rest of Texas.

To address the low immunization rates the District planned an event to increase awareness of the need for childhood immunizations during National Immunization Week. The event held at the Texas City Community Family Center offered shots along with a coloring contest, puppet show, air walk and photographs taken with clowns and bunnies. Other events were planned at the Sam’s Club in Texas City and Independent Missionary Village in Hitchcock.

The importance of vaccines not only for children but also adults was illustrated shortly after the District sponsored events when the State Department of Health reported an outbreak of rubella. Primarily in south Texas 21 cases were reported. As a result the
Galveston County Health District advised people who had not been vaccinated against rubella to get a shot.

Continuing efforts to improve the county’s immunization rates were enhanced when access to a mobile care van was acquired thanks to a partnership between Blue Cross/Blue Shield and the Galveston County Immunization Coalition. The mobile van was stationed at different locations throughout the county, targeting underserved areas such as northern Galveston County.

The District also issued a public health advisory in May 1998 as a result of smoke and air pollution wafting up from the coast of Mexico and Central America. Per the advisory people with respiratory and heart diseases were advised to remain indoors. In addition the District also recommended that outdoor sporting events be postponed. During the smoke event UTMB reported a 30 percent increase in respiratory complaints.

The smoke was likely caused by forest fires. It was also partly attributed to Mexican farmers that would set fires to clear new land and stubble from cultivated land to prepare for a new growing season.

An intestinal illness outbreak that sickened at least 34 people during the same summer was linked to oysters. The county and state responded by advising people not to eat raw oysters that came from Galveston Bay and requested recalls of oysters from seafood companies receiving those oysters. Oyster beds in the bay that were identified as producing the tainted oysters were also closed.
Public Health in Galveston County
A Historical Recollection by the History Council Committee
of the Galveston County Health District

Tropical Storm Frances which hit the county during summer '98 prompted the District to issue health warnings to promote public health. Caution was particularly urged for those living in areas where water safety had been compromised due to flooding. Advisories were also issued to encourage food safety for items that may have spoiled after electricity was lost during the storm.

Members of the United Board of Health passed a resolution in April 1999 asking the Texas Natural Resource Conservation Commission (TNRCC) to conduct neighborhood air monitoring near four industrial plants in Texas City. This action was taken after earlier TNRCC testing found levels of hydrogen sulfide and sulfur dioxide exceeding standards. Many community members saw the levels found as a red flag that something unusual was happening.

At the time TNRCC maintained three air-monitoring stations in Texas City. The stations provided snapshot readings upwind and downwind of locations. Data that had been collected since 1986 showed a steady decline in overall industrial emissions.

Planning for emergency evacuation in the event of a hurricane made the news in May 1999 when the City of Galveston considered scrapping their program to assist special needs evacuees. There was much concern by other agencies in the community such as the Galveston Housing Authority that no one would take the responsibility if the city did away with the program. Galveston EMS still planned to assist those known special needs residents if a hurricane hit the area.

The Health District partnered with the Galveston County Local Emergency Planning Committee in June to conduct a Household Hazardous Waste Collection Day for county residents. The event was held at the Biosphere 1 Recycling center in Texas City. Residents were encouraged to bring potential hazards from their homes and dispose of them in an environmentally safe manner.

The event offered free disposal for all household hazardous wastes – drain cleaners, pesticides, herbicides, poisons, acids, paints, solvents, anti-freeze, flea and tick killers, batteries and waste automotive fluids - plus the opportunity to turn in regular recyclables. The event utilized funds received from the Texas Natural Resource Conservation Commission. Turnout for the event was much greater than expected proving the need for a permanent facility that would accept hazardous waste in the county. It was estimated that 600 vehicles showed up at the Biosphere to dispose of waste. Texas City Sun, June 6, 1999

Attention was focused on meningitis in February 2001 after a Texas City student was diagnosed with the illness. At least 30 people were given preventive antibiotics that were identified as close contacts with the student. No mass vaccination clinics were needed in the community.
The county experienced flooding in June of 2001 which prompted GCHD officials to issue advice on how to deal with flood waters. The precautions covered water, food, environmental and medical concerns that persisted after the flood water receded. Flooding was most serious in north Galveston County.

The State of Texas requires each city to have some plan for preventing and mitigating water pollution. The requirement was being deliberated by area city councils in early 2002. Several cities contracted with the Health District beginning in the early 70's for the service which was based on the number of active water connections in each city.

The call for Galveston County Commissioner’s to increase indigent care funding was addressed in April ’02, but not in the manner that many were hoping. Community leaders were asking for $12 million but received only $1 million which would be added to the $5 million already allocated for care by the court. County Judge James Yarbrough said the new money would be used for chronic disease management and other focused programs.

In previous action the Commissioner’s slashed the eligibility guidelines for secondary and tertiary care after UTMB implemented what it called the Demand Access Management Program. Commissioner’s Court had established the eligibility requirements for indigent care on the county program at 21 percent of the federal poverty limit, which at the time for a family of four equated to about a $3,700 annual income. Restoring the eligibility to 100 percent like the committee wanted would have cost the county an additional $8 million to $10 million a year.

Other solutions to the problem were being sought in Austin through the Texas legislature. Members of the indigent care task force and county government lobbied state lawmakers to pass legislation that would have allowed county residents to raise the sales tax rate in Galveston County to pay for health care. While this measure passed in the House of Representatives, senators refused to bring it to the floor for debate.

The Health District announced in April ’02 that they would be receiving $390,000 in federal funds to prepare for a possible bioterrorism attack. There were six target areas that money could be used for which included; increasing the capability to spot and track disease outbreaks, improve communications and technology and fund a system for getting warnings and advisories to the public. Other possible uses included improving planning and readiness assessment, the capacity of public health laboratories, and education and training.

As a result of the sunset review the agreement forming the district which had been updated in 1984 was again being changed. Some cities worried the changes would not give them representation to insure public health services such as restaurant inspections and animal control would not be pushed aside by the indigent health care issue. GCHD's Executive Management attempted to reassure leaders that the District had always been
able to balance public health duties with its medical obligations and expected to continue doing so.

In 2002, Dr. Ralph Morris stepped down as the Executive Director and Health Authority of the Galveston County Health District. Dr. Harlan Guidry, was named in 2003 as the Chief Executive Officer and the Health Authority to lead the Health District under the policy making United Board of Health.

Some called for making the Health District an actual county department. GCHD executive management felt that doing so would jeopardize hundreds of thousands of dollars in grant funding it received each year from the state and federal governments.

It was eventually decided that the District would remain autonomous, but the Galveston County United Board of Health would be expanded from nine to 13 members in 2003. Two new members of the board would be nominated by the cities, a privilege they did not have under the old agreement. County and Health District officials said the larger board, would better represent the public health needs of citizens along with health care needs. This remains the operating structure of GCHD today.

Current Board of Health members include:

1. Ben G. Raimer, MD, Chair, represents UTMB
2. Eric Froeschner, Vice Chair, represents Citizen-at-Large
3. Mark Sonnier, AAMS, Secretary-Treasurer, represents Interested Citizen
4. Jason Lawrence, PE, represents Engineer
5. Tim Rainey, represents Municipality
6. Steven Pratt, represents Food Service/Sales
7. John Hackbarth, DDS, represents Dentist
8. Curtis Klages, represents Veterinarian
9. Patrick McGinnis, MD, MS, MBA, represents Interested Citizen
10. Mary Jo Godinich, MD, represents Medical Society
11. Vacant, represents Mainland Center Hospital
12. Vacant, represents Nurse
13. Vacant, represents Municipality

For most of GCHD's history administrative headquarters were located in La Marque. With limited space the various program managers were located in multiple locations. That changed in 2008 when county voters approved a bond package to transform an abandoned retail store in Texas City into the new Mid-County Annex.

The District moved all program operations to the new facility in 2012 which for the first time consolidated all programs under one roof. The new facility allows for a more efficient operation.
GCHD staff members at the new Mid County Annex groundbreaking

The Galveston County Mid-County Annex located in Texas City, Texas. Approved by voters in 2008 it has been GCHD Headquarters since 2012.
4C's Clinics become a reality

In 1970 the Mainland Cities-Galveston County Health Department, Galveston County Commissioners Court, UTMB, and the City of Galveston Board of Health successfully completed a federal grant application to establish the Galveston County Coordinated Community Clinics (4C's). The process of obtaining the funds was initiated by Dr. Louis Riley who at the time was acting director of the Galveston County Health Department.

The federal grant application also included the signatures of Galveston County Judge Ray Holbrook, and Dr. Truman Blocker, President of the University of Texas Medical Branch. The funds were obtained in the name of the Mainland Cities – Galveston County Health Department.

When first established it was decided to place one clinic in La Marque and one in Galveston. During these years the operations of the 4C's clinic in La Marque were closely scrutinized. The original person hired to act as an administrator of the clinics for five years was terminated after a short time and eventually filed a wrongful termination suit. Many of the cities at the time also claimed that county leaders were making decisions without first consulting with them. It was a struggle to keep leaders aware of the positive benefits the clinics provided in the community to those with few resources for health care.

Despite challenges operations continued to expand with the opening of the planned second 4C's clinic in Galveston during the summer of 1972. The clinic operated out of buildings once used by the United States Public Health Service Hospital which was still in operation at the time. The clinic was located at 45th Street and Avenue M.

The District announced a new program with the University of Texas Medical Branch in February 1973. The program allowed 4C's patients to enter John Sealy Hospital on a referral basis and then return to the clinics after hospitalization. The patients were referred by 4C's physicians and their progress would be followed by these physicians while they were cared for by UTMB family medicine physicians. Family medicine doctors would be allowed to serve a rotation through the county clinics.

In addition to new services the 4C's Clinic celebrated its second anniversary in Galveston with a party in February 1974.

February of 1975 found 4C's dental staff presenting oral hygiene education to students at area elementary schools. Dental services provided in the clinics proved popular and a 4C's dental clinic was opened in September 1976 at Lasker Park in Galveston. Staffed with a dentist, dental assistant and a part-time dental hygienist the clinic provided comprehensive dental care for qualified patients of all ages.
Services provided in the 4C’s clinics were being welcomed and by the end of 1977 the clinics were providing more than 19,000 physician-patient visits and 10,300 patient-dental visits, plus 14,800 nurse and social service visits.

As time progressed the 4C’s clinics entered their ninth year of operation in 1978 with full-time services provided at three sites: the La Marque Public Health Center, the Galveston Medical Clinic and the Galveston Dental Clinic. There was also a satellite clinic at the League City Health Center. There were approximately 22,700 patient visits to physicians, 9,300 to the dental department and 10,000 nurse and social service visits.

As growth and demand for services continued changes were taking place in the clinics. In November 1981 after several years of negotiations the Galveston Dental Clinic moved from temporary quarters in a small frame bungalow on Avenue Q to the former Public Health Service Dental Clinic on the same grounds as the Galveston Medical Clinic and Public Health Center. The dental clinic was on the east side of the property on 43rd, and the medical clinic on the west side facing 45th street.

By 1984 the clinics were providing 21,536 patient visits, and 9,242 dental visits with full-time outpatient services provided at three sites - the La Marque Public Health Center, the Galveston Medical Clinic, and the Galveston Dental Clinic. Services provided included physician, laboratory, x-ray, pharmacy, dental, nutrition, adolescent counseling, limited patient transportation, and some social services.

In 1985 the 4C’s Clinics continued to provide services in three locations with changes on the horizon. A major event for the clinics in 1985 was the start of a renovation of the La
Marque Public Health Center, which housed the clinic program for the mainland. The project, costing approximately $900,000, was funded by a grant from the Economic Development Agency of the Bureau of Commerce, funds from the County of Galveston, and funds from the U.S. public Health Service.

The renovations to the clinics were necessary as they were experiencing substantial growth in both the number of individuals using the clinics and the number of visits. During 1986 over 12,300 patients utilized the services of the clinics or about a 25% increase from the previous year. There were over 54,000 patient visits to health providers of the clinics in the same year.

The demand for clinic services first noted in 1986 continued in 1987. Numbers indicated a 48% increase over the number of patients seen in 1985, and total visits were projected at over 73,000 compared to 48,000 in ’85. The increase was attributed to the economic situation in the area, increased referrals from other providers, and expansion of clinic services such as the Supplemental Feeding Program for Women, Infants, and Children (WIC), pre-natal clinic hours, and family planning services.

Entering the 1990’s the clinics continued to provide comprehensive services to the medically indigent at two sites. As with most years since the clinics opened they saw the
largest number of encounters in their history. The total number of “medical users” was 16,861 representing a 14% increase over 1989.

Challenges were experienced in dealing with the large numbers seeking services in 4C’s clinics. Some of the challenges included; pharmacy overload, need for a pharmacy in Galveston, needed additional space in La Marque, and needed computer systems for clinics in order to retrieve and identify patient information.

4C’s pharmacy services filled 60,273 prescriptions in 1990 compared to 49,603 in 1989. The increase in demand for pharmacy services was due in part to a cutback in prescriptions ordered at the University of Texas Medical Branch outpatient clinics.

In 1991 the 4C’s clinics continued their high level of service, providing care to over 25,000 patients for a total of over 88,000 visits. This increase in demand for medical services became a hot issue in the political world. Galveston County Judge Ray Holbrook at the time stated in a guest column to the Galveston Daily News that the demand for equipment, expanded clinical facilities and money for treatment was Galveston County’s most pressing issue for 1991.

The condition of the Galveston 4C’s clinic on 45th street became an issue when the District proposed closing it due to unsafe conditions. Located in what had previously been officers’ quarters for the U.S. Public Health Service Hospital the property was given to the county in 1972 when the hospital was closed. The building dated back to 1933 and was not designed to meet the needs of a public health clinic, or public health services in general. The 60-year old clinic building had been cited repeatedly over the years for fire code violations.

Members of the United Board of Health were incensed at the idea of closing the clinic which would leave the island without a community health center and approved sending a resolution to the County Commissioner’s Court telling them they needed to do something to help. Commissioner’s Court indicated if it became necessary to close the clinic they would recommend UTMB help furnish some space for the clinic on an interim basis until permanent quarters were found.

United Board of Health members eventually approved closing the Galveston clinic at the beginning of June 1992. Traditional public health services which were located in other buildings on the property continued on the island including immunizations, STD prevention, tuberculosis, and dental services. The decisions to close the Galveston clinic brought an outcry from the public and local news editors. An editorial in the Galveston Daily News stated that no amount of scrubbing could make the Galveston 4C’s look clean but it was needed by the island’s terminally poor.

Funding for the clinics became even more debated in the community when it was announced that assessed property values in the community had one of their biggest
increases ever. Many including some members of the United Board of Health felt like some of the funds should have been directed toward the district to improve services offered in the 4C’s clinics.

County Commissioners responded by accusing the district of not keeping them informed of needs. Some claimed they did not even know the Galveston clinic did not meet fire codes until they read it in the local newspaper. They were also angry that $400,000 allocated previously for work on the clinic buildings was instead used to purchase computer equipment. The District’s Executive Director rebutted that the computer equipment was just as needed as the improvements to facilities.

All of the debate came at a time when the 4C’s clinics were seeing a tremendous increase in the demand for services. In 1992, in Galveston County:
- There were 43,000 people at or below 100% of the poverty level
- There were 74,538 at 200 percent of poverty – the district’s “target” population at the time
- The number of patients seen at the clinic leaped from 9,985 in 1985 to 17,667 in 1991, a 77 percent increase
- The number of visits to the clinic increased from 48,177 in 1985 to 88,595 in 1991, an increase of 84 percent

Talks were initiated with UTMB to explore the possibility of the university providing primary care and family planning services to indigent patients in Galveston.

While talks with UTMB were taking place the United Board of Health began planning to move the Galveston clinic to the “Old Globe” at 4600 Broadway. The building had been purchased by the Galveston Housing Authority and was being renovated as a social services mall. The space on Broadway was just one of several sites considered for the clinic which included the Galvez Mall, Port Holiday Mall, and two strip centers on 61st Street near Broadway. Executive management also considered tearing down the clinic site on 45th and building a new medical-dental clinic on that county owned property.

While the debate continued about how and where to reopen an island clinic changes were also taking place in the 4Cs clinic on the mainland. During 1993 with the island clinic closed the 4Cs clinic in La Marque was experiencing an increase in the number of patients being seen. This presented a challenge since there was no room for expansion.

Officials looked for other space and found out that Texas City’s Mainland Children’s Partnership happened to have available space in an old retail building at Texas Avenue and 21st Street which had been rehabilitated as The Texas City Community Family Center. UTMB was going to occupy space for an OB/GYN clinic, and it was decided that the medical component of the 4Cs would be a good fit in the building. 4Cs dental services remained in La Marque at the Oak Street location, but later relocated to the Community Family Center when UTMB vacated space they had occupied.
The issue of a Galveston clinic continued in 1994 when Commissioners Court set aside $1 million to fund two years of operation of an island clinic but one still did not exist. The County Commissioners Court was waiting on the United Board of Health which was waiting on the Court.

Part of the problem in opening a new clinic in Galveston was location. A local coalition including the District, UTMB, the Harris and Eliza Kempner Fund and the Gulf Coast Center wanted to build a combination mental health clinic and primary care clinic at 45th Street and Avenue N. This location brought resistance from residents of the posh Cedar Lawn neighborhood across the street.

Other community leaders again spoke in favor of the former Globe department store building on Broadway that the Galveston Housing Authority was renovating to house social service agencies.

The clinic issue continued to simmer with new proposals being discussed. A coalition formed to devise a plan to reopen the 4C’s clinic called for treatment of the county’s indigent through UTMB with the eventual goal of building a primary-care and mental-health clinic on or near UTMB’s campus. The coalition making the proposal included representatives from GCHD, UMTB, and The Gulf Coast Center.

As time went on the issue became not just the need for a clinic in Galveston but also the struggle to keep any 4C’s clinic open. Staff was constantly letting County Commissioners know that they needed more money and were losing qualified staff to other agencies that paid a more competitive salary. Competition from UTMB for funding and staff were also blamed for the problems faced in the clinic.

UTMB was opening family medicine clinics in the county which health board members felt would take Medicaid dollars away from the 4C’s clinics when they were already experiencing a financial crunch. At a special meeting the United Board of Health passed a resolution supporting negotiations with UMTB to reach a compromise. UTMB
representatives said they could not provide any details on their future clinics and would not comment on the requested moratorium on clinic openings.

In '94 about 50,000 county residents did not have any form of health insurance. The clinics were serving about 1,400 people per week and had an annual budget of $5 million. Funding came from a combination of federal, state and local funding with the county contributing approximately $1.5 million.

In July it was also revealed that the District was having discussions with the Sisters of Charity of the Incarnate Word to reopen a clinic on Galveston Island to provide care to the underserved population. Sisters of Charity had been operating St. Mary’s Hospital since the earliest days of Galveston but had recently put it up for sale or lease. Despite the move they wanted to maintain a presence on the island. The Health District having closed the island clinic in 1992 due to staffing and structural issues was still eager to find a way to open another clinic on the island.

The local executive director of the Galveston Housing Authority publicly stated there was a need for medical care for low and moderate income people in Galveston. He also said the housing authority would be happy to have St. Mary’s open a clinic at the Island Community Center which was under consideration. The housing authority had just completed a $5 million renovation of the Globe building with hopes of leasing space to social service agencies.

Instead of reaching some kind of compromise with UTMB, County Commissioners had another idea, negotiating a deal with UTMB to assume all of the county’s indigent health care duties for a flat fee. If this happened the district would be left with pollution control, animal control and assorted other duties. Two Commissioners were assigned the task of working with UTMB. The two went so far as to ask UTMB officials to study taking over the 4C’s clinics.

After negotiations and many meetings it appeared an agreement was reached that would allow UTMB to run the 4C’s clinics. GCHD and UTMB were to split responsibilities. The district would maintain responsibility for pollution control, sanitation, animal control, vital statistics, epidemiology, tuberculosis control and administration. All other services including indigent care, and care in the 4Cs clinics would be performed by UTMB.

At the time the district’s total annual budget was $5.45 million, made up of federal and state grants, plus county funds. The money was to be divided between GCHD and UTMB based on departmental responsibilities.

Almost immediately after it appeared the agreement was reached the district learned a nearly $1 million Medicaid windfall would enable them to decline the UTMB bid to take over the clinics. Executive management credited new computer equipment that allowed employees to file accurate reports for allowing access to the federal funds.
County Commissioners heard from a host of citizens that urged caution on the issue. Many were 4C’s employees disturbed by the possibility of working for UTMB despite the likelihood of better salaries and benefits. Many expressed the feeling that they did not get involved in public health for money but instead to help people. They felt if UTMB assumed control of operations things would change and not for the positive. Commissioners voted to delay any decision until more study could be completed.

Encouraged by the windfall, members of the Galveston County United Board of Health voted unanimously to delay any UTMB takeover of the 4C’s clinics. However it would take a vote of the County Commissioners, and there appeared to be some that felt like a UTMB takeover might still be in the best interest of the residents.

Galveston County Judge Ray Holbrook at the time stated there was strong support on the Commissioners Court to work with UTMB. (33) As time progressed it appeared that despite the financial windfall Commissioners would turn the clinics over to the University system.

In a surprise to many, operations of the clinics did not fall into UTMB’s hands when the Commissioners met in September. The court postponed action on the matter until many lingering questions about the proposed deal could be answered. (35) Commissioners directed their legal department to come up with a detailed contract that would include input from UTMB and the Health District. What seemed to be a done deal now appeared to be months away from being finalized. Ultimately UTMB never did gain any control over Health District functions.

At the same meeting the previously mentioned clinic collaboration between the District and the Sisters of Charity of the Incarnate Word was also discussed. The Sisters proposed to lease property for the clinic to use rent free and to supply part of the cost of operating for five years. The County 4C’s clinic would supply the equipment and most of the personnel and also seek funds from the county.

Plans for the new Galveston Clinic moved forward with an effective date of May 1, 1996.

The new Galveston Clinic a partnership between the Galveston County Health District and the Sisters of Charity became a reality. After having taken occupancy of the building, formerly occupied by the Globe Corporation’s retail center in May an official opening was conducted on August 30, 1996. The clinic offered a full range of family medical services.

In a Galveston Daily News editorial the opening of the Galveston clinic was called a significant event because of the low-cost health care it would provide.
While the district vacated the site on 45th Street the buildings did not go unused. A local non-profit organization serving children and women in crisis obtained the buildings to be used for transitional housing.

The National Association of Community Health Centers presented an achievement award to the District in “98 for addressing the delivery of quality healthcare to underserved Americans through the 4C’s clinics.

Indigent medical care remained a problem for Galveston County in 1999. The County and the University of Texas Medical Branch entered into a temporary arrangement which provided care to patients that could not afford it which had an impact on the 4Cs clinics. At the time Galveston County was paying UTMB for indigent hospital care and was concerned they would be asked to pay more as the University struggled to get a grip on indigent care costs that were spiraling out of control.

To address problems with indigent care UTMB was retooling their entire system for providing care to indigent patients requiring them to pay more, more often and also pay for prescriptions. They also instituted a twelve dollar co-pay for all emergency room visits, and started refusing emergency-room transfers of indigent patients from other hospitals.

The changes were to take place at the beginning of April but were delayed due to ongoing negotiations. Once the changes were implemented patients who qualified for indigent health care had to follow certain procedures to access care:
First they had to visit one of the 4C's clinics in Texas City or Galveston for an initial screening process which was to be repeated every six months
- Patients had to obtain a health care card from the clinics
- Doctor visits for non-emergency care had to be provided in the county clinics
- To access care at UTMB a doctor’s referral was needed
- Patients arriving at UTMB without a card or referral were turned away
- County Social Services would work with patients that did not qualify for indigent care

County officials estimated the changes would send an additional 12,000 patients to the 4C's clinics in Galveston and Texas City. To qualify for specialty care at the university county residents had to live at or below federal poverty guidelines. At the time it meant a family of four earning more than $16,000 a year would be ineligible for indigent care.

The changes made by UTMB earlier in the year concerning indigent health care became costly as more and more patients were showing up at 4C's clinics. County Commissioners began to realize that more money would be needed if the clinics were going to meet the demand. There were also concerns about administering the indigent care program that would screen residents to make sure they were 100% of federal poverty before referring them to UTMB for specialty care.

Due to the ongoing crisis of providing indigent care Health District officials started working with others to explore what, if any, options existed that could then address the issue. They settled on a cooperative plan based on a health care model from Florida known as Hillsboro HealthCare. The program would use a quarter-cent sales tax to provide care to those who did not have other health insurance. Recipients would pay for care on an income based sliding fee scale. The program never became a reality.

Good news was announced by the District in December 1999 when the 4C’s clinics gained accreditation from the Joint Commission on Accreditation of Healthcare Organizations. This was the first attempt made to gain this prestigious recognition.

While area cities were concerned with pollution services Galveston County Commissioners were dealing with the ongoing issue of indigent health care and part of the process was a sunset review of GCHD operations. (44) The Health District fulfilled its duties but was concerned that indigent health care needs would eventually overshadow its public health services.

At the time it was estimated there were 80,000 uninsured or underinsured residents in Galveston County. Some committee members felt the most pressing needs was finding more funding for indigent health care. There were organized community marches to put pressure on the Commissioners Court to increase the county’s contribution to indigent care by $12 million a year.
GCHD’s 4C’s clinic in Texas City made the news in a rather unusual way in March 2002 when it was evacuated due to a chemical spill. A machine being used to develop X-rays overflowed, spilling film-processing chemicals in the building. One office worker was taken to a local hospital. Contractors were called in to clean up the spill, and the Texas City Fire Department’s Hazardous Materials team monitored the situation.

Today services are still provided at clinics in Galveston and Texas City. All county residents can access care in the clinics, and indigent primary care is also provided to those who qualify and meet income requirements. Those qualifying for the Galveston County Indigent Health Care Program needing specialized hospital care must receive a referral through the 4Cs clinics.

The clinics Governing Board took action in November 2011 and voted to change the name from 4Cs to Coastal Health & Wellness. This action occurred in anticipation of a move to a new clinic facility in Texas City which county voters approved in 2008. The name change was approved along with strategies and goals to keep existing patients, improve the public image and community perceptions of the new Coastal Health & Wellness and to manage organizational change effectively.

The new clinic was constructed for a larger capacity allowing Coastal Health & Wellness to serve more local residents. The clinic is located in the former Wal Mart building in the Mainland Mall area located on Emmett F. Lowry Expressway in Texas City.
Animal Services

Animal control has been a concern among Galveston County residents and leaders for many years. As early as 1956 there was one animal control officer assigned to cover all unincorporated areas of the county. Eventually this was upgraded and there were two officers that provided services using their own trucks. During these years the county “pound” was located in Dickinson. There were many complaints as the facility consisted of ten wire cages stacked on top of each other for animal storage.

Mainland communities were also dealing with the challenges posed by animal control. Hitchcock put dogs in an old jail cell, and La Marque had outside uncovered animal pens. Texas City maintained its’ own animal control department, but it was supervised by the County Health Department, and had its own pound which was the best in the area if for no other reason than it was covered.

The local SPCA raised concerns about the practices and cited the fact that people were taking animals to the local dump and using them for target practice rather than taking them to the county. In response the county signed a contract with the SPCA in San Leon to take animals from the unincorporated areas of Galveston County, La Marque, Dickinson and Hitchcock.
The agreement continued for many years with the District providing animal control officers for a large part of the county. The district would provide field services but a contract with the SPCA in San Leon was still in place to house animals. Many in the community felt like the shelter was inadequate and calls for improvements began to be heard. According to a report in the February 5, 1975 Texas City Daily Sun the SPCA planned to request a $10,000 increase from County Commissioners to improve services.

Animal services remained newsworthy with reports of rabies becoming more prevalent in surrounding counties so the District proposed a new Animal Control Policy that would provide strong controls over animal owners and all commercial animal establishments. The ability to pass such policies had been given to the United Board of Health in 1976. The UBOH approved this requiring that any proposed regulations be submitted to all contributing agencies and/or member cities for their recommendation and approval before the board could enact the regulations. Other regulations pertained to the number of animals allowed per house or apartment, the legality of keeping wild or non-indigenous animals and there were rules to identify, register and control vicious animals.
The United Board of Health adopted a more stringent Animal Control Policy in 1981. This action was taken after seven confirmed cases of rabies in skunks and bats were detected in the county. Board of Health members addressed the policy by twice amending it in 1983. The first amendment redefined a kennel and the requirement to obtain a permit for a kennel. The second amendment exempted wild or exotic animals which were not dangerous to human beings.

The district’s vicious animal regulations received national, state and local attention in 1987. As a result Texas House Bill 571 passed during the legislative session relating to the creation of an offense for owning or keeping a vicious dog, and provided for the destruction of certain dogs. The law was successfully enforced in Galveston County. United Board of Health members also amended the Districts Rules for Animal Control to reflect new state laws. 313 animal bites were reported in 1988 down from 370 in ‘87. The decrease was attributed to the stiffer regulations.

The Animal Shelter Act amended in 1989, required shelters to separate all animals by species, sex and size. This meant many of the cities would have to modify their existing shelters. It was proposed that a new centralized animal shelter be constructed that would serve multiple communities. The cost of a centralized shelter would be split by the county and the five cities most likely to use it: Texas City, La Marque, Santa Fe, Dickinson and Hitchcock. Their portions were to be split according to population.

United Board of Health members voted to pass along a proposition to County Commissioners in 1990 for the construction of a $300,000 centralized animal shelter. The proposition was passed along partly due to the fact the State had recently set tougher regulations for animal shelters.

The plans for the new animal shelter suffered a setback in ’91 when the facilities architect passed away. The Director of Environmental Services estimated construction kick-off was at least 30 days behind schedule. Despite the setback, the 4,080-square-feet shelter to be located in Texas City on Loop 197N was still scheduled to be open by January 1992, and house up to 5,600 animals per year.

While anticipation for the new shelter was high it suffered another setback when Galveston County Commissioners voted to reject all bids and start over. Commissioners had previously approved a $300,000 shelter but construction estimates came in exceeding $500,000.

The architect who designed the proposed shelter defended the cost stating it was more than just a doghouse but instead a large facility designed to operate efficiently with only three people. He pointed out to Commissioners that the shelter was designed to hold up to 80 animals with special rooms for puppies, cats, sick animals and provide space for grooming.
The new Galveston County Animal Shelter finally became a reality when it opened in January 1993. The County Commissioners named the building "The Joe Vickery R.S. Animal Shelter" in honor of Joe Vickery, Director of Environmental and Consumer Health. Mr. Vickery and Guy Wilkinson worked for over 20 years to bring the County and cities together on this project. The shelter cost was $558,325. The County agreed to fund 50% of the cost of the building and operations of the shelter with the cities contributing the remaining 50% according to population.

The new facility contained 40 cages, including eight set aside for quarantine. It also included an examining room for a veterinarian and a special room where the euthanasia of animals would be handled by two different methods.

The District’s Animal Shelter Director, Shirley Tinnen made the news in early 1997 when she participated in a state program that dropped rabies serum from an airplane in south Texas. The state conducted the program after two confirmed human cases of rabies in 1996. The effort was conducted to stop the spread of rabies throughout the state.

In May ’98 Animal Control was in the news when a judge ordered a La Marque man to surrender his African Rhodesian Ridgeback to the District. While the owner claimed the animal was a docile pet others claimed the dog was a vicious animal that terrorized the neighborhood and postal workers. After an appeals process the animal was euthanized.

Animal Control remained in the news when 17 Pit Bulldogs were removed from a Dickinson residence during a drug raid in April 1999. All of the animals displayed signs that they had been trained as fighting dogs. Many had scars from past fights. Along with the canines other animals taken during the raid included a beagle, a rabbit and a Cayman alligator. The search also netted 68 pounds of marijuana seized by the Galveston County Sheriff’s Department. The bulldogs were eventually euthanized by court order.

An unfortunate operations error kept Animal services in the public’s eye after staff humanely euthanized a dog that a family had selected to adopt for their child. After visiting the facility the family went home to make sure their yard was secure before bringing the puppy home. After returning to the shelter they discovered that staff had euthanized the animal.

Staff agreed the situation was not handled properly and had to field calls from angry local residents that found out about the euthanized animal. There was a call by some that animal services be turned over to a private company. This idea was rejected, but staff did pledge to make improvements in procedures at the shelter facility.

As a result of the incident The Galveston County Daily News published a feature story on the shelter. District officials pointed out that in 1999 more than 7,000 dogs and cats
were taken in at the shelter, and only about 650 were reclaimed by owners, 340 taken to new homes, and more than 5,000 were euthanized.

In the story it was stressed that while not a perfect situation animals not claimed or adopted had to be euthanized in order to make room for additional animals. The problem was not the shelter, but instead that many pet owners were not responsible and properly caring for their animals.

Animal Services reappeared in the news after animal control officers came back from a call in Crystal Beach with a 200 pound cougar. The animal, owned by a Houston woman, bit its owner who decided she would rather not keep the large cat and called the Sheriff’s office for help, who in turn called Animal Control. After a 30-day quarantine a new facility was found to care for the animal. Texas City Sun, June, 5, 1999

Through time providing quality animal control services has remained challenging and a responsibility that continues to grow with a growing human population. The Health District has worked with multiple animal welfare groups to increase the volunteer support at the shelter, and to improve services. Additional outreach has also been initiated to increase the live release rate at the ARC. An Animal Advisory Council with diversified community representation was also formed that helps guide the district in efforts to improve services.

Most importantly in November of 2008 voters approved a county bond proposal that included construction of a new Animal Resource Center. Animal services moved in to the new Galveston County Animal Resource Center in 2011. Construction of the center began in early 2011 and was completed in November 2011. A grand opening celebration occurred on November 28, 2011 in front of a large crowd of supporters listening to remarks from many dignitaries in the area. Construction costs were estimated at 5 million dollars for this 15,000 square foot state of the art pet adoption facility. Shortly after the grand opening, allegations of animal abuse at the center led to public outcry and protestors picketing during an open house at the animal resource center. Eventually, the animal abuse charges were not substantiated and the center has seen amazing improvements in live animal adoptions through the hard work of staff, the incredible volunteers and the wonderful partnerships with animal rescue groups. Information about animals available for adoption is broadcast on Facebook, youtube, twitter, GCHD’s website and the Galveston County Daily News.
The Trouble with Pits

The Galveston County Health District has dealt with many environmental issues through the years, perhaps none as complicated and drawn out as that surrounding the M.O.T.C.O. waste pits located at the Texas City Wye in La Marque.

The pits were first excavated to provide soil for the construction of U.S. Highway 75. After their use for soil was no longer needed U.T. Alexander purchased the site in 1959 for the purpose of recycling styrene tars generated by local industry.

The recycling operation was abandoned in 1961 because of flooding from Hurricane Carla. The pits on the site were then used for disposal of industrial petro-chemical wastes. In 1963 the ownership of the pits was transferred to a Texas corporation, and later in 1964 the site was permitted as a disposal facility by the State of Texas which continued to operate until 1968.

In later years others continued to dump a variety of hazardous chemical waste in the pits. Some of the material included styrene tars, vinyl chloride bottoms, spent acids, and mercury. GCHD Director Dr. W. W. Kemmerer was reported as saying, “This problem is the pits!” The Health District with others in the community struggled to find a solution that would rid the community of the noxious pits which at the time were abandoned.

By 1979 the pits had become a major problem and seemed virtually indestructible, and by the beginning of 1980 the toxic tar pits were again in the news. The Environmental Protection Agency (EPA) toured the site and listed it as one of their top priorities for a major cleanup. Agency officials stated the pits held a poisonous chemical stew. At the time the first of what would eventually be several clean-ups began with the EPA pledging to build dikes around the pits and removing the dangerous materials in barrels. The site was listed as one of the top ranking superfund sites in the nation.

Things became complicated after the visit by EPA with some claiming their visit was nothing more than a flag waving ceremony. While on site they claimed funds would be available for the Coast Guard to at least build a fence and put up some warning signs. After the visit the Coast Guard stated the pits were not in their jurisdiction and there was no funding, so the issue of what to do with the tar pits remained a problem that Galveston County United Board of Health members were very concerned about.

Eventually a cleanup led by the Coast Guard did take place. Remediation activities included the removal of drums that had been stored in and around an abandoned service station on the property, extending and raising the perimeter dikes, and securing the site by erecting a 6-foot fence around the property. That same month Coast Guard officials locked gates to the new fences surrounding the waste pits and turned over the keys to the Galveston County Health District. While not a complete clean-up the Coast Guard said
as much work as possible had been done under the existing laws at the time. Approximately $130,000 was spent on the cleanup effort. Time would reveal that this was not the last time the county would be dealing with the troubling pits.

In 1984 The Environmental Protection Agency began the process of accepting bids on remedial actions to be taken with federal Superfund financing to eliminate the M.O.T.C.O. tar pits. It was estimated that a full clean up would take from three to five years and cost in the millions.

The District continued to assist the Environmental Protection Agency in their quest to clean up the M.O.T.C.O hazardous waste site. In ’85 an agreement was reached with the responsible parties allowing them to address remission of the site. The principal parties began the selection process to find a supervisory engineering firm, and methodology for processing the waste. (23)

After studies, studies, and more studies a contract was let for the elimination of the M.O.T.C.O site at the Texas City Wye. The funding for the process set new standards for EPA and the Texas Water Commission with the cost of the remediation at the time estimated as much as $45,000,000. The cost was apportioned between the government agencies and the designated “Potentially Responsible Parties” on a voluntary basis. The complete cleanup was projected to be completed in four to five years.

The clean-up of the pits that started in 1988 was finally completed in 1997. EPA conducted a final site inspection and issued the Preliminary Close out report in September. During the process the pits were remediated and capped, a cutoff slurry wall was installed around the perimeter of the affected materials, and an onsite ground water treatment facility that would operate under a long-term response plan to extract and treat ground water was put in place. The surface of the site is now covered with planted grasses, and site security is provided by a chain link fence and locked gates.
**EMS Services in Galveston County**

Historically ambulance services in Galveston County had been provided by funeral home operators. Things begin to change in 1975 when after many months of planning the City of Galveston Health Department and the Galveston County Health District entered into a new program for the provision of emergency medical services. Initiated by a regional medical program grant, the health department assumed the responsibility for an emergency medical services system for the City of Galveston. On May 1, 1975 the service was opened and by December 31, it had responded to 3,414 calls.

At the same time Galveston’s Moody Foundation also made a donation to the Emergency Medical Services Council for the City of Galveston to purchase vehicles and medical equipment. This City of Galveston program was and remains administered by the District.

EMS in other areas of Galveston County was a big issue in 1977 after funeral home operators on the mainland announced they would cease providing such services. The Galveston County Association of Mayors and Councilmen began to study the possibility of a working county-wide EMS program. The group charged the Galveston County Health District to draw up a plausible plan for an EMS in Galveston County that would help the various cities understand the problems and services involved. Until a permanent EMS solution could be reached a subsidy was needed to keep funeral homes providing services. This solution became problematic when several cities could not afford to pay the subsidy.

The community continued to struggle with the issue. Many called for a county wide EMS service and some cities wanted to contract with private providers for the services. By year’s end, the cities of Texas City and League City and Galveston County contracted with
the ABC Ambulance Company, while the cities of La Marque and Hitchcock and the unincorporated Santa Fe opted for a subscription service operated by Jordan Ambulance Service.

In 1977 the Galveston City Emergency Medical Services, operated by the Health District under the direction of Warren J. Holland, initiated advanced life support services bringing what at the time were the most modern emergency services to the citizens of Galveston. Each vehicle was fully equipped to provide electrocardiograms, administer intravenous therapy, treat cardiac arrest and administer lifesaving medications.

As time passed ambulance services remained in the news with many complaints that the private contractor’s equipment being used in a large portion of the county did not meet state standards. On several occasions in 1978 the District’s director was called on to inspect ambulances. The ambulance services on the Mainland saw many changes during this time. The year started out with two ambulance companies providing services. ABC ambulance service was serving Texas City, League City, Dickinson, Kemah, and the unincorporated areas of the county through a contract agreement with the cities and county. Jordan ambulance service continued serving the Highway 6 area.

In the summer of 1978 a volunteer EMS group was established in the Santa Fe area. This group had been concerned with the service the area was receiving from the private company and decided to provide service themselves. While the volunteer group was organizing, Jordan ambulance service decided to leave the area. To protect those that had purchased subscriptions Jordan contracted with AA ambulance service of Galveston to provide services through January 1979.

With Jordan pulling out of the area, leaders in Hitchcock and La Marque were again faced with the problem of what to do with ambulance service. Plans at the first of the year were for Hitchcock to establish a volunteer service; La Marque was undecided as to the type of service, volunteer or contract, to be provided.
While mainland communities struggled, Galveston continued to be served by Galveston EMS operated by the Health District with a paid staff of 20. The service operated three front line modules with a crew of two persons per vehicle, one paramedic and one EMT. In 1978 the Galveston EMS had passed the 20,000 mark in calls received since beginning operation three years before. They were also awarded a certificate of merit by the Emergency Product News for outstanding performance during a grain elevator explosion at the Port of Galveston that had occurred in 1977.

As the county entered the 1980's the provision of emergency medical services to all county residents remained a challenging situation. The Galveston County Mainland was served in the following manner:

- League City awarded a 2-year contract to Bay Area Ambulance Service, but rescinded the contract mid-year due to lack of funds. There was no coverage for the remainder of the year.
- La Marque, Texas City and the unincorporated areas of the north county were served by Galveston County Emergency Medical Service, a private company.
- The Highway 6 area and surrounding unincorporated were served by the volunteer services of Santa Fe and Hitchcock.
- The Friendswood area was covered by the Friendswood Volunteer Ambulance Service operated by the fire department.
- Bolivar Peninsula was served by volunteer services in Port Bolivar, High Island, and Crystal Beach.
- Galveston EMS continued to serve the island with a full-time paid staff of 20 employees. In 1980 the Galveston EMS passed the 36,000 mark in calls received since beginning operations.

In June 1981 the Galveston County Commissioners Court established an Emergency Medical Service Study committee to critically examine the emergency ambulance problems on the Mainland, excluding Texas City, La Marque and Friendswood. The committee was requested by the local Moody Foundation which strongly believed that a coordinated county-wide program would be beneficial to citizens.

The “Study of Emergency Medical Services in Galveston County” would be completed in 1982 and presented to leaders in 1983. When it was completed it found that the greatest benefit would be the establishment of a unified EMS service coordinated by one agency serving the mainland. The recommendation never came to fruition.

By 1985 Galveston EMS passed the 72,000 mark in calls received since beginning operations. The total number of responses for 1985 was 6,981 or a daily average of 19 calls per day.

In Galveston the growth of certain events was beginning to have a big impact on the EMS. Mardi Gras 1990 impacted Emergency Medical Services as the year was the busiest ever. During the festival EMS responded to a total of 159 calls for one 24-hour shift.
of the responses were in the Strand District and had to be handled by paramedics on foot. The United Board of Health requested a meeting with the City of Galveston to discuss EMS needs during “planned emergencies” such as Mardi Gras. (29)

UBOH members felt that event organizers should pay for extra EMS services just as special event organizers often paid for additional law enforcement. Some board members considered encouraging the public not to attend future Mardi Gras’s if more funding was not received because adequate emergency services would not be available.

The continued increase in the demand for EMS services in the City of Galveston remained newsworthy. After compiling data from a six-month self-study, EMS officials and Galveston County Health District authorities began talking about allotting the service more money.

Of primary concern was a lack of service when both ambulances that served the city were on call. The EMS operations manager stated at the time that up to one hour per day was uncovered in the city. When the ambulances that served the city were on call, incoming calls were put on hold or handled by the EMS supervisor at the Fire Department.

Staffing Galveston’s EMS was another concern. In 1991 the service had 20 full-time paramedics, the same number they had in 1977. As a result paramedics were overworked and stressed resulting in a 50 percent turnover rate for the service. Galveston’s City Council addressed the concerns by adding $40,000 to the Galveston Emergency Medical Service’s $1 million budget. Approximately $33,000 of the funds was to be used to hire four additional paramedics with the remainder used for salary increases.

Galveston EMS paramedics talked about staging a walkout in ’91 after the City Manager approached the University of Texas Medical Branch with the idea of taking over the $1.2 million service. Paramedics employed by the Health District expressed fears and discussed a “sick-out” to protest the measure.

One concern among employees were benefits they might lose if UTMB took over the service, but the City Manager told a committee that employees were safe – that they would not lose accrued sick time or other benefits.

Initially the City Manager recommended the city to take UTMB’s offer to run the service. As a result the council grilled the manager for more than two hours. He said it was clear that a majority of council was pleased with the service being provided by the district so he did as asked.

The EMS Operations Manager at the time recommended raising the rates charged for ambulance runs above the levels being charged at the time, which had not changed in more than four years, but some city council members feared an “unbelievable uproar” in the community if that happened.
Eventually Galveston’s City Manager recommended the council allow the Health District to raise its price for basic ambulance service and remain the provider. He proposed raising the base charge for ambulance service from $130 to $210 per response which would boost the EMS income by $100,000 a year.

Another challenge was presented in 1992 when the private firm providing service to several mainland communities announced they would continue providing non-emergency transport but stop providing emergency ambulance service. While many believed that it was possible for a private provider to make money off of an emergency ambulance service it was beginning to look like that was not true. The Mayor of Galveston proposed the creation of an emergency medical services district that would have taxing power. This did not ever come about.

This patchwork of EMS service in the county really began to be a concern when residents expressed concern about quality of services. The do-it-yourself quilt of ambulance companies that contracted with the county and with each individual city in the county obviously had problems. Many felt that like neighboring Fort Bend County there should be one countywide service.

In 1992 the county, Texas City, Hitchcock, Dickinson, La Marque, Friendswood, and League City all contracted with private services. Many residents started to wonder if any of the private services could reach them in time to save their lives if needed. The City of Galveston owned its own ambulances but continued in their contract with the Health District for the personnel to operate them and the equipment.

While Galveston had enjoyed a successful EMS operated by the Health District in 1995 the firefighters union presented a plan that they claimed would save the city $350,000. It was based on the service becoming a part of the fire department. The plan also assumed a private collections company could collect up to $1.9 million to $2.1 million per year in charges billed. (37)

Many felt to save the money fees would have to double or triple if the proposal was accepted. There was also concern that the collections agency could not obtain a performance bond or provide a letter of credit for at least $1.1 million. Another thorn in the issue was UTMB whom many felt was also jockeying to provide the service.

United Board of Health members approved continued negotiations with the City of Galveston to continue providing EMS services on the island. Part of the negotiations included an exclusive transfer service. When the negotiations were complete GCHD maintained their contract with the city, and also was granted the exclusive transfer service contract. These negotiations resulted in the formation of the Galveston Area Ambulance Authority (GAAA) through a Memorandum of Understanding (MOU) between the County, City of Galveston and Health District.
A new Galveston EMS substation opened in February ‘97 at 501 Avenue S. The opening shaved two-to-three minutes off the time it took for EMS responding to emergencies on the west end of the island.

Mainland EMS service entered the news again during the summer of ‘98 when the contracted provider indicated they would withdraw services from the mainland communities of Texas City, Dickinson, La Marque, and Hitchcock. Company officials stressed they wanted to stay but were facing financial difficulties. Texas City extended their contract with the local service provider while at the same time seeking proposals to create a countywide EMS system. The city’s mayor stated publicly he hoped the Health District would submit a proposal to provide the services. The district did submit an RFP to provide services but was not awarded the contract.

When all was said and done the mainland service area ended up with two providers. Texas City and Dickinson signed contracts with Rural/Metro EMS and the city of La Marque continued using American Medical Response. Hitchcock whose volunteer service had disbanded also signed a contract with American Medical Response. Problems continued to exist with all private contractors. It seemed that every time an agreement was reached the cost would rise dramatically for each municipality when the contract came up for renewal. After much angst the City of La Marque also adopted to drop American Medical Response and signed a contract with Rural/Metro.

This arrangement lasted until 2005 when the private EMS contractor filed for bankruptcy and ceased providing service. Through meetings with city and county leaders another MOU was created that called for coordination of EMS services between Texas City, La Marque, Dickinson, Hitchcock, Bayou Vista, Tiki Island and Santa Fe.

As part of the agreement beginning in February ’06 GAAA assumed responsibility for 911 response services in the Highway 6 area, excluding Santa Fe which continued to operate their own community EMS. The Bacliff area continued to be served by GAAA. Bolivar Peninsula received EMS services via a community volunteer corps with assistance from GAAA as part of an ongoing agreement to provide assistance.
The basic framework of this agreement continues today. The Cities of Friendswood, League City, Dickinson, La Marque and Santa Fe (see inset) provide their own EMS services. GAAA continues to provide EMS services on Galveston Island as part of their agreement with the City of Galveston. GAAA also provides 911 services in Hitchcock, Bayou Vista, Tiki Island, Bacliff area, and provides support by contract to the Bolivar Peninsula communities.

Santa Fe Fire and Rescue – A Success Story
Santa Fe Fire & Rescue was formed in 1995 to provide the citizens of Santa Fe and the surrounding area with unmatched fire, rescue and emergency medical services. The Fire Division is comprised completely of volunteer firefighters that respond 24 hours a day, 365 days a year to calls for service: Fires, Rescues, Hazardous Materials Incidents. The EMS Division is comprised of 4 full-time Paramedic supervisors and multiple part-time paramedics and EMTs. Two full-time office personnel are responsible for administrative duties. Santa Fe Fire & Rescue is a 501(c)(3), non-profit organization funded by the Galveston County Emergency Services District #1, the first and only district of its kind in the county.
Public Health in Galveston County  
A Historical Recollection by the History Council Committee  
of the Galveston County Health District

**GCHD Key Personnel**

**Galveston County Mainland Health Department**

Dr. Louis Riley  
1968-1970

**Executive Directors**  
**Galveston County Health District**

Dr. John Reeves (Acting Director)  
1971 - 1972

Dr. Walter W. Kemmerer  
1972 - 1984

Dr. Clarence Porter (Interim)  
1984 - 1985

Dr. Ralph Morris  
1985 - 2002

Dr. Harlan “Mark” Guidry  
2003 - 2015

Kathy Barroso (Interim)  
2015-2016

Kathy Barroso  
2016 – Present

**History Council Members:**
Dr. Mark Guidry, Ray Holbrook, Warren Jay Holland, Milton Howard, MD, Bernard Milstein, MD, Darla Kass, Janet Greenwood, Jean Chipman, Jim Hilton, Joe Vickery, Leta Melancon, Mike Carr, Mary Griggs, Gay Lane, Sandy Sherow, Shirley Carr, Susan Studebaker, Terry Smith, and Thelma Logan

*Special thanks to the History Council Members, Dr. Guidry, Kurt Koopmann, Richard Pierce, Ronnie Schultz, Scott Packard, and Amanda Taber for all the time and hard work put into making this historical recollection.*

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