Fortieth Anniversary

1966-2006



A PROMISE MADE.

A PROMISE FULFILLED.

A PROMISE FOR

A BETTER TOMORROW.

Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.

MARGARET MEAD, AMERICAN ANTHROPOLOGIST

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A RICH TRADITION OF CARING FOR OUR NEIGHBORS

In 2006, the Harris County Hospital District celebrated its 40th year of service to our community. From humble beginnings, we have come a very long way. Yet, as we continue to serve one of America's fastest-

growing urban areas, our challenges are greater than ever.

Today, our community includes more than 1.2 million uninsured or underinsured residents. The visionary leaders who helped establish our health system to care for the indigent 40 years ago likely never envisioned serving as many as 30 percent of our neighbors.

J. Evans Attwell

The time has come for the hospital district to grow in strength and depth of service to better meet our community's medical needs. The next several years will bring a dramatic expansion of our facilities and many other improvements in our health care delivery system, all of which will markedly improve patient access to care.

As we move forward, we acknowledge the dedication of the exceptionally talented people who have served our community so well throughout our proud history, and thank those who con-

tinue to serve today.

This report is presented in three sections: the promise of better care made by our forebears; the promise we continue to fulfill today through our centers of excellence; and the promises we make for continued excellence far into the future.



David S. Lopez

Entering this new and exciting period in our development, we are mindful of our rich tradition of caring for the community's underserved. The progress we make during the next few years will help ensure it is a service that continues for generations to come.

Sincerely,

J. Evans Attwell

Chair, Board of Managers

James athwell.

David S. Lopez

President and CEO



A promise made



As it continues to deliver on its mission to improve the community's health by delivering high-quality health care to Harris County residents and by training the next generation of health professionals, the Harris County Hospital District is mindful of the promise that was made 40 years ago by a group of thoughtful and dedicated citizens.

HIGHLIGHTS FROM HARRIS
COUNTY HOSPITAL DISTRICT'S
FIRST 40 YEARS:

1966

Harris County Hospital District takes ownership of city-county hospitals Jefferson Davis and Ben Taub



1967

Jan. 28, Settegast Health Center opens in Northeast Houston to launch the hospital district's Community Health Program, an innovative neighborhoodbased primary care initiative

1967

Feb. 14, Baytown Health Center opens in far East Harris County

1969

Ben Taub's Dr. George L. Jordan first uses the "Jordan Maneuver" to repair injuries to the duodenum, allowing wounds to heal faster and with fewer complications

1970

Aug. 21, Casa De Amigos Health Center opens in near North Houston



1971

May 17, Acres Home Health Center opens

1972

April 28, Martin Luther King Health Center opens

1973

Jan. 2, Ripley Health Center opens

1973

Dr. Carlos Vallbona enlists district's Community Health Centers to instruct new physicians in providing



health care outside of hospital settings

1974

Nov. 5, West End Health Center opens (later becomes Northwest Health Center)

1975

Ben Taub Hospital institutes cuttingedge automation for the storage and retrieval of laboratory data

1975

Ben Taub Emergency Center institutes a new method of recovering and returning a patient's blood.

1977

Oct. 31, Strawberry Health Center opens in Pasadena

1979

14,000 Births

The Winifred Wallace Maternity Center at Jefferson Davis Hospital is completed, accommodating more than 14,000 births annually

1979

Ben Taub becomes the first hospital to obtain a CT scanner for the evaluation of head injuries

1980

HCHD Dental Center opens Feb. 12

1982

Jefferson Davis becomes the first public hospital in the nation to have nurse midwives provide obstetrical care to women with uncomplicated pregnancies

1982

April 28, E. A. "Squatty" Lyons Health Center opens in Humble

1983

Quentin Mease Community Hospital, named for district's long-time board chairman, opens on N. MacGregor Drive, offering geriatric and long-term rehabilitation services



1984

Ben Taub Anesthesiology Service installs advanced, computerized system for anesthetic and respiratory analysis

1986

HCHD establishes Health Care for the Homeless Program

1987

Board of Managers increases to nine members, improving its diversity

1989

UT-Houston Medical School affiliates with HCHD to provide medical staff to LBJ Hospital and some of its community health centers



1989

May 22, Thomas Street Health Center opens as nation's first freestanding HIV/AIDS treatment facility



1989

June 2, LBJ General Hospital opens; June 3, Jefferson Davis Hospital closes

1990

The new 578-bed Ben Taub General Hospital opens next to the original facility in the heart of the Texas Medical Center on Jan. 12

1990

LBJ Emergency Center and operating suites open July 1, receiving its first medical emergency at 7:01 a.m.

1994

HCHD is named one of the nation's "Top 100 Hospitals" by *Modern Healthcare Magazine*



1994

HCHD opens first school-based clinic at Jackson Middle School

1995

HCHD is again named to "Top 100 Hospitals" list by *Modern Healthcare Magazine*

1996

Lyndon. B. Johnson becomes first hospital in Texas to receive Level III trauma designation

1997

HCHD launches mobile health program with HCHD Foundation's donation of TroubleShooters immunization van

2001

June 9, Ben Taub and LBJ Hospitals accept dozens of patients from other community hospitals flooded during Tropical Storm Allison

2001

July, NASA astronauts came to
LBJ Hospital to
learn about
proper airway
management
and endotracheal intubation as
part of their
medical training for the
journey
into space

2004

HCHD Physical Medicine and Rehabilitation Program achieves CARF accreditation, certifying it among the nation's elite rehabilitation programs



2005

HCHD establishes Astrodome Health Center to serve the medical needs of nearly 25,000 Hurricane Katrina evacuees



2005

HCHD wins prestigious TMF Health Quality Institute's Award of Excellence

2005

April 20, HCHD introduces ServiceFIRST initiative to improve customer and patient satisfaction

2006

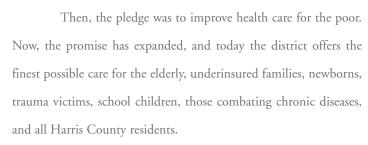
The Ginni and Richard Mithoff Trauma Center is dedicated at Ben Taub Hospital



2006

HCHD announces plans to add two new community health centers, a dialysis center, a radiation therapy center, and new outpatient diagnostic clinics to better meet the community's growing needs It was the promise of better health care for all our neighbors that prompted Harris County residents to vote for the creation of the Harris County Hospital District. The city of Houston joined county government to deliver responsibility for the Harris County Hospital District on January 1, 1966, to a newly appointed board of managers





The promise of quality health care has been fulfilled untold thousands of times throughout the district's 40 years, and this year it provided caring service to our neighbors, who made 1.2 million vis-

its to its hospitals, health centers and school-based clinics. Compassion and a caring mindset have always been hall-marks of the hospital district's staff members and medical staff. As David S. Lopez, president and chief executive officer, says, "This is our ministry."

A voter transported from 1966 to today might be surprised to see how that long-ago pledge of quality health care has been realized. Gone are the beige walls of yesteryear. Today's hospital district visitor enjoys soothing colors of periwinkle blue, peach or lavender. Re-engineering of procedures designed by front-line staff and managers speedily connects patients with their health care providers. World-renowned physicians from The University of Texas Medical School at Houston and Baylor College of Medicine care for patients, offering services identical or even superior to those found at private hospitals.

Throughout the district's facilities and services, the goal is to provide excellence wrapped in compassionate care, and several programs and services are recognized centers of excellence. These shining examples demonstrate how well the hospital district is living the promise of its creators.



A promise fulfilled



The Harris County Hospital District has been fulfilling its promise to the community for 40 years.

Today, the care promised by Texas' largest hospital district is best witnessed through its eight centers of excellence – those areas of patient care providing innovative treatment and leading therapies for a wide array of medical needs. As you read about the district's centers of excellence in cardiology, community medicine, geriatrics, HIV/AIDS, physical medicine and rehabilitation, sleep disorders, trauma, and women and infants services, you will see the promise being fulfilled every day to thousands of Harris County's residents.

Cardiology: The promise of leading heart interventions

For patients with developing or advanced heart disease or common congenital heart conditions, cardiologists at Ben Taub provide an array of advanced interventions, including: cardiac catheterization, angioplasty, computerized electrophysiology studies, pacemaker and transvenous defibrillator insertions, alcohol septal ablation and closure of aortic septal defects. The cardiology service strives to care for patients before they have a heart attack or other cardiac episode. At Ben Taub, cardiology

Quick Facts | 2006

- 7,087 cardiology clinic visits
- 6,000 echocardiograms (EKG)
- 991 cardiac catheterizations
- 400 angioplasties

conducts between 1,600 and 1,700 noninvasive cases each month, as well as another 150 to 200 interventional catheterizations in just two catheterization laboratories.

"While physicians elsewhere may take a 'wait and watch' approach to treating those with atrial septal defects, at Ben Taub, we close the defect before the heart begins enlarging and a cascade of problems follow," explains Donna Quinn, nurse manager. "We will give you the best intervention possible – when it will do the most good."

Ben Taub was one of the first – and still one of few area hospitals – to perform alcohol septal ablation, which prevents the potentially fatal obstruction of the heart's left ventricle.

With faculty from Baylor College of Medicine staffing the program, Ben Taub trains nearly a dozen cardiology specialists each year, as well as nursing students and those studying to be catheterization or echocardiogram

"WHILE PHYSICIANS ELSEWHERE MAY TAKE A 'WAIT AND WATCH' APPROACH TO TREATING THOSE WITH ATRIAL SEPTAL DEFECTS, AT BEN TAUB, WE CLOSE THE DEFECT BEFORE THE HEART BEGINS ENLARGING AND A CASCADE OF PROBLEMS FOLLOW."

— DONNA QUINN, NURSE MANAGER

technicians. That passion for teaching the next generation of health care professionals ensures that the cardiology service will be in the forefront of new treatment protocols.

Last year, both LBJ and Ben Taub were recognized by the federal government

for providing gold-standard treatment to heart attack patients. Comparison tools posted by the U. S. Centers for Medicare and Medicaid show that the district's practices and protocols equal the best in the nation. Core measures of quality included providing aspirin upon arrival and at discharge, providing ACE inhibitors to lower blood pressure and, when appropriate, making referrals to smoking cessation programs and diet consultations. In many of the core measures, the district's hospitals held the leading quality scores in the community.



Community Medicine: The promise of health care close to home

In 1967, the Harris County Hospital District launched one of the first public health care initiatives in the nation dedicated to providing community-based primary care. Today, compassionate, quality primary care close to home is the promise fulfilled by the district's 12 community health centers, eight school-based clinics, dental center and four mobile health units.

The first neighborhood clinic, established January 28, 1967, Settegast Health Center is typical of the district's community-based

Quick Facts | 2006

- 596,737 physician visits
- 16,171 school-based clinic visits
- 54,294 dental visits
- 2.37 million prescriptions filled

health services. Nursing infants, young families and grandmothers feel right at home at their neighborhood health center. From the garden of crepe myrtles shading the parking area through the center's green gabled



entrance, Settegast welcomes visitors. The staff's bright smiles complement a sparkling blue and green interior, soothing the anxieties of those seeking care.

Begun in 1973 with a \$525,000 grant to teach young physicians about delivering health care outside of hospitals, today, medical students and residents from both The University of Texas Medical School at Houston and Baylor College of Medicine learn about providing primary care while tending to patients in the health centers.

The faculty, physicians and staff work tirelessly to enhance that care in the midst of escalating patient populations. Settegast staff see nearly 175 people each day, both

scheduled and those without appointments, totaling nearly 45,000 patient visits each year. Like many other district health centers, Settegast has added evening and Saturday hours to better accommodate working families' needs for

health care, and this year the staff began re-designing processes with the goal of completing each visit within 90 minutes of a patient's arrival.

Patient Care Technician Kuped Prince, part of a re-engineering team at Settegast, says, "We've more than met our goal of caring for patients more efficiently by reducing the time they are with us by about half."

The promise of community health care is helping people stay healthy, and the district's community health centers take that mission seriously. The centers offer a wide range of health education, including extensive teaching about diabetes self-care, breast self-exam and controlling



hypertension. Several times each week, professionals provide nutrition counseling, podiatric care, optometric services and eyeglasses, social services, behavioral counseling, psychology services and an early intervention HIV clinic.

New this year is a Coumadin[®] clinic, with services provided by Clinical Pharmacist Sheyla Orengo. Patients taking this common blood thinner must be checked carefully and often, especially in the early weeks of the prescription, to ensure the medication is not thinning the blood so much that bruising and internal bleeding

"WE'VE MORE THAN MET OUR GOAL OF CARING FOR PATIENTS MORE EFFICIENTLY BY REDUCING THE TIME THEY ARE WITH US BY ABOUT HALF."

— KUPED PRINCE, PATIENT CARE TECHNICIAN

might occur, and that enough is circulating to prevent blood clots that could result in a heart attack or stroke.

To improve patient care and reduce

time needed for the laboratory to process samples, Orengo has been approved to conduct coagulation checks for patients in her care. Now patients receive nearly instant results, and Orengo can make any needed dosage adjustments. "We work with our patients to get to the ideal dosage," she says. All of these changes contribute to higher patient satisfaction.

Geriatrics: The promise of compassionate care for the elderly

Elderly residents of Harris County are the beneficiaries of compassionate, concerned health services delivered by the hospital district's heralded geriatrics staff.

Under the direction of Dr. Carmel Dyer, associate professor of medicine at Baylor College of Medicine, medical students and residents see patients in both the geriatrics clinic housed at Quentin Mease Community Hospital and during old-fashioned house calls to the homebound elderly in their care.

As the baby boom generation approaches its golden years, the

need for geriatricians – physicians skilled at caring for the unique and complicated medical needs of the elderly – will grow exponentially. The geriatrics program is training the next generation of physicians and nurse practitioners while

caring for our elderly neighbors.

Home visits allow physicians and nurses to assess a patient's health status, and also review the environment and speak with family caregivers. That can tell doctors a great deal about the ability of the patient and family to comply with physician orders and the safety of the home environment. The team drives its "house calls" van into the community to see three or four elderly patients daily, review their care plans and order any needed tests, medications or social services. The geriatrics team also provides extensive medical evaluations at the request of Adult Protective Services, which investigates cases of possible elder neglect or abuse.

The geriatrics clinic at Quentin Mease Community Hospital welcomes its elderly patients and their family members in large airy spaces, as patients often need their offspring to help with their care at home. The team of caregivers – physicians, nurses, social workers, and other professionals – talks with patients about their primary com-

Quick Facts | 2006

- 3,778 geriatric clinic visits
- 3-4 house calls to homebound elderly each day
- Average length of inpatient stay is 20 days
- 40 percent of hospital patients nationwide are 60 years or older



plaints, as well as their eyesight, diet, medications, social situation and any other concern. The team is focused on the professional challenge and personal fulfillment of helping elderly patients manage overlapping chronic conditions and other nonmedical issues common among the elderly.

Inpatients are kept busy, learning new skills while recuperating from illness or injury. Physical and occupational therapists assist patients in regaining strength to walk or learning to use a walker or wheelchair, while a devoted nursing staff tends to their medical needs.

The geriatrics program staff was instrumental in developing a new screening tool and recommendations for caring for the elderly during disasters. As nearly 25,000 people who evacuated New Orleans following Hurricane Katrina arrived at the Reliant Astrodome complex, team members quickly realized a significant number of evacuees



were elderly. Harris County Hospital District and Baylor staff were joined by protective service workers from the Texas Department of Family and Protective Services to devise ways to serve this special needs group quickly. Calling their team SWiFT – Seniors Without Families Triage – they devised a rapid screening tool for social workers paired with nurses or physicians to use as they looked for seniors who appeared to be alone at the Astrodome. Each elderly person was quickly assessed as SWiFT Level 1, 2 or 3, and taken to agencies, volunteers or family members who could

THE TEAM DRIVES ITS "HOUSE CALLS" VAN INTO
THE COMMUNITY TO SEE THREE OR FOUR ELDERLY
PATIENTS DAILY, REVIEW THEIR CARE PLANS AND
ORDER ANY NEEDED TESTS, MEDICATIONS OR
SOCIAL SERVICES.

help them.

Geriatrics program staffers soon partnered with 85 agencies and a thousand individual members of Care for Elders, a Harris County

partnership dedicated to improving services for older adults, and quickly recognized the value of having an existing partnership to care for the elderly during a disaster. Following the Katrina experience, the group published 10 recommendations for planning for disasters and caring for elders. The nationally distributed report, Recommendations for Best Practices in the Management of Elderly Disaster Victims, offers the nation the first blueprint for effective elder care during disasters.

HIV/AIDS: A promise of hope for people touched by the illness

Opened in 1989 as the nation's first freestanding treatment facility for people affected by HIV/AIDS, Thomas Street Health Center today cares for 25 percent of Harris County residents who are receiving HIV/AIDS treatment. Clients enjoy bright, spacious facilities where the staff really knows them and their health concerns. They know they will access "one-stop health care," including pharmacy, minor emergency care, physical therapy, laboratory and x-ray exams, nutrition counseling, substance abuse counseling and social services, as well as expert medical care for HIV/AIDS.

Quick Facts | 2006

- First freestanding HIV/AIDS clinic in USA
- 40 percent of patients are45-64 years old
- Center treats 4,000 clients
- Treats 25 percent of all HIV+ persons in county

Physicians from Baylor College of Medicine and The University of Texas Medical School at Houston lead an interdisciplinary staff of nurses, social workers, pharmacists, health educators, physical therapists, laboratory and x-ray technicians and others devoted to caring for their clients. Their research is published and presented at international conferences, setting standards for care of those affected by HIV/AIDS.

Knowledgeable as they are about the interaction of HIV/AIDS with other health conditions, the highly skilled staff do not only tend to the clients' HIV/AIDS issues, but also offer specialized care for cancer and blood diseases, as well as rheumatological, neurological, psychiatric and metabolic disorders. Clients with special needs also benefit from obstetrical and gynecological care, pain management, well-woman and adolescent services.

Comprehensive care at the internationally-known Thomas Street Health Center is geared toward maintaining a healthy status, and, with modern retrovirology medications, HIV/AIDS is treated as a chronic condition. Some of those drug cocktails, however, may deplete bone mass or have other side effects, and HIV can be affected by common conditions such as diabetes, Hepatitis C or high blood pressure.

That's why the staff at Thomas Street works with clients on their diet, exercise, social connections and mental well-being. "The promise I make to clients is, 'commit to taking good care of yourself and sticking with our care plan, and you can maintain a good quality of life," says Robert Sandoval, senior physical therapist. As a member of Rehabilitation Services, Sandoval works with the Thomas Street Health Center's Health and Wellness Program, designed to help clients get fit, maintain lean body mass, live well, stay healthy and prevent opportunistic infections through individualized regimens.

"We know our patients and they know us," says nurse Ed Rose. "They know that we really care. When they are ill, they may be weak, they may come to us by stretcher, but they know we will take care of them."



Rehabilitation: The promise of renewed function and independence

Our neighbors who suffer debilitating strokes, devastating brain or spinal injuries and similar disabilities need look no further than the nationally recognized Physical Medicine and Rehabilitation (PM&R) service at Quentin Mease Community Hospital for help. There, a competent team of rehabilitation professionals works each day to help patients regain the greatest functionality possible and improve their quality of life.

The multidisciplinary staff focuses on practical learning: safely getting into and out of the family vehicle, dressing, ironing, preparing meals and other activities of daily living. In a large, well-equipped gym-

Quick Facts | 2006

- CARF accredited, 24-bed inpatient rehabilitation unit
- Patients receive at least three hours of therapy daily
- 30 percent of patients had a stroke prior to admission
- 69 percent discharged home using a walker or wheelchair without assistance

nasium filled with natural light, patients practice strengthening, range of motion and stretching exercises. They and their family members learn to use wheelchairs or walkers, carefully negotiating steps, sitting down and rising from an easy chair, and more.

Physical, occupational and speech therapists work with patients and their families to set goals and devise daily therapy to attain them. They are so effective that nearly 90 percent of inpatients eventually return home, contrasted with the national average of less than 80 percent.

The PM&R service routinely receives patient satisfaction rates higher than 90 percent, sometimes scoring 100 percent. Staff members care so personally about their patients that they recently arranged for employee parking to be moved further away from the hospital, reserving all of the nearer spaces for patients.

That caring attitude, combined with professional expertise, recently earned the program a three-year reaccreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF). Surveyors found dozens of
facets of the program exemplary, including the outstanding physician team, exceptionally well-maintained facilities,
reduced lengths of stay through integrated team planning, and interdisciplinary team members who work tirelessly to
provide all persons served with the best quality services possible.

From the first day, communication among team members and with patients and families keeps the focus on restoring function and getting people back to their lives. To help patients on the road to recovery, physical and occupational therapists team with certified orthopedic specialists, certified hand specialists, a lymphodema specialist and a neurophysiologist, who evaluates patients' attitudes and motivations to succeed. Equipment, barriers at home, and community resources are considered as care plans are made, and some patients may go home for a day to see how well they can manage in their own environments to determine if additional therapy is needed before they can be discharged.



Sleep Lab: The promise of healthy, restorative sleep

Increasing numbers of Harris County residents are suffering from sleep apnea, a condition in which a lack of oxygen rouses them from the deep sleep needed each night to restore the brain fully for the next day's challenges. The cost to the community is high, including on-the-job mishaps, vehicle accidents, reduced efficiency and increased irritability. Health risks to sufferers include heart attack, stroke, high blood pressure, irregular heartbeat and other heart conditions.

The sleep lab at LBJ Hospital helps nearly 100 patients each month by enabling physicians to diagnose apnea and prescribe a simple breathing machine that allows sufferers to breathe easily and sleep

Quick Facts | 2006

- More than 1,200 patients examined at LBJ sleep lab
- Four patient studies performed each night
- 25 percent of Americans experience sleep apnea
- 400-500 events of apnea per night per individual is typical
- Oxygen level can drop by half during each apnea event

through the night. Each evening, patients are ushered into four rooms in the sleep lab that resemble comfortably sized hotel rooms. They are fitted with electrodes, encouraged to relax, and settle down for sleep by 10:30 p.m. The sleep center then records brain activity, eye movement, breathing and oxygen levels in the blood until 5:30 a.m.

Studies are scored the following day, and board-certified sleep specialists review reports and prescribe treatment. About 95 percent of all patients are diagnosed with sleep apnea, which is treated with a C-PAP (Continuous Positive Airway Pressure) machine that keeps the airway open and unobstructed by blowing air into the nose through a small mask during the night.

Opened just two years ago, the sleep lab is in the process of achieving accreditation by the American Academy of Sleep Medicine, and its medical director, Dr. Shyamsunder Subramanian, recently presented findings from the lab's experiences at an international sleep conference.



Trauma: We promise to be ready when you need us most

The Harris County Hospital District's promise of a quick, compassionate response to an emergency is fulfilled many times every day, but never as impressively as when Hurricane Katrina evacuees began arriving at the Reliant Astrodome complex in September 2005. Within hours, physicians, nurses and staff from throughout the hospital district were setting up a comprehensive medical facility, stocking it with medications, supplies and equipment to treat a vast array of situations. They operated the "field hospital" at the Astrodome complex for two weeks, seeing as many as 2,000 patients during the clinic's most hectic day. Evacuees needing hospital services were transported to Ben Taub or

Quick Facts | 2006

- 166,204 total emergency patients treated
- 28,360 pediatric emergencies
- 20 percent of all Houston Fire Department EMS transports go to Ben Taub or LBJ
- 40 seconds from ambulance bay at Ben Taub's Emergency Center to operating room

LBJ's emergency centers, where the district's trauma expertise is most evident.



Many in Harris County know the staff at the Ginni and Richard Mithoff Trauma Center at Ben Taub General Hospital offers the finest trauma care in the nation. After all, they pioneered many of the procedures now commonly used elsewhere.

Every day, the staff efficiently cares for those injured in motor vehicle or on-the-job accidents, those experiencing acute episodes of asthma or diabetes, children with broken bones, and stroke and heart attack patients. The more hectic the scene, the calmer they become, their pulse rates slowing and their high-caliber training guiding their every step.

"Responding to a crisis is what we do best," says

Dr. Kenneth Mattox, chief of staff. "The minute we hear that something serious has happened in the community, we open our emergency incident command post, and we are ready with the needed information, supplies and equipment before the first patient arrives."

Ben Taub's Level I trauma care is so highly regarded, in fact, that the staffs of corporate and political dignitaries planning visits to Houston often provide medical data in advance so the trauma staff will have vital information should sudden illness or injury occur.

Level III trauma care is promised to those who arrive at Lyndon B. Johnson General Hospital, the only trauma center serving Northeast Harris County.

"We promise to meet our neighbors' emergency needs, in the community where they live," says Martha Stancil, LBJ director of Emergency and Ambulatory Care.

In 2006, more than 72,000 LBJ emergency



patients were treated in a space designed nearly 20 years ago for about half that number. Work has begun to renovate the trauma center and improve patient flow so that quality care can be provided more quickly and privately. One recent change to improve care was to assign pediatric patients to dedicated space with staff experienced in caring for emergencies common to children.

To guide people to the best site for the care they need, a "RightCare" program was launched successfully in summer 2006, encouraging those needing primary health care services to go to a community health center rather than

MANY IN HARRIS COUNTY KNOW THE STAFF AT THE GINNI AND RICHARD MITHOFF TRAUMA CENTER AT BEN TAUB GENERAL HOSPITAL OFFERS THE FINEST TRAUMA CARE IN THE NATION. AFTER ALL, THE CENTER PIONEERED MANY OF THE PROCEDURES NOW COMMONLY USED ELSEWHERE.

to the emergency department. Posters, media reports and active involvement by social agencies and hospital staff helped redirect hundreds of families to the district's health centers, where they could find a "medical home" and

establish an ongoing relationship with health care professionals. Many centers expanded evening and Saturday hours to accommodate the increase in patients, and a 10 percent decrease in emergency department visits is credited primarily to the success of "RightCare."

Women and Infants: The promise of a bright start, healthy future

The Harris County Hospital District offers the expertise gained from nearly 100 years of providing compassionate, high-quality health care to the women of Southeast Texas – a tradition that started in 1909 with the opening of the first city-county hospital. Since its inception in 1966, the hospital district has served as the city's premier mother and baby health care provider, delivering more than half a million babies to Harris County mothers in its 40 years.

Quick Facts | 2006

- 11,185 births
- 149 newborn bassinets
- 33 neonatal intensive care (NICU) bassinets

Today, the hospital district's women and infants services are equaled by few health care providers. Each year, thousands of women deliver their babies in our state-of-the-art birthing centers.

To the newborns – some 11,000 each year – our staff commits to providing a warm and loving entry into the world, with all of the technology they may need at the ready. Moms-to-be know that the women and infants services at Ben Taub and LBJ hospitals will coach them, encourage them and hold their hands as they prepare to bring their babies into the world. Their babies will be born in private birthing rooms surrounded by family, an attentive professional staff caring for them and state-of the-art equipment to ensure a healthy start in life.

About half of the women served by the hospitals have high-risk pregnancies, reflecting the staff's expertise in successfully managing difficult deliveries. These patients come to the hospital if they feel ill, don't feel the baby move,

"WHEN THEY SAY 'THIS IS MY FIRST BABY,' I TEACH
THEM AND TALK TO THEM. THEY MAY BE SCARED, SO I
HOLD THEIR HAND, LISTEN AS THEY SHARE THEIR CONCERNS, AND I TURN THAT ANXIETY INTO A SMILE."

- NURSE OCTAVIA SHERMAN

run a fever, experience contractions or severe swelling, or have a rise in blood pressure. At either hospital, the staff triages, examines and observes her, and monitors

the infant's heart. Patients are either admitted for an impending delivery or sent home, reassured that all is well.

Because so large a proportion of the population is high-risk, says Moranda Dansby, director of women and children's services at LBJ hospital, "We see things you only read about in books, and even situations that have not yet been published. We learn from each experience and take that knowledge to the next patient."

New moms are assured that they are in good hands. "I love taking care of people who need my help," says nurse Octavia Sherman. "When they say 'This is my first baby,' I teach them and talk to them. They may be scared, so I hold their hand, listen as they share their concerns, and I turn that anxiety into a smile."

To the tiny newborns in the Neonatal Intensive Care Unit, nurse Madalyn Jean McQueen promises, "I will treat you like you're my baby, and I will fight for you to grow strong and healthy."

As at LBJ, the Ben Taub staff also provides a family-centered experience. Their compassionate, caring attitude includes putting newborns in their mothers' arms to bond before administering the standard vitamin K injection and

eye drops that prevent infection, making those first few moments a tender, loving experience for baby and mom. Dads, siblings and other family members are encouraged to join in welcoming the newborn, too.

That focus on the family begins long before delivery, when expectant mothers are invited to tour the labor and delivery and visit the obstetrics, breastfeeding and newborn follow-up clinics.

For those families whose infants must stay days or weeks in the hospital's nurseries, moms have a cheerful room where they can pump breast milk, the best nutrition for their babies. Eight in 10 new moms at Ben Taub breastfeed



their new babies, and a certified lactation consultant coaches those who encounter challenges.

When babies are strong and healthy enough to go home, families may feel anxiety about caring for a little one who has been ill. They are reassured after a day or two in one of two transition suites, charming mini-apartments where they may care for their newborn in comfort. "We can build a new mother's confidence," says Gaynell Guillory, nurse manager of infant care. "The nursing staff is on hand to reassure her and to step in if there are problems." All of the equipment and technology that might be needed is discreetly tucked away inside the suites' bedrooms, ready for use at a moment's notice.

FY 2005-2006 | By The Numbers

COMBINED STATEMENTS OF REVENUE, EXPENSES, AND PROFIT (LOSS)

	Fiscal Years Ended February 28		
(In Thousands)	2006	2005	
Operating revenue			
Net patient service revenue	\$ 256,316	\$ 244,378	
DSH/UPL program revenue	169,119	159,189	
Premium revenue	123,147	104,622	
Other operating revenue	16,671	15,004	
Total operating revenue	\$565,253	\$523,193	
Non-operating revenues			
Net ad valorem tax revenues	383,533	364,592	
Net tobacco settlement revenue	10,298	6,317	
Investment income and other	10,506	3,666	
Total non-operating revenues	404,337	374,575	
Total revenues	\$969,590	\$897,768	
Operating expenses			
Salaries, wages, and benefits	429,000	421,405	
Pharmaceuticals and supplies	139,807	143,006	
Physician and other services	291,102	267,246	
Depreciation, amortization and interest	41,557	40,296	
Total expenses	\$901,466	\$871,953	
Total operating profit (loss)	\$68,124	\$25,815	

HARRIS COUNTY HOSPITAL DISTRICT AND AFFILIATE. A COMPONENT UNIT OF HARRIS COUNTY, TEXAS.

Statistical Highlights

	2006	2005
Admissions		
Ben Taub	25,899	25,933
Lyndon Baines Johnson	16,266	15,784
Quentin Mease	321	487
Total	42,486	42,204
Patient Days		
Ben Taub	161,063	160,071
Lyndon Baines Johnson	66,832	65,775
Quentin Mease	11,799	11,457
Total	239,694	237,303
Newborns		
Ben Taub	5,945	6,066
Lyndon Baines Johnson	5,240	5,268
Total	11,185	11,334
Emergency Visits		
Ben Taub	93,598	97,442
Lyndon Baines Johnson	72,606	69,245
Total	166,204	166,687
Outpatient Clinic Visits (with doctor)		
Ben Taub	190,550	185,658
Lyndon Baines Johnson	114,755	114,553
Quentin Mease	10,628	10,755
Community Health Centers	596,737	546,978
Total	912,670	857,944



A promise for a better tomorrow



As we continue our success, we will reinvest in our health system, following a strategy of planned and balanced growth. As opportunity permits, we will reach out to care for more of our neighbors and expand further to best meet the needs of all Harris County residents.

Growing to care for Harris County

During the hospital district's first 40 years, Texans witnessed dramatic changes in how health care is delivered. Newborns now go home in a day, surgery that once required an eight-day stay is now performed on an outpatient basis. Technology is driving many of these changes, and the hospital district is planning an ambitious construction program to align our facilities, equipment and technology with the needs of tomorrow's patients.

HCHD leadership is pursuing the following priorities for expanding and strengthening the district's capital infrastructure:

- Replacement facility for the MLK Health Center
- Addition of a community health center in the Alief community
- Expansion of the LBJ Hospital Emergency Center
- Construction of outpatient diagnostic imaging center
- · Construction of an advanced radiation therapy center

As more uninsured and underinsured people seek to fill basic primary health care needs, nearly 17 percent will require referrals to specialty clinics and diagnostic testing, as well as surgery and less invasive medical interventions.

The hospital district's plans for balanced growth include increasing the size of diagnostic and specialty clinics and moving them out of the hospitals, which will not only be more efficient, but also more convenient for clients. With dedicated outpatient surgical facilities, those needing same-day procedures can be treated without having to reschedule to accommodate an emergency.

"Like other organizations, we have challenges," says David S. Lopez, president and CEO. "But we are facing them head on, not running from them. We will provide the best use of funds for improving the health status of the community. By doing so, we not only provide our clients with better health, but we also help lower insurance costs for private insurers and employers."

Expanded emergency centers and intensive care areas will also provide the increased capacity required to meet community needs while adding the very latest in advanced medical technology.

Pledging to stay current

In 2006, our radiology service completed a \$30 million upgrade to become totally digital, so that clinicians can view MRI, CT, ultrasound and conventional x-ray images on their desktop computers, and consult simultaneously with the patient's other caregivers in any district facility. The district's new picture archival and communication system (PACS) is state-of-the-art.

We are implementing an electronic medical record (EMR) system that will make the paper medical record obsolete. Beginning with community health centers, then adding specialty clinics and the hospitals, the EMR will link

all of a patient's providers. Information will be available instantly regardless of where the patient presents for care, without any wait for records to be transferred manually.

The EMR will launch the district into a new era and enhance quality of care, as all patient information will be readily available to the health care professional the moment it is needed.

With this effort comes a renewed promise to Harris County residents that they will receive the finest health care services available.



Our promise continues

As we continue fulfilling the district's early covenant, we also pledge to be a most efficient organization, using technology to provide the right care at the right time and in the right place. We will continue building on our caring tradition, striving always for greater excellence, reaching out in a planned, balanced way to care for more of our neighbors.

We promise.

Partnering to build a stronger future

Houstonians have long been known for their kind hearts and generous spirits. As a tightly knit community, we have a history of caring for the less fortunate and disadvantaged. In turn, by giving our time and financial support, we help build a better life for all.

The Harris County Hospital District Foundation was established in 1992 to supplement and enhance the broad health care mission of the Harris County



Patrick LeBlanc and Wanda LeBlanc

Hospital District, one of the oldest and largest health care providers in the region. The hospital district is dedicated to serving Harris County residents with unique health care programs and services while providing the medically indi-

gent, uninsured and underinsured residents with high-quality care.

Barbara Schachtel, Ph.D. and Quentin R. Mease

The HCHD Foundation in honored by the tremendous financial support it receives from the community. Donors' generosity is significant not only to the programs and projects they support, but also to the children and families who benefit directly from each contribution.

As the "safety net" for the area's growing number of medically underinsured and uninsured, the hospital district needs your continued support to meet the increasing demands for our services now and in the years to come.

Help build a stronger community by providing topnotch health services for all. Consider a donation to the capital campaign that will help fulfill our next generation of promises. For information about how you can make a difference today for your community's health tomorrow, contact the Harris County Hospital District Foundation at 713-566-6409.



David Ott, M.D., Pam Ott, Kay Holmes, Ned Holmes and H. Ben Taub

The following pages list our generous donors during 2005-2006. We offer our most sincere appreciation to them for helping us build one of the finest public health organizations in the nation.

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