



Business Plan 2007 – Division of Environmental Health - Florida Department of Health

Mission: “Promote and Protect Health”

Vision: “Healthier Floridians”

Goal: To prevent disease of environmental origin

Bureau of Community Environmental Health – FLORIDA BIRTH DEFECTS REGISTRY

Background:

In 1994, the Environmental Equity and Justice Commission was established by the Florida Legislature and directed to scientifically study whether low-income and minority communities were more at risk from environmental hazards than the general population. The Commission’s Final Report, released in 1996, included a recommendation that the legislature should fund and ensure maintenance of a birth defects registry. In 1997, the Florida Department of Health received funding to operate and manage a birth defects registry in response to the public’s ongoing concern about birth defects and environmental hazards.

**Division Cost: \$468,930 (General Revenue)
\$900,000 (Grant Funding)**

Division Positions: 1

County Program Cost: *

County Positions: *

*County staffing and costs are not tracked at a statewide level and there are no county positions.

Trends and Conditions:

Since 1997, the Florida Birth Defects Registry (FBDR) has identified more than 36,000 infants with at least one major birth defect. In 2003 approximately 2.5%, or about 6,000 infants (1 in 36 births) born in Florida were affected by a major birth defect. Birth defects are one of the leading cause of infant mortality, accounting for 20% of infant deaths. These conditions can have a major impact on the quality of life of the affected individuals and their families. Approximately 70% of birth defects have an unknown etiology. However, birth defects are caused by different combinations of genetic, environmental, and behavioral factors. The Florida Birth Defects Registry maintains records on all infants born with a birth defect in the state. This information can be used to identify patterns of birth defects, identify risk factors, investigate causes, help prevent birth defects, refer families to services, and study long-term outcomes of infants with birth defects.

While the causes of most birth defects are unknown, there are important prevention opportunities including smoking cessation during pregnancy, avoiding alcohol, maintaining a healthy weight, taking multi-vitamins before pregnancy, and managing pre-existing disease such as diabetes during pregnancy. Efforts to promote the use of multi-vitamins containing folic acid among women of childbearing age have the potential to significantly reduce neural tube defects, serious birth defects of the brain and spine. Based on information from the registry, folic-acid prevention messages can be targeted to high-risk groups such as women of Mexican origin. Smoking during pregnancy may pose an increased risk for birth defects and the registry can work collaboratively with maternal/child health programs to develop, implement and evaluate prevention messages. The obesity epidemic affecting Florida creates special concerns for pregnant women and their offspring, especially as it increases the risk of Type 2 Diabetes. Recent research links obesity and Type 2 Diabetes to a spectrum of abnormal fetal outcomes including neural tube defects, congenital heart defects, and other malformations with lifelong repercussions. Alcohol related birth defects such as Fetal Alcohol Syndrome and Fetal Alcohol Spectrum Disorders, are the leading cause of preventable mental retardation in Florida. Efforts to educate health care providers and the general public are critical to reducing the lifelong effects associated with these birth defects.



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Data are available for the years 1997-2003 and can be used by researchers and health planners to document the enormous impacts birth defects have on families, affected individuals, medical expenditures, educational requirements and provision of services. Since food fortification with folic acid was implemented nationwide in 1998, the number of infants born with neural tube defects has declined both across the nation and in Florida, substantiating limited success for this important public health prevention program. Additional cases of neural tube defects can be prevented if all women of reproductive age consume multi-vitamins with folic acid prior to and early in pregnancy. The registry will continue to monitor rates of neural tube defects to document continued and improved success of prevention activities.

Short Term Objectives

During 2007:

- Prepare an updated electronic birth defects report.
- Prepare electronic issue papers on topics of interest in collaboration with other Department of Health programs.
- Seek recommendations from the Birth Defects Advisory Council on birth defects surveillance activities.
- Continue participating in the development of educational materials for health care providers, affected families, and the public about birth defects with other Department of Health Programs and health advocacy organizations. (13 Fact Sheets completed in 2007.)
- Continue participating on department workgroups such as Environmental Public Health Tracking, Women's Health Program, Interagency Task Force on Fetal Alcohol Spectrum Disorders, CMS's Early Hearing Identification and Detection Program, Women and Infant Data Linkage Committee, and March of Dimes Prematurity Campaign.
- Continue required tasks for CDC Birth Defects Cooperative Agreement.
- Improve use of the data by other DOH programs, universities, and health planning and advocacy organizations and post a public use data set on the Registries Internet site.
- Utilize Geographic Information Systems (GIS) to map birth defects and infant mortality attributable to birth defects.
- Prepare birth defects presentations and participate in at least one state professional meeting.
- Prepare birth defects proposals and assist other entities with birth defects activities.

Long Term Objectives:

During 2008:

- Perform required tasks for CDC Environmental Public Health Tracking related to birth defects..
- Prepare birth defects presentations and participate in at least one state professional meeting.
- Seek funding to support first statewide birth defects meeting targeting health care providers and affected families to be held in 2008.

By January 1, 2009:



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- Prepare an updated birth defects report.
- Submit a birth defects proposal to Florida Chapter of the March of Dimes.
- Develop a Legislative Budget Request to move the registry from a passive surveillance system to an active surveillance system.
- Prepare birth defects presentations and participate in at least one state professional meeting.

Measure #1: Identify patterns of birth defects and associated risk factors in Florida. An electronic annual report will be prepared by March 31.

Division EH Strategic Plan		Strategy	Benchmark	Responsible Party	Target Date	Status
Goal: Create a statewide culture of Environmental Health	Sub-goal: Collect, use and analyze data.	Improve case ascertainment methodology. Analyze data to look at birth defect rates and trends in population subgroups to highlight demographic, health, and behavioral risk factors.	Data collection ongoing.	Jane Correia and university contractors (UF & USF)	In progress.	In progress.
Goal: Create a statewide culture of Environmental Health	Sub-goal: Collect, use and analyze data.	<ul style="list-style-type: none"> • Gather data from relevant sources: <ul style="list-style-type: none"> • Vital statistics • AHCA hospital data • CMS data • Physician reports • PRAMS reports • BRFSS reports • MCH reports 	Data merged, linked, unduplicated and report prepared. Analyze PRAMS, BRFSS, and MCH data.	Jane Correia, university contractors (UF), and other DOH programs.	June 2007 for data from 1997-2004.	<p>1997-2004 by June 2007.</p> <p>PRAMS, BRFSS, and MCH data are analyzed on an on-going basis. Folic acid data for years 2000, 2001, 2002 and 2004 have been analyzed and will be updated to include latest available data by October 2007.</p> <p>Data on alcohol consumption by women of reproductive age and women recently post-partum has been analyzed and will be updated using</p>



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						latest available data by October 2007.
Goal: Create a statewide culture of Environmental Health	Sub-goal: Collect, use and analyze data. Reduction in Infant Deaths Related to Congenital Heart Defects	<ul style="list-style-type: none"> Merge, link and unduplicate data to form a birth defects surveillance database 	Reports prepared no later than three months after completion of surveillance database	Jane Correia and university contractors	June 2007 for data from 1997 through 2004; October 2007 for 2005 data	Working on FBDR Data Report with data tables from 1997-2004 by June 2007.
Goal: Create a statewide culture of Environmental Health	Sub-goal: Collect, use and analyze data. Reduce the occurrence of spina bifida and other neural tube defects (NTDs)	<ul style="list-style-type: none"> Post data to web in formats useable by researchers, advocates, and the public. 	Website updated as directed by the department but at least quarterly.	Jane Correia and university contractors	August 2007 for data through 2004	Ongoing
Goal: Create a statewide culture of Environmental Health	Sub-goal: Collect, use and analyze data.	<ul style="list-style-type: none"> Process requests for access to confidential data for research use within 6 weeks. 	Respond within 6 weeks of receiving a complete application	Jane Correia and university contractors	Ongoing	Ongoing



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Measure #2: Help prevent birth defects by participating in a minimum of two public or professional education and training sessions.

Division EH Strategic Plan		Strategy	Benchmark	Responsible Party	Target Date	Status
Goal: Create a statewide culture of Environmental Health	Sub-goal: Be the best communicators and educators.	Develop education and training plan for health care professionals and the public	Plan undergoing revisions for 2007.	Jane Correia and university contractors	Regular updates.	In progress.
Goal: Create a statewide culture of Environmental Health	Sub-goal: Be the best communicators and educators.	<ul style="list-style-type: none"> Conduct training sessions in a variety of formats such as classes, grand rounds, conference presentations and teleconferences 	Training is ongoing.	Jane Correia, university contractors, other DOH programs, and Registry Partners.	Ongoing	Ongoing. Numerous presentations given in a variety of settings. During 2006, approximately 500 individuals attended presentations.
Goal: Create a statewide culture of Environmental Health	Sub-goal: Be the best communicators and educators.	Analyze feedback from participants to evaluate the education and training activities.	Within one month of training activities.	Jane Correia, university contractors, other DOH programs and Registry Partners	Ongoing	In progress. Evaluations have been positive.



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Measure #3: Promote partnerships among three organizations interested in studying and preventing birth defects.

Division EH Strategic Plan		Strategy	Benchmark	Responsible Party	Target Date (up to 18 months)	Status
Goal: Create a statewide culture of Environmental Health	Sub-goal: Support community outreach.	Organize birth defects advisory committee	Membership list developed and finalized. Membership will be evaluated every two years.	Jane Correia and university contractors	May 2005	Discuss at May 2005 meeting.
		<ul style="list-style-type: none"> Schedule and conduct meetings 	One meeting organized and conducted during fiscal year.	Jane Correia and university contractors	October 2007	Ongoing.
Goal: Create a statewide culture of Environmental Health	Sub-goal: Support community outreach.	<ul style="list-style-type: none"> Participate as a member of the executive committee of the Florida Folic Acid Coalition. <ul style="list-style-type: none"> Distribute materials Make presentations Distribute multi-vitamins. 	Council meetings, conference calls, materials and multi-vitamins distributed	Jane Correia in collaboration with Family Health Services' Infant, Maternal and Reproductive Health Program and UF	Ongoing	In progress.



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Measure #4: Enhance surveillance for selected birth defects in selected counties to improve data quality and timeliness as funded by CDC Cooperative Agreement in accordance with CDC reporting schedule; March and September.

Division EH Strategic Plan		Strategy	Benchmark	Responsible Party	Target Date	Status
Goal: Create a statewide culture of Environmental Health	Sub-goal: Provide the best Environmental Epidemiology assets	Organize internal agency workgroup	Solicit participation on workgroup and hold initial meetings to discuss grant activities.	Jane Correia	Completed	Ongoing meetings. CDC site visit planned for June 21-22, 2006. Meeting held and program received very good rating from CDC.
		<ul style="list-style-type: none"> Notify selected hospitals about active birth defects surveillance activities. 	Prepare and distribute letter describing surveillance activities and providing case ascertainment information.	Jane Correia and USF-BDC	Ongoing through June 30, 2008.	Ongoing. Initial project letters mailed to all hospitals. Letters requesting medical records are sent prior to abstracting at hospital.
		<ul style="list-style-type: none"> Continue medical records abstraction. 	Establish schedule for medical records reviews.	Jane Correia	Initial schedule has been established and is updated as progress continues. Completion date is June 30, 2008.	Ongoing. Medical records reviews underway and proceeding in a timely manner.
		<ul style="list-style-type: none"> Continue medical records abstraction. 	Identify ways to link records and provide information to programs serving children with special health care needs such as Children's Medical Services programs, Healthy Start and others.	Jane Correia and USF-BDC	Ongoing through June 30, 2008.	Ongoing. Exploring development of materials, grants, and data sharing. Collaborated on March of Dimes Grant with USF that was approved for funding to support development of educational materials to be distributed to affected families.



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		<ul style="list-style-type: none"> • Improve referral for services. 	Explore data sharing between DOH programs.	Jane Correia	By February 2005 contact DOH programs including Legal to explore options for data sharing. Completed.	Ongoing. MCH and CMS programs are willing to share data between programs if Legal approves. Legal approval received January 2006 and linking discussions are ongoing.
		<ul style="list-style-type: none"> • Report grant activities to CDC. 	Prepare 6 and 12 month progress reports and continuation applications.	Jane Correia	March & September 2007	Ongoing. Progress reports are submitted quarterly to DOH and will be incorporated into CDC progress reports.