Public Health Preparedness and Emergency Response

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Public Health in Texas

• Texas is divided into 8 health service regions (HSRs)
  • Where a local health department exists, DSHS HSR offices provide support and supplemental public health services
  • Where there is no local health department (LHD), DSHS may provide core public health services
  • Where there is no local health authority (LHA), the regional medical director acts as the LHA

• LHDs vary in size, resources, and capacity
  • Approximately 60 health departments are “full service” and 80 health departments offer fewer services
  • The DSHS role is to provide, as needed, core public health services not offered at the local level
Local and DSHS Public Health Coverage in Texas

- DSHS Health Service Regions
- Local Health Department Coverage
- DSHS Coverage
Types of Emergency Responses

- Texas takes an all-hazards approach to preparedness and response, which includes:
  - Disease outbreaks
  - Natural events
  - Biological events
  - Hazardous material spills
  - Radiological accidents
  - Terrorist acts
  - Man-made disasters

- Texas Department of Emergency Management (TDEM) is the lead agency for state disaster response in Texas:
  - State of Texas Emergency Management Plan
  - State Operations Center (SOC)
• DSHS responsibility falls under the State of Texas Emergency Response Plan
  • Emergency Support Function 8: coordinating public health and medical response during emergencies
DSHS Roles in Emergency Response

- **Health Emergency Preparedness and Response**
  - Administration of preparedness grants
  - Operation of the State Medical Operation Center (SMOC)
  - Development of statewide plans and policies
  - Education

- **Infectious Disease**
  - Assistance with triage to determine the severity of the threat
  - Support related to identifying and tracing contacts, administering prophylaxis, and monitoring for additional illness
  - Guidance for disease assessment and monitoring

- **DSHS Laboratories**
  - Testing for biological, chemical, radiological threats and incidents, and other emerging public health threats
DSHS Roles in Emergency Response

• Health Service Regions
  • Field staff for public health and sanitation
  • Regional Health and Medical Operation Centers as well as staffing Disaster Districts
  • Coordination with partners
  • Response teams

• Disaster Behavioral Health
  • Disaster behavioral health services for survivors, first responders, and disaster workers

• Regulatory Services
  • EMS coordination
  • Radiological response
Texas Emergency Response Partners

- TDEM
- LHDs
- Regional Advisory Councils (RACs)
- Hospitals
- Emergency Medical Services (EMS)
- Emergency support services contractors
- Texas Military Forces
- Laboratory Response Network
- Health and Human Services System Agencies
- Other State Agencies
Public Health Emergency Response in Texas

• Because Texas is a home rule state, emergency response begins at the local level unless there is no LHD.

• When a response exceeds local capacity, the state can provide support, resources, and expertise as requested.

• The state can request federal assistance:
  • CDC
  • Office of the Assistant Secretary for Preparedness and Response (ASPR)
  • Federal Emergency Management Agency (FEMA)
Emergency Public Health Response: Before the Disaster

• Infectious disease surveillance and response
  • Continual and systematic collection, analysis, and interpretation of health data
  • Mandatory reporting for nearly 90 conditions, including foodborne, vector-borne, respiratory, and sexually transmitted diseases

• At any given time, numerous investigations are open under DSHS or local jurisdiction
  • Investigations involve illnesses related to foodborne transmission, sexually transmitted disease, bloodborne pathogens, zoonotic (animal-to-human) disease, or airborne contagions

• Investigations vary widely in scale and interest
Select Current Disease Investigations

- **San Antonio Tuberculosis - high school**
  - 50 contacts; 3 latent TB cases identified

- **Collin County Tuberculosis – high school**
  - 56 contacts; 7 latent TB cases and one active TB infection identified

- **El Paso Tuberculosis – adult day care center**
  - 187 contacts; 28 TB suspects identified and subject to further testing

- **Williamson County Tuberculosis – multiple health care locations**
  - 342 contacts; 7 latent TB infection cases identified

- **Collin County Travel-Associated Measles – elementary school**
  - 5 contacts without documented immunity
Emergency Public Health Response: Before the Disaster

- Continual fostering of partnerships
  - RACs, hospitals, EMS, emergency management, stakeholder associations, and local health departments
- Maintenance of disaster response plans and procedures
- Caches of supplies and equipment
  - For example, Personal Protective Equipment (PPE)
- Contingency contracts
  - Medical and clinical staffing, Texas Funeral Directors Association, pharmacy, medical sheltering
- Training and exercises
  - Operation Lone Star
  - East Texas Medical and Dental Outreach
Emergency Public Health Response: During a Disaster Response

- Coordination and control
- Medical evacuation and sheltering
- Responder safety and health
- Medical material management and distribution
- Disaster Behavioral Health
- Epidemiology, surveillance, and laboratory testing
- Communication/emergency public information
- Pharmaceutical distribution
2008 – 2015 DSHS Emergency Responses

- Dallas Ebola Cases
- West Explosion
- West Nile Virus Outbreak
- Bastrop Wildfires
- Hurricane Alex
- Hurricane Dolly
- Hurricane Gustav
- Hurricane Ike
- Tropical Storm Edouard
- H1N1 Pandemic Response
- San Angelo: Yearning for Zion Ranch
Emergency Public Health Response: After the Disaster

- Recovery efforts
  - Assessment of public health and medical infrastructure
  - Provide necessary resources including staff, supplies, and equipment to speed recovery
  - Community assessment for public health emergency response
- After Action Review process
- Revise and review plans and procedures
- Training and exercises
Current Activities: Zika Virus

- Zika virus is an arbovirus that is primarily transmitted mosquito-human-mosquito.
  - Symptoms are typically mild in adults
  - Concerns about link to microcephaly
- Texas’ first localized case of Zika virus occurred in the Dallas area
  - Source of transmission is under investigation
  - Sexual transmission a likely cause
- There is no evidence that Zika virus has infected Texas mosquitoes
  - Risk of introduction of Zika into the native mosquito population
- Status
  - Active coordination with CDC and local health departments
  - Education on personal prevention measures and vector control
  - Analysis of microcephaly incidence in Texas
  - DSHS laboratory capability for initial testing
Current Activities: Avian Flu Monitoring

- Avian flu was confirmed in poultry flocks outside Texas over the last year
  - CDC and U.S. Department of Agriculture assured proper disposal of affected flocks
  - Depopulation workers are demobilizing to their home states, including Texas

- Workers are being monitored for 10 days after last possible exposure
  - No human infections with these viruses have been reported
  - The health risk posed to the general public by domestic avian flu is low
  - Monitoring is precautionary to ensure any risk to public health is minimized

- Individuals requiring monitoring have returned to Texas
  - DSHS is providing LHDs with guidance for appropriate monitoring and technical assistance
  - Laboratory testing will occur if symptoms appear, according to set criteria
  - Appropriate precautions are in place if a monitored individual tests positive for Avian Flu
Pressures on the Public Health Preparedness and Response System

- Multiple governmental entities with interdependencies
- Role of the individual in preparedness and prevention
- Dependence on federal funding to support critical activities
- Variance of federal funding streams over time
- Reduced earnings from the Tobacco Settlement funds
Emergency Preparedness and Disaster Response: Challenges

- Information sharing with first responders
- Communications to providers and to the public about infectious disease patterns and actions
- Communications among public health for disease reporting and monitoring
- Surveillance for emerging disease
- Infectious disease response protocols and plans
- Logistical issues in statute
  - Control orders due process and procedures
  - Public health measures
  - Disposition of remains
  - Common carriers