



Public Health and Healthcare Response to Hurricane Harvey

**Presentation to Senate Committee on
Finance**

Dr. John Hellerstedt, Commissioner

October 24, 2017



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DSHS Hurricane Harvey Efforts



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- DSHS efforts by the numbers:
 - **689** DSHS staff involved in response
 - **149** DSHS personnel staffed SMOC
 - **990** medical response missions
 - **3,200** medical patient evacuations
 - **1,800** patients treated by mobilized medical units
 - **142** patients transferred
 - **70,000** vaccines distributed
 - **6,765,971** acres treated for mosquito control
- Total DSHS as of September 20th: **\$41,218,005**





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DSHS Hurricane Harvey Recovery Efforts

DSHS is engaged in ongoing public health recovery efforts.

- **Food Safety:** The Texas Rapid Response Team (TRRT) has been activated to monitor and respond to any food-related incidents
- **Impact Assessment:** Working with locals to assess impact to public health and medical infrastructure, public health issues relating from the disaster, identify gaps, and provide support as appropriate
- **After Action:** Identifying lessons learned to produce a comprehensive statewide Public Health and Medical After Action Report and Improvement Plan
- **Asset Recovery:** Assessing resources expended during the emergency in order to replace and repair equipment in preparation for future responses
- **Reimbursement:** Working with entities involved in response to ensure documentation necessary for Federal Emergency Management Agency (FEMA) reimbursement has been completed
- **Data and Statistics:** Analyzing death certificates, reviewing media reports, and contacting medical examiners and justices of the peace to identify hurricane-related deaths



Hurricane Harvey Expenditures and Funding Sources

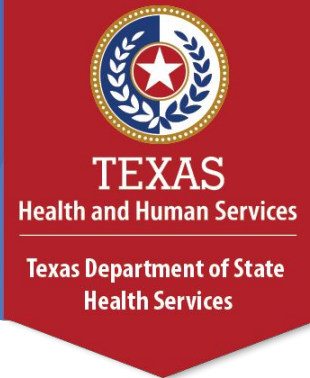
Hurricane Harvey Estimated Expenditures	
Personnel, Supplies, and Logistics	\$2,834,439
Contract - Emergency Medical Task Force/Regional Advisory Council Resources	\$12,254,754
Contract – Vector Control	\$11,716,090
Contract – BCFS Medical Shelter	\$7,560,000
Contract – FEMA Ambulances*	\$6,600,000
Contract – Mortuary Trailers	\$160,320
Contract – Oxygen	\$44,370
Total	\$41,218,005

Hurricane Harvey General Revenue Funding Sources	
Original Funding Identified – Health Data and Analysis, Immunizations, Laboratory, Mental Health State Hospitals (AY 17)	\$2,800,000
Base Capital Lapses (AY 17)	\$1,178,305
25% Capital Lapse (AY 17)	\$401,836
Unobligated GR (AY 17)	\$4,672,567
HHS Funding (AY 17)	\$7,448,970
Delay Paying HHS System Expenses (AY 18)	\$15,613,806
Public Health Revenue Accounts (AY 18)	\$12,604,199
Total	\$44,719,683

* It is anticipated the \$6.6 M for FEMA ambulances will be paid directly by FEMA



Funding for Public Health Response



- There is no specific funding stream for response.
- DSHS uses various budget mechanisms to manage cash flow during a response.
 - Payments are due before potential federal reimbursement is received.
- FEMA reimbursement cannot always be expected, and the parameters of reimbursement are unpredictable.
 - 100 percent reimbursement is the exception to the rule.
 - Costs may fall outside the time period for reimbursement.



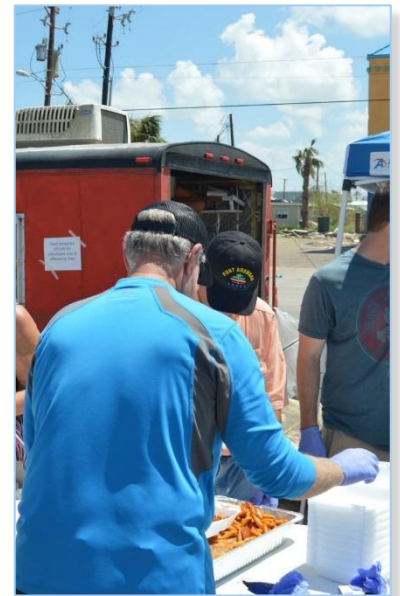
Appendix



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- DSHS Responsibilities in Emergency Response
- Funding Public Health Preparedness
- Preparedness Efforts
- Response Efforts
- Recovery Efforts





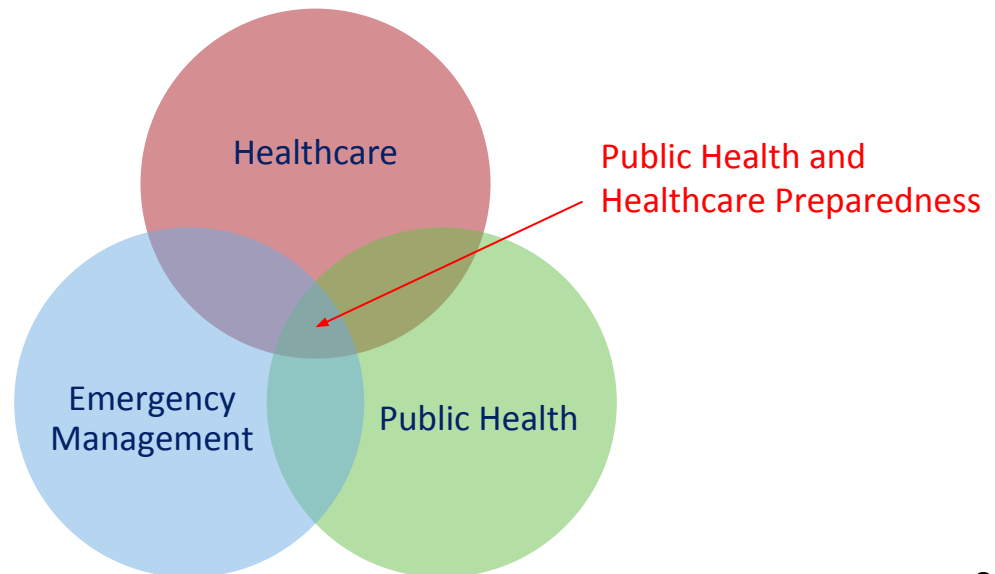
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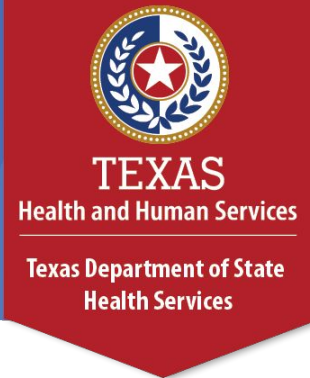
DSHS Responsibilities in Emergency Response

DSHS responsibilities fall under the State of Texas Emergency Plan.

- Emergency Support Function 8: coordinating public health and medical response during emergencies
- Annex D: radiological emergencies



DSHS Responsibilities in Emergency Response



- While emergency response begins at the local level, DSHS plays a vital role when:
 - There is no local health department
 - The response exceeds local capacity
 - Large events involve multiple jurisdictions
 - Response involves areas with no local component
- DSHS operates the State Medical Operations Center (SMOC)
 - SMOC operates in coordination with the State Operations Center (SOC) operated by the Texas Division of Emergency Management (TDEM).
- Personnel and resources from across DSHS are utilized to respond to an emergency.



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Funding for Public Health Preparedness

General Revenue funding is not specific to preparedness. Rather, it maintains the public health infrastructure necessary for response.

State Funds by Strategy	FY 2018-19
A.1.1: Public Health Preparedness & Coordinated Services	\$28,607,815
A.2.3: Infectious Disease Epidemiology, Surveillance, and Control	\$22,772,131
A.4.1: Laboratory Services	\$83,449,761
Total	\$134,829,707



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Funding for Public Health Preparedness

A federal cooperative agreement funds two public health preparedness programs:

- **Public Health Emergency Preparedness (PHEP)**
- **Hospital Preparedness Program (HPP)**

Preparedness Federal Funding Programs	FY 2018-19 Totals
Hospital Preparedness Program (528 – HPP)	\$32,353,268
Public Health Emergency Preparedness (531 – PHEP)	\$75,773,702
Public Health Preparedness Response Zika (775-PHPR) One-time	\$950,000
Hospital Preparedness Program Ebola Supplemental (752 – Part A) One-time	\$1,700,000
Hospital Preparedness Program Ebola Supplemental (761- Part B) One-time	\$500,000
Total	\$111,276,970

Public Health Emergency Preparedness (PHEP)

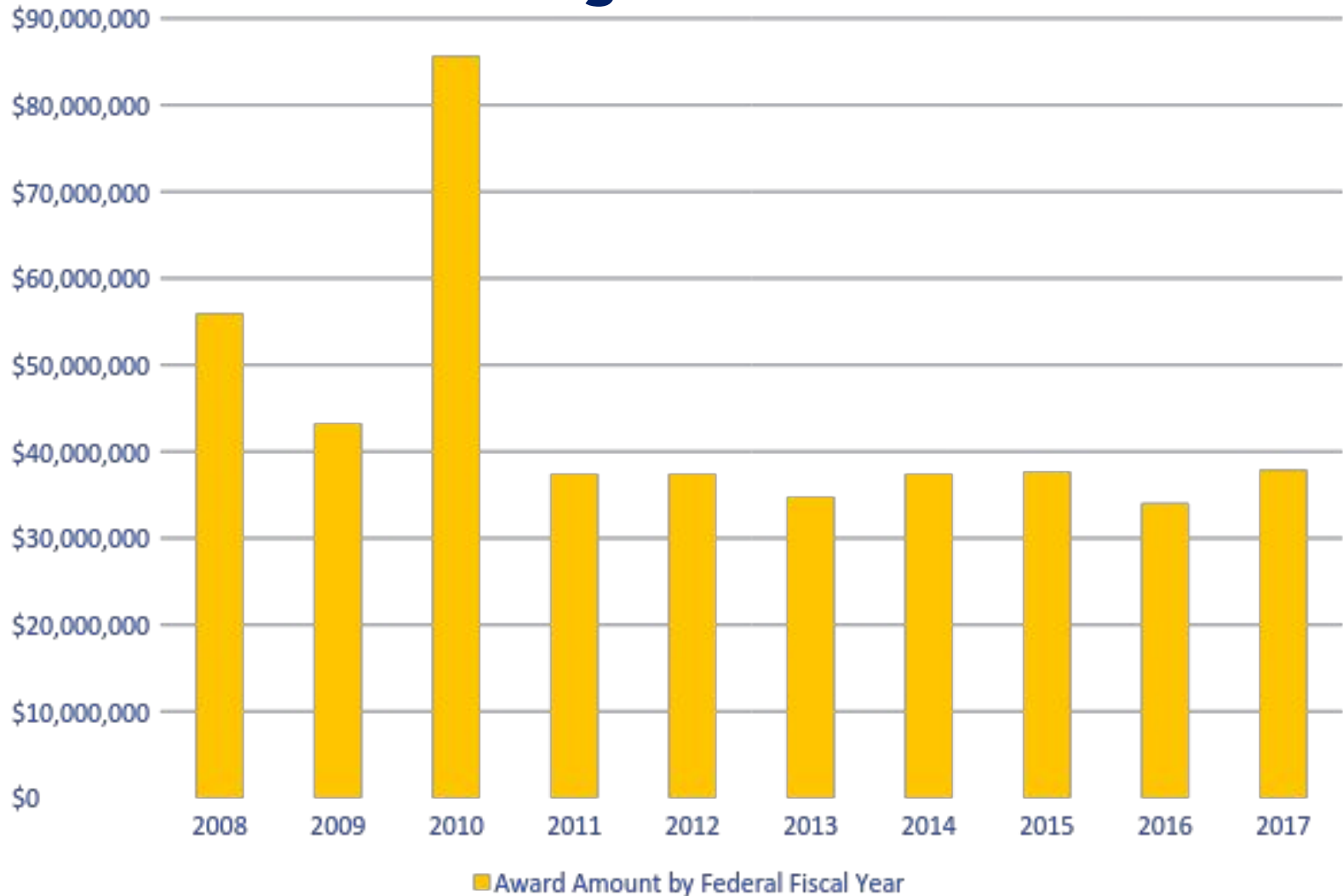


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- Administered by the Centers for Disease Control and Prevention (CDC)
- Focus is on community preparedness to prevent, respond to, and rapidly recover from all public health threats.
- Key components:
 - Epidemiology and surveillance
 - Lab Response Network (LRN) – biological and chemical
 - Rapid dispensing of medical countermeasures
 - Responder safety and health
- Funds support local health departments, health service regions, statewide projects, and DSHS central office.

Public Health Emergency Preparedness Funding: 2008-2017



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Hospital Preparedness Program (HPP)



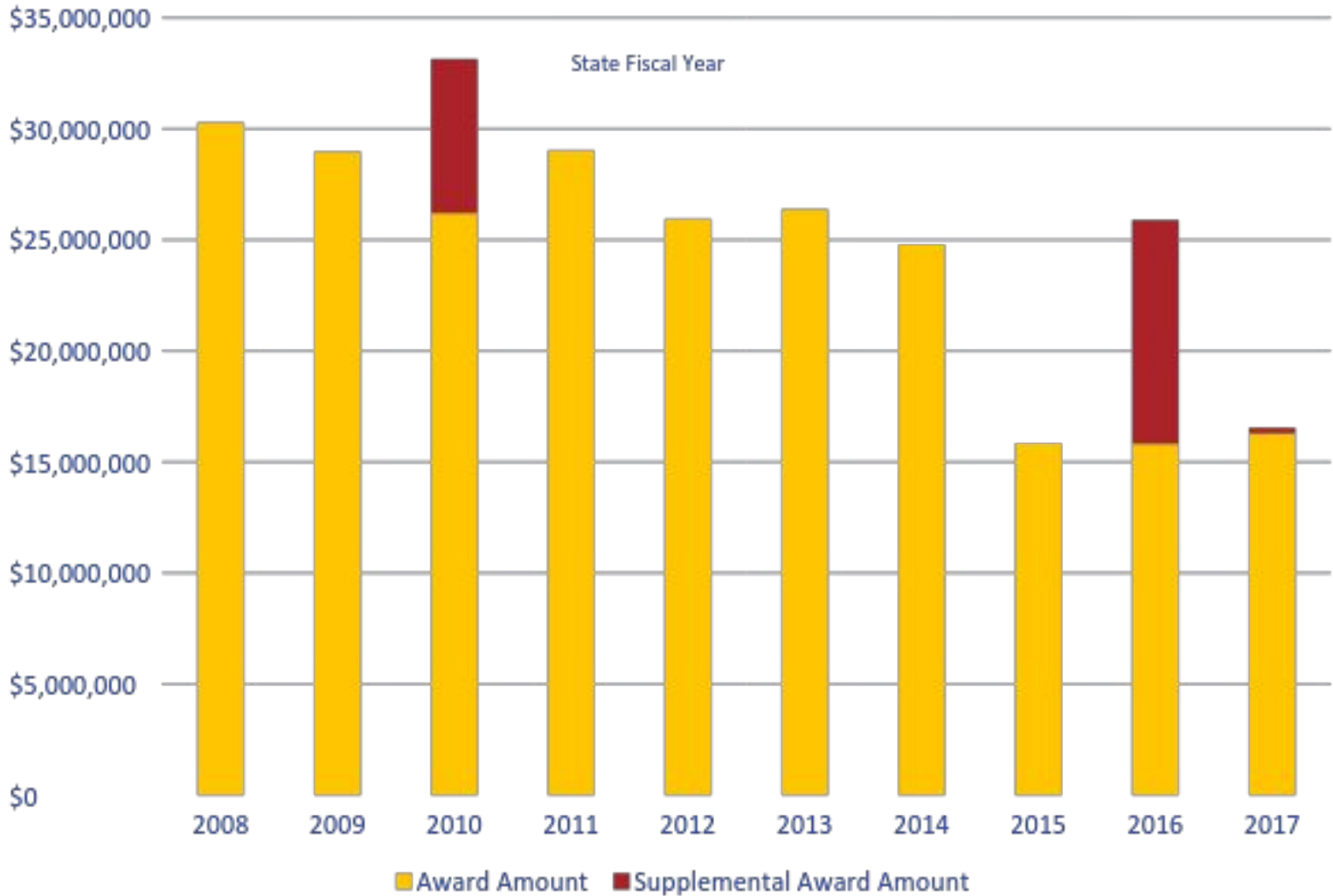
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- Administered by the U.S. Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response (ASPR).
- HPP funds support equipment and trained personnel:
 - Ambulance bus (AMBUS) equipment
 - Mobile medical units
 - Ambulance strike teams
 - Physicians, nurses, and paramedics
- Funds used to support healthcare preparedness coalitions, statewide projects, and the DSHS central office.



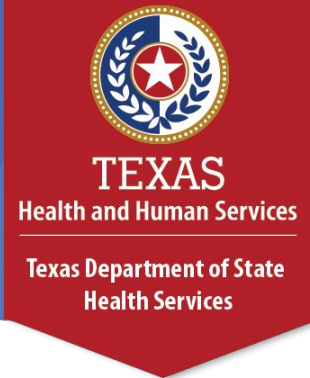
Hospital Preparedness Program Fiscal Years 2008-2017



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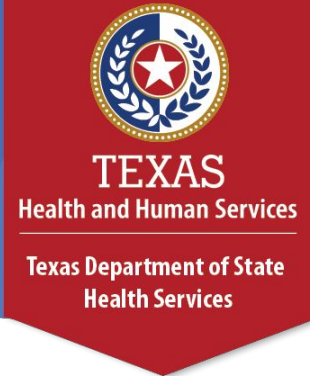
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Preparedness – DSHS Hurricane Harvey Efforts



- Before each hurricane season, DSHS updates plans, procedures, and staff training to ensure readiness
 - Conducted 8 day, full-scale evacuation exercise in June 2017 in conjunction with Texas Division of Emergency Management (TDEM)
- Raising public awareness about how to prepare for a disaster increases personal readiness
 - <http://www.texasprepares.org/>
- Mobilizing assets before the hurricane makes landfall is important to ensure resources are in place for response.

Response – DSHS Hurricane Harvey Efforts



- Deployed medical personnel to assist with medical evacuations and to support general population shelters:
 - 795 Emergency Medical Task Force (EMTF) personnel
 - 100 EMTF ambulances
 - 13 EMTF ambulances
 - 18 Disaster Medical Assistance Teams
 - 58 air ambulances
- 3 mobile medical units to treat, stabilize, and transport individuals
- 3 medical shelters for evacuees with medical needs

Response – DSHS Hurricane Harvey Efforts



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- Requests from local entities for vaccine were processed
 - As of September 22nd, provided over 70,633 doses to the locals
- Sanitarians were deployed to impacted areas to help provide guidance on food safety
- Maintain situational awareness and provide assistance to healthcare facilities, as needed
- Support aerial and ground spraying to control mosquito populations



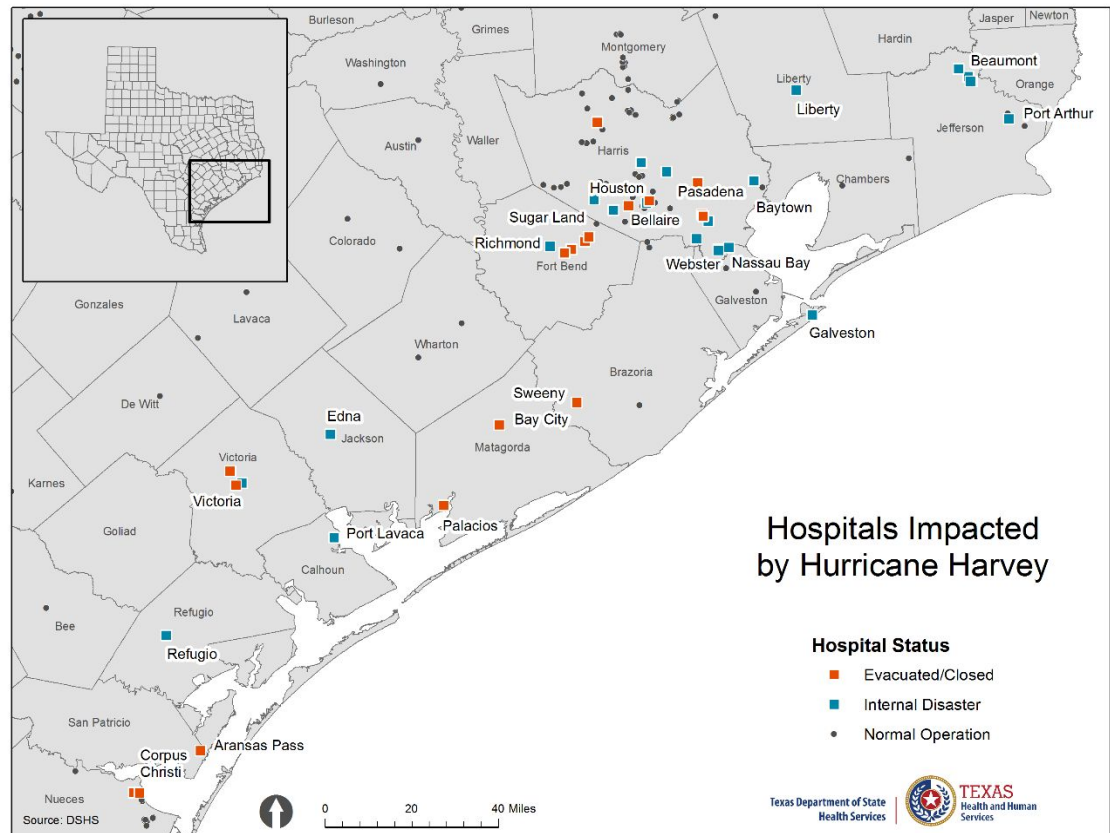
Response – DSHS Hurricane Harvey Efforts



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- Evacuated/
Closed: 20
- Internal
Disaster: 25

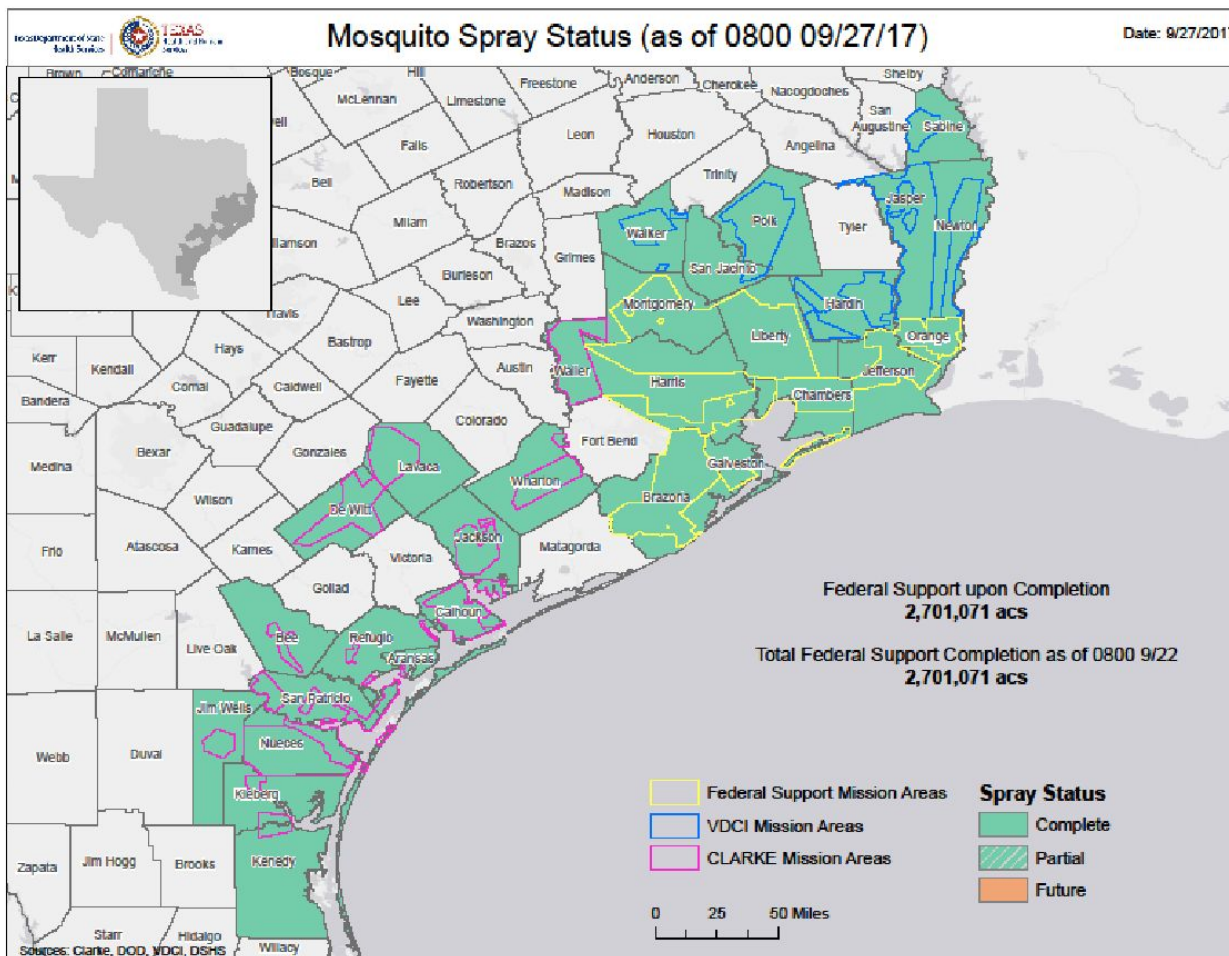


Recovery – DSHS Hurricane Harvey Efforts



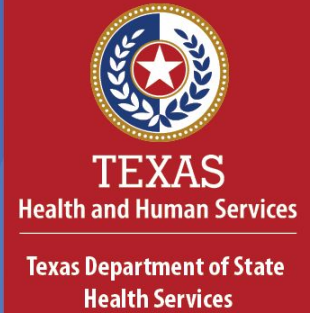
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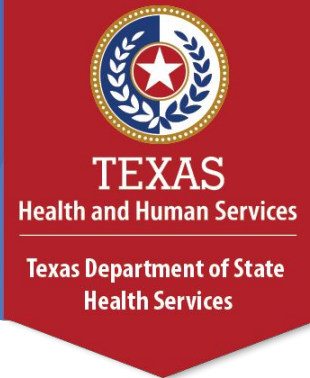
- Counties sprayed: 29
- Approximate number of acres sprayed: 6,765,971

Response – DSHS Hurricane Harvey Efforts



- The Governor’s office has granted several DSHS requests to waive certain rules and statutes to facilitate response and recovery:
 - Mold Remediation
 - Food Donation
 - Animal Shelters
 - Grace Periods for License Deadlines/Fees
 - Delayed Infection Reporting by Facilities
 - Asbestos
 - Vital Statistics Fees
 - Alternate Potable Water Sources
 - Verification of Immunizations for School Enrollment

Recovery – DSHS Hurricane Harvey Efforts



- Provide public health education and outreach for cleanup and recovery
- Collect and analyze hurricane-related health data to assess the public health impacts from the storm
 - Identify hurricane-related deaths
 - Modify the Texas Pregnancy Risk Assessment Monitoring System
 - Collaborate to analyze data on water, soil, and air quality
- Perform public health surveillance to monitor for infectious diseases
- Identifying and monitoring public health risks post-event



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Thank you
