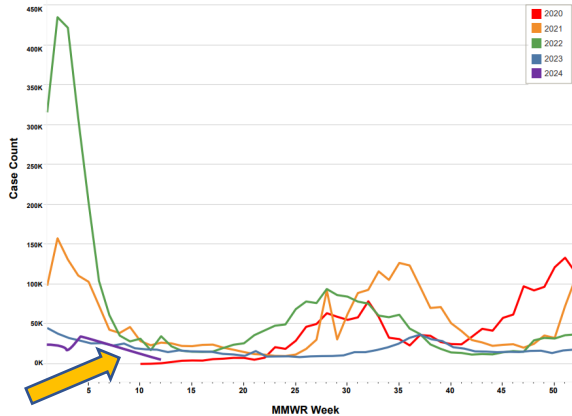


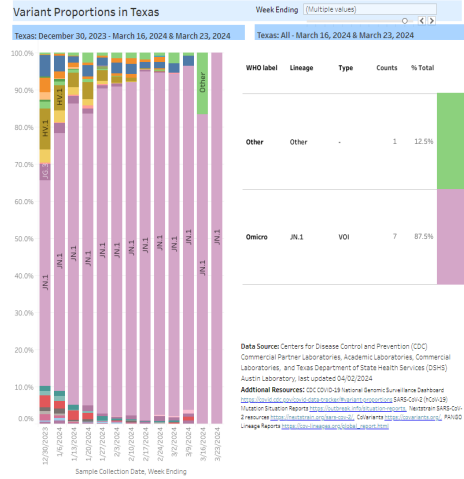
Public Health Regions (PHRs) PCC REPORT 15 APR 2024

COVID-19 cases *have significantly decreased* in TX while JN.1 remains the leading variant.

Figure 9. Cases of COVID-19 by MMWR Week, Texas, 2020 to Current Report Week (N = 9,184,104)



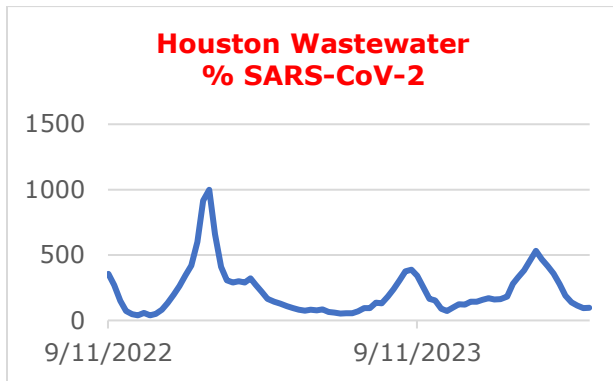
Note: The COVID-19 pandemic reported the first locally acquired SARS-CoV-2 case in Texas during the MMWR Week 10 in 2020. Prior to MMWR Week 10 in 2020 there were no locally acquired cases of SARS-CoV-2 infection reported among Texas residents. Case counts are reported based on all MMWR weeks as they are provided.



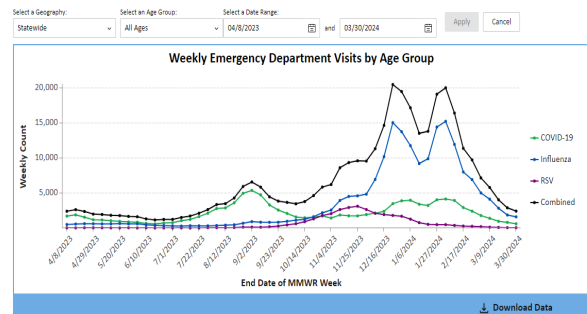
[Texas DSHS | Respiratory Virus Surveillance Report | 04.02.24 | Week 12](#)

[SARS-CoV-2 Variants and Genomic Surveillance in Texas | Texas DSHS](#)

Houston wastewater measurements have also markedly decreased as have emergency room visits for respiratory diseases.



Houston wastewater SARS-CoV-2 percent for the weeks of 9/11/2022 to 4/1/2024. City of Houston SARS-CoV-2 Wastewater Dashboard: <https://covidwntp.spatialstudieslab.org/>



Emergency department visits associated with COVID-19, influenza, and RSV, presented as a percent of all emergency department visits.

TX Respiratory Illnesses Dashboard: [Texas Statewide Emergency Department Visits for Respiratory Illnesses | Texas Respiratory Illnesses Dashboard \(arcgis.com\)](#)

HPAI in Panhandle Cattle – Timeline

USDA Animal and Plant Health Inspection Service, March 25, 2024: [Federal and State Veterinary, Public Health Agencies Share Update on HPAI Detection in Kansas, Texas Dairy Herds | Animal and Plant Health Inspection Service \(usda.gov\)](#)

- Clinical samples of milk from sick cattle as well as an oropharyngeal swab collected from dairy farms in Kansas and Texas, tested positive for highly pathogenic avian influenza (HPAI) thought to have been introduced by wild birds.
- Testing by the National Veterinary Services Laboratories has not found changes to the virus that would make it more transmissible to humans.
- Milk from impacted animals is being diverted or destroyed so that it does not enter the food supply. In addition, pasteurization has continually proven to inactivate bacteria and viruses, like influenza, in milk.
- On average about ten percent of each affected herd appears to be impacted, with little to no associated mortality reported among the animals.

TDA press release March 25, 2024: [COMMISSIONER MILLER SAYS MYSTERY DAIRY COW DISEASE HAS BEEN IDENTIFIED > Texas Department of Agriculture Website > News & Events \(texasagriculture.gov\)](#)

Recommended measures include:

- restrict access to essential personnel only.
- disinfect all vehicles entering and leaving premises.
- isolate affected cattle.
- destroy all contaminated milk.
- clean and disinfect all livestock watering devices and isolate drinking water where it might be contaminated by waterfowl.
- notify herd veterinarians if any cattle within the herd are suspected to be displaying symptoms of this condition.
- no need to depopulate dairy herds as cattle are expected to fully recover.

NPR media release 3/31/2014 (updated 4/1/2024):

<https://www.npr.org/2024/03/31/1241897770/bird-flu-dairy-cows-idaho-kansas-texas-michigan-new-mexico>

- The USDA believes the dairy cows have been sickened by a strain called **H5N1, Eurasian lineage goose/Guangdong clade 2.3.4.4b**, which was likely introduced by wild birds.
- ...federal officials are also not ruling out the possibility of cow-to-cow transmission... after a Michigan farm recently received a shipment of cattle from an affected Texas farm before any of the cows showed signs of disease...
- Cows sickened by bird flu at affected dairy farms have recovered "after isolation with little to no associated mortality reported"

DSHS Health Alert dated April 1, 2024

First Case of Novel Influenza A (H5N1) in Texas, March 2024

<https://www.dshs.texas.gov/news-alerts/health-alert-first-case-novel-influenza-h5n1-texas-march-2024>

The **first human case of novel avian influenza A(H5N1)** in a patient with a primary symptom of conjunctivitis was announced **in Texas**. This is the second case of avian influenza A(H5N1) identified in a person in the US.

The patient became ill following contact with dairy cows presumed to be infected with avian influenza A(H5N1). Avian influenza A(H5N1) has previously been detected in TX but this is the **first time it has been detected in cattle**.

Avian influenza A(H5N1) viruses have only rarely been transmitted from person to person and the **risk to the general public is believed to be low**. However, people with close contact with affected animals suspected of having avian influenza A(H5N1) have a higher risk of infection.

Initiation of antiviral treatment with a neuraminidase inhibitor (oseltamivir twice a day for 5 days) is recommended **as soon as possible** for any patient with suspected or confirmed infection with avian influenza A(H5N1), **even if >48hrs have elapsed** since illness onset and **regardless of illness severity**.

Chemoprophylaxis...

- should be administered to individuals in the same household or close family members with unprotected, prolonged contact to a confirmed or probable case.
- may be considered in healthcare personnel or non-household members with prolonged unprotected close contact with a confirmed or probable case.
- is typically not considered for individuals who have had social contact of a short duration with a confirmed or probable case in a non-hospital setting.

For asymptomatic individuals, the **treatment frequency dosing** for oral oseltamivir or inhaled zanamivir (one dose twice daily) **is recommended** instead of the typical antiviral chemoprophylaxis regimen (once daily). Treatment should be **started immediately and not be delayed while testing is pending**.

Close contact: within about 6 feet of a confirmed or probable avian influenza case for a prolonged period of time, or direct contact with infectious secretions while the case was likely to be infectious (beginning 1 day prior to illness onset and continuing until the resolution of illness).

PPE: [Recommendations for Worker Protection and Use of Personal Protective Equipment \(PPE\) to Reduce Exposure to Novel Influenza A Viruses Associated with Severe Disease in Humans](#).

Hygiene measures: wash hands often, cover coughs and sneezes, do not pick up dead birds and animals, stay home if sick.

Milk Consumption: Raw unpasteurized milk can make people sick. Pasteurization is the process of heating milk to a high enough temperature for enough time to kill harmful germs in the milk, including all kinds of flu viruses. Milk sold in stores is required to be pasteurized and is safe to drink.

MPOX Clade I is an emerging concern:

"An mpox outbreak in the Democratic Republic of the Congo (DRC) that began in 2023 has expanded to 23 of the country's 26 provinces ...with children the most affected group."

Aggravating factors include increased violence, refugee displacement, severe flooding, and outbreaks of other diseases (cholera, measles, anthrax, and plague). Hospitals are often overwhelmed.

The outbreak in the DRC, due to Clade 1 virus and until recently characterized by zoonotic spread, has involved some sexual spread including heterosexual transmission.

Cases reported this year:

- 3,941 suspected mpox cases (389 lab-confirmed)
 - 271 (7%) of them fatal
- 2/3 have been reported in children
 - 10% Case Fatality Rate in infants and young children.

The WHO is concerned that the proportion of deaths is rising and that it poses a threat to neighboring countries, though **no cases of clade 1 have been reported outside of the DRC.**

The emergence of gene deletions may impact detection of the virus with the current tests available in that area.

The strain of a recent mpox outbreak in the Republic of Congo was not able to be determined.

[DR Congo mpox outbreak expands, becomes deadlier | CIDRAP \(umn.edu\)](#)

There are currently three clades of mpox (monkeypox) virus recognized:

- Clade I (Congo Basin), with 10% human mortality, is transmitted by rodents with little human-to-human spread
- Clade IIa (West Africa), with a low mortality, is also zoonotic
- Clade IIb (currently global), with high risk for immunosuppressed individuals, is spread by human to human transmission.

"The genetic basis for differences in virulence and transmission has not yet been determined."

[Virulence differences of mpox \(monkeypox\) virus clades I, IIa, and IIb.1 in a small animal model | PNAS](#)

An outbreak of Clade I mpox in the DRC was linked to travel to Belgium but enhanced surveillance in Belgium has failed to uncover any cases.

[No Evidence for Clade I Monkeypox Virus Circulation, Belgium - Volume 30, Number 2—February 2024 - Emerging Infectious Diseases journal - CDC](#)

DSHS Public Health Regions

For more information on dispensing Medical Countermeasures, see...

<https://www.ncbi.nlm.nih.gov/books/NBK190045/>

Region 1 Preparedness activities:

- ESF-8 Quarterly Meeting held 1/10
- Preparedness and Response (PAR) staff attended Point of Dispensing (POD) training in Georgetown 1/10-1/13
- PAR attended COG EMC meeting Jan 18th
- PAR/EPI staff attended the PCW January 23,24.
- PAR Staff attended DDEOC 1 quarterly meeting on 1/31
- PAR Staff attended DDEOC 2 quarterly meeting on 2/1
- Attended Lubbock County LEPC meeting 2/1
- PAR staff attended Mass Fatality training on 2/2
- PAR/EPI staff attended Category B Biological Substance Packaging and Shipping Training on 2/2
- PAR staff attended ICS 300/400 training beginning 2/7
- SNS Coordinator provided CHEMPACK training to CHEMPACK sites with county/city officials attending (Pampa 2/20, Covenant 3/6)
- PAR moved CHEMPACK container to Covenant Medical Center 2/23
- PAR staff attended Agreement in Principle Meeting (Counties in area surrounding Pantex) 3/13
- DSHS PHR 1, including PAR/EPI staff responded to the Panhandle Wildfires starting 2/29 through 3/15, providing DSHS Public Health Liaison to the DDEOC, conducting tetanus clinics, participating in multi-agency resource centers. RHMOC was activation was LIMITED. Tetanus Vaccine clinics were provided by nurse strike teams, Daily SITREPS, IAPS generated for staff deployments.
- PAR staff attended GRIT awards 3/20. Received Because of Y'all Award.
- PAR attend Disaster Pediatrics MGT 439 3/27-3/28
- DSHS PHR 1 began response operations to the Panhandle Dairy HPAI event 3/27 – ongoing. RHMOC is at FULL activation, currently conducting surveillance/investigations, specimen collection/submission, PPE distribution to dairies, working to obtain access to dairies/dairy workers. Daily SITREPS and IAPS.
- PAR Staff attended CBRNE course in Brownwood on 3/21-3/22
- SNS Coordinator attended the Preparedness Summit in Cleveland OH 3/24 through 3/28

Congratulations to the Region 1 Preparedness and Response team for being recognized as the recipients of this year's "*Because of Y'all*" DSHS GRIT award.

KUDOS to y'all!!!!

Also, sincere appreciation to the Region 1 PAR for their service in responding to the fires devastating the Texas panhandle. **THANK YOU!!!!**

Region 2/3 Preparedness activities:

- Provided Integrated Preparedness Planning technical assistance to Wichita Falls-Wichita County Public Health District's newly hired PHEP program staff.
 - In coordination with Wichita Falls-Wichita County Public Health District PHEP program staff, we designed, developed, and facilitated a High Consequence Infectious Disease and Medical Countermeasures tabletop exercise (TTX). The TTX was conducted on March 20, 2024.
 - Presently, design and development technical assistance is being provided to the 2024 Trauma Service Area-C Health Care Coalition's Chemical Surge Response TTX. Exercise is scheduled for April 11, 2024.
- Per request, we are supplying ongoing NIMS/ICS related training support to DSHS HQ in Austin.
 - We continue to provide NIMS/ICS (National Incident Management System) instructional support (G-300 and 400) to the DSHS Preparedness Branch in Austin by sending two instructors. Courses are scheduled for April and June 2024 in Austin and PHR 7, respectively.
 - As part of the DSHS Preparedness Branch ICS Scenario Workshop team, we are continuing design and development of G-300 course activity scenarios that include ESF-8 elements for courses conducted for DSHS staff and partner agencies.
- On March 6 and 7, 2024, delivered a two-day training session consisting of the Centers for Disease Control and Prevention (CDC) Point of Dispensing (POD) Essentials Course and POD Workshop and Simulation in the City of Brownwood in Brown County. Two more 2024 classes will take place in the following counties: Wichita, and Dallas.
- Conducted IMATS demonstration with Dallas County. Developing Medical Counter Measures (MCM) distribution spreadsheet to conduct trial run of IMATS system during their upcoming POD TTX on June 1st.
- Attending VOAD (The North Central Texas Trauma Regional Advisory Council)
- Completed Bio Watch TTX in Denton County on February 28th.
- Participated in the North Central Texas Trauma Regional Advisory Council (NCTTRAC) Chemical Surge TTX on February 23rd.
- Developing a CHEMPACK (containers which are self-contained units placed in centralized locations to enable first responders to quickly administer life-saving antidotes). TTX with NCTTRAC to address gap identified during Surge TTX.

Region 4/5N Preparedness activities:

- Identifying and engendering community participation in being designated as a new Receipt, Storage and Staging (RSS) site for Medical Countermeasures (MCM) within Northeast Texas.
- Updating Regional Health and Medical Operations Center (RHMOC) plans.
- Updated the regional Basic Plan and Radiation Annex for review and approval.
- Attended Texas Disaster Emergency Management newly redefined Disaster District Committee 5, 6, and 14 quarter meetings.

- Continue to share information with ESF-8 regional partners for contact information for preparedness, response, and training opportunities.
- Attended the Central Office Integrating Preparedness Planning workshop in Austin on January 23 & 24, 2024; staff attended workshops nested within the Integrated Preparedness Planning (texas.gov)
- Five program staff attended PER-410 (Enhancing Planning, Preparedness, and Response to Pandemics and Other Large-Scale Public Health Emergencies) February 20-21, hosted by PHR 2/3 in the DFW area.
- PHR 4/5N continues planning and training efforts in preparation for PHR 2/3 and 4/5N exercise with a dynamic RSS/MCM Scenario
- Continue preparing for and sharing information concerning the Total Eclipse (08 April 2024) to conduct a multijurisdictional and multidisciplinary exchange of health-related information and situational awareness data with state, local, tribal, and territorial government levels, and the private sector.
- We are participating and providing information sharing in the upcoming Regional Advisory Council F and G tabletop and full-scale exercise, with a concentration on pediatric readiness and Chemical/Biological/Radiation/Nuclear and Explosive mass casualty incidents (May 2024).

Region 6/5S Preparedness activities:

- March 12: Conducted In-Person ICS100, Introduction to Public Health Emergency Response, Orientation and Stop the Bleed training for new regional staff.
- March 19: Conducted Maritime Infectious Disease Tabletop Exercise in partnership with Galveston County Health District, testing communications pathways and response plans when a person becomes ill with a potential notifiable condition on a cruise ship bound for Galveston port.
- March 28: Conducted Walker County Family Assistance Center (FAC) Tabletop Exercise, testing county OEM and DSHS regional office plans to provide FAC services following a mass casualty or fatality incident without a criminal nexus.
- Continued progress building a *Resilience Hub* in Liberty County to improve community disaster preparedness and a public health emergency volunteer corps to augment the existing workforce during an emergency response.
- Significant work completed by the newly created Regional public health emergency preparedness Community Engagement Team. Additional progress limited due to short-term, grant-based funding, impacting efforts to build resilient communities.
- Developed emergency communications resource ("*communication board*") to assist emergency service workers providing support to vulnerable populations in a public health disaster. These are currently in review phase and already garnering great interest amongst vulnerable populations community groups across the state and country, who have long identified this as an unmet need.
- Building partnerships with regional and state radiological response groups, with a view to expanding this capacity in 2025 through planning, training and exercising public health emergency response activities that might be conducted during a radiological incident (such as establishing a Community Reception Center).

Region 7 Preparedness activities:

- PHR 7 planned and conducted a Community Assessment for Public Health Emergency Response (CASPER) with a focus on general preparedness and some specific questions about the anticipated impact of the April 8 total solar eclipse. The CASPER was conducted March 1-2 in portions of Blanco, Burnet, and Llano Counties. The team sought input from local emergency management coordinators and local health authorities. Ninety household-level surveys were completed, and most households agreed to a follow-up survey after the eclipse to gauge changes in preparedness and actual impacts of the eclipse. Households were provided with an information packet containing preparedness and solar eclipse resources. Preliminary CASPER results were shared with local officials and a final report will be completed after the follow-up survey.
- Two team members completed the Disaster Recovery International (DRI) Foundation's Business Continuity course which expands the region's foundational knowledge for Continuity of Operations (COOP) planning.
- Approximately 30 PHR 7 staff have received training in Stop the Bleed and American Heart Association HeartSaver CPR/AED since the beginning of 2024.

Region 8 Preparedness activities:

- Staff & partners attended DDC District 18 Agency Introduction Meeting at AACOG
- Feb Community Outreach: Texas Ready presentation for Pearsall ISD
- PHR 7 & 8 continue planning activities for the combined 5-year full scale exercise
- Hosted MGT 383 Emergency Planning for Rural Jurisdictions Course – Cotulla
- Presented NARCAN Administration and Stop the Bleed training to Southwest Texas Junior College Police Academy students
- PHR 8 hosted MGT 341 Disaster Preparedness for Healthcare Organizations course at STRAC
- Hosted NTSB Course to familiarize regional staff and partners with Mass Fatality response operations in preparation for the upcoming PHR 8 Mass Fatality workshops and 2025 full scale exercise
- Hosted Mass Fatality Workshop planning meeting with 10 subject matter experts who will assist in the development of the workshop/table top exercise PHR 8 is building for partners/stakeholders
- Hosted a CPR refresher class
- Working with Central Office Training Unit to do re-writes to selected ICS 300 Scenario's to add a Public Health component (ongoing)
- Worked with HHSC DBH, TEEX, Tx Line of Duty Taskforce to bring CISM/MH/Peer support to first responders in Eagle Pass. Need was identified due to the ongoing migrant response and the strain on first responders
- UCISD Benson/Robb Elem suspicious package incident response. Three affected employees sent to hospital for evaluation. Subsequent in person AAR conducted by Uvalde Co EM/DA Office

Region 9/10 Preparedness activities:

- Collaboration between Public Health Regions 1 and 9/10 on Joint Integrated Preparedness Planning for the coming year in both regions.
- As part of this year's National Public Health Week, Preparedness Program provided an emergency preparedness 101 and deployments presentation to regional staff in anticipation of annual training.
- ERT Epidemiology and Preparedness staff will conduct presentations on epidemiology investigations, public health preparedness, regional health medical operations centers operations, incident command and deployments to state employees.
- Preparedness staff conducted inspections of regional medical mobile units and equipment for deployment in anticipation of regional statewide deployments.
- Epidemiology and Preparedness Program participated in a 'Public Health, Preparedness and Tribal Nations 101' workshop with the local Ysleta del Sur Pueblo Tribal Nation. Next steps on joint public health emergency preparedness activities were discussed.
- The region hosted Preparedness Emergency Support Function (ESF 8) quarterly meetings with stakeholders and local health departments.
- In preparation for the solar eclipse event next week, epidemiology and preparedness programs have been working with regional stakeholders and first responders to ensure there is no public health/medical needs in three our regional counties that are in the totality zone.
- Regional Health Medical Operations Center in El Paso will be on a limited activation to monitor and track any ESF-8 related needs and requests.
- ERT Epidemiology responded to several gastrointestinal outbreaks in our counties. Total number of cases was 89 cases. Norovirus Genogroup II RNA Detected by PCR.
- ERT Epidemiology provided technical guidance and lead coordination efforts in several infant botulism cases in the region that had large media coverage in state.
- ERT Epidemiology Program will setup a four-day syndromic surveillance for the solar eclipse in three counties that are projected to be in the path of the eclipse.
- Program staff met with regional leadership and UTHealth Houston School of Public Health to discuss regional partnership opportunities with their GETPHIT (Gaining Equity in Training for Public Health Informatics and Technology) initiative.

Sincere appreciation to Public Health Regions **2/3, 4/5N, 7, 8,** and **9/10** for the months of preparation and intense engagement with stakeholders and partners getting ready for the *Great Solar Eclipse* taking place April 8, 2024. **THANK YOU!!!!**

For information on the Great Solar Eclipse of 2024:

[Where & When \(nasa.gov\)](https://www.nasa.gov)

Impacts on Texas:

[Small Texas towns gear up for solar eclipse crowds | The Texas Tribune](https://www.texastribune.org/2024/03/28/small-texas-towns-gear-up-for-solar-eclipse-crowds/)

Region 11 Preparedness activities:

- Commenced preparations for the 2024 exercise of Operation Border Health Preparedness (OBHP) – This is an annual emergency preparedness exercise coordinated by DSHS and various partners to provide services to underserved areas of PHR 11. During OBHP 2023, 6,641 individuals received 27,427 health services across five medical points of dispensing (MPODs). The clinicians performed 2,904 free medical exams, 4000 immunizations with an estimated total value of \$482,457 in the private sector. Additionally, The Texas A&M Veterinary Response Team provided a total of 4,044 services veterinary services for 5 days to 1,016 animals (813 dogs & 203 cats).
- Conducted a tabletop exercise to discuss best practices in setting up a Family Assistance Center (FAC) in response to a Mass casualty incident (MCI).
- Guided local jurisdictions in the development of their own FAC plan, identify key partners, and gather resources for their respective areas.
- Arranged talks with the CDC, LHD, and DSHS on surveillance protocols and further actions to be taken in case of human transmission of malaria.
- Maintained collaboration with the Qualtrics team to create a local Contact database, a flu monitoring database, and other projects.
- Continue to hold training sessions for the Regional Health and Medical Operations Center (RHMO) on a monthly and quarterly basis. The goal is to increase the efficiency and effectiveness of the RHMO response team by eliminating redundancy and confusion, enhancing communication and information flow, providing timely accurate information and analysis to support decision-making, ensuring continuity of operations and services through backup and contingency plans, and boosting resilience and recovery (easing the transition from response to recovery).
- Conducted the 2024 Epidemiology Surveillance and Reporting Workshop, bringing together DSHS Region 11 Epidemiology team and various regional programs. Participants included representatives from Immunizations, Zoonosis, HIV/STD, and Sanitarians programs. Additionally, the workshop featured the LRN South Texas Laboratory, renowned for its shipping and labeling expertise, due to its popularity among past attendees. The primary goal was to empower attendees with enhanced knowledge and confidence in their respective roles.
- Hosting 2024 regional Evacuation Transportation Triage (ETT) training events for LHD/public health and medical staff; state, local, tribal, and territorial, emergency planning personnel, non-governmental organizations (NGOs) and volunteer organizations active in disasters (VOADs), disability groups/organizations, and other interested community stakeholders that may be involved in mass evacuation. The aim is to understand how and where to send evacuees, based upon their medical needs/conditions, utilizing the Evacuation Transportation Triage (ETT) model.
- Participated in the 2024 All Hazards & Coastal Bend conference and presented on best practices in setting up an FAC in response to a MCI)
- Conducting regional health provider visits to promote community preparedness, provide education on public health surveillance and epidemiological surveillance, and enhance information sharing.