

Hidalgo County



Public Health & Medical Services Plan

April 2023

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Approval and Implementation

Public Health & Medical Services Plan

This Public Health & Medical Services Plan is formerly known as Annex H, Health & Medical Services, from Hidalgo County’s Emergency Management Basic Plan, and supersedes all other previous versions.

Eduardo Olivarez
Director, Health & Human Services

Date

Ricardo Saldaña
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Date

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Authority

The Hidalgo County Commissioner’s Court has the authority to approve and implement the Public Health & Medical Services Plan. The Public Health & Medical Services Plan includes 12 appendices. The County Commissioner’s Court approved the Public Health & Medical Services Plan on [REDACTED], 2023. This plan aligns with the County’s Emergency Management Basic Plan, ESF-8: Public Health that was approved by the County Commissioner’s Court on September 7, 2021.

Purpose

The purpose of the Public Health & Medical Services Plan is to outline the operational roles and responsibilities of the Hidalgo County Health and Human Services Department (HCHHSD), along with policies and procedures necessary to provide coordinated public health and medical services to residents of Hidalgo County during emergency situations.

The primary goals are to immediately address any public health issues that could result in deaths or injury during the emergency; to coordinate and support all community healthcare organizations to assist victims or vulnerable populations; and to ultimately restore normal public health and community medical services as soon as possible.

As the public health authority for Hidalgo County, HCHHSD also takes part in regional emergency planning efforts, such as the Texas Homeland Security Strategic Plan under the Lower Rio Grande Valley Development Council (LRGVDC). This collective effort brings emergency resources together for three counties in south Texas.

Explanation of Terms

Acronyms

DADS	Department of Aging and Disability Services
DDC	Disaster District Committee
DMAT	Disaster Medical Assistance Team
DMORT	Disaster Mortuary Services Team
DOC	Division Operations Center
DSHS	Department of State Health Services
EMC	Emergency Management Coordinator
EMS	Emergency Medical Services
EOC	Emergency Operations Center

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FEMA	Federal Emergency Management Agency
HCHHSD	Hidalgo County Health Human Services Department
HPP	Hospital Preparedness Program
HSAC	Homeland Security Advisory Committee
HSR 11	Health Service Region 11
ICP	Incident Command Post
JIC	Joint Information Center
LEPC	Local Emergency Planning Committee
LMHA	Local Mental Health Authority
LRGVDC	Lower Rio Grande Valley Development Council
NIMS	National Incident Management System
PHEP	Public Health Emergency Preparedness
PIO	Public Information Officer
SOC	State Operations Center
SOP	Standard Operating Procedures
TCEQ	Texas Commission for Environmental Quality
TRAC	Trauma Regional Advisory Council
TRAC-V	Trauma Regional Advisory Council V
TTBH	Tropical Texas Behavioral Health

Definitions

Disaster Medical Assistance Team: A team of volunteer medical professionals and support personnel equipped with deployable equipment and supplies that can move quickly to a disaster area and provide medical care.

Disaster Mortuary Services Team: A team of mortuary service and medical personnel that provide mortuary and victim identification services following major or catastrophic disasters.

Emergency Medical Services: A service providing out-of-hospital acute care and transport to definitive care to patients with illnesses and injuries which the patient believes constitutes a medical emergency. The most common and recognized EMS type is an ambulance organization.

Joint Information Center: A location established by the State and Federal Government after a Presidential Disaster Declaration. These centers have the dual role of collecting damage information relating to the private (individual) sector and serving as a referral center to help individuals in receiving available assistance to meet immediate needs.

National Incident Management System: A unified approach to incident management; standard command and management structures; emphasis on preparedness, mutual aid and resource management.

Situation Report: Updates are compiled for use in emergency management planning and operational activities. Updates include information and graphics gathered from a variety of sources including other federal agencies and departments, state and local government, and the news media.

Vulnerable and At-Risk Populations: Includes the homeless and economically disadvantaged, infants and children, the elderly, medically fragile, mentally and/or physically challenged or handicapped, individuals with mental illness, or those with developmental delays. May include home-bound individuals and those that experience cultural, geographic, and/or social isolation, patients in nursing/long term care facilities, or individuals with language or literacy barriers. These groups may need specially trained healthcare providers to assist them, special facilities equipped to meet their needs, and/or specialized vehicles and equipment for transport during emergency situations.

Situation & Assumptions

Situation

1. As outlined in the Hazard Analysis in the Hidalgo County Emergency Management Basic Plan, Hidalgo County is vulnerable to a number of hazards which could result in the evacuation, destruction of, or damage to homes, schools and businesses, along with loss of personal property, disruption of food distribution and utility services, possible serious health risks, or other situations that would adversely affect area residents.
2. Emergency situations could result in the loss of water supply, wastewater, and solid waste disposal services, creating potential health hazards.
3. Hospitals, nursing homes, ambulatory care centers, pharmacies, and other facilities for medical/health care and functional needs populations may be damaged or destroyed in major emergency situations.
4. Health and medical facilities that survive emergency situations with little or no damage may be unable to operate normally because of a lack of utilities or because staff are unable to report for duty because of personal injuries or damage to communications and transportation systems.
5. Medical and health care facilities that remain in operation and have the necessary utilities and staff could be overwhelmed by the "walking wounded"

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and seriously injured victims transported to facilities in the aftermath of a disaster.

6. Uninjured persons who require frequent medications such as insulin and antihypertensive drugs, or regular medical treatment, such as dialysis, may have difficulty in obtaining these medications and treatments in the aftermath of an emergency due to damage to pharmacies and treatment facilities and disruptions caused by loss of utilities and damage to transportation systems.
7. Use of radiological, nuclear, chemical, or biological weapons of mass destruction could produce a large number of injuries requiring specialized treatment that could overwhelm the local and state health/medical system and possibly involve Mexican border towns. Similarly, these situations could produce a large number of deaths that could overwhelm the state’s ability to provide adequate mortuary services.
8. Emergency responders, victims, and others involved in emergency situations may experience stress and anxiety and may display physical and psychological symptoms that affect their daily lives. In some cases, disaster behavioral health services may be needed during response operations.
9. Hidalgo County’s geographical location along the Texas-Mexico border may require international cooperation in resolving certain possible public health threats, such as COVID-19, Zika, and H1N1 outbreaks.
10. The following table shows HCHHSD’s jurisdictional area which includes twenty-three (23) cities within Hidalgo County, and four (4) neighboring Texas counties. The list includes three Mexican cities that communicate frequently with HCHHSD for international disease surveillance. HCHHSD also works with CDC-related organizations based in Mexico City:

Cities in Hidalgo County			
▪ Alamo	▪ Elsa	▪ Mercedes	▪ Progreso
▪ Alton	▪ Granjeno	▪ Mission	▪ Progreso Lakes
▪ Alton North	▪ Hidalgo	▪ Palmhurst	▪ San Juan
▪ Donna	▪ La Joya	▪ Palmview	▪ Sullivan City
▪ Edcouch	▪ La Villa	▪ Penitas	▪ Weslaco
▪ Edinburg	▪ McAllen	▪ Pharr	
Neighboring Jurisdictions			
Brooks County		Starr County	
Cameron County		Willacy County	
International Coordination			
State of Tamaulipas, Mexico		City of Nuevo Progreso, Mexico	
CDC in Mexico City		City of Rio Bravo, Mexico	
CENAPRECE		City of Reynosa, Mexico	

Assumptions

1. Although many health-related problems are associated with disasters, there is an adequate local capability to meet most emergency situations.

2. Public and private medical, health, and mortuary services resources located in our region will be available for use during emergency situations; however, these resources may be adversely impacted by the emergency.
3. If hospitals and nursing homes are damaged, it may be necessary to relocate significant numbers of patients to other comparable facilities elsewhere.
4. Disruption of sanitation services and facilities, loss of power, and the concentration of people in shelters may increase the potential for disease and injury.
5. Damage to chemical plants, sewer lines and water distribution systems, and secondary hazards such as fires could result in toxic environmental and public health hazards that pose a threat to response personnel and the general public. This includes exposure to hazardous chemicals, biologics, radiological substances, and contaminated water supplies, crops, livestock, and food products.
6. The public will require guidance on how to avoid health hazards caused by the disaster or arising from its effects.
7. Some types of emergency situations, such as hurricanes, and floods may affect a large proportion of this region, making it difficult to obtain mutual aid from the usual sources.
8. Appropriate local, state, federal public health officials, and organizations will coordinate to determine available medical and public assistance supply and demand levels.

Concept of Operations

General

1. This government will provide a consistent approach to the effective management of actual or potential public health or medical situations to ensure the health and welfare of its citizens operating under the principles and protocols in the National Incident Management System (NIMS). The County's Public Health & Medical Services plan will also coincide with the County's and State's emergency management plan, especially for requesting resources beyond the County's local capacity.
2. The Hidalgo County Health and Human Services Department (HCHHSD) is the local agency primarily responsible for day-to-day provision of public health services and for establishing mechanisms to discuss public health hazard policies and plans of action with community partners through newsletters, Hidalgo County and HCHHSD's website and social media outlets, and attending coalition meetings (i.e., Local Emergency Planning Committee (LEPC), Hospital Preparedness Program (HPP), Homeland Security Advisory Committee (HSAC), Equal Voice Network, Rio Grande Valley Border Health Coalition, United Way of South Texas, Proyecto Azteca) However, in the event of a Public Health Emergency, HCHHSD has broader legal authority to take action.

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3. HCHHSD evaluates community sectors that provide critical services to public health, engages agencies and organizations, and works with them to evaluate their capabilities and resources. In this way, HCHHSD can better determine which agencies and organizations could provide help during public health response and should be included in information sharing prior to and during an event.
4. HCHHSD works with the entities below through specialized initiatives that facilitate community preparedness and increase awareness of public health emergency response. In this way, Hidalgo County can meet with community and organization leadership to determine spokespersons to deliver public health messages during a public health emergency. In order to maintain collaboration with our community partners HCHHSD conducts meetings, trainings, exercises, and conferences to discuss public health hazard mitigation policies and plans of action for any public health emergency. HCHHSD also uses the entities below to help in the dissemination of public health emergency information to the community before, during, and after an event (planned or unplanned) using flyers and educational materials, other forms of traditional and social media (e-mail, commercials), conferences and meetings, and drills and exercises.

Group 1: Educational Institutions

- School Districts
- Institutions for Higher Learning

Group 2: Health and Social Service Providers

- Healthcare
- Physicians
- Clinics (i.e., Hope Clinic, El Milagro, Nuestra Clinica del Valle)
- Hospitals
- Pharmacies
- Social Services
- Mental/Behavioral Health Service Providers (LMHA, i.e. Tropical Texas Behavioral Health)
- Department of Aging and Disability Services (DADS)
- Cultural and faith-based organizations and groups
- Non-profit organizations and groups

Group 3: Care Service Providers

- Adult day cares
- Childcare services
- Nursing homes
- Home health providers

Group 4: Other Partners

- Local businesses
- Media outlets (local news and radio stations)

Group 5: Local Stakeholders – Year-Round Meetings (January – December)

- District Attorney’s Office
- Community leadership
- Emergency Medical Services Providers
- Law Enforcement
- Fire Departments
- Emergency Management
- Hospital Preparedness Program (HPP)
- Homeland Security Advisory Committee (HSAC)
- Trauma Regional Advisory Council V (TRAC-V)
- Department of State Health Services, Region 11 (HSR-11)

5. The Public Health & Medical Services Plan is based upon the concept that emergency functions of public health, medical, and mortuary services will parallel normal day-to-day operations as much as possible. The same personnel and material resources will be employed in both cases. Some daily services that do not directly help the emergency operation may be temporarily suspended, so that more resources can be redirected to emergency tasks. The Public Health & Medical Services Plan also considers annual Hazard Risk Analysis data for Hidalgo County. The Federal Emergency Management Authority (FEMA) defines risk as “the likelihood that a threat will harm an asset with some severity of consequences.” HCHHSD emergency preparedness planning considers the vulnerable and at-risk population’s needs in the development of risk management guidelines and standard operating procedures to ensure that necessary services and aid are accessible and can be provided to these populations during a public health emergency. Specific guidelines and role assignments are included in Appendix 1: Coordination & Control (Also see Attachment 1: Administration).
6. Provisions must be made for the following:
- a. Establishment of a medical command post at the disaster site.
 - b. Coordination of necessary services and aid to vulnerable and at-risk populations.
 - c. Coordinate and assist city health departments and other public and private health care providers with health & medical response.
 - d. Triage of the injured/ill, if appropriate.
 - e. Arrangements for medical care for the injured/ill, as needed.
 - f. Holding and treatment areas for the injured/ill, if appropriate.
 - g. Providing guidance on isolation, quarantine, decontamination, and treatment of victims of hazardous materials or infectious diseases, as needed.
 - h. Providing guidance and assistance regarding identification of infectious diseases, control contagion, and report cases to state/federal health or environmental authorities.

- i. Issue health & medical advisories to emergency management, public and private health professionals, and the public on such issues as drinking water precautions, waste disposal, immunizations, disease outbreak control measures, and food protection techniques.
- j. Conduct health inspections of congregate care and emergency feeding facilities.
- k. Provide assistance and guidance for surveillance of infectious diseases/notifiable conditions in clusters, outbreaks, epidemics and pandemic.
- l. Provide direction on mass dispensing and / or vaccination operations and the use of the Strategic National Stockpile, as required.

Declaration for Public Health Emergency

The Medical Health Authority has legal authority to declare a public health emergency. The HCHHSD Director in the absence of the Medical Health Authority (with approval from the County Judge) can declare public health emergency.

Process for Declaration

The Medical Health Authority, HCHHSD Director, the District Attorney's Office (designee County Attorney), the Office of Emergency Management, and any other agencies directly involved will meet to discuss reasons and justifications for requesting the Public Health Emergency Declaration and activate any mutual aid agreements, if necessary. The County Judge will be informed of the decision and legal procedures to be taken. DDC and DSHS Region 11 will be informed of the declaration to be forwarded to the State Operation Center (SOC)

Legal Counsel for Emergency Declaration

Under the County Basic Plan, the County Attorney is authorized to provide legal guidance to any County Department on federal, state and county laws, statutes, or ordinances, involving emergency powers. These may all apply in a public health emergency.

Community Leadership

Community leadership includes county commissioners, school superintendents and school boards, city mayors and city managers, leaders of local cultural and faith-based organizations, healthcare and social service providers, emergency management, and local business partners. These leaders will be identified through joint meetings, activities, trainings, and exercises and will be volunteers or will help to engage other volunteers to register as volunteers using the Texas Disaster Volunteer Registry (TDVR) to participate in public health emergency preparedness activities.

HCHHSD hosts and invites community partners and leadership to participate in drills, exercises, conferences, trainings, and events throughout the year. HCHHSD maintains a contact list of all community partners and provides notification of public health preparedness activities and emergencies using e-mail, phone calls, messages, and

meetings. HCHHSD also distributes flyers and education throughout the community to engage new and potential partners.

Emergency Behavioral Health Services

Appropriate emergency behavioral health services may be required for disaster victims, survivors, bystanders, responders and their families, and other community caregivers during response and recovery operations. Services may include crisis counseling, critical incident stress management, information and referral to other services, and education about normal, predictable reactions to a disaster experience and how to cope with them. HCHHSD works with the Local Mental Health Authority (LMHA), Tropical Texas Behavioral Health (TTBH), to incorporate emergency behavioral health services into emergency planning and coordinates training for staff and volunteers to be better prepared to identify unmet needs for these services in the public to make appropriate referrals to service providers.

Information on disaster behavioral health services procedures can be found in Appendix 8, attachment D (Behavioral Health). Medical and mental health trainings and services incorporated into emergency planning reflect HCHHSD's top three identified jurisdictional risks to ensure that the community has access to the most appropriate services during a public health emergency.

Medical Services

1. Clinic Services

HCHHSD may provide limited clinical support in certain public health incidents. Responses may include small vaccination clinics, epidemiological investigation support, and sanitation inspections.

Mortuary Services

When mass fatalities have occurred, it may be necessary to establish a temporary morgue, holding facilities, and obtain additional mortuary service assistance. For events that exceed local mortuary capacity, federal disaster mortuary assistance may be requested. For additional information refer to Appendix 4: Hidalgo County Mass Fatality Plan. For a regional mass fatality incident response plan, refer to Appendix 4: Regional Mass Fatality Management Plan.

Medical and Mortuary Assistance

Hidalgo County's EOC may request medical and / or mortuary assistance from DOC for Disaster Medical Assistance Teams (DMAT) and Disaster Mortuary Services Teams (DMORT).

Damage Assessment

1. Casualty Information

The Justice of the Peace/Medical Examiner hold primary responsibility for surveillance of morbidities and mortalities in emergencies and disasters. Accurate data is essential for identifying what additional levels of medical

support are needed. The information must be forwarded to the Chief Health Administrative Officer in the EOC as soon as possible in order to process requests for outside assistance and for required reports.

2. Water Supply Systems

In cooperation with Department State Health Services (DSHS), TCEQ has primary responsibility for evaluating damage to water treatment facilities following disaster occurrences. Due to system vulnerability to numerous forms of contamination and the impact which prolonged shutdown of water treatment facilities could have on public health and welfare, it is essential that rapid and accurate assessments of damage be completed and forwarded to the EOC as soon as possible. Accurate timely estimates for required repairs will permit the DSHS and TCEQ to identify appropriate interim measures such as rationing, expedient water treatment, or construction of temporary water delivery systems.

3. Wastewater Systems

Wastewater treatment facilities are vulnerable to disaster-related interruptions and their unavailability can have a major impact on the community's health and well-being. The TCEQ, in cooperation with Public Works, has a responsibility for evaluating damage to those facilities, as well as advising local officials concerning expedient sanitation practices, which may be required in the affected areas.

Requesting External Assistance

If health and medical problems resulting from an emergency situation cannot be resolved with local resources, inter-local agreements, or resources obtained by the Resource Management staff in the EOC, EMC may request medical or mortuary assistance from the appropriate supporting DDC. Cities must request assistance from the County EOC before requesting assistance from the State.

Actions by Phases of Emergency Management

1. Mitigation

- a. Administer immunizations.
- b. Conduct health and sanitation inspections.
- c. Conduct specialized training to stakeholders/providers.
- d. Conduct epidemiological surveillance investigations and provide education and training.
- e. Conduct public health awareness programs.

2. Preparedness

- a. Coordinate with county/city emergency management and public/private health entities regarding public health practices.
- b. Train and exercise with County emergency response personnel.
- c. Educate and train for SNS program.
- d. Review, exercise, and revise health and medical plans, as necessary.
- e. Provide support with emergency equipment, as necessary.

3. Response

- a. Provide public information dealing with public health threats and responses.
 - b. Conduct disease investigations/collection of vital statistics for control measures.
 - c. Monitor health and sanitation activities.
 - d. Conduct environmental health activities, as required.
 - e. Support emergency response by local emergency management and public/private health entities.
4. Recovery
 - a. Compile health reports for local, state, and federal officials.
 - b. Identify potential and/or continuing hazards affecting public health.
 - c. Reduce or prevent the harmful effects of the hazard.

Organization & Assignment of Responsibilities

Organization

1. HCHHSD's organization will plan and carry out public health and medical operations during all-hazards emergency situations.
2. HCHHSD functions as the local Medical Authority. HCHHSD has primary responsibility for health and medical services and shall designate its Director to plan and coordinate these services during emergency situations. The Director or designee shall serve as a member of the EOC and will coordinate the public health response through the Incident Commander. Large-scale health and medical efforts shall also be coordinated from the EOC.
3. Upon receipt of official notification of an actual or potential emergency condition, it is the responsibility of the Director in conjunction with the Medical Authority and the Emergency Management Coordinator to receive and evaluate requests for health and medical assistance and to notify all other public health, medical, and mortuary services, as needed.

Assignment of Responsibilities

1. General

All agencies/organizations assigned to provide health and medical services support are responsible for the following:

 - a. Designating and training representatives of their agency, to include NIMS and ICS training.
 - b. Ensuring that appropriate SOPs are developed and maintained.
 - c. Maintaining current notification procedures to ensure trained personnel are available for extended emergency duty in the EOC or in the field.
2. Emergency Functions

Under the Hidalgo County Emergency Management Basic Plan, HCHHSD has primary responsibility to provide the following services in response to emergency situations:

- a. Essential medical and treatment for persons whose illnesses or injuries are a result of a public health disaster or where care and treatment are complicated by a public health disaster.
- b. Public health information, education, and awareness for the protection of the affected population.
- c. Support mortuary and vital records services in the event of a public health disaster or emergency.
- d. Support state and federal entities in conducting a damage assessment for public health and medical facilities and systems.

To ensure that these services are available as needed, various medical and public health services have been assigned primary or support responsibility for specific activities.

Task Assignments

1. The Medical Authority will
 - a. Perform pre-emergency planning for emergency health and medical services and coordinate such activities during major emergencies and disasters.
 - b. Provide qualified staff to support health and medical operations at the ICP and the EOC.
2. The Director and Medical Authority will
 - a. Coordinate emergency health and medical activities from the EOC when that facility is activated.
 - b. Rapidly assess health and medical needs, as determined during emergency events.
 - c. Oversee and coordinate the efforts of local health and medical organizations activated for an emergency, assess their needs, help them obtain additional resources, and ensure that necessary services are provided.
 - d. Ensure that emergency medical teams responding to a disaster site establish a medical command post.
 - e. Coordinate with neighboring community health and medical organizations on matters related to assistance from other jurisdictions.
 - f. Coordinate with local businesses and community leaders in matters relating to emergency public health preparedness.
 - g. Educate community partners (i.e., clinics, educational systems) and leaders to increase awareness about public health emergency preparedness.
 - h. Coordinate with local, state, and federal officials regarding available state and federal assistance, as determined by DDC.
 - i. Coordinate with various local teams as determined by DDC or EOC on each of the incoming response units, such as DMAT, and screen individual health and medical volunteers.

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- j. Assist in the identification and proof of licensure and document from designated participants assigned by DDC or EOC.
 - k. Assist DDC or designee in coordinating the location, procurement, screening, and allocation of health and medical supplies and resources, including human resources, required to support health and medical operations.
 - l. Provide pertinent and allowed information to the news media on casualties and instructions to the public on dealing with public health response. The information given will be determined by the JIC and DDC.
 - m. Assist in the coordination of laboratory services required in support of emergency health and medical response in accordance with state and federal guidelines as outlined by the SOC and DDC.
 - n. Coordinate the various immunization campaigns with public/private partners as indicated by the SOC and DDC. Any public health quarantines, if required, will be coordinated by the medical authority and the appropriate legal entities (i.e., Justice of the Peace, District Judges)
 - o. Coordinate inspection of food products, water, and other consumables that were exposed to hazards to be assessed by local and state public health inspectors/sanitarians. In the event of large-scale elimination of contaminated consumables, efforts will be coordinated between local authorities and private entities which deal with eradication of contaminated consumables.
 - p. Support state and federal agencies in coordinating the inspection of damaged buildings for health hazards.
 - q. Disposal of small domestic animals will be coordinated by the various local animal control offices. The disposal of large domestic animals will be coordinated by the state animal extension office or designee.
 - r. Coordinate the implementation of measures to prevent or control disease vectors, such as flies, mosquitoes, and rodents.
 - s. Establish preventive health services, including control of communicable diseases, such as influenza, particularly in shelters.
 - t. Monitor food handling and sanitation in emergency facilities.
3. Emergency Medical Services will
- a. Establish and maintain field communications and coordination with other responding emergency teams (i.e., medical, fire, police, public works).
 - b. Continue radio and/or telephone communications with hospitals.
All Emergency Medical Services (EMS) requested to assist will be coordinated through Hidalgo County Emergency Management Coordinator. EMS services will be monitored at EOC through EMSsystems.
4. Hospitals will
- a. Implement internal and/or external disaster plans.
 - b. Report the conditions at the facility and the number and type of available beds to health and medical services staff in the EOC through the EMSsystems, Regional Medical Operation Center, and TRAC.

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- c. Establish and maintain field and inter-facility medical communications.
 - d. Provide medical guidance, as needed, to EMS.
 - e. Coordinate with EMS, other facilities, and any medical response personnel at the scene to ensure the following is accomplished:
 - Casualties are transported to the appropriate medical facility.
 - Patients are distributed to and among hospitals both inside and outside the area based on severity and types of injuries, time and mode of transport, capability to treat, and bed capacity.
 - Consider special designations such as trauma centers and burn centers.
 - f. Consider the use of clinics to treat less than acute illnesses and injuries.
 - g. Coordinate with local emergency responders to isolate and decontaminate incoming patients, if needed, to avoid the spread of chemical or bacterial agents to other patients and staff.
 - h. Coordinate with other hospitals and with EMS on the evacuation of affected hospitals, if necessary. Evacuation provisions should specify where the patients are to be taken.
 - i. Depending on the situation, deploy medical personnel, supplies, and equipment to the disaster site(s) or retain them at the hospital for incoming patients.
 - j. Establish and staff a reception and support center at each hospital for the relatives and friends of disaster victims who may converge there in search of their loved ones.
 - k. Provide patient identification information to the American Red Cross upon request.
5. Independent School Districts will
- a. Coordinate emergency health and medical activities within their school district.
 - b. Rapidly assess health and medical situation.
 - c. Oversee and coordinate the efforts of disease reporting emergencies, assess their needs, and obtain additional resources.
 - d. Coordinate with local health department and neighboring hospitals and/or medical organizations on matters related to notifiable conditions.
 - e. Coordinate the location, procurement, screening, and allocation of health and medical supplies and resources, including human resources, required to support health and medical operations.
 - f. Coordinate immunization campaigns with appropriate agencies if required.
 - g. Establish preventive health measures, including control of communicable diseases, particularly in shelters.
 - h. Implement internal and/or external medical/disaster plans.
 - i. Provide medical guidance, as needed, to students, parents, and staff.

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- j. Coordinate with school district Risk Managers/Safety Managers to avoid the spread of chemical or bacterial agents to students and staff.
 - k. Coordinate with Risk Manager/Safety Managers on the evacuation of affected schools, if necessary. Evacuation provisions should specify where the students and staff are to be taken.
 - l. Depending on the situation, deploy medical personnel, supplies, and equipment to the school(s) involved.
 - m. Establish and staff a reception and support center at each school for the parents/guardians of affected students or staff.
 - n. Continue to evaluate and report on a 24/7 basis any urgent diseases/notifiable conditions to the local health department.
 - o. Develop an Emergency Operation Plan to include Notifiable Conditions and or public health outbreaks.
 - p. Utilize Strategic National Stockpile protocols for managing and dispensing of vaccinations or prophylaxis.
6. The Disaster Behavioral Health Authority will
- a. Ensure that appropriate behavioral health services are available for disaster victims, survivors, bystanders, responders and their families, and other community caregivers during response and recovery operations.
7. The Justice(s) of the Peace/Medical Examiner will
- a. Conduct inquests for the deceased and prepare death certificates.
 - b. Order or conduct autopsies, if necessary, to determine cause of death.
 - c. Order or conduct forensic investigations to identify unidentified bodies.
 - d. Authorize removal of bodies from incident sites to morgue/mortuary facilities.
 - e. Provide information through the PIO to news media.
8. Law Enforcement will
- a. Upon request, provide security for medical facilities.
 - b. Conduct investigations of deaths not due to natural causes.
 - c. Locate and notify next of kin.
9. Mortuary Services with County-elected Justice of the Peace will
- a. Provide for the collection and care of human remains.
 - b. Establish temporary holding facilities and morgue sites, if required.
 - c. Coordinate, as necessary, with emergency health and medical services.
10. The County Planning Administrator, Buildings & Grounds, and the County Fire Marshall will
- a. Inspect damaged County operated medical facilities.
 - b. Make temporary repairs to County operated medical facilities.
11. The Hidalgo County EOC will
- a. Coordinate in restoring utility service to key county medical facilities through prioritization.
12. The Public Information Officer (PIO) will

- a. Disseminate emergency public information provided by health and medical officials. The Director has primary responsibility for coordination of health & medical information intended for release through public media during emergency operations, with support provided by those public health and medical services responsible for particular aspects of the response.

Direction & Control

General

1. The Director, working as a staff member of the Hidalgo County emergency organization, supported by an appropriate network, shall direct and coordinate the efforts of local health and medical services and agencies/organizations during major all-hazards emergencies and disasters requiring an integrated response.
2. Routine health and medical service operations may continue during less severe emergency situations. Direction and control of such operations will be by those that normally direct and control day-to-day health and medical activities.
3. External agencies providing health and medical support during emergencies are expected to conform to the general guidance provided by our senior decision-makers and carry out mission assignments directed by the Incident Commander or the EOC. However, organized response units will normally work under the immediate control of their own supervisors.

Incident Command System - EOC Interface

If both the EOC and an ICP are operating, the Incident Commander and the EOC must agree upon a specific division of responsibilities for emergency response activities to avoid duplication of effort as well as conflicting guidance and direction. The EOC and the ICP must maintain a regular two-way information flow.

Disaster Area Medical Coordination

1. In emergency situations involving significant damage to Hidalgo County medical facilities, each facility shall be responsible for determining its overall status and compiling a consolidated list of resources or services needed to restore vital functions. Each operating unit will report its status and needs to a single contact point designated by the facility. This facility contact should consolidate the data provided and report it to the Health and Medical staff in the EOC.
2. The Director must be prepared to receive the consolidated requests and channel various elements of those requests to those local health and medical facilities as well as other departments, agencies, and organizations that can best respond. Requests for resources that cannot be obtained through normal sources of supply or through mutual aid by health and medical facilities outside the local area should be identified to the Resource Management staff in the EOC for action.

Line of Succession

To ensure continuity of health and medical activities during public health threats or actual public health disasters, the following line of succession is established for the Director:

The line of succession for administration:

1. Hidalgo County Judge
2. Hidalgo County Emergency Management Coordinator
3. Director, Hidalgo County Health & Human Services
4. Medical Authority, Hidalgo County
5. Assistant Director, Hidalgo County Health & Human Services

The line of succession for Medical:

1. Medical Authority, Hidalgo County
2. Regional Medical Authority, Regional Director Texas Department of State Health Services Region 11
3. Director, Hidalgo County Health & Human Services
4. Assistant Director, Hidalgo County Health & Human Services

See Concept of Operations Section, Emergency Management Coordination of Hidalgo County's Emergency Management Basic Plan.

Readiness Levels

State Levels of Readiness

Level 4: Normal Conditions

Emergency incidents occur and local officials are notified. One or more departments or agencies respond to handle the incident.

- a. Review and update plans and related SOPs.
- b. Review assignment of all personnel.
- c. Coordinate with local private industries on related activities.
- d. Maintain a list of health & medical resources.
- e. Maintain and periodically test equipment.
- f. Conduct training, drills, and exercises that are NIMS compliant.
- g. Develop task assignments and identify potential resource shortfalls.
- h. Establish a liaison with private health and medical facilities.

Level 3: Increased Readiness

Increased Readiness refers to a situation that presents a greater potential threat than "Level 4" but poses no immediate threat to life and/or property.

- a. Check readiness of health and medical equipment, supplies, and facilities.
- b. Correct any deficiencies in equipment and facilities.
- c. Check readiness of equipment, supplies, and facilities.
- d. Correct shortages of essential supplies and equipment.
- e. Update incident notification and staff recall rosters.
- f. Notify key personnel of possible emergency operations.
- g. Review procedures for relocating patients and determine the availability of required specialized equipment if evacuation of health & medical facilities may be required.

Level 2: High Readiness

High Readiness refers to a situation with a significant potential and probability of causing loss of life and/or property.

- a. Alert personnel to the possibility of emergency duty.
- b. Place selected personnel and equipment on standby.
- c. Identify personnel to staff the EOC and ICP if those facilities are activated.

Level 1: Maximum Readiness:

Maximum Readiness refers to situations that hazardous conditions are imminent.

- a. Mobilize health and medical resources to include personnel and equipment.
- b. Dispatch health and medical representative(s) to the EOC when activated.

See Readiness Levels Section in Hidalgo County's Emergency Management Basic Plan.

Administration & Support

Reporting

In addition to reports that may be required by their parent organizations, health & medical elements participating in emergency operations should provide appropriate situation reports to the Incident Commander, or if incident command operation has not been established, to the Chief Health Administrative Officer in the EOC. The Incident Commander will forward periodic reports to the EOC as per NIMS compliance.

Pertinent information from all sources will be incorporated into the Initial Emergency Report and the periodic Situation Report that is prepared and disseminated to key

officials, other affected jurisdictions, and state agencies during major emergency operations.

Maintenance and Preservation of Records

1. Maintenance of Records

Health and medical operational records generated during an emergency will be collected and filed in an orderly manner. This is so a record of events is preserved for use in determining the possible recovery of emergency operations expenses, response costs, settling claims, assessing the effectiveness of operations, and updating emergency plans and procedures.

2. Documentation of Costs

Expenses incurred in carrying out health and medical services for certain hazards, such as radiological accidents or hazardous materials incidents, may be recoverable from the responsible party. Hence, all departments and agencies will maintain records of personnel and equipment used and supplies consumed during large-scale health and medical operations. Refer to Administration, Finance and Logistics Section in Hidalgo County's Emergency Management Basic Plan.

3. Preservation of Records

Vital health & medical records should be protected from the effects of a disaster to the maximum extent possible. Should records be damaged during an emergency, professional assistance for preserving and restoring those records should be obtained as soon as possible.

Post Incident Review

For large-scale emergencies and disasters, the County Judge/Mayor/City Manager/EMC shall organize and conduct a review of emergency operations by those tasked in this plan in accordance with the guidance provided in Post Incident and Exercise Review Section of Hidalgo County's Emergency Management Basic Plan. The purpose of this review is to identify needed improvements in this plan, procedures, facilities, and equipment. Health and medical services that participated in the emergency operations that are being reviewed should participate in the post-incident review.

Exercises

Local drills, tabletop exercises, functional exercises, and full-scale exercises based on the hazards faced by Hidalgo County should periodically include health and medical service operations. Additional drills and exercises may be conducted by various agencies and services for the purpose of developing and testing abilities to make effective health and medical response to various types of emergencies.

Plan Development & Maintenance

1. The Hidalgo County Health and Human Services Department Director is responsible for maintaining and reviewing the Public Health & Medical Services

Hidalgo County
Public Health & Medical Services Plan

Plan annually. Recommended changes to this plan should be forwarded as needs become apparent and may reflect any changes within our jurisdictional risks and/or community capabilities.

2. The Public Health & Medical Services Plan and its appendices are living documents and require revision to account for changes in roles/responsibilities and resources within Hidalgo County such as the acquisition of new equipment, training of staff, and increased partnerships from the private sector.
3. Once the Public Health & Medical Services Plan has been updated, the Hidalgo County Health and Human Services Department Director will present to Commissioner's Court for final adoption and ratification. The Public Health & Medical Services Plan is updated and presented to Commissioner's Court every five years with input from Emergency Management and various stakeholders. Departments and agencies assigned responsibilities in the Public Health & Medical Services Plan are responsible for developing and maintaining SOPs. Copies of the Public Health & Medical Services Plan are kept at HCHHSD's main offices at **1304 S. 25th Avenue, Edinburg, TX 78542** in the following locations:

Office of Administration

Public Health Emergency Preparedness Division (PHEP)

Clinical Health Services

Information Technology Services

Safety Officer

Hidalgo County Emergency Operations Center (EOC)

Hidalgo County Emergency Management Coordinator

Each HCHHSD division manager is responsible for informing and instructing public health personnel about the location of the plan copies, as well as each employee's emergency response role and responsibilities. The supervisors/managers are also responsible for ensuring that employees attend appropriate training, according to their assigned response tier.

Contributors

This section provides a list of Hidalgo County personnel or agencies that contributed to the development of this document. The planning of the Public Health & Medical Services Plan is a process that has taken years to accomplish through the shared experience and expertise of many local, regional, state, and federal entities. Additionally, HCHHSD is in communication with our bi-national partners through information sharing with Mexico's public health officials through our partnership with the Texas Department of State Health Services (DSHS).

Hidalgo County
Public Health & Medical Services Plan

The unique challenge for Hidalgo County Health and Human Services are the public health complications that occur located along the US/Mexico border. Many of the public health threats and potential bi-national events are discussed, evaluated, and exercised through Emergency Management with our various local, state and federal stakeholders to assure proper response in the event of a bi-national incident. The **Public Health & Medical Services Plan Planning Committee/Stakeholders** include:

Hidalgo County Health & Human Services Department

Public Health Emergency Preparedness Division (PHEP)

Administration

Director of Clinical Services

Safety Officer

Finance Officer

Hidalgo County Office of Emergency Management

Emergency Management Coordinator

County Finance Director

Local Mental Health Authority

Tropical Texas Behavioral Health

Lower Rio Grande Valley Development Council (LRGVDC)

Homeland Security Advisory Council (HSAC)

Hospital Preparedness Program (HPP)

References

1. Annex H (Health & Medical Services) to the *State of Texas Emergency Management Plan*.
2. Texas Department of State Health Services (DSHS) website: www.dshs.state.tx.us.
3. DSHS Public Health Region website: www.dshs.state.tx.us/brlho/regions.html. This site contains information on the counties served by the 11 DSHS Public Health Regions.

Appendices

Appendix 1: Coordination and Control

Attachment 1 – Logistics

Attachment 2 – Responder Safety and Health

Attachment 3 – Volunteer Coordination

Attachment 4 – Mutual Aid and External Resources

Appendix 2: Communication Plan

Attachment 1 - Emergency Warning & Notification Standard Operating Guide

Attachment 2 - Crisis and Emergency Risk Communications Plan

Appendix 3: Community Recovery

Attachment 1 – Continuity of Operations Plan

Appendix 4: Mass Fatality Management Plan

Attachment 1 – Surge Capacity

Attachment 2 – Hidalgo County Justice of the Peace

Attachment 3 – Local Resources

Attachment 4 – Fatality Management Forms

Attachment 5 – Release of Remains Protocol

Attachment 6 – Hidalgo County Population Density

Appendix 5: Disaster Behavioral Health Services

Appendix 6: Biological Terrorism Response Plan

Attachment 1 – Probable Biological Weapon of Mass Destruction

Appendix 7: Pandemic Infectious Disease Response Plan

Attachment 1 – COVID-19

Appendix 8: Medical Countermeasures

Attachment 1 – Receipt, Staging, and Storage (RSS)

Attachment 2 – Coordination with Treatment Centers

Attachment 3 – Inventory Control

Attachment 4 – Repackaging

Attachment 5 – Security

Attachment 6 – Dispensing

Attachment 7 – Command & Control

Attachment 8 – Tactical Communications

Attachment 9 – First Responder Prophylaxis & Vaccination

Attachment 10 – CHEMPAK Program

Appendix 9: Epidemiology & Laboratory

Attachment 1 – Electronic Investigation Guide 2022

Attachment 2 – DSHS Notifiable Conditions 2023

Attachment 3 – HCHHSD Report Form

Attachment 4 – DSHS Epi Case Criteria Guide

Attachment 5 – Isolation and Quarantine

Appendix 10: Mass Care Support Plan

Attachment 1 – Evacuation

Attachment 2 – Shelter-in-Place

Attachment 3 – Hospital and Medical Services Coordination

Appendix 11: Environmental Health Plan

Appendix 12: Workforce Development Plan