TexasHRH: Hurricane Relocation with COVID-19

Context:
The Texas Hurricane Response Hub (TexasHRH), led by Texas Health Institute, is funded by the Centers for Disease Control and Prevention through the National Network of Public Health Institutes. Texas is one of five funded initiatives along with Louisiana, Georgia, Florida, and Puerto Rico. TexasHRH convened a Project ECHO series to discuss six topics regarding Hurricanes in the context of COVID-19. Our participants are primarily managers/specialists charged with hurricane preparedness/operations for hospitals, FQHCs, RACs, and emergency preparedness organizations. We also have representatives from DSHS, Texas Hospital Association, Texas Nurses Association, Texas Medical Association, and Texas Health Care Association. Virtually, every participant is also responsible for some part of their organization responding to COVID-19.

The Relocation Session on July 22, 2020, focused on relocating people from areas impacted by the disaster event. Nicole Swanton, Public Health Preparedness Coordinator for Michigan's Midland County Department of Public Health, described their response during the 500 year flood event in May, 2020. Midland, Michigan had a COVID-19 shelter-in-place order during the flood event. ECHO Session participants identified five themes with questions that should be considered and acted on. The themes are not described in CDC's current guidance on disasters, severe weather, and COVID-19. Tropical Depression 8 is forecasted to become Tropical Storm Hanna by Friday, July 24. Currently, a Tropical Storm Watch has been issued for much of the Texas Coast from Port Mansfield to High Island. The storm elevates the necessity for organizational leaders to ensure these themes and questions are considered with the ongoing planning in a timely manner.


Key Themes and questions

1. Evacuations to congregate and non-congregant housing, alternate evacuation cities
   a. People may be fearful in letting shelters know they are, or have been, COVID-19 positive and recovered or have been quarantined. Facilities should plan for where these people should be housed. Local Health Departments should consider actions if hotels/motels push back on housing COVID-19 positive people or families. Cities outside normal evacuation routes but still provide shelter for evacuees, should plan for displaced people who are positive (and non-hospitalized),

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recovered, or have been quarantined. In the past they may have had the ability to pay out-of-pocket costs. Today, evacuees may not be able to pay.

b. Determine where to house and provide support for positive, quarantined, or people who test positive on site. This includes people who may be running high temperatures.

c. Consider opening non-operating schools, college campus classrooms, RV parks with RV rentals for positive or quarantined families.

d. Prepare for people to show up with campers, RVs, or other vehicles and not enter shelters due to COVID-19 fear.

e. Be prepared for families to still violate social distancing when seeing relatives, neighbors or friends and having physical contact/hugging.

f. Recognize that no amount of planning will prepare your teams for a double disaster.

g. Determine how best to work with and support volunteers who arrive on scene. Volunteers will need to be screened for COVID-19 before starting to help. Once working, volunteers will need to be supported and encouraged in new ways since they are dealing with COVID-19 and a hurricane.

2. Mitigation

a. In addition to CDC guidance and local health authority policies, consider reducing buffet meals and requesting/purchasing packaged meals.

b. Consider conducting COVID-19 testing after people have been placed to reduce bottleneck potential.

3. Privacy

a. Safety and privacy are important with COVID-19. It's important to mitigate individuals and families being labeled or discriminated against because they are positive or have been quarantined. It is also important to ensure at-risk communities are not further marginalized, including LGBTQ+, impaired, ethnic and religious people.

b. There are allowable places in the Law to share privileged information. Develop plans to ensure privacy and respect are maintained where sharing disaggregated or aggregated information from more than one database(s).

4. Tracking

a. EMS wristbands with bar and QR codes associated with each tag were purchased with Hurricane Harvey funds. Determine if the Regional Advisory Councils have these in place. Ensure people have been trained on how to quickly enter

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information for the wristband and convey how the privacy of this information will be respected with COVID-19.

b. Be wary and think through the implications in color coding wristbands or other identifiers.

5. **Communications**

a. Consider how to empower people to triage the resources and services they need while also respecting their privacy and that of others.

b. Be prepared for the media to question wristbands and labeling positive, recovered, or quarantined people. This includes how information is shared to manage the public health requirements since we have not dealt with a hurricane and COVID-19 before.

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