Addressing the Zika Virus in Texas

2017 AMCHP Annual Conference

The Texas Title V program has been working closely with the Texas Birth Defects Epidemiology and Surveillance Branch and others within and outside of the Texas Health and Human Services System to address the emergence of Zika.
Current Zika Testing Status of Fetuses/Infants Delivered in Texas to Mothers with Evidence of Zika Infection During Pregnancy

<table>
<thead>
<tr>
<th>Evidence of Zika Infection</th>
<th>No Evidence of Zika Infection</th>
<th>Pending/Not Tested</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>20</td>
<td>19</td>
<td>48</td>
</tr>
</tbody>
</table>

For more information, email birthdefects@dshs.state.tx.us

Grant Funding

- CDC Surveillance Grant
- Evaluate the ascertainment of birth defects using other data sources
- Increase program reach
- Examine referrals
- Conduct interventions
- Evaluate critical congenital heart disease screening
- Evaluate outcomes of babies with birth defects (survival, morbidity, whether the baby received age-appropriate surgeries, etc.)
Grant Funding

- CDC Microcephaly/Zika Grant
  - Rapid ascertainment of microcephaly and other Zika-related conditions
  - Conduct surveillance
  - Examine referrals
  - Evaluate outcomes of babies
  - Interviews with moms of babies with microcephaly/Zika
  - Family outreach – Texas Parent to Parent

Flow Chart

- In July 2016, DSHS convened a workgroup to discuss the system of services for children and families affected by Zika virus.
- A flow chart depicting the system of services for children with Congenital Zika Syndrome was developed in collaboration with these workgroup members.
Ongoing Family Follow-up and Program Communication

DHHS Birth Defects Epidemiology and Surveillance (BDES) Branch: BDHS does not currently conduct referral or follow-up with families or other programs. Proposed referral and follow-up includes the following:
- Extract new, rapidly reported cases of Zika-related birth defects from the TDER on a monthly basis and determine vital status of each case: include deceased case infants
- Refer cases with infants’ diagnostic and family contact information to DHHS regional social workers via CHCIN Systems Development Group in the region where the family resides
- Conduct follow-up through evaluation questions that are provided to and completed by regional social work staff and returned to BDHS on a monthly basis.

CHCIN Systems Development Group (Systems Development): Currently families are referred with no follow-up and there is minimal communication with other programs. Potential new efforts include:
- Immediate referral to DHHS Specialized Health and Social Services Program Manager in the Health Service Region (HSR) in which the family resides and follow-up within one month to ensure that the HSR connected with the family. If the family has not been connected to the HSR, Systems Development will assist in connecting (if needed) requested by the HSR.
- Provide ongoing follow-up for cases referral to DHHS Specialized Health and Social Services Program Manager or CHCIN Systems Development for cases requiring ongoing follow-up.

DHHS Specialized Health and Social Services (DHSS) Regional Case Management: Case Management staff provide follow-up services to families as outlined in the family’s individualized Service Plan to ensure they have made connections to available resources. Current communication with Systems Development is made through HAGS Case Management or directly through the family’s HSR. Systems Development will provide ongoing follow-up and make direct referrals to provide ongoing follow-up for cases referral to DHHS Specialized Health and Social Services Program Manager or CHCIN Systems Development for cases requiring ongoing follow-up.

Early Childhood Intervention (ECI): When children are referred to ECI, the family is contacted and if they agree to ECI services, ECI determines eligibility. ECI case management services will connect them to all available resources. If the parent provides consent to provide information to ECI, consent must be specific to the program. ECI is providing information to, and be specific about the kind of information being shared.

Families who decline services typically do not provide ECI with consent to share information with the referral source. At that point, ECI can refer them back to the DHHS SMS Regional Case Management or CHCIN Systems Development to potentially access resources through these agencies.

January 13, 2017

Pilot

- In conjunction with development of the flow chart, it was decided to pilot the process depicted in the flow chart as an initial step toward implementation.
- The pilot will be limited to statewide cases of severe microcephaly (< 3rd percentile head circumference) and Congenital Zika Syndrome.
- Cases captured in the Texas Birth Defects Registry beginning 7/1/2016 and onward and meeting the dx criteria above will be included in the pilot.
Zika in Texas

What's New?
- Jan 27, 2017 - Zika in Texas Brief by Dr. John Hellerstedt, DHS Commissioner
- Jan 25, 2017 - First Zika Infection in a Pregnant Texas Resident Who Did Not Travel Outside the State
- Dec 22, 2016 - Additional Localized Zika Cases in Cameron County
- Dec 14, 2016 - Public Health Officials Outline Zika Testing Guidance
- Dec 9, 2016 - Texas Standardized Additional Local Zika Case in Cameron County
- Dec 6, 2016 - Recorded properties by DHS Commissioner, John Hellerstedt, AB, "Zika: Looking Ahead"

Reported Cases
- As of: January 15, 2017

PROTECT YOURSELF FROM ZIKA

What is Zika?
Zika is a virus spread through the bite of certain species of mosquitoes. It can cause fever, rash, joint pain, and conjunctivitis (red eyes).

Should I Be Concerned?
Most of the people infected with Zika have mild or no symptoms. For those who do develop symptoms, illness is generally mild and typically lasts a few days to a week. The most common symptoms of Zika virus infection are fever, rash, joint pains, and conjunctivitis (red eyes).

Can Zika Spread?
Zika virus can be spread through sexual contact. The virus can be spread through semen or vaginal fluids from an infected person for at least 6 days after symptoms begin.

What Can I Do to Prevent Zika?
Take these simple steps to protect yourself and your loved ones from the Zika virus.

WHEN YOU'VE GONE OUT:
- Just 2- to 3-day protection.
- Use insect repellent with DEET, picaridin, or oil of lemon eucalyptus.
- Avoid standing water and areas where mosquitoes breed.
- Use screens and window纱ds.

WHEN YOU'RE HOME:
- Mosquitoes don't bite indoors.
- Mosquitoes are out at dusk and dawn.
- If you see mosquitoes, use insect repellent or screens and window纱ds.

Protect yourself while outdoors.
- Limit outdoor activities during peak mosquito times.
- Use long sleeves and pants.
- Wear insect repellent. Look for repellent that is EPA-approved.
- Keep mosquitoes out of your home.
- Use air conditioning and intact window screens.
- Locate all standing water and around your home.

3/15/2017
Zika in Texas Podcast

Texas is on the front lines combating Zika, especially since locally transmitted cases have been identified in the state. Learn how the virus is projected to affect Texas and how health-care professionals can assess, test, and protect vulnerable populations, especially pregnant women and their babies. This podcast offers valuable information and guidance for all Texas health-care professionals who provide direct patient care.

Video:
There are hundreds of ways to connect with other parents, including through this website.

Navigate Life Texas Wins Two Awards!

Local Disability Contacts
Thank you

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