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PURPOSE

The purpose of this bench book is to serve as a guide for judges who evaluate public health control measures, such as quarantine and isolation, particularly in the face of a catastrophic event such as a pandemic flu. This area of the law is in sufficient flux that the statutes cited and principles stated in this bench book should not be considered definitive at a later date but can be used as a basis from which to further research and understand this area of law.

DISCLAIMER

Viewpoints reflected in this publication do not represent any official policy or position of the University of Houston, the University of Houston Law Center, or the University of Houston Health Law and Policy Institute.
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CHAPTER 1
INTRODUCTION

Since September 11, 2001, legislatures and courts have begun to examine previously existing law on public health emergencies, including control measures such as quarantine, and how the courts would be run should such an emergency strike. In Texas, the need to understand these contingencies becomes increasingly important each hurricane season, as was demonstrated during the recent disasters caused by Hurricanes Katrina and Rita.

The Texas Constitution discusses Texas’ open courts policy, which is based on the importance of everyone having access to justice and to a day in court. The likelihood that this important aspect of our society could be disrupted during a public health emergency, such as a major hurricane or a more long-term emergency such as a pandemic flu, has led to the creation of this bench book and the forms included in its appendix. The purpose of this book is to lay out briefly which laws govern during a public health emergency and what role the courts play in ensuring that the balance between public safety and individual rights is not forgotten.

While laws regarding quarantine and isolation of individuals, property, and carriers are included in this book, it is likely that in the case of a massive, wide-scale disaster that the provisions of the Texas Disaster Act and those on area quarantine would be the most widely used. Under the Texas Disaster Act, the Governor may “suspend the provisions of any regulatory statute prescribing the procedures for conduct of state business or the orders or rules of a state agency if strict compliance with the provisions, orders, or rules would in any way prevent, hinder, or delay necessary action in coping with a disaster.”1 The Texas Disaster Act does not explicitly give the Governor any authority over the judicial branch or allow the closing of the courts. Texas area quarantine law is also more streamlined than that involving individuals (see Chapter 4 for more information on area quarantine law).

A Note on Terminology

The use of certain terms in this area of law can be confusing. Texas law does not contain definitions of “isolation” and “quarantine” that apply to the sections of law discussed in this bench book.2 “Control measures” are defined through a list of terms that are not themselves defined,3 and the word “management” when referring to management of a person with a communicable disease is also undefined.

In common speech and occasionally in the law, the terms isolation and quarantine are used interchangeably, but they have different meanings for clinicians. Historically, quarantine referred to detention under enforced isolation of those suspected of carrying a communicable disease.

2 Quarantine and isolation with respect to infected animals are defined in Texas Health & Safety Code § 826.002 and 25 TAC § 169.22 respectively, but there are no broader definitions.
3 See Texas Health & Safety Code § 81.082(f).
disease, often with a 40 day timeframe. Currently, the clinical definition of quarantine means the restriction of healthy people who have been exposed to a communicable disease during the period of communicability in order to prevent transmission of the disease.\textsuperscript{4} Isolation is a control measure directed at people known to be infected with a communicable disease and can be imposed based on disease status alone or based on the combination of disease status and risky behaviors.\textsuperscript{5} A quarantine can therefore become an isolation if the person tests positive for the disease during the quarantine period and the control measures are continued.

These different uses of terminology can further complicate the intersection of public health and the law. Ensuring that all parties involved know how the terms are being used is key to effective public health law implementation.

\textsuperscript{5} Id. at 210.
CHAPTER 2
FEDERAL V. STATE JURISDICTION

Introduction

The main control measures used during a public health emergency are quarantine and isolation. The terms quarantine and isolation are both used with respect to separating those infected with or exposed to a highly contagious illness. A quarantine involves separating people who have potentially been exposed to the illness but are not yet ill, while isolation relates to those who are already infected. Both state and local health departments have the authority to impose quarantines. In addition, federal authorities may also intervene as they find necessary, as further explained below.

Federal Government

Federal public health powers are vested in the President, Department of Health and Human Services, and the Centers for Disease Control and Prevention. The authority for federal quarantines and other similar public health control measures arises from the Commerce Clause. The federal government's power to tax and spend for the general welfare also plays a role in federal public health authority.

The key role of the President is to define communicable diseases through executive order. The Secretary of Health and Human Services' authority relates only to the communicable diseases thereby defined. With that caveat, the Secretary of Health and Human Services may make and enforce regulations to prevent the introduction and spread of communicable diseases.

Federal law also authorizes the Secretary to care for and treat quarantined individuals and assist states and localities in enforcing their own quarantine orders. The Secretary may, in turn, request help from states and localities in enforcing federal quarantines. Violation of a federal quarantine order carries fines of up to $1,000, one year in jail, or both.

Additionally, the Centers for Disease Control and Prevention have proposed regulations that would expand the use of isolation and quarantine orders while limiting individual rights that courts have previously required. As of February 2008, final regulations have not been published.

6 Kathleen S. Swendiman and Jennifer K. Elsea, FEDERAL AND STATE QUARANTINE AND ISOLATION AUTHORITY, 1, Congressional Research Service, Order Code RL33201 (last updated January 23, 2007); see also p. 11.
7 Id. at 2.
8 Id. at 4. The Commerce Clause is Article I, Section 8, Clause 3 of the United States Constitution.
10 42 U.S.C. § 264(b).
but these regulations show the flux in isolation and quarantine law since September 11, 2001 and the outbreak of Severe Acute Respiratory Syndrome (SARS) in 2002 and 2003.

**Texas**

The power to quarantine and impose isolation is a well established power of the states as an exercise of their police power. It is extremely useful in order to protect the public from contagious disease or illness.

In Texas, the Communicable Disease Prevention and Control Act establishes the control measures to be used and how to use them in response to a communicable disease outbreak. On the local level, the local health authority (HA) is the main contact for making and implementing control measures and ensuring public safety. The duties of the HA are specified in law and include quarantine authority. Rights and duties during public health emergencies are delegated in various manners between the Commissioner of Health, the Texas Department of State Health Services (DSHS), and the HA. Ensuring cooperation between these entities is essential to responding adequately to a public health emergency.

Under Texas law, HAs are competent and reputable physicians licensed and residing in Texas who serve for a term of two years, with no term limits, to perform duties prescribed by law as necessary to implement and enforce laws to protect the public health and any duties prescribed by DSHS. The duties of an HA include: establishing, maintaining, and enforcing quarantine in the HA's jurisdiction; aiding DSHS in relation to local quarantine, inspection, disease prevention and suppression, birth and death statistics, and general sanitation within the HAs jurisdiction; reporting the presence of contagious, infectious, and dangerous epidemic diseases in the jurisdiction to DSHS; reporting to DSHS on any subject on which it is proper for a report to DSHS to be made; and aiding DSHS in enforcing proper rules requirements, ordinances, sanitation laws, quarantine rules, and vital statistics collection. HAs may be removed for cause.

HAs must be appointed in municipalities or counties with established local health departments or public health districts as well as in municipalities or counties receiving grants from DSHS for essential public health services. The governing body of the municipality or the commissioners court of a county appoints the HA if the jurisdiction does not have an organized

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16 Texas Health & Safety Code, Chapter 81. Control measures are defined as including: immunization, detention, restriction, disinfection, decontamination, isolation, quarantine, disinfection, chemoprophylaxis, preventive therapy, prevention, and education.

17 See Texas Health & Safety Code, Chapter 121.

18 Texas Health & Safety Code § 121.022.

19 Texas Health & Safety Code § 121.023.

20 Texas Health & Safety Code § 121.024.

21 Texas Health & Safety Code § 121.025.

22 Texas Health & Safety Code §§ 121.033, 45.

23 Texas Health & Safety Code § 121.028.
local public health department or district. In areas with organized local health departments and/or public health districts, the department or district director is appointed by the municipality's governing body or the commissioners court. The director acts as the HA unless the HA is not a physician, in which case the director appoints the HA.25

24 Texas Health & Safety Code § 121.028.
25 Texas Health & Safety Code §§ 121.033, 45.
Various levels of authority and responsibility for actions regarding communicable diseases in Texas are held by the Governor, Department of State Health Services, local health authorities, and individual Texans. The Texas Communicable Disease Prevention and Control Act (Chapter 81 of the Health & Safety Code), along with the Texas Disaster Act (Chapter 418 of the Texas Government Code), specify the roles of the various players. This chapter will largely be a review of the relevant statutes, with the goal of organizing the information according to the particular people or entities involved and to help readers more easily find relevant sections.

**Statewide Authority**

**Disaster Declaration**

The Governor’s authority during a public health emergency is based on the Texas Disaster Act.\(^\text{27}\) The Governor has the authority to issue related executive orders and is granted the power to declare a state of disaster and to, thereby, initiate the state emergency management plan and suspend laws relating to the normal order of business for the government and state agencies.\(^\text{28}\) The Governor also may order the evacuation of affected areas.\(^\text{29}\)

Under the Texas Communicable Disease Prevention and Control Act, the Commissioner of Health is responsible for statewide implementation and administration of communicable disease control measures in Texas.\(^\text{30}\) Additionally, in times of public health disasters, the Commissioner may require reports regarding communicable diseases in addition to those already required by rule.\(^\text{31}\) The Commissioner may declare a public health disaster for a period of not more than 30 days and renew that declaration for an additional 30 days.\(^\text{32}\)

**Reportable Diseases and Investigations**

The Department of State Health Services (DSHS) defines which diseases are considered reportable diseases in Texas and maintains related registries.\(^\text{33}\) Under suspicion or with evidence of a reportable disease, a report must be made to the local health authority by the following individuals: dentists, veterinarians, local school authorities, and the person in charge of a

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26 Please see the discussion in Chapter 2 on the different uses of terms by clinicians versus statutory use of terms.
27 See Texas Government Code, Chapter 418.
29 Texas Gov. Code § 418.018.
30 Texas Health & Safety Code § 81.004.
31 Texas Health & Safety Code § 81.041.
32 Texas Health & Safety Code § 81.082.
33 Texas Health & Safety Code § 81.041.
clinical or hospital laboratory, blood bank, mobile unit, or other facilities performing laboratory examinations.\textsuperscript{34} Reports to the local health authority or DSHS upon suspicion or knowledge of a reportable disease must be made by: a professional registered nurse; an administrator or director of a nursing home, personal care home, maternity home, adult respite care center, or adult day-care center; an administrator of a home health agency; an administrator or health official of a public or private institution of higher education; an owner or manager of a restaurant, dairy, or other food handling or processing establishment or outlet; a superintendent, manager, or health official of a public or private camp, home, or institution; a parent, guardian, or householder; a health professional, including a physician; an administrator or health official of a penal or correctional institution; emergency medical service personnel; a peace officer; or a firefighter.\textsuperscript{35} Local health authorities must pass all reports along to DSHS.\textsuperscript{36}

DSHS also has the authority to investigate cases of communicable diseases in the state and determine the status of any outbreaks; the health authority at the local level must cooperate with DSHS during these investigations.\textsuperscript{37} An investigator for DSHS may take samples as needed for testing and must offer samples of the same materials to the owner of the material in question.\textsuperscript{38} Corresponding to the right to take samples is the right of inspection and right of entry into non-residential areas.\textsuperscript{39}

**Implementation of Control Measures**

DSHS may preempt a local health authority with respect to the administration of control measures at the local level and may modify the control measures (see p. 23 for discussion of control measures) implemented by a health authority.\textsuperscript{40} As needed, DSHS may also return nonresidents to the custody of the relevant agency in their home state.\textsuperscript{41}

DSHS has the authority, with reasonable cause to believe an individual has been exposed to or infected by a communicable disease, to order the person to implement control measures.\textsuperscript{42} The order must be written and delivered in person or via registered or certified mail and remains in effect until the individual is no longer infected or until expiration of the longest usual incubation period for the suspected disease.\textsuperscript{43}

DSHS may order control measures for a group of five or more individuals who have been exposed or are suspected of having been exposed to a communicable disease. The order must be in writing and delivered personally or by certified or registered mail to each member of the group. If names and addresses for all group members are not known at the time of the order, DSHS

\textsuperscript{34} Texas Health & Safety Code § 81.042 (a)-(d).
\textsuperscript{35} Texas Health & Safety Code § 81.042 (e).
\textsuperscript{36} Texas Health & Safety Code § 81.043.
\textsuperscript{37} Texas Health & Safety Code § 81.061.
\textsuperscript{38} Texas Health & Safety Code § 81.063.
\textsuperscript{39} Texas Health & Safety Code §§ 81.064-065.
\textsuperscript{40} Texas Health & Safety Code § 81.082.
\textsuperscript{41} Texas Health & Safety Code § 81.083.
\textsuperscript{42} Id.
\textsuperscript{43} Id.
must publish notice in the newspaper of general circulation in the impacted counties stating: that DSHS has reasonable cause to believe that a group is ill with, has been exposed to, or is the carrier of a communicable disease; the suspected time and place of exposure; the orders from DSHS; instructions to an individual to provide information if the individual knows or reasonably suspects that the individual was at the place of the suspected exposure during the time at issue; that DSHS may make an application for court orders; and that a criminal penalty applies to an individual who is a member of the group and knowingly refuses to perform or allow the performance of the ordered control measures.44

Potentially Infected or Contaminated Property

DSHS may impose control measures on property as well as on people. The property suspected of being infected or contaminated may be quarantined to allow medical or technical examination. Notice of the action must be delivered to the owner of the property either in person or via registered or certified mail. If the property in question is land, a notice on the land is also required. DSHS may, by written order, require the owner of the property to impose control measures as feasible. The quarantine must be removed and/or the property returned if it is found to be uncontaminated or after the control measures have been effective. If there are no effective control measures, DSHS may require the owner to destroy non-land property or seal off or securely fence land or structures.45

Area Quarantines

The DSHS Commissioner may establish an area quarantine if there is a communicable disease outbreak in the state. There must be reasonable cause to believe the individuals or property involved have been infected or contaminated. If needed to cover the impacted area, DSHS may enter into cooperative agreements with neighboring states to share information and coordinate control measures. DSHS must publish notice of the area quarantine in a newspaper of general circulation each week and may use all other reasonable means to inform persons in the area of the quarantine and needed actions. DSHS may also, during a public health disaster, request the disclosure of an individual’s immunization records and take appropriate actions if the person is not adequately immunized.46

Carriers or Private Conveyances

DSHS may also impose control measures on private or common carriers and private conveyances while the vehicle or craft in question is in Texas. DSHS may, when there is reasonable cause to believe the vehicle traveled through an area infected or contaminated by a communicable disease, order the owner or operator to stop the vehicle at its place of entry into the state and provide relevant information on passengers and cargo. Technically feasible control measures may also be imposed, and the owner may be ordered to pay any related costs.47

44 Id.
45 Texas Health & Safety Code § 81.084.
46 Texas Health & Safety Code § 81.085.
47 Texas Health & Safety Code § 81.086.
Local Authority

Reportable Diseases and Investigations

It is the role of the health authority (HA) to maintain records of all reportable disease cases in the area and report this information to DSHS. Like DSHS investigators, the HA has the right of inspection and right of entry to inspect any non-residential area. The HA is also the lead on administration of control measures in the HA's jurisdiction, absent preemption by DSHS.

Implementation of Control Measures

The HA has the same authority as DSHS to impose control measures on an individual or group.

Potentially Infected or Contaminated Property

The HA has the same authority as DSHS with regard to control of property.

Area Quarantines

The HA may impose an area quarantine within the HA's jurisdiction but only after consulting with DSHS. The HA must give written notice of the quarantine to the governing body of each affected county or municipality as soon as practicable. If the HA is running the quarantine, the HA must publish notice of the area quarantine in a newspaper of general circulation each week and may use all other reasonable means to inform persons in the area of the quarantine and needed actions. The HA may terminate the area quarantine only with the consent of DSHS.

The HA may also designate facilities within the HA's jurisdiction to provide services during a public health disaster or area quarantine.

During area quarantines, the governing body of the municipality or hospital district or the commissioners court of the affected county may suspend admission of patients seeking elective treatment, except for indigent patients the district, county, or municipality is otherwise required to care for, in order to provide quarantine or isolation facilities.

48 See discussion in Chapter 2 on the definition of health authority in Texas law.
49 Texas Health & Safety Code § 81.043.
51 Texas Health & Safety Code § 81.082.
52 Id.
53 Texas Health & Safety Code § 81.084.
54 Texas Health & Safety Code § 81.085.
55 Texas Health & Safety Code § 81.082.
56 Id.
Carriers or Private Conveyances

The HA has similar authority to DSHS in terms of addressing suspected infections involving carriers or conveyances.\textsuperscript{57}

Penalties for Non-Compliance

Individuals must not knowingly conceal their exposure or the exposure of their dependent(s) to a communicable disease during an investigation by DSHS or the HA.\textsuperscript{58} Such concealment or attempts to conceal are Class B misdemeanors.\textsuperscript{59} Knowingly concealing, removing, or disposing of an infected or contaminated animal or object that is under investigation is also a Class B misdemeanor.\textsuperscript{60} It is a Class A misdemeanor to knowingly refuse entry or inspection to DSHS, the HA, or a peace officer.\textsuperscript{61}

Failure to comply with control measure orders or removal, alteration, or destruction of quarantine devices are Class B misdemeanors.\textsuperscript{62}

If an individual is subject to a court order,\textsuperscript{63} that person is financially responsible for the needed treatment unless the individual is indigent and uninsured. The relevant county or hospital district is responsible if the individual is an indigent, uninsured resident of that county or district; otherwise the state must pay for indigent and uninsured patients.\textsuperscript{64}

Failure to abide by area quarantine orders is a felony of the third degree.\textsuperscript{65} Knowingly transporting people or property that the person knows or suspects is infected or contaminated with a communicable disease that is a threat to the public health into this state is a Class A misdemeanor. If the person acts with the intent to harm or defraud, it is a felony of the third degree.\textsuperscript{66}

\textsuperscript{57} Texas Health & Safety Code § 81.086.
\textsuperscript{58} Texas Health & Safety Code § 81.066.
\textsuperscript{59} \textit{Id}.
\textsuperscript{60} Texas Health & Safety Code § 81.067.
\textsuperscript{61} Texas Health & Safety Code § 81.068.
\textsuperscript{62} Texas Health & Safety Code §§ 81.087-88.
\textsuperscript{63} See Chapter 3 for more information.
\textsuperscript{64} Texas Health & Safety Code § 81.083.
\textsuperscript{65} Texas Health & Safety Code § 81.085.
\textsuperscript{66} Texas Health & Safety Code § 81.089.
CHAPTER 4

ROLE OF TEXAS COURTS DURING A PUBLIC HEALTH EMERGENCY

If everyone complies with the orders of DSHS and the HA, the role of the courts is minimal. The courts’ main responsibility is to hear cases and issue orders as needed when an individual does not comply with the imposed control measures, with a focus on ensuring that the proper balance is found between the protection of public health and the protection of individual liberty rights. DSHS or the HA may seek a court order when an individual is infected or reasonably suspected of being infected with a communicable disease that is an immediate threat to the public health and that person fails to comply with the ordered control measures. A showing of non-compliance is not required if a public health disaster exists. Court orders may also be sought with respect to contaminated property from the county or district court where the property is located.

Orders for Management of Persons with Communicable Diseases

A sworn written application for an order for management of a person with a communicable disease (OMPCD) shall be filed by the municipal, county, or district attorney at the request of the HA or by the attorney general at the request of DSHS. The application must be filed in the district court in the county in which the person resides, is found, or is receiving court-ordered health services. The case may be transferred upon the application of the person or the person’s attorney to the person’s county of residence upon a showing of good cause if the application was not originally filed therein. In cases where a person is receiving services under a temporary management order in a county other than that where the order was entered and an extended order is being sought, the county where the order was issued shall pay any expenses for transporting the person back for proceedings under the extended order request.

An OMPCD is sought for judicial enforcement of the imposition of control measures. Under Texas law, control measures include: immunization, detention, restriction, disinfection, decontamination, isolation, quarantine, disinfection, chemoprophylaxis, preventive therapy, prevention, and education. Given the breadth of this list, widely diverse types of management may be sought through an OMPCD, from compelling testing of the individual and/or requiring immunizations to forced treatment or isolation.

The application for an OMPCD must include a copy of the written orders from DSHS or the HA – unless the applicant is seeking outpatient treatment for the person suspected of having a communicable disease, in which case the orders are not required – and a medical evaluation.

67 Texas Health & Safety Code § 81.083.
68 Texas Health & Safety Code § 81.084.
69 Texas Health & Safety Code § 81.151.
71 Texas Health & Safety Code § 81.082.
72 Texas Health & Safety Code § 81.151.
application must state whether temporary or extended management is being sought. It must refer to the individual by initials instead of by full name and must state the person’s address, county of residence, and a statement that the person is infected or is suspected of being infected with a communicable disease that is a threat to the public health. The application must also include a statement that the person meets the criteria for an OMPCD. If an order for inpatient treatment is being sought, the application must also include a statement that the person has failed to or refuses to comply with the written control measure orders of DSHS or the HA. 73

The medical evaluation included in the application must be dated and signed by the DSHS Commissioner or designee or by the HA with the concurrence of the DSHS Commissioner. The evaluation affidavit must include the name and address of the examining physician, name and address of the person examined or to be examined, the date and place of the examination, and a brief diagnosis, if applicable, of the person’s physical and mental condition. Also, if applicable, the evaluation must state the period during which the person has been under the examining doctor’s care and a description of the provided treatment. The affidavit must also include the opinion of DSHS or the HA and reasons therefore that the person is infected or reasonably suspected of being infected with a public health-threatening communicable disease and is a threat to self or will continue to endanger the public health if not examined, observed, or treated. If an extended management order is being sought, information must be included about why treatment is expected to last for more than 90 days.74

If DSHS or the HA is seeking management for a group of five or more, a single application may be filed for the group if DSHS or the HA reasonably suspects the group has been exposed to or is infected with a communicable disease and each person individually meets the requirements for an OMPCD.75 The same provisions as apply in cases involving individuals apply to group cases with the following exceptions: any statement or determination regarding the conduct of a member of the group must apply to the majority of its members; any finding or statement regarding compliance must apply to all members of the group; and any notice being sent to the group must also be published in the local newspaper of general circulation, state that the group is appointed one attorney but any individual member may request an individual attorney, and include instructions for people who suspect they may be part of the group to contact DSHS or the HA. An affidavit of medical evaluation for a group may be based on an individual evaluation if the physician believes it to be representative of the majority of the group’s condition.76 The application for a group is also slightly different. It must contain the following information: a description of the group and the location where the group members may be found; a narrative of how the group was exposed or infected; an estimate of the number in the group; to the extent known, the name, address, and county of residence for each member; information that the applicant sought the name, address, and county of residence for those not known and a statement about why the information is unavailable; and a statement that the members have failed or refuse to comply with orders if inpatient treatment is being sought.77

73 Texas Health & Safety Code § 81.152.
74 Texas Health & Safety Code § 81.158.
75 Texas Health & Safety Code § 81.151.
76 Texas Health & Safety Code § 81.1511.
77 Texas Health & Safety Code § 81.152.
Within 24 hours of the filing of the application, the judge must appoint an attorney to represent the individual if the person does not already have an attorney. A language or sign interpreter must also be appointed in that time period if necessary. The person's attorney must receive all records and papers in the case and be granted access to all hospital and physician records. If a group is involved, the judge must appoint an attorney to represent the group and must appoint an individual attorney for each person who so requests if the person does not already have an individual attorney.

The judge must set the hearing on an application for OMPCD to take place within 14 days of the service of the application to the person. The hearing may be held within the first 3 days of that time period only if neither the person nor the person's attorney objects. Continuances up to the 30th day after service may be granted on a motion by either party and a showing of either agreement of the parties or good cause for the continuance.

The person and the person's attorney are entitled to copies of the application and written notice of the time and location of the hearing immediately after the hearing date is set. Service may be made in person or, if the person is a minor or is the subject of a guardianship or conservatorship, by certified mail to the person's parent, guardian, or conservator. A guardian ad litem shall be appointed by the court if the person is a minor without a guardian or conservator and the child's parents can not be found.

If the person's attorney requests the information at least 48 hours before the hearing time, the attorney representing DSHS or the HA must provide, within a reasonable time before the hearing, citations to the sections of Health & Safety Code, Chapter 81 that will be relied upon at the hearing, information about each witness who may testify, a brief description of why court-ordered management is believed necessary, and a list of alleged acts the attorney will seek to prove at the hearing. Information not disclosed in this notice may be admitted by the judge if the admission would not deprive the person of a fair opportunity to contest the information.

The person at issue in the application is entitled to remain free pending the hearing unless detained under a protective order or other provision of Texas Health & Safety Code, Chapter 81.

The judge may set the hearing for any suitable location in the county that is not likely to have a harmful effect on the public or the person at issue. If the person or the person's attorney so requests, the hearing must be held at the county courthouse. The HA has the authority to advise the court of any needed control measures to prevent transmission during the hearing. The person is entitled to be present at the hearing but may waive this right or, if the HA advises the court that the person must remain in isolation or quarantine, the individual may be ordered to appear only though electronic or other means. The hearing must be public unless there is good cause to close the hearing and the person or person's attorney so requests. The hearing must be held

79 Texas Health & Safety Code § 81.1531.
80 Texas Health & Safety Code § 81.154.
82 Texas Health & Safety Code § 81.156.
83 Texas Health & Safety Code § 81.160.
on the record, and the state must prove its case by clear and convincing evidence.\textsuperscript{84} If temporary management is sought, the hearing must take place before the court unless the person or person's attorney requests a jury. If extended management is sought, a jury is required unless that right is waived in writing, under oath, in a document signed by the person or the person's attorney. The waiver must be made at least seven days before the scheduled hearing date and the court must find good cause in order to allow the waiver. No jury fee is allowed, and the jury may not make findings regarding the types of services to be provided.\textsuperscript{85} The person or person's attorney may waive the right to cross-examine witnesses through a written waiver. The court may admit the medical evaluation as evidence and consider it competent medical testimony.\textsuperscript{86}

If the court orders treatment, a facility must be designated by the petitioner – DSHS or the HA. The DSHS Commissioner or HA will have designated facilities as potential facilities for treatment in these cases,\textsuperscript{87} and any one of those facilities may be selected in an individual case. The HA may designate only a facility in the county in which the application is being filed; if no such facility exists, only the Commissioner may designate the facility to be used.\textsuperscript{88}

If the application for OMPCD is denied, the court shall enter an order so denying the request and ordering the immediate release of the person if the person is not free at the time the order is written.\textsuperscript{89}

If the standard for a temporary OMPCD is met, the judge must enter an order stating the judge or the jury, as applicable, found that the person is likely to cause serious harm to self or continue to endanger the public health if not examined, observed, isolated, or treated as a result of a communicable disease with which the person is infected or reasonably suspected of being infected, and the person has failed or refused to follow written orders from DSHS or the HA. The order must state that the measures to be taken may last no longer than 90 days. DSHS, along with the head of the selected facility, must provide to the court a general program of treatment within 14 days of the order being issued. Upon receipt, the program must be incorporated into the court order.\textsuperscript{90}

If the standard for an extended OMPCD is met, the court must enter an order stating the court or the jury, as applicable, found the person is likely to cause serious harm to self or continue to endanger the public health if not examined, observed, isolated, or treated as a result of a communicable disease with which the person is infected or reasonably suspected of being infected and the person has failed or refused to follow written orders from DSHS or the HA. The order must also state the person's condition is expected to continue for more than 90 days. The court's findings may not be based on the medical evaluation alone, and testimony, including competent medical testimony, shall be heard. The order must state that the necessary control measures are not authorized to continue for more than 12 months. DSHS, along with the head of the selected

\textsuperscript{84} Texas Health & Safety Code § 81.169.
\textsuperscript{85} Texas Health & Safety Code § 81.170.
\textsuperscript{86} Texas Health & Safety Code § 81.172.
\textsuperscript{87} Please note that pursuant to law, the Commissioner may designate any facility other than a nursing home or custodial care home licensed under Health & Safety Code, Chapter 242 or an intermediate care facility for the mentally retarded licensed under Chapter 252.
\textsuperscript{88} Texas Health & Safety Code § 81.159.
\textsuperscript{89} Texas Health & Safety Code § 81.171.
\textsuperscript{90} Texas Health & Safety Code § 81.172.
facility, must provide to the court a general program of treatment to be provided within 14 days of the order being issued. Upon receipt, the program must be incorporated into the court order.91

If the person is found to be infected or reasonably suspected of being infected with a communicable disease, to have failed or refused to follow the written orders of the HA or DSHS, and to meet the criteria for an OMPCD, the judge may hear additional evidence relating to alternative settings for care before entering an order. In determining a setting for care, the judge must consider the recommendation made by the petitioner. The judge may enter an order committing the person to a facility for inpatient care or requiring the person to participate in other communicable disease management programs.92

One such inpatient facility is located at the Texas Center for Infectious Diseases in San Antonio. The Center contains a quarantine wing that is used for tuberculosis patients under involuntary quarantine. The wing has 24 beds and has locked doors. Patients have access to a recreation room and are allowed limited, supervised time in an outdoor courtyard. Patients at the Center receive court-ordered antibiotic treatment, which can last from six months to two years depending on their particular strain of tuberculosis. There are also beds at the same site for patients who seek voluntary treatment.93

In cases where outpatient services are ordered, the court shall designate an HA to monitor the person's compliance and order the facility head to cooperate with the HA for such monitoring. Within two weeks of the entry of the court's order for outpatient treatment, the HA or DSHS shall submit a general program of treatment to be provided that has been prepared in cooperation with the facility head; the court shall incorporate the program into the court order. The HA or DSHS must notify the court if the person fails to comply with the court order or a substantial change is made in the general program of treatment.94

Facilities must comply with an OMPCD to the extent they have the necessary resources, but private facilities may be designated only with the consent of the facility head and upon an application signed by the person or the person's guardian requesting such designation and agreeing to pay for the care, unless the court orders treatment at a private facility. The court may order treatment at a private facility with no cost to the state, municipality, or hospital district if a public health disaster or area quarantine is in place, the facility is within the area impacted, and the judge determines there is no public health care facility within that area with the capacity to treat the person.95 Federal facilities may be used if the court receives written notice from the federal agency that runs the facility saying that it has the needed resources; the state court maintains jurisdiction over the person regardless of the facility used.96

91 Texas Health & Safety Code § 81.173.
94 Texas Health & Safety Code § 81.175.
95 Texas Health & Safety Code §§ 81.175, 177.
96 Texas Health & Safety Code § 81.178.
The sheriff or constable shall accompany the person to the designated facility; a female attendant must be used to accompany a female patient. The HA or DSHS will instruct the sheriff or constable on any control measures that may be necessary during transportation. The head of the facility shall give the attendant a written statement acknowledging acceptance of the person and any personal property. A copy of the acknowledgement must be filed with the court clerk after admitting the individual and receiving the writ of commitment from the court; the court clerk will issue two writs of commitments to the attendant so that a copy may be left with the facility head.

**Protective Custody Orders**

A temporary protective custody order may be issued before the filing of an application for an OMPCD if the judge or magistrate takes testimony that an application for an OMPCD and an application for a protective order will be submitted the following business day and the judge or magistrate determines that there is probable cause to believe the person represents a substantial risk of serious harm to self or others so that the person cannot be at liberty pending the filing of the applications. A temporary protective custody order terminates at 4 p.m. the business day following the issuance of the order if the applications are not filed by that time. If the applications are filed in time, the order may continue to allow the court reasonable time to rule on the applications.

A motion for a regular protective order may be filed by the municipal, county, or district attorney on behalf of the HA or the attorney general on behalf of DSHS in the court in which an application for OMPCD is pending. The motion must state the DSHS's or HA's belief that the person meets the necessary criteria for court-ordered management and the basis for this belief, including a representation from a credible person, the conduct of the person at issue, or the circumstances under which the person at issue was found.

The application must include a medical evaluation with the same information as that required for an OMPCD as well as information about why the person poses a substantial risk of serious harm to self or others if not immediately restrained. The judge may designate a magistrate to issue protective orders in the judge’s absence as needed.

In order to issue a protective order, the judge or magistrate must find that the HA or DSHS has stated its opinion and detailed basis supporting its opinion that the person is infected or reasonably suspected of being infected with a communicable disease that presents an immediate threat to the public health and that the person has failed or refused to comply with the HA's or DSHS's written orders, if applicable. The judge or magistrate may consider only the application and medical evaluation in ruling on the motion, unless additional evidence is needed to make a fair determination of the matter.

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97 Texas Health & Safety Code § 81.179.
99 Texas Health & Safety Code § 81.162.
100 Texas Health & Safety Code § 81.161.
103 Texas Health & Safety Code § 81.162.
The order, if granted, must direct a peace officer to take the person into protective custody and transport the person to an appropriate inpatient health facility that is on the DSHS Commissioner’s or the HA’s designated facility list. If an appropriate inpatient facility is not available, the person shall be transported to a facility deemed suitable by the HA.\textsuperscript{104} Private facilities may be used only if the head of the facility agrees and the person or person’s guardian requests a private facility and agrees to pay for such care, unless the court orders treatment at a private facility. The court may order treatment at a private facility with no cost to the state, municipality, or hospital district if a public health disaster or area quarantine is in place, the facility is within the area impacted, and the judge determines there is no public health care facility within that area with the capacity to treat the person.\textsuperscript{105} Federal facilities may be used if the court receives written notice from the federal agency that runs the facility saying that it has the needed resources; the state court maintains jurisdiction over the person regardless of whether a federal facility is used.\textsuperscript{106} Public or private facilities need to comply only to the extent resources are available. The person will remain at the facility until a probable cause hearing is held.\textsuperscript{107}

The judge or magistrate shall appoint an attorney for the person at issue if the person did not have one at the time the protective custody order was signed and, within a reasonable time, provide to the person and the person’s attorney written notice that the person has been placed under a protective custody order, the grounds for the order, and the time and place for the probable cause hearing.\textsuperscript{108}

The purpose of the probable cause hearing is to determine if there is probable cause to believe the person presents a substantial risk of serious harm to self or others that would preclude the person from being free pending an OMPCD and that DSHS or the HA has stated its opinion and the basis therefore that the person is infected with or reasonably suspected of being infected with a communicable disease that is an immediate threat to the public health. The hearing must be held within 72 hours of the person’s detention or the next business day following the conclusion of the 72 hours if that occurs on a weekend or legal holiday. A 24 hour postponement is allowed if an extreme emergency exists due to extremely hazardous weather conditions. Additional postponements are allowed if the area where the hearing will be held or where the person is found is under a public health disaster. In those instances, the hearing may be postponed until after the disaster has ended. The hearing is conducted by the magistrate or a master designated by the judge and may include evidence that would not be admissible at a subsequent commitment hearing. The state may use the medical evaluation in order to prove its case.\textsuperscript{109} The hearing may be held with the individual at issue appearing through electronic or other means if the judge or magistrate finds the person’s presence at the hearing is appropriate but the HA has advised that the person should remain in isolation or quarantine as exposure to those at the hearing would jeopardize them and the public health.\textsuperscript{110}

\textsuperscript{104} Id.
\textsuperscript{105} Texas Health & Safety Code §§ 81.162, 177.
\textsuperscript{106} Texas Health & Safety Code § 81.178.
\textsuperscript{107} Texas Health & Safety Code § 81.163.
\textsuperscript{108} Texas Health & Safety Code § 81.164.
\textsuperscript{109} Texas Health & Safety Code § 81.165.
\textsuperscript{110} Id.
Upon a finding that there is an adequate factual basis to support probable cause that the person presents a substantial risk of serious harm to self or others and may not be at liberty pending the OMPCD, the magistrate or master must order the person to remain in protective custody. The magistrate or master must arrange for the person to be returned to the health facility or other appropriate place and send to the facility affidavits and other materials used as evidence in the hearing along with a notification regarding the probable cause hearing. This information must also be filed with the district court that entered the original order for protective custody.

The person subject to a protective order must be detained by the head of the designated facility pending an OMPCD or the person’s release or discharge. The facility designated must be an appropriate inpatient facility on the list of those designated by the DSHS Commissioner or the HA. A non-medical facility used to detain persons charged or convicted of a crime may be used only for up to 72 hours and only if the person is isolated from those charged or convicted of a crime, the consent of that facility’s medical director has been obtained, and the facility has respiratory isolation capability for airborne communicable diseases.

The magistrate or master shall order the release of the person if the magistrate or master determines after the hearing that no probable cause exists. The person should then be returned to the location where the person was apprehended, the person’s place of residence, or another suitable location. The head of the facility must release the person if: the head of the facility does not receive notice that a probable cause hearing was held and further detention ordered within the prescribed time; an OMPCD is not entered within the prescribed time; or the HA or DSHS Commissioner determines the person no longer meets the criteria for a protective order.

The sheriff or constable shall accompany the person to the designated facility, and a female attendant must be used to accompany a female patient. The HA or DSHS will instruct the sheriff or constable about any control measures that may be necessary during transportation. The head of the facility shall give the attendant a written statement acknowledging acceptance of the person and any personal property and file a copy of the statement with the court clerk after admitting the individual and receiving the writ of commitment; the court clerk will issue two writs of commitment to the attendant so that both the attendant and the facility have a copy.

Modification of an OMPCD or Protective Custody Order

At the request of the HA or DSHS, the appropriate attorney shall request a modification of an OMPCD to allow for outpatient treatment from the court that entered the original commitment order. The reason for the change request must be made in detail and must include an affidavit from a physician who treated the person at issue within the 7 days preceding filing of the modification request. The person at issue must receive notice and, if a hearing is requested, have an attorney appointed. If neither the person nor any interested party requests a hearing, the judge may rule

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111 See Appendix E for the statutory form of the notice.
112 Texas Health & Safety Code § 81.166.
113 Texas Health & Safety Code § 81.167.
115 Texas Health & Safety Code § 81.179.
based on the modification request and physician’s affidavit. The court must designate the HA to monitor the person’s compliance if the modification request is granted. The modified order may last only as long as the original order would have lasted.\textsuperscript{117}

A court that entered an order for outpatient treatment may set a hearing on its own motion, the motion of the relevant attorney’s office acting on behalf of the HA or DSHS, or the motion of an interested person to determine if the order should be modified. If a hearing is scheduled, the person at issue shall have an attorney appointed and shall receive notice similar to that required before a hearing on an application for an OMPCD. No jury is required at the hearing.\textsuperscript{118} The original outpatient order remains in effect if the modification is not granted.\textsuperscript{119}

A person may be detained pending a modification order under an order for temporary detention. The appropriate attorney’s office would make a motion for a temporary detention order on behalf of the HA or DSHS. The application must state that the person meets the criteria for a commitment order and that detention in an inpatient facility is needed to evaluate the proper setting for court-ordered care and explain the basis for the applicant’s statements. The court shall decide on the basis of the application whether a temporary detention order is appropriate. To order temporary detention of an individual, the court must find that there is probable cause to believe the opinions stated in the application are valid. If the person does not have an attorney at the time the temporary detention order is signed, the court must appoint one. Within 24 hours of the person’s detention, a written notice must be provided by the court to the person’s attorney stating that the person has been placed under a temporary detention order, the grounds for the order, and the time and place of the modification hearing.\textsuperscript{120}

If a temporary detention order is granted, the order will instruct a peace officer to take the person in question into custody and transport the person to an appropriate inpatient facility or, if an appropriate inpatient facility is not available, to a facility deemed appropriate by the HA. A temporary detention order may not last longer than 72 hours, excluding weekends, holidays, and time as needed during an extreme weather emergency. The person must be released if the facility does not receive notice within the 72 hour period that a modification hearing was held at which continued detention was ordered.\textsuperscript{121}

An order for outpatient services may also be modified at the modification hearing if the court determines that the person continues to meet the criteria for an OMPCD and has either not complied with the original order or has suffered a deterioration that makes outpatient services inappropriate; such modification is not mandatory even if the court makes the requisite findings. The court’s decision must be supported by an affidavit of medical evaluation prepared by the HA or DSHS. In response, the court may order a revision of the outpatient services or may provide for inpatient services.\textsuperscript{122}

\textsuperscript{117} Texas Health & Safety Code § 81.182.
\textsuperscript{118} Texas Health & Safety Code § 81.183.
\textsuperscript{119} Texas Health & Safety Code § 81.185(d).
\textsuperscript{120} Texas Health & Safety Code § 81.184.
\textsuperscript{121} Texas Health & Safety Code § 81.185.
\textsuperscript{122} Texas Health & Safety Code § 81.186.
Renewal of an Extended Management Order

At the request of DSHS or the HA, the appropriate attorney must file an application to renew an order for extended management. The application must explain in detail why the renewal is required and explain why a less restrictive setting is not appropriate for further care. An affidavit of medical evaluation based on an examination conducted within 30 days of filing must be included in the application and be signed by the HA or DSHS. Upon the filing of the application, the court must appoint an attorney for the person at issue. The person or the person's attorney may request a hearing or the court may set a hearing on its own motion. At the hearing, the application is considered an original motion for an extended OMPCD. If no hearing is set, the medical evaluation shall be considered competent medical testimony. The court may not renew an order unless it finds the person meets the standards for an original extended OMPCD.¹²³

Rehearing, Re-examination or Appeal

A motion for rehearing on an OMPCD may be held upon a showing of good cause. The court may stay the order and release the person pending the rehearing if the court is satisfied that the person does not meet the criteria for a protective order. Bond may be imposed if the person is not detained.¹²⁴

A person subject to an extended OMPCD may request a re-examination and a hearing to determine if the person still meets the requirements for an OMPCD. The request must be filed in the county where the person is receiving services. Upon a showing of good cause, the court may require a re-examination and schedule a related hearing. The court must notify the HA, DSHS, and head of the facility providing services to the person if a re-examination and/or hearing is scheduled. The head of the facility shall arrange for the re-examination upon receiving the court’s notice. The court is not required to order the hearing or re-examination if the request is made within 6 months of the original order or similar request. If the HA or DSHS determines the person no longer meets the criteria for an OMPCD, the facility must immediately release the person. If the HA or DSHS believes the person continues to meet the criteria for an OMPCD, the HA or DSHS must file an affidavit of medical evaluation within 10 days of the filing of the re-examination and hearing request.¹²⁵ A court may set a hearing on a request for re-examination if an affidavit of medical evaluation calling for continued management has been filed within 10 days of the request being filed or, within the same time period, the person has not been discharged. The court will appoint an attorney for the person and provide notice of the hearing to the person, the person’s attorney, DSHS or the HA, and the head of the facility where the person is receiving treatment. A physician not on staff at the facility shall be designated by the court to examine the person and file an affidavit stating the person’s diagnosis and recommended treatment. The person may request examination by a physician of the person’s choice if the person agrees to bear any related expense. The hearing is held before the judge, not a jury, and is similar in nature to a hearing for an OMPCD. If there is clear and convincing evidence that the person continues to meet the standard for the

¹²⁴ Texas Health & Safety Code § 81.188.
¹²⁵ Texas Health & Safety Code § 81.189.
original order, the court shall dismiss the request. Otherwise, the court must order the head of the facility to discharge the person at issue.\(^{126}\)

Appeals are also allowed from an OMPCD or renewal or modification of such an order. The appeal must be filed in the court of appeals for the county in which the order was entered. Notice of appeal must be filed within 10 days of the signing of the order. Upon filing of the appeal, the clerk shall immediately send a certified transcript of the proceedings to the court of appeals. The trial judge may stay the order and release the person, with or without requiring an appearance bond, pending the appeal if the judge is satisfied the person does not meet the standards for a protective order. The courts of appeals and Supreme Court are required to give these appeals preference over all other cases on the docket. Rules regarding time to file briefs and docket cases may be suspended.\(^{127}\)

**Treatment at the Facility**\(^{128}\)

The person may be allowed out of the facility under a pass from the facility head allowing the person to leave for not more than 72 hours. The HA or DSHS must concur before a pass may be granted. Specified conditions may be placed on the pass.\(^{129}\) A person outside a facility under a pass may be detained and returned to the facility based on a signed certificate authorizing the person’s return by the facility head, the HA, or DSHS or the filing of such a certificate with the magistrate requesting that the person’s return be ordered. A certificate may be signed if the signer believes the person is absent from the facility without authority, has violated a condition of a pass, or has experienced a deterioration in his condition.\(^{130}\)

The person may be transferred to a federal facility if: authorized by the HA or DSHS; the federal agency sends notice that facilities are available for which the patient is eligible; notice of the transfer is sent to the court; and the court enters an order approving of the transfer.\(^{131}\)

Prior to discharge, the HA or DSHS must prepare a continuing care plan if continued care is required.\(^{132}\) A person must be discharged upon expiration of the court order and may be discharged before the expiration of the order at the direction of the HA or DSHS. A discharge certificate, prepared by the HA or DSHS, must be filed with the court that entered the order, and notice must be given to the facility head.\(^{133}\)

\(^{126}\) Texas Health & Safety Code § 81.190.
\(^{127}\) Texas Health & Safety Code § 81.191.
\(^{128}\) Discussed below are the sections of the code on treatment at the facility that are most likely to impact the courts. Additional information on records, adequacy of treatment, and similar provisions may be found in Texas Health & Safety Code, Chapter 81. These sections are relevant only if an individual is admitted to the facility under an order for management of a person with a communicable disease.
\(^{129}\) Texas Health & Safety Code § 81.193.
\(^{130}\) Texas Health & Safety Code § 81.194.
\(^{131}\) Texas Health & Safety Code § 81.199.
\(^{132}\) Texas Health & Safety Code § 81.192.
\(^{133}\) Texas Health & Safety Code § 81.195-197.
Property Cases

In cases involving property, upon the filing of a petition and a showing that the owner has failed to comply with proper orders from DSHS or the HA and that DSHS or the HA has reason to believe that the property is or may be infected with a communicable disease that presents an immediate threat to the public health, the court may grant injunctive relief. The owner of the property is responsible for all related costs and may be required by the court to execute a bond. If the court finds that the property was improperly quarantined or is not contaminated, the court must order DSHS or the HA to remove the quarantine and return the property to its owner.134

Area Quarantines

If the DSHS Commissioner or one or more HAs has determined that an environmental or toxic agent, including a communicable disease, has been introduced into the environment, they may impose an area quarantine as discussed in Chapter 3. No role for the courts during an area quarantine is specified other than the authority of the commissioner’s court of the affected county or the governing body of the municipality or hospital district to suspend admission of patients seeking elective treatment – except for indigent patients that the district, county, or municipality is otherwise required to care for – in order to provide quarantine or isolation facilities.135

134 Texas Health & Safety Code § 81.084.
135 Id.
APPENDICES
APPENDIX A
QUICK REFERENCE CONTACT LIST

Federal
• Centers for Disease Control and Prevention 800-CDC-INFO
• Federal Emergency Management Agency 800-621-FEMA
• National Institutes of Health 301-496-4000
• Office of the Surgeon General 301-443-4000
• Public Health Service Commissioned Corps 240-453-6000

State
• Commissioner of Health 888-963-7111
• Governor's Office 800-843-5789
• Office of General Counsel, TDSHS 512-458-7236
• Office of Public Health Practice, TDSHS 512-458-7700
• Center for Public Health Preparedness and Response, TDSHS 512-458-7219

Suggested Local Contacts
• County Commissioner's Court
• County and/or municipal departments of health
• City Council
• City Attorney's Office
• Local office of public health preparedness
• County Attorney
• County Appraisal District

Information Available On The Internet
• Centers for Disease Control and Prevention http://www.cdc.gov/
• Federal Emergency Management Agency http://www.fema.gov/
• National Institutes of Health http://www.nih.gov/
• Governor's Office http://www.governor.state.tx.us
• Texas Department of State Health Services http://www.dshs.state.tx.us
• Communicable Disease Control Measures in Texas, DSHS Report http://www.dshs.state.tx.us/comprep/ogc/cdmanual.pdf
• Avian Flu Pandemic Litigation Forms, Office of the Attorney General http://www.oag.state.tx.us/notice/emergency/birdflu/index_forms.php
APPENDIX B
QUICK VENUE/JURISDICTION REVIEW

Court Order for Management of Person with Communicable Disease
- District court in county where the person resides, is found, or is receiving court-ordered health services
- If not originally filed in county where the person resides, court may transfer case to that county upon showing of good cause

Order for Protective Custody
- May be filed only in court in which an application for order for management is pending or was filed

Re-examination
- Must be filed in the county where the person is receiving services

Appeals on OMPCD, renewals, or modifications
- Court of Appeals for the county from which the order was entered

Area Quarantines
- Commissioners court can restrict elective admissions to hospitals in order to provide isolation/quarantine facilities
APPENDIX C
ACRONYMS

DSHS  Texas Department of State Health Services
HA    Health authority
OMPCD Order for management of a person with a communicable disease
APPENDIX D
FAQs from the February 2007 DSHS Report
Communicable Disease Control Measures in Texas,
HTTP://WWW.DSHS.STATE.TX.US/RLS/LHA/COMMUNICABLEDISEASE.SHTM

Frequently Asked Questions and Their Answers
Concerning the Imposition of Control Measures

Does Texas have a “quarantine” law?
The term “quarantine” is used loosely in common speech and law as a synonym for “isolation.”
Texas statutes usually use the more inclusive and accurate term “control measure.” The state law
on control measures is found in the Communicable Disease Prevention and Control Act, Health
and Safety Code, Chapters 81 and 508. All further references in this document are to the Health
and Safety Code unless stated otherwise.

How can I find the Health and Safety Code on the Internet?
State laws are located on the Internet at Texas Legislature Online at http://tlo2.tlc.state.tx.us/
statutes/hs.toc.htm. (NOTE: Following a legislative session, this site is not updated for several
months. Please refer to the instructions at this site for further information on updates to the
statutes.) Scroll down the table of contents to find the applicable Code (for example, Health
and Safety Code). Find the desired chapter (for example, Chapter 81). Then choose the relevant
Section (§). These directions also apply to locating other codes listed in [the DSHS manual] such
as the Government Code and Occupations Code.

What is the definition of a “communicable disease”?
Section 81.003(1) defines “communicable disease” to mean ‘an illness that occurs through the
transmission of an infectious agent or its toxic products from a reservoir to a susceptible host,
either directly, as from an infected person or animal, or indirectly through an intermediate plant
or animal host, a vector, or the inanimate environment.’

Generally what control measures can be imposed?
Control measures are efforts necessary to control and prevent communicable disease.
They include, but are not limited to, immunization, detention, restriction, disinfection,
decontamination, isolation, quarantine, disinestation, chemoprophylaxis, preventive therapy,
prevention, and education. See §81.082. However, the law does not limit control measures to
only these efforts. Texas law allows control measures to be imposed on individuals, property,
areas, or common carriers as discussed below.

Who has the authority to enforce public health laws in an emergency?
For most laws the Department of State Health Services (“department”) has authority that is
concurrent with the local health authority. However, it is imperative to read each statute carefully
because some statutes give the local health authority or local government different authority from that given to the department or require different procedures to impose a control measure.

“[E]stablishing, maintaining, and enforcing quarantine in the health authority’s jurisdiction” is one of the local health authority’s explicit legal duties. See §121.024(c)(1).

**What are the requirements in order for the appointment of a health authority to be legal?**
A health authority must be a physician licensed by the State of Texas and a resident of the State of Texas. Once appointed, the health authority must take the official Oath of Office. See Texas Constitution, Article XVI, Section 1. The Oath and the Statement of Appointed Officer, which is also required by the Texas Constitution, must be filed with the department regional office covering the health authority’s jurisdiction within ten working days of the date of taking the oath. See §121.022 and department rules at 25 T.A.C. §85.1(h). The health authority serves for a term of two years. See §121.023. The oath must be taken each time a new health authority is appointed or the same health authority is reappointed.

Further information on the appointment of health authorities may be obtained at the department’s Web site at [http://www.dshs.state.tx.us/rls/lha](http://www.dshs.state.tx.us/rls/lha) or by contacting the appropriate regional office or the department’s Regional and Local Services at (512) 458-7770.

**Why are the above requirements relating to the appointment of a health authority important?**
A health authority acts as an officer of the state when performing duties prescribed by state law. See §121.024. If a health authority has not been legally appointed or taken the required oath of office (see §121.022), his/her actions as a health authority, including the imposition of control measures in an emergency, may be subject to challenge, and the immunities from lawsuit and liability available to a state officer may not apply.

**Does the local health authority have any liability in civil court for losses that persons or businesses suffer because of an order imposing control measures?**
Though the state has had little opportunity to use most of these laws, if the health authority follows the procedures required by state law, the authority’s liability should be nonexistent or nominal. The principle of official immunity will protect governmental officials from lawsuit and liability in many cases. Protection from liability is one of the important reasons why the local health authority should ensure that s/he is properly appointed as described above.

Two laws passed in 2003 may protect a health authority — a “state officer” — from civil liability arising from the issuance of control measure orders during an emergency or disaster. Civil Practice and Remedies Code, §79.003, Disaster Assistance, was enacted in Senate Bill 513 (Chapter 58, 78th Leg., 2003). It provides immunity from civil liability for an act or omission when a person is giving care, assistance, or advice with respect to the management of an incident that is a man-made or natural disaster that threatens individuals, property, or the environment and in which the care, assistance, or advice is provided at the request of local, state, or federal agencies. The act does not apply to persons who expect or receive compensation from, or on behalf of, the recipient of the care, assistance, or advice in excess of reimbursement for expenses. It also does not apply to reckless conduct or intentional, willful, or wanton misconduct. A health
authority issuing control measure orders may be considered to be involved in “management of an incident” and therefore covered by this provision.

Government Code, §421.061, Civil Liability, was enacted in House Bill 9 concerning homeland security. It pertains to officers or employees of state or local agencies who are performing homeland security activities or volunteers performing homeland security activities at the request or under the direction of officers or employees of state or local agencies. The act authorizes persons in either of those capacities to be considered members of the state military forces and provides immunity from civil liability while they are performing homeland security activities. For the act to apply, the activity must be under the procedures or circumstances described in the governor’s homeland security strategy and must be within the course and scope of the person’s authority. The act does not apply to willful or wanton negligence, conscious indifference, or reckless disregard for the safety of others. Until the governor’s homeland security strategy is issued, it is not yet clear what activities will be covered or whether health authorities would be considered officers of the state under this provision.

Local health authorities should consult with the authority’s city or county attorney on the protections within state law, including the Local Government Code, and case law on local government liability and immunity if more specific information is needed.

Are there other officials who have authority to address emergency situations?
The Secretary of the United States Department of Health and Human Services is authorized to assist states and political subdivisions in the prevention and suppression of communicable disease and to cooperate in the enforcement of quarantine and other health regulations. The Secretary is authorized to advise states on matters relating to the preservation of public health. The Secretary may also extend assistance for up to six months to state or localities in meeting health emergencies of such a nature to warrant federal assistance. See 42 United States Code, §243.

The Governor of Texas may invoke powers under the Texas Disaster Act, Government Code, Chapter 418, which gives the Governor sweeping powers to deal with an emergency.

How can the Governor declare a disaster?
The Texas Disaster Act defines a “disaster” as ‘the occurrence or imminent threat of widespread or severe damage, injury, or loss of life or property resulting from any natural or man-made cause’ [Government Code §418.004(1)]. The “governor by executive order or proclamation may declare a state of disaster if the governor finds a disaster has occurred or that the occurrence or threat of disaster is imminent” [§418.014(a)]. The governor could use his authority under this law if the terroristic weapon is a communicable disease or if it is something other than a communicable disease, since the governor’s authority can be used in the case of any natural or man-made disaster. The governor may declare a state of disaster by executive order or proclamation in response to a request by state or local officials.

Some of the effects of a declaration of a state of disaster would be:
• activation of the state emergency management plan;
• authorization of the use of any forces, supplies, equipment, materials, or facilities assembled to be made available under a disaster;
• suspension of regulatory statutes and rules that would hinder action in coping with a disaster;
• use of all available and necessary state government and political subdivision resources;
• use of necessary private property;
• recommendation for evacuation of an area; and
• control of ingress and egress to and from a disaster area.


What is a public health disaster?
A “public health disaster” is a declaration by the governor of a state of disaster and a determination by the commissioner that an immediate threat from communicable disease exists that “poses a high risk of death or serious long-term disability to a large number of people” and “creates a substantial risk of public exposure because of the disease’s high level of contagion or the method by which the disease is transmitted.” See Health and Safety Code §81.003(7). This definition was added by the Texas Legislature in House Bill 2292 in 2003. See Part Two of [the DSHS manual] for a discussion of how a public health disaster affects the issuance of control measure orders.

Must a health authority or the department issue an order to perform control measures to address a bioterrorism event involving a communicable disease?
The statutes enacted by House Bill 2292 affect many areas of public health preparedness and communicable disease control and allow control measures to be more expeditiously imposed during a public health disaster. Health and Safety Code section 81.083(e)(2) provides that an individual may be subject to court orders when a public health disaster exists, “regardless of whether the department or health authority has issued a written order and the individual has indicated that the individual will not voluntarily comply with control measures.” Section 81.084(k) allows the department or health authority to impose additional control measures on property (after an initial order) as deemed necessary and appropriate to “arrest, control, and eradicate the threat to the public health.”

In case of a bioterrorism event, does anyone have authority to mandate the allocation or reallocation of medical resources, such as hospital beds, professional staff (doctors, nurses, etc.), medical supplies, and other health resources?
In the case of an area quarantine, §81.085(g) allows a county commissioner’s court, a city council, or the board of directors of a hospital district to “suspend the admission of patients desiring admission for elective care and treatment,” with certain exceptions. Such an action would make available isolation and quarantine facilities during an area quarantine.
When the governor declares a state of disaster, he has the authority to use all available state and local governmental resources; reassign state governmental resources and personnel; and “commandeer or use any private property if the Governor finds it necessary to cope with a disaster, subject to the compensation requirements of this chapter.” See Government Code, §418.017(c).

Government Code, §418.016, gives the governor authority to suspend any regulatory statute prescribing procedures for the conduct of state business or the orders or rules of a state agency.
if strict compliance would in any way prevent, hinder, or delay necessary action in coping with a disaster. This authority could be applied to regulatory requirements relating to the licensing of health-care professionals.

Government Code, §418.171, allows a professional person licensed by another state to render aid in Texas to meet an emergency or disaster.

**In the event of an emergency, can hospital licensing laws and rules be waived or modified?**

If the governor declares a state of disaster, he has the authority to waive regulatory requirements, including licensing laws and rules.

Section 241.026(c) provides a process by which the Board of Health may waive or modify hospital licensing laws or rules if it is determined that the waiver or modification will facilitate the operation of the hospital and the action is in the best interest of the individuals served or to be served by the hospital. The board has delegated to the commissioner of health the authority to exercise this power. The procedures for obtaining a waiver are found at 25 T.A.C. §133.81. This rule is written for consideration of requests from individual hospitals but is broad enough to allow the commissioner to apply a particular waiver to all hospitals in an area that is affected.

**What authority do public health authorities have in the case of individuals who have been or may have been subject to a chemical attack?**

The department has many of the same powers to conduct epidemiological and toxicological investigations as it does to conduct communicable disease investigations. See §§161.0211–161.0212. The requirements relating to the provision of records and other information upon the department’s request are the same.

In 2003 the 78th Legislature added Health and Safety Code, Chapter 508, Area Quarantine for Environmental or Toxic Agent. This chapter allows a health authority or the commissioner to impose an area quarantine when the introduction of an environmental or toxic agent into the environment has occurred. See Part Two of the manual for further discussion of Chapter 508.

**In the event of a large-scale disease outbreak, who has the ability to control or ration the use of antibiotics or vaccines when there is a mass demand for them?**

If the governor declares a state of disaster, he has authority to use all available state and local government resources and to commandeer or use private property subject to certain compensation requirements. See Government Code §418.017.

**Can state or local public health officials procure or confiscate medications or vaccines?**

There are no laws that allow the department to take control of, or confiscate, medications or vaccines. If the department originally distributed the medicines or vaccines by contracts with local public health departments, the contracts may provide for department control or confiscation in the event of an emergency.

If mass treatment or prophylaxis is to be mandatory instead of voluntary, the department or health authority would have to issue an order mandating such a control measure under
§81.085(c) relating to area quarantine or under §81.083 relating to each individual. See also §81.009(b), which suspends the normal right to claim exemption from treatment on religious grounds in the event of an emergency, an area quarantine, or a declaration of a state of disaster.

**Are there any applicable federal regulations?**

**Is there a list of control measures that can be imposed?**
Section 81.082(f) provides a list of 12 suggested control measures: immunization, detention, restriction, disinfection, decontamination, isolation, quarantine, disinestations, chemoprophylaxis, preventive therapy, prevention, and education. The list is not comprehensive; a health authority may impose any control measures “that are reasonable and necessary to prevent the introduction, transmission, and spread of the disease in this state.” See §§81.083(b), 81.084(k), and 81.085(c).

**Must a health authority or the department issue an order to perform control measures to address a communicable disease?**
If the local health authority or department receives full cooperation on all activities required to address the suspected or actual communicable disease from all necessary parties — such as the individual exposed, the owner of infected property, or the operator of a common carrier — orders may not be necessary. In weighing whether appropriate orders should be issued, rather than relying on future voluntary cooperation on all matters, one should consider such issues as:

- whether all necessary parties will continue to cooperate over time,
- whether orders are necessary to ensure any possible later court action, and
- whether orders are necessary for law enforcement to provide adequate assistance.

**Do public health authorities have access to medical and health records involving communicable disease or suspected communicable disease in individuals?**
In an instance of control measures imposed by a health authority, the health authority would be authorized by law to receive records because a health authority must perform each duty that is necessary to implement and enforce a law to protect the public health. See §121.024(b)(1).

Most health-care professionals that would have information on patients with certain suspected or diagnosed diseases, such as anthrax and smallpox, are required to report to the local health authority, who then reports to the department. See §§81.042, 81.043 and 25 T.A.C. §§97.2, 97.3.

Section 81.046 addresses the confidentiality requirements of reports, records, and other information furnished to a health authority or the department. In addition, and without regard as to whether information was received through such a report, the department may investigate the existence of communicable disease in the state in order to formulate control measures. The law requires a person to provide records and other information to the department on request according to the department’s written instructions. See §81.061. Patient consent is not required.

Licensing laws generally also provide for a specific exception from confidentiality restrictions.
for information being provided to a governmental agency if required or authorized by law. For example, see §241.153, concerning hospital records, and Occupations Code, §159.004, concerning physician records. In such cases patient consent is not required.

The federal Health Insurance Portability and Accountability Act (HIPAA) privacy regulations allow a health-care provider to continue to provide protected health information to a health authority or the department:

- as required by law, e.g., laws requiring the reporting of communicable disease [45 Code of Federal Regulations §164.512(a)];
- as authorized by law for public health activities such as controlling disease, e.g., laws on reporting disease or authorizing inspections [45 Code of Federal Regulations §164.512(b)]; or
- to prevent or lessen a serious and imminent threat to the health or safety of a person or the public [45 Code of Federal Regulations §164.512(j)].

The DSHS Web site at http://www.dshs.state.tx.us/hipaa contains further information on HIPAA.

**Can an individual refuse medical treatment?**

Yes, under certain circumstances. Section 81.009 addresses exemption from medical treatment for religious reasons. Chapter 81 “does not authorize or require the medical treatment of an individual who chooses treatment by prayer or spiritual means as part of the tenets and practices of a recognized church of which the individual is an adherent or member. However, the individual may be isolated or quarantined in an appropriate facility and shall obey the rules, orders, and instructions of the department or health authority while in isolation or quarantine.” Therefore, a person who requests religious exemption from medical treatment may be so exempted, but must still comply with an order for isolation or quarantine. Further, Section 81.009(b) revokes the exemption from medical treatment “during an emergency or an area quarantine or after the issuance by the Governor of an executive order or a proclamation under Chapter 418, Government Code (Texas Disaster Act of 1975).”

**Who has the authority to impose control measures on an individual?**

Imposing control measures on individuals is a process that, though not common, has been used in this state, mainly in cases of tuberculosis. Usually the first step in the process is for the health authority or department to execute and deliver an order to the individual.

**To impose control measures on an individual, does the health authority’s order have to be approved by a city, county, or district judge?**

Many health authorities are familiar with applying control measures to an individual (§81.083). This process begins with an order directed to the individual (sometimes called a “warning letter” or “control measure letter”) from the health authority or department, which does not have to be approved by a judge or court.

Any further coercive measures used to obtain compliance with the health authority’s order will require an order from a state district court. If a public health disaster exists as defined in §81.003(7), the initial order is not required. See §81.083(c). The health authority may go directly to a state district court.
What are the requirements for obtaining a court order if the individual does not comply with the health authority’s or department’s order?

A person may be subject to court order if s(he) does not comply with the department’s or health authority’s order and “the individual is infected or is reasonably suspected of being infected with a communicable disease that presents an immediate threat to the public health.” See §81.083(e).

If a public health disaster has been declared, a department or health authority order does not have to be issued; the department or health authority can go to a district court as described below.

Chapter 81, Subchapter G addresses “Court Orders for Management of Persons with Communicable Diseases.” The health authority must request the city, county, or district attorney to file an application for a court order. The attorney general will file an application if requested by the department. The application includes the order issued under §81.083, if inpatient treatment is being requested, and a medical evaluation. The medical evaluation must be signed by the commissioner of health or his designee or by a health authority with the concurrence of the commissioner or his designee. The designation of a health-care facility is also required. A health authority’s medical evaluation form meeting the requirements of the law is included in [the DSHS manual]. The commissioner’s or a designee’s concurrence may be obtained by contacting the department’s Office of General Counsel at (512) 458-7236 or by fax at (512) 458-7751. The facility designation and the commissioner’s concurrence will be prepared by the department.

A protective order may be obtained quickly from the court ordering the person’s immediate detention. Otherwise, a judge, or a jury if requested, will decide if mandatory inpatient treatment or some other treatment option is most appropriate. The district court will issue its order to the person and anyone necessary to carry out the order (e.g., law enforcement officers).

Obtaining a court order may not be a practical process in an emergency. A declaration of a state of emergency by the governor or the imposition of control measures on property or an area as described below may be a more expeditious way to address control measures needed in an emergency.

Who has the authority to impose quarantine or control measures on property?

The department or a local health authority may place property in quarantine. Section 81.084, subsection (a) provides:

If the department or a health authority has reasonable cause to believe that property in its jurisdiction is or may be infected or contaminated with a communicable disease, the department or health authority may place the property in quarantine for a period necessary for a medical examination or technical analysis of samples taken from the property to determine if the property is infected or contaminated. The department or health authority may tag an object for identification with a notice of possible infection or contamination.

Property may be an object, a parcel of land, or a structure, an animal, or other property on a parcel of land. See §81.084(j). Notice of the action to the person who owns or controls the property is required, unless a public health disaster has been declared. A sample notice form is included in [the DSHS manual]. Notice must be sent by registered or certified mail or personal
delivery to the person who owns or controls the property and, in some circumstances, be posted “on the land and at a place convenient to the public in the county courthouse.” See §81.084(b). Note that the posting requirement has changed and notice need not be posted directly on the courthouse door. A health authority needs to work closely with his/her city, county, or district attorney to comply with these requirements, especially if the property is privately owned.

**To impose control measures on property, does the health authority issue an order?**

Once the determination is made that the property is infected or contaminated, the department or health authority may issue a written order requiring the person who owns or controls the property to impose control measures to disinfect or decontaminate the property or to secure or destroy the property. See §81.084(c)–(d). A sample order is included in [the DSHS manual]. The department or health authority may issue further orders if necessary. See §81.084(d)–(d-1), (k). There is no requirement that a judge or court approve these orders.

**Does an order for control measures on property have to be approved by a city, county, or district judge?**

County or district court involvement may be necessary where “a person fails or refuses to comply with the orders of the department or health authority …” and there is “reason to believe that the property is or may be infected or contaminated with a communicable disease that presents an immediate threat to the public health.” See §81.084(e). If initiated by the department, the attorney general would petition the court. If initiated by a health authority, the appropriate city, county, or district attorney would petition the court.

**Who has the authority to quarantine or impose control measures on an area?**

The isolation of a city, county, or portion of such a political subdivision may be necessary where there is an outbreak of communicable disease in a finite geographic area. There is overlapping authority between the local health authority and the department. There are some actions that either the commissioner of health or a local health authority might take. Similarly, the governor has broad authority under the Texas Disaster Act, as discussed above, to take steps that will address a public health emergency. The governor has some authority to do things the public health sector lacks. This is a reason for careful coordination between all persons and entities involved in addressing a communicable disease emergency.

**What is the specific law on area quarantine?**

The most relevant provisions specific to area quarantine are §81.085(a)–(c):

(a) If an outbreak of communicable disease occurs in this state, the commissioner or one or more health authorities may impose an area quarantine coextensive with the area affected. The commissioner may impose an area quarantine, if the commissioner has reasonable cause to believe that individuals or property in the area may be infected or contaminated with a communicable disease, for the period necessary to determine whether an outbreak of communicable disease has occurred. A health authority may impose the quarantine only within the boundaries of the health authority’s jurisdiction.

(b) A health authority may not impose an area quarantine until the authority consults with the department. A health authority that imposes an area quarantine shall give written notice to
and shall consult with the governing body of each county and municipality in the health authority's jurisdiction that has territory in the affected area as soon as practicable.

(c) The department may impose additional disease control measures in a quarantine area that the department considers necessary and most appropriate to arrest, control, and eradicate the threat to the public health.

Absent preemptive action by the department under this chapter or by the governor under Chapter 418, Government Code (Texas Disaster Act of 1975), a health authority may impose in a quarantine area under the authority's jurisdiction additional disease control measures that the health authority considers necessary and most appropriate to arrest, control, and eradicate the threat to the public health.

Note that a health authority cannot impose an area quarantine prior to consulting with the department. See §81.085(b).

Have there been any legislative changes to the law on area quarantine?
House Bill 627 in 2003 added Chapter 508 to the Health and Safety Code relating to area quarantine. See Chapter 508. The legislative updates are reflected in the Statutory Appendix in [the DSHS manual]. The most important changes to the law on area quarantine include:

An area quarantine may be imposed by the commissioner or a local health authority (in addition to communicable disease outbreaks) if it is determined that the introduction of an environmental or toxic agent into the environment has occurred. These agents include radioactive, hazardous, or other toxic substances.

- The area quarantine must be accomplished by the least restrictive means necessary to protect the public health.
- The area quarantine will expire by the earlier of: 24 hours having passed, termination or superseding action by the governor by declaration of a state of disaster, or superseding action by the commissioner.
- There is a criminal penalty (third-degree felony) created for violation of an area quarantine.

Are there difficulties with imposing an area quarantine?
One problem that the local health authority or the commissioner of state health services would face is the determination of when an “outbreak of communicable disease occurs.” For example, does an outbreak occur when a crop duster is seen over a city spraying an unknown substance? Little guidance is provided in the law as to what would constitute an outbreak.

Again, a health authority must consult with the department before imposing an area quarantine. See §81.085(b).

In an instance where an outbreak has not occurred, it may be more expeditious to ask the commissioner to impose an area quarantine for the period necessary to determine whether an outbreak has occurred. This would accomplish the goal of isolating the geographic area if that is needed.

How does the commissioner or health authority impose an area quarantine?
The commissioner of state health services or the health authority “may use all reasonable means
of communication to inform persons in the quarantine area of the … orders and instructions…” The department or health authority must also publish a notice of the orders and instructions at least once a week in an area newspaper. See §81.085(e). The law does not specify a specific format or content of an order, instruction, or notice. The department has developed a sample format for an order, which is included in Part Five of [the DSHS manual].

**Does an order for area quarantine have to be approved by a city, county, or district judge?**

Court approval is not required for a health authority or commissioner’s order imposing an area quarantine. However, after a health authority has imposed an area quarantine (after consultation with the department), the authority must give “written notice to and shall consult with the governing body of each county and municipality in the health authority’s jurisdiction that has territory in the affected area as soon as practicable.” See §81.085(b).

**May an area quarantine include other control measures?**

A health authority may impose in an area quarantine “additional disease control measures that the health authority considers necessary and most appropriate to arrest, control, and eradicate the threat to the public health.” See §81.085(c). The department has similar authority. Those additional measures should be articulated in the orders, instructions, and notices referenced in [the DSHS manual].

**To impose control measures on a common carrier, does the health authority issue an order?**

Section 81.086 provides instructions for the department or health authority to issue an order to comply with control measures to “prevent the introduction and spread of communicable disease in this state.”

**Does an order for control measures on a common carrier have to be approved by a city, county, or district judge?**

The statute does not explicitly require the involvement of a court or prior consultation with any governmental entity before the department or local health authority initially acts. However, if control measures on individuals or property are imposed after inspection, the approval and order requirements for imposing such control measures will apply.

The law does not specify any format for an order or other documentation. The department has developed order forms which are included in Part Six of [the DSHS manual].

**Is there a criminal penalty for violating the Communicable Disease Prevention and Control Act?**

The Communicable Disease Prevention and Control Act has several criminal provisions. Unless otherwise noted, the provisions listed below are Class B misdemeanors (punishable by up to 180 days in jail and/or a fine of up to $2000). It is a criminal offense to:

(1) knowingly conceal or attempt to conceal the fact that a person has, has been exposed to, or is the carrier of a communicable disease or that the person’s minor child has a disease (§81.066);
(2) knowingly conceal, remove, or dispose of an infected or contaminated animal, object, vehicle, watercraft, or aircraft that is the subject of an investigation by the department, a health authority, or a peace officer (§81.067);

(3) knowingly refuse entry to the department, a health authority or a peace officer on presentation of a valid search warrant to conduct a disease investigation (Class A misdemeanor punishable by up to one year in jail and/or a fine of up to $4000) (§81.068);

(4) knowingly refuse to perform or allow the performance of control measures on individuals, property, areas, or carriers as ordered by a health authority or the department (§81.087);

(5) knowingly remove, alter or destroy a quarantine device (§81.088);

(6) knowingly transport into this state an object, individual or animal that is known to be infected or contaminated with a communicable disease (Class A misdemeanor unless done with intent to harm, and then it may be a third-degree felony punishable by 2–10 years in prison and/or a fine of up to $10,000) (§81.089); and

(7) knowingly fail or refuse to obey a rule, order or instruction of the department or health authority during an area quarantine (punishable as a third-degree felony by 2–10 years in prison and/or a fine of up to $10,000) [§81.085(h)].

Is anyone authorized to use force to enforce the Communicable Disease Prevention and Control Act?
The decision to use force would not belong to the department or local health authority. Law enforcement authorities have or would establish procedures for enforcing these laws.

Should specimens or other physical material be treated as evidence and, if so, how?
You should consult with law enforcement and use your medical expertise to determine whether any material or specimen would be useful to law enforcement authorities. If you determine that it is, you should document carefully the names, times, and dates of those who have access to the material. Law enforcement officials can advise you more specifically on how to document this “chain of custody.”
APPENDIX E
QUARANTINE OF INDIVIDUALS AND GROUPS
FLOWCHARTS AND SAMPLE FORMS

FLOWCHARTS

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SAMPLE FORMS

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Order for temporary protective custody

1. Terminates by 4 p.m. the following business day. Termination delayed to allow court to rule if applications for an order for protective custody and for a court order for management of a person with a communicable disease have been filed.

2. Order is issued based on representations in the court filings and not an adversary hearing.

Person remains free pending order for protective custody and/or court for management if TPC order not granted.

Motion for Order for Protective Custody; must allege:
1. Person meets all criteria for commitment; and
2. Person presents immediate threat to the public health.

Application for court order for management of person with a communicable disease; must include:
1. Person’s name and address;
2. Person’s county of residence;
3. Person is infected with communicable disease;
4. Copy of written order;
5. Medical evaluation.

Apprehension and detention under court order.

Order for temporary protective custody

1. Terminates by 4 p.m. the following business day. Termination delayed to allow court to rule if applications for an order for protective custody and for a court order for management of a person with a communicable disease have been filed.

2. Order is issued based on representations in the court filings and not an adversary hearing.

Person remains free pending order for protective custody and/or court for management if TPC order not granted.

Motion for Order for Protective Custody; must allege:
1. Person meets all criteria for commitment; and
2. Person presents immediate threat to the public health.

Appointment of attorney.

Order for temporary protective custody

Probable cause hearing within 72 hours of detention (delay allowed if location of person or court is in a public health disaster).

Order for continued detention (requires finding of risk of serious harm to self or others).

Order for temporary detention pending modification.

Motion for modification order.

Order for temporary management (1-90 days).

Order for extended management (90 days – 1 year).

Appeal or rehearing.

Designation of facility.

Criminal Penalty – Class B Misdemeanor.

Application for court order for management of person with a communicable disease; must contain:
1. Person’s name and address;
2. Person’s county of residence;
3. Person is infected with communicable disease;
4. Copy of written order;
5. Medical evaluation.

Appointment of attorney within 24 hours of application.

Notice to appropriate parties.

Disclosure of information/document to person’s attorney.

Recommends treatment and designation of facility by health authority or department (eligible facilities designated by Commissioner of Health).

Hearing on application.

Compliance with order, including transportation to facility and acknowledgement of delivery.
Order for temporary protective custody

1. Terminates by 4 p.m. the following business day. Termination delayed to allow court to rule if applications for an order for protective custody and for a court order for management of a group with a communicable disease have been filed.
2. Order is issued based on representations in the court filings and not an adversary hearing.

Group remains free pending order for protective custody and/or court for management if TPC order not granted.

Motion for Order for Protective Custody; must allege:
1. Group meets all criteria for commitment; and
2. Group presents immediate threat to the public health.

Application for court order for management of group with a communicable disease; must contain:
1. Description and location of group; 2. Narrative on how group was exposed or infected; 3. Estimate on number in group; 4. Names, addresses, and counties of residence if known (if not known statement of how sought and why unknown); 5. Statement that the members failed to comply with control measure orders; and 6. Medical evaluation of group – may be based on individual evaluation if doctor believes it to be representative of the group.

Apprehension and detention under court order

Order for temporary protective custody

1. Terminates by 4 p.m. the following business day. Termination delayed to allow court to rule if applications for an order for protective custody and for a court order for management of a group with a communicable disease have been filed.
2. Order is issued based on representations in the court filings and not an adversary hearing.

Group remains free pending order for protective custody and/or court for management if TPC order not granted.

Motion for Order for Protective Custody; must allege:
1. Group meets all criteria for commitment; and
2. Group presents immediate threat to the public health.

Seek court-ordered treatment; statements in application should be based on group actions (Person may make religious objection unless there is a proclaimed disaster, public health emergency, or area quarantine; in which case seek only protective custody)

Apprehension and detention under court order

Appointment of attorney

Probable cause hearing within 72 hours of detention (delay allowed if location of group or court is in a public health disaster).

Order for continued detention (requires finding of risk of serious harm to selves or others).

Order for release

Compliance with order

Motion denied

Group released

Release

Court-ordered outpatient services

Compliance with order

Motion for modification order

Order for temporary detention pending modification

Modification of order for outpatient treatment

Modification upheld

Appeal

Order for temporary management (1-90 days)

Order for extended management (90 days – 1 year)

Appeal or rehearing

Designation of facility

Compliance with order, including transportation to facility and acknowledgement of delivery

Threats to public health

Application for court order for management of group with a communicable disease; must contain:
1. Description and location of group; 2. Narrative on how group was exposed or infected; 3. Estimate on number in group; 4. Names, addresses, and counties of residence if known (if not known statement of how sought and why unknown); 5. Statement that the members failed to comply with control measure orders; and 6. Medical evaluation of group – may be based on individual evaluation if doctor believes it to be representative of the group.

Apprehension and detention under court order

Appointment of attorney

Probable cause hearing within 72 hours of detention (delay allowed if location of group or court is in a public health disaster).

Order for continued detention (requires finding of risk of serious harm to selves or others).

Order for release

Compliance with order

Motion denied

Group released

Release

Court-ordered outpatient services

Compliance with order

Motion for modification order

Order for temporary detention pending modification

Modification of order for outpatient treatment

Modification upheld

Appeal

Order for temporary management (1-90 days)

Order for extended management (90 days – 1 year)

Appeal or rehearing

Designation of facility

Compliance with order, including transportation to facility and acknowledgement of delivery

Threats to public health

Application for court order for management of group with a communicable disease; must contain:
1. Description and location of group; 2. Narrative on how group was exposed or infected; 3. Estimate on number in group; 4. Names, addresses, and counties of residence if known (if not known statement of how sought and why unknown); 5. Statement that the members failed to comply with control measure orders; and 6. Medical evaluation of group – may be based on individual evaluation if doctor believes it to be representative of the group.
Pursuant to Texas Health & Safety Code § 81.083, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby issue this order imposing (specified control measures or quarantine) on you (name or description of person or group).

This order is being issued in response to reasonable cause to believe that you are infected with, have been exposed to, or are a carrier of a communicable disease and therefore may be a threat to yourself or others.

You are hereby ordered to submit to the Department of State Health Services and/or the local health authority for testing. You must also (describe control measures here or name of facility to which person or group should report).

Additional information regarding any control measures to be implemented will be provided to you in a timely manner.

Failure to abide by this order and further instructions from the Department of State Health Services and/or the local health authority may result in criminal penalties ranging from a Class B misdemeanor to a felony in the third degree.

If you have any questions, information, or concerns, please contact (insert contact information here).

This order is issued under my authority as (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) on this the ___ day of ______, 20___.

Print name below; sign on the line
APPLICATION FOR ORDER FOR COURT MANAGEMENT OF
A PERSON WITH COMMUNICABLE DISEASE138

No. ____________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST § $ IN AND FOR
AND PROTECTION OF § $ ___________________ COUNTY, TEXAS

Application for Order for Management of a Person
with a Communicable Disease

The (insert appropriate title here: the Commissioner of Health or a local health authority in the State of Texas, under Texas Health and Safety Code § 121.021), by counsel, hereby respectfully applies to the Court for an Order for Management of a Person with a Communicable Disease.

1. On (date), written orders from (insert appropriate title here: the Commissioner of Health or a local health authority) were issued. See Exhibit A.

2. The person on whom the orders were imposed (initials of person, address, county of residence; if group, change wording as needed and supply description and location of group, estimated number, names, address, and counties of residence as known or statement regarding why they are not known must follow) is or is believed to be infected with a communicable disease that could constitute a threat to the public health.

3. The attached Affidavit of Medical Evaluation, Exhibit B, details the person’s current condition and is submitted in support of this application.

4. The applicant, upon information and belief, alleges that the person is likely to cause serious harm to self or continue to endanger the public health if not examined, observed, isolated, or treated as a result of a communicable disease.

138 To be filed in the district court in which the person is found, resides, or is receiving court-ordered services by the attorney general on behalf of DSHS or the municipal, county, or district attorney on behalf of the local health authority.
5. The applicant further alleges that the person has not complied with the orders issued (Exhibit A).

WHEREFORE, based upon the above, the applicant respectfully requests this Court to order (temporary or extended) management of the above referenced person.

Dated: _____________

Signed: _______________________________________


MEDICAL EVALUATION AFFIDAVIT

No. ____________________

THE STATE OF TEXAS & IN THE _____________ DISTRICT COURT
FOR THE BEST INTEREST $ $ IN AND FOR
AND PROTECTION OF $ $ ___________________ COUNTY, TEXAS

Affidavit of Medical Evaluation

I, the undersigned, (insert appropriate title here: the Commissioner of Health or a local health authority in the State of Texas, under Texas Health and Safety Code § 121.021) do hereby certify the following to the best of my knowledge:

1. The name and address of the physician who examined the proposed patient are:
   ____________________________________________________________________________

2. The name and address of the proposed patient are:
   ____________________________________________________________________________

3. On the _____ day of _____________, 20_____, the proposed patient was examined by the above named physician at the following location: ____________________________

4. A brief diagnosis of the physical and mental condition of the proposed patient on said date is: the proposed patient has a contagious form of (name of disease) and is refusing medical treatment.

5. An accurate description of the health treatment, if any, given by or administered by the examining physician is as follows: See Exhibit ________, which is attached hereto and incorporated by reference.

6. I am of the opinion that the proposed patient is infected with a communicable disease that presents a threat to the public health. As a result of that communicable disease, the proposed patient presents a substantial risk of serious harm to self and will continue to endanger the

139 To be submitted to the court by the Commissioner of Health or local health authority.
public health if not immediately restrained and observed, isolated, and/or treated. The detailed basis for this opinion is as follows: (Detailed information and reasoning.)

7. (If seeking extended management: I am further of the opinion that the proposed patient's condition is expected to continue for more than 90 days. The detailed basis for that opinion is as follows: __________________________. See Exhibit ___________.)

Signed: _______________________________________

SUBSCRIBED AND SWORN TO before me on this _________ day of _________________, 20_____.

Notary Public, __________________________ County, Texas

My commission expires: __________________________
I, the undersigned hearing officer, hereby notify the parties and attorneys involved in the above captioned action that a hearing has been set for the ___ day of ______, 20___, at (time and location).

The individuals to be so notified are: (names, addresses, and phone numbers as appropriate).

This hearing will be held to hear evidence on the application for an order from this Court for management of (initials of person or description of group).

Date: ___ day of ______, 20___.

Signed: ________________________________
ORDER ON APPLICATION FOR COURT ORDER FOR MANAGEMENT OF A PERSON WITH A COMMUNICABLE DISEASE 141

No. ____________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST § IN AND FOR
AND PROTECTION OF § IN AND FOR
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THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST § IN AND FOR
AND PROTECTION OF § IN AND FOR
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Order

On this the _____ day of __________, 20___, I, the undersigned hearing officer heard evidence concerning the need for court ordered management of ____________ (hereinafter referred to as the proposed patient). The proposed patient was given the opportunity to challenge the allegations that the proposed patient presents a substantial risk of serious harm to self or others and/or has failed to comply with legally issued control measure orders.

I have examined the affidavit of medical evaluation and ____________ (list other evidence considered). Based on the evidence, I find that the proposed patient is likely to cause serious harm to self and/or continue to endanger the public health as a result of infection or possible infection by (name of disease) if management is not ordered. (If order for extended treatment: I additionally find that the proposed patient’s condition is expected to continue for more than 90 days.)

In accordance with these findings, I hereby ORDER the proposed patient to submit to examination, observation, isolation, and/or treatment as determined by the local health authority, Department of State Health Services, and/or head of the facility at which the proposed patient is seen. (If order is for outpatient services: I hereby appoint the local health authority to monitor the proposed patient’s compliance and order the head of the facility providing treatment to the proposed patient to cooperate with the local health authority as needed to fulfill the terms of this order.)

Treatment and related activities under this order may be continued no longer than (90 days or 12 months, depending on whether it is a temporary or extended order).

SO ORDERED THIS: ___ day of ______, 20___.

Signed: ___________________________________________________________________

141 To be entered by trial judge.
WRIT OF COMMITMENT

No. ____________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST § IN AND FOR
AND PROTECTION OF § ___________________ COUNTY, TEXAS

Writ of Commitment

On this the _____ day of __________, 20___, I, the undersigned, entered an order directing treatment of (initials of proposed patient) at (name of facility), a copy of which is attached hereto.

In accordance with this Court’s order and this writ, the sheriff or constable is hereby ordered to accompany the proposed patient to (name of facility) and apply any control measures needed during such transportation as determined by the Department of State Health Services and/or local health authority.

SO ORDERED THIS: ___ day of ______, 20___.

Signed: _______________________________________

142 To be issued by trial judge. Two copies will be given to the sheriff or constable transporting the patient – one for the sheriff or constable and one for the head of the facility.
WRITTEN STATEMENT ACKNOWLEDGING ACCEPTANCE OF THE PERSON AND ANY PERSONAL PROPERTY

No. __________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST §
AND PROTECTION OF § IN AND FOR §
_____________________________ § ___________________ COUNTY, TEXAS

Acknowledgement of Delivery of Patient and Personal Belongings

On this the ____ day of _____, 20____, (initials of patient) was delivered by sheriff or constable to (name of facility). As the head of the facility, I hereby acknowledge receipt of (initials of patient) and the following personal property of the patient's: (list personal property) and will ensure treatment commences pursuant to the orders of the Court in this matter and instructions from the Department of State Health Services and/or local health authority.

Signed: ______________________________

SUBSCRIBED AND SWORN TO before me on this _________ day of
_________________________, 20_____.

Notary Public, ______________________________ County, Texas

My commission expires: ______________________________

143 To be written by the head of the treating facility. One copy must be given to the sheriff or constable who delivered the patient, and one copy must be filed with the court clerk after the person is admitted and the writ of commitment is received.
Motion for Temporary Protective Custody

No. ____________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST § $ IN AND FOR
AND PROTECTION OF § $ ___________________ COUNTY, TEXAS

Motion Seeking Temporary Protective Custody

The (insert appropriate title here: the Commissioner of Health or a local health authority in the State of Texas, under Texas Health and Safety Code § 121.021), by counsel, hereby respectfully applies to the Court for an Order for Temporary Protective Order of (initials of individual).

1. On (date), written orders from (insert appropriate title here: the Commissioner of Health or a local health authority) were issued. See Exhibit A.

2. The person on whom the orders were imposed, (initials of person, address, county of residence; or, if group, description and location of group, estimated number, names, address, and counties of residence as known or statement regarding why they are not known must follow) is or is believed to be infected with a communicable disease that could constitute a threat to the public health.

3. An application for an order for management of a person with a communicable disease and motion for protective custody will be filed with this Court during the next business day.

144 To be filed in the court where the motion for protective custody and/or application for court management of a person with a communicable disease will be filed. To be submitted by the attorney general on behalf of DSHS or the municipal, county, or district attorney on behalf of the local health authority.
4. The applicant, upon information and belief, alleges that there is probable cause to believe
the person poses a substantial risk of serious harm to self or others should he remain at
liberty pending orders on the above-referenced motion and application.

WHEREFORE, based upon the above, the applicant respectfully requests this Court to order
temporary protective custody for the above-referenced person/group.

Dated: _________________

Signed: _________________________________
ORDER FOR TEMPORARY PROTECTIVE CUSTODY

No. ____________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST § IN AND FOR
AND PROTECTION OF § ___________________
§ COUNTY, TEXAS

Order

On this the _____ day of __________, 20___, I, the undersigned hearing officer, reviewed evidence concerning the need for temporary protective custody for ____________ (hereinafter referred to as the proposed patient).

Based on the evidence, I find that the proposed patient is likely to cause serious harm to self or others should the proposed patient remain free at this time due to the proposed patient’s suspected infection with a communicable disease.

In accordance with these findings, I hereby ORDER the proposed patient to submit to examination, observation, isolation, and/or treatment as determined by the local health authority, Department of State Health Services, and/or head of the facility at which the proposed patient is seen. (If order is for outpatient services: I hereby appoint the local health authority to monitor the proposed patient’s compliance and order the head of the facility providing treatment to the proposed patient to cooperate with the local health authority as needed to fulfill the terms of this order.)

This ORDER terminates at 4 p.m. on ____ (next business day) unless a motion for protective custody and/or application for a court order for treatment of a person with a communicable disease is filed prior to that time.

SO ORDERED THIS: ___ day of ______, 20___.

Signed: _______________________________________
Motion for Protective Custody

The (insert appropriate title here: the Commissioner of Health or a local health authority in the State of Texas, under Texas Health and Safety Code § 121.021), by counsel, hereby respectfully applies to the Court for an order directing (initials of person) to submit to protective custody.

1. On (date), written orders from (insert appropriate title here: the Commissioner of Health or a local health authority) were issued. See Exhibit A.

2. The person on whom the orders were imposed, (initials of person, address, county of residence; or, if group, description and location of group, estimated number, names, address, and counties of residence as known or statement regarding why they are not known must follow) is or is believed to be infected with a communicable disease that could constitute a threat to the public health.

3. The attached Affidavit of Medical Evaluation, Exhibit B, details the person’s current condition and is submitted in support of this application.

4. The applicant, upon information and belief, alleges that the person is likely to cause serious harm to self and/or constitute an immediate threat to the public health if not examined, observed, isolated, or treated as a result of a communicable disease. This allegation is based on: (detailed basis for belief).
5. The applicant further alleges that the person has not complied with the issued orders (Exhibit A).

WHEREFORE, based upon the above, the applicant respectfully requests this Court to order protective custody for (initials).

Dated: _____________

Signed: ________________________________
NOTIFICATION OF PROBABLE CAUSE HEARING

No. ____________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST § IN AND FOR
AND PROTECTION OF § ___________________ COUNTY, TEXAS

Notice of Probable Cause Hearing

On this the _____ day of __________, 20___, I, the undersigned hearing officer, heard evidence concerning the need for protective custody of ____________ (hereinafter referred to as the proposed patient). The proposed patient was given the opportunity to challenge the allegations that the proposed patient presents a substantial risk of serious harm to self or others.

The proposed patient and his/her attorney ___________ have been given written notice that the proposed patient was placed under an order of protective custody and the reasons for such order on ___________ (date of notice).

I have examined the affidavit of medical evaluation and ______________ (other evidence considered). Based on the evidence, I find that there is probable cause to believe that the proposed patient presents a substantial risk of serious harm to self or to others such that the proposed patient cannot be at liberty pending a final hearing because the proposed patient is infected with or reasonably suspected of being infected with a communicable disease that presents an immediate threat to the public health and the proposed patient has failed or refused to comply with the orders of the health authority or the Texas Department of State Health Services delivered on ____ (date of service).

Date: ___ day of ______, 20___.

Signed: _______________________________________

145 This is the form required by statute; it is not merely a proposed form.
146 To be issued by the trial judge.
No. ____________________

THE STATE OF TEXAS § IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST §
AND PROTECTION OF §
§ IN AND FOR
§
§ ___________________ COUNTY, TEXAS

Order

On this the _____ day of __________, 20___, I, the undersigned hearing officer, heard evidence concerning probable cause supporting the need for protective custody of ____________ (hereinafter referred to as the proposed patient). The proposed patient was given the opportunity to challenge the allegations that the proposed patient presents a substantial risk of serious harm to self or others, an immediate threat to the public health, and/or has failed to comply with legally issued control measure orders.

I have examined the affidavit of medical evaluation and ______________ (list other evidence considered). Based on the evidence, I find that the proposed patient is likely to cause serious harm to self and/or poses an immediate threat to the public health if the proposed patient does not remain in protective custody.

In accordance with these findings, I hereby ORDER the proposed patient to remain under the care of (name of facility providing temporary protective custody).

SO ORDERED THIS: ___ day of ______, 20___.

Signed: _______________________________________

147 To be issued by the trial judge.
ORDER FOR RELEASE

No. ____________________

THE STATE OF TEXAS $ IN THE __________ DISTRICT COURT
FOR THE BEST INTEREST $ § IN AND FOR
AND PROTECTION OF $ § IN AND FOR
§
§
$ ________________ COUNTY, TEXAS

Order

On this the _____ day of __________, 20___, I, the undersigned hearing officer, heard evidence concerning probable cause supporting the need for protective custody of ____________ (hereinafter referred to as the proposed patient). The proposed patient was given the opportunity to challenge the allegations that the proposed patient presents a substantial risk of serious harm to self or others, an immediate threat to the public health, and/or has failed to comply with legally issued control measure orders.

I have examined the affidavit of medical evaluation and ____________ (list other evidence considered). Based on the evidence, I find that there is insufficient cause to believe the proposed patient is likely to cause serious harm to self and/or poses an immediate threat to the public health if the proposed patient does not remain in protective custody.

In accordance with these findings, I hereby ORDER the proposed patient to be released by (name of facility providing temporary protective custody).

SO ORDERED THIS: ___ day of ______, 20___.

Signed: _______________________________________

148 To be issued by the trial judge
DESIGNATION OF FACILITY

No. __________________________

THE STATE OF TEXAS $ IN THE ____________ DISTRICT COURT
FOR THE BEST INTEREST $ IN AND FOR
AND PROTECTION OF $ ________________ COUNTY, TEXAS

Designation of Health Facility

Pursuant to Chapter 81 of the Texas Health and Safety Code, I, the undersigned (insert appropriate title here: Commissioner of Health of local health authority of named region), do hereby designate the following appropriate in-patient health facility as a suitable place for detention of the person who is the subject of this suit.

(If local health authority: This facility has previously been designated to provide needed treatment of communicable diseases by the Commissioner of Health.)

Done at __________________________ County, Texas, on this the
__________ day of _________________, 20____.

____________________________________
Title

149 To be submitted to the court by the Commissioner of Health of local health authority.
APPENDIX F
QUARANTINE OF PROPERTY
FLOWCHART AND SAMPLE FORMS

FLOWCHART

Quarantine of Property.................................................................................................................. p. 99

SAMPLE FORMS

Notice to Owner of Animal or Property .................................................................................. p. 101
Destruction Order .......................................................................................................................... p. 103
Termination of Measures Regarding Animal or Property ......................................................... p. 105
Suspect property is infected or contaminated

Provide notice to owner and quarantine property

Class B misdemeanor to knowingly remove, conceal, or dispose of property under investigation

Take samples for testing, offer similar samples to the owner

Class A misdemeanor to refuse entry or inspection

Failure to comply is a Class B misdemeanor

Determine appropriate control measures

Release quarantine if no contamination or infection found

If no appropriate control measures exist, require owner to destroy property. If land, require secure fencing and sealing off of all structures

Release quarantine when safe
Pursuant to Texas Health & Safety Code § 81.084, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby issue this order imposing (specified control measures or quarantine) on (description of property).

Based on information and belief, you are the (insert appropriate title: owner, person in control, registered agent for corporate owner or registered agent for the corporate person in control) of (insert description of property).

This order is being issued based on reasonable cause to believe that the (insert animal or property) is or may be infected or contaminated by a communicable disease that could constitute a threat to the public health.

You are hereby ordered to authorize entry to and submit the (insert animal or property) to investigation by the Department of State Health Services and/or the local health authority. The property at issue may not be moved, caused to move, or allowed to move from its current location until authorization is received from the Department of State Health Services or local health authority.

Additional information regarding any technically feasible control measures to be implemented will be provided to you in a timely manner.

(Insert if real property: Until further notice, ingress to or egress from the property is prohibited except by authorized public health personnel. A copy of this notice shall by posted on the land and at a place convenient to the public in the county courthouse.)

If you have any questions, information, or concerns or if you are not the owner, person in control, or registered agent for the (insert animal or property), please contact (insert contact information here).

Failure to abide by this order and further instructions from the Department of State Health Services and/or the local health authority may result in criminal penalties ranging from a Class B misdemeanor to a felony in the third degree.

This order is issued under my authority as (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) on this the ___ day of ______, 20___.

___________________________
Print name below; sign on the line

150 Please note that Texas law does not specify the forms on which these documents must be written. The following are merely examples.
151 To be issued by the Commissioner of Health or local health authority.
Pursuant to Texas Health & Safety Code § 81.084, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby issue this order directing you to destroy (description of property).

(Substitute if real property: Pursuant to Texas Health & Safety Code § 81.084, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby issue this order directing you to securely fence off and seal (description of property).)

Based on information and belief, you are the (insert appropriate title: owner, person in control, registered agent for corporate owner or registered agent for the corporate person in control) of (insert description of property).

This order is being issued following an investigation that has determined that there are no feasible and effective control measures available to address the property's contamination with (insert name of communicable disease).

Failure to abide by this order and further instructions from the Department of State Health Services and/or the local health authority may result in criminal penalties ranging from a Class B misdemeanor to a felony in the third degree.

If you have any questions, information, or concerns or if you are not the owner, person in control, or registered agent for the (insert animal or property), please contact (insert contact information here).

This order is issued under my authority as (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) on this the ___ day of ______, 20___.

________________________________________
Print name below; sign on the line

152 To be issued by the Commissioner of Health or local health authority.
TERMINATION OF MEASURES REGARDING ANIMAL OR PROPERTY

Pursuant to Texas Health & Safety Code § 81.084, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby terminate my previous order imposing (control measures and/or quarantine) on the following property: (insert appropriate description).

This termination is being issued based on reasonable cause to believe that the control measures previously imposed have been successful and the property is no longer a threat to the public health.

If you have any questions, information, or concerns, please contact (insert contact information here).

This termination is effective on this the ___ day of ______, 20___.

___________________________
Print name below; sign on the line

153 To be issued by the Commissioner of Health or the local health authority.
APPENDIX G
QUARANTINE INVOLVING CARRIERS
FLOWCHART AND SAMPLE FORMS

FLOWCHART

Actions Involving Carrier or Private Conveyances ................................................................................................ p. 109

SAMPLE FORMS

Control or Quarantine Order ................................................................................................................................................. p. 111
Termination of Measures Regarding Carriers or Conveyances ....................................................................................... p. 115
Vehicle or craft in Texas

Reasonable cause to believe it traveled through or from an area infected or contaminated by a communicable disease

Determine control measures and issue related order – order vehicle stopped and obtain information on the passengers and cargo

Owner may be ordered to pay costs of any technically feasible control measures

Release

Knowingly transporting infected or contaminated people or property is a Class A misdemeanor; if intent to cause harm or defraud then felony of the third degree
Pursuant to Texas Health & Safety Code § 81.086, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby issue this order imposing (specified control measures or quarantine) on (description of carrier or vehicle).

You have been identified as the (insert appropriate title: owner, operator, or authorized agent in control of) the described carrier or conveyance.

This order is being issued based on reasonable cause to believe that the vehicle traveled through an area infected or contaminated by a communicable disease that could constitute a threat to the public health.

You are hereby ordered to stop the carrier or vehicle at its present location and submit to investigation by the Department of State Health Services and/or the local health authority.

At this initial stage in the investigation, the following information is required and must be provided by you by (insert deadline):

1. List of operators, crewpersons, and passengers on the vehicle.
2. All cargo carried by the vehicle.
3. Any illness or suspected illness experienced by any operator, passenger, or crewperson on the vehicle.
4. Any condition on board during the journey that may have led to spreading of any communicable disease.
5. Any medical or health instructions provided to you or imposed on the vehicle or any of its occupants or cargo during the journey.

Additional information regarding any technically feasible control measures to be implemented will be provided to you in a timely manner.

154 Please note that Texas law does not specify the forms on which these documents must be written. The following are merely examples.
155 To be issued by the Commissioner of Health or the local health authority.
Failure to abide by this order and further instructions from the Department of State Health Services and/or the local health authority may result in criminal penalties ranging from a Class B misdemeanor to a felony in the third degree.

If you have any questions, information, or concerns, please contact (insert contact information here).

This order is issued under my authority as (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) on this the ___ day of ______, 20___.

___________________________
Print name below; sign on the line
Pursuant to Texas Health & Safety Code § 81.086, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby terminate my previous order imposing (control measures and/or quarantine) on the following vehicle or carrier: (insert appropriate description).

This termination is being issued based on reasonable cause to believe that the control measures previously imposed have been successful and the vehicle and related persons and cargo impacted are no longer a threat to the public health.

If you have any questions, information, or concerns, please contact (insert contact information here).

This termination is effective on this the ___ day of ______, 20___.

___________________________
Print name below; sign on the line

156 To be issued by the Commissioner of Health or the local health authority.
APPENDIX H

AREA QUARANTINE

FLOWCHART AND SAMPLE FORMS

FLOWCHART

Area Quarantine .............................................................................................................................................................................. p. 119

SAMPLE FORMS

Order Imposing an Area Quarantine ........................................................................................................................................ p. 135
Notice for Publication ................................................................................................................................................................. p. 123
Request for Immunization Information .......................................................................................................................... p. 125
Order Regarding Admission to Particular Health Facilities ............................................................................ p. 127
Termination of Area Quarantine .......................................................................................................................................... p. 129
Area Quarantine
(Texas Health & Safety Code § 81.085)

- Issue area quarantine order upon reasonable cause to believe persons or property contaminated (if HA, must consult with DSHS and give notice to impacted governing bodies)

- If needed, cooperative agreements with neighboring states

- Publish notice in newspaper of general circulation each week

- Use other reasonable means to communicate with persons in the area of the quarantine and needed actions

- If needed, request disclosure of individuals' immunization records and take any appropriate action

- If needed, commissioner’s court of affected county or governing body of municipality or hospital district may suspend admission of patients seeking elective treatment; does not impact responsibilities to indigent residents

- Failure to comply with area quarantine and related orders is a felony of the third degree

Termination by DSHS (HA may only terminate with DSHS consent)
ORDER IMPOSING AN AREA QUARANTINE

Pursuant to Texas Health & Safety Code § 81.085, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby issue this order imposing an area quarantine.

The area covered by this quarantine includes: (insert appropriate description: address for real property, county, appraisal district, municipality, etc.).

The imposition of this order is required based on information and belief that an outbreak of a communicable disease has occurred and impacted the quarantine area.

Individuals in the quarantined area must (insert appropriate control measures here).

Individuals covered by the quarantine are prohibited by law from: concealing or attempting to conceal their exposure to a communicable disease; prohibiting entry or impeding an investigation by the Department of State Health Services or local health authorities; knowingly concealing, removing, or destroying an item that is under investigation; and failing to comply with all ordered control measures.

Additional control measures, if needed, will be explained in further written instructions.

Failure to comply with area quarantine orders constitutes a felony of the third degree.

This quarantine will remain in effect until further notice. Once the area has been determined not to pose a threat to the public health, the area quarantine will be terminated.

Additional information about this quarantine and imposed control measures will be published weekly in (insert name of newspaper of general circulation). Other means of communication may also be used.

If you have any questions, information, or concerns, please contact (insert contact information here). Please contact us immediately if you believe you have been exposed to or are infected by (name of disease).

The outbreak may affect an area or areas outside my jurisdiction. In such a case, you may be contacted by public health officials from that area.

This order is issued under my authority as (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) on this the ___ day of _______, 20___.

___________________________
Print name below; sign on the line

157 Please note that Texas law does not specify the forms on which these documents must be written. The following are merely examples. Bolded language in the forms is believed imperative for the average impacted person to read.

158 To be issued by the Commissioner of Health or local health authority of the impacted area.
An area quarantine has been imposed on (area) by (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) due to a potential threat to the public health.

Individuals in the quarantined area must (insert appropriate control measure here).

Individuals covered by the quarantine are prohibited by law from: concealing or attempting to conceal their exposure to a communicable disease; prohibiting entry or impeding an investigation by the Department of State Health Services or local health authorities; knowingly concealing, removing, or destroying an item that is under investigation; and failing to comply with all ordered control measures.

If you have any questions, information, or concerns, please contact (insert contact information here).

Please contact us immediately if you believe you have been exposed or are infected by (name of disease).

Information about this quarantine will be published on a weekly basis in this newspaper. Please continue to review these notices for additional, updated information.

159 To be provided by the Department of State Health Services or local health authority’s office to the newspaper of general circulation in the affected area.
Pursuant to the authority invested in me by Texas Health & Safety Code § 81.085, I, the \textit{appropriate title}: Commissioner of Health or Local Health Authority for \textit{insert name of region} hereby request all immunization records for \textit{insert individual's name and identifying information here}, who is currently in an area covered by an area quarantine.

Please note this information may be disclosed without the patient’s permission under the Health Insurance Portability and Accountability Act (HIPAA) provisions regarding public health activities and information required to be disclosed by law.

This request is issued under my authority as \textit{appropriate title}: Commissioner of Health or Local Health Authority for \textit{insert name of region} on this the ___ day of ______, 20___.

\textit{Print name below; sign on the line}

\textit{To be issued by the Commissioner of Health or local health authority of the impacted area.}
ORDER REGARDING ADMISSIONS TO PARTICULAR HEALTH FACILITIES

WHEREAS this (insert name of county, municipality or hospital district) is under an area quarantine issued on the ___ day of ____, 20___ by (insert the Commissioner of Health or local health authority);

WHEREAS, in accordance with the area quarantine order, treatment, isolation, and quarantine quarters must be provided to individuals at an appropriate health facility;

WHEREAS appropriate facilities are available in the impacted area at (insert name of facility);

IT IS HEREBY ORDERED that (insert name of facility) suspend admission of patients seeking elective treatment to the extent such suspension would not violate the Indigent Health Care and Treatment Act and operate as a quarantine, isolation, and/or treatment facility in cooperation with the local health authority and/or the Department of State Health Services.

This order is issued pursuant to the power invested in (insert this court or this body) by Texas Health & Safety Code § 81.084 on this the ___ day of ______, 20___.

___________________________
Print name below; sign on the line

161 To be issued by the commissioner’s court of the affecting county or governing body of the municipality or hospital district.
Termination of Area Quarantine

Pursuant to Texas Health & Safety Code § 81.085, I, the (insert appropriate title: Commissioner of Health or Local Health Authority for insert name of region) hereby terminate my previous order imposing an area quarantine on the following area: (insert appropriate description address for real property, county, appraisal district, municipality, etc.).

This termination is being issued because the area has been determined within a reasonable degree of medical and scientific certainty to no longer pose a threat to the public health.

If you have any questions, information, or concerns, please contact (insert contact information here).

(Use only if issued by local health authority: This termination is made with the consent and agreement of the Department of State Health Services.)

This termination is effective on this the ___ day of ______, 20___.

___________________________
Print name below; sign on the line

162 To be issued by the Commissioner of Health or the local health authority.
Control Measures and Public Health Emergencies

A Texas Bench Book

Contains flowcharts and sample forms

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