Follow-up for Positive COVID-19 Cases and their Close Contacts

Tools for Local Boards of Health

This call and webinar is for local health departments and infection control preventionists engaged in COVID-19 case investigation and follow up. If you are a member of the press please disconnect now.

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Topics Today

- Privacy around MAVEN data
- COVID-19 Basics
  - Transmission
  - Common Vocabulary (PUIs, Confirmed Cases, Presumptive-Positives, Close Contacts, Isolation, Quarantine)
- Key Documents (Tools for the Field)
- LBOH Follow-Up
  - Background (Where we started)
  - Confirmed Cases – Interviews & Follow-Up
  - Contacts – Notifications & Follow-Up
- MAVEN Tools & Tips
- Frequently Asked Questions
- Translation Resources
We know this is changing daily.
Requesting MAVEN Access

- Email isishelp@state.ma.us to request MAVEN access.
- One reviewed Lionel/Reed/Scott will email you a user request form.
- Staff requesting access should be performing active case investigation and follow-up for their jurisdiction(s).
- You will need a valid town/city or organization email address when submitting your MAVEN user request form. We can no longer create Virtual Gateway accounts with personal email addresses.
105 CMR 300 regarding Confidentiality

• **300.120**: Confidentiality (A) All confidential personally identifying information, whether kept in an electronic system or paper format, including but not limited to, reports of disease, records of interviews, written or electronic reports, statements, notes, and memoranda, about any individual that is reported to or collected by the Department or local boards of health pursuant to 105 CMR 300.000, shall be protected by persons with knowledge of this information. Except when necessary for the Commonwealth’s or local jurisdiction’s disease investigation, control, treatment and prevention purposes, or for studies and research authorized by the commissioner pursuant to M.G.L. c. 111, § 24A, the Department and local boards of health shall not disclose any personally identifying information without the individual’s written consent. Only those Department and local board of health employees who have a specific need to review personal data records for lawful purposes of the Department or local board of health shall be entitled access to such records. The Department and local boards of health shall ensure that all paper records and electronic data systems relating to information that is reported to or collected by the Department or local boards of health pursuant to 105 CMR 300.000 are kept secure and, to the greatest extent practical, kept in controlled access areas. (B) Notwithstanding 105 CMR 300.120(A), the Department shall not disclose to the federal government, the Commonwealth or any of its political subdivisions or any agency, agent, or contractor of said Commonwealth or federal government, the identity of any individual with HIV or AIDS reported to the Department under 105 CMR 300.000.

Transmission of COVID-19

- **Mode of transmission:** Early reports suggest person-to-person transmission most commonly happens during close exposure to a person infected with COVID-19, primarily via respiratory droplets produced when the infected person coughs or sneezes.
  - Droplets can land in the mouths, noses, or eyes of people who are nearby or possibly be inhaled into the lungs of those within close proximity.
  - The contribution of small respirable particles, sometimes called aerosols or droplet nuclei, to close proximity transmission is currently uncertain. However, airborne transmission from person-to-person over long distances is unlikely.

Laboratory Confirmed COVID-19 Cases

• All Laboratory Confirmed COVID-19 Cases are considered “CONFIRMED” as of March 14, 2020.
  • Includes CDC, MA State Public Health Lab, and approved Commercial Labs.

• Previous Test Results (Prior to March 14):
  “Presumptive Positive”
  • Had tested positive by PCR at MPDH SPHL
  • Awaiting CDC confirmation
  • “Probable” case status in MAVEN.

  “Confirmed Cases”
  • Has tested positive by PCR at MDPH SPHL
  • Has tested positive by PCR at CDC
  • “Confirmed” case status in MAVEN.
Who Can Get Tested for COVID-19?

- Testing started out only through CDC.
- Testing then expanded to State Laboratories.
- Testing is currently being rolled out through commercial labs and also some larger medical providers. Expanding daily.
- Preliminarily patients had to meet very strict testing criteria and be preapproved.
  - March 13, 2020, MDPH published clinical advisory with expanded testing guidance outlining who should be tested and where to send those specimens (State Lab vs. elsewhere).
Who Can Get Tested for COVID-19?

- March 13, 2020, MDPH published clinical advisory with expanded testing guidance outlining additional categories for testing.
- Recommends specimens be submitted to the State Lab or commercial lab based upon different criteria
- Public Health Pre-Approval for testing is NO LONGER REQUIRED.
Person Under Investigation (PUI)

- A Person Under Investigation for possible infection with COVID-19.
  - Early term in the outbreak related to patients who met investigation criteria (symptoms and epidemiological risk) and qualified for testing.
    - Typically referred to suspect cases waiting for testing results.
    - Lots of paperwork and data collection related to PUIs (PUI Forms, PUI Numbers, etc.)
    - Lots of CDC and public health resources still refer to PUIs.
  - With expanded testing opportunities, not every patient is investigated prior to testing, and fewer people receive comprehensive public health investigations prior to testing.
    - More Applicable Key Terms Today: Suspect Case, Confirmed Case, Contact, & Revoked.
Who is considered a close contact?

- Close Contact is Defined as:
  - Being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time;
    - close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case
    - or -
  - b) Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on) while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection).
**Isolation vs. Quarantine**

**ISOLATION**
- For **symptomatic** people.
- For Confirmed COVID-19 Cases.
- Prevents people from infecting others
- **LASTS UNTIL THE PERSON IS NO LONGER CONTAGIOUS**

**QUARANTINE**
- For **asymptomatic** people who have had an exposure (i.e. travelers from high risk areas, close contacts of confirmed cases)
- Prevents people from infecting others in the event they develop symptoms
- **LASTS FOR 14 DAYS FROM LAST EXPOSURE. (If you don’t develop illness, you are then released.)**

**CASES**

**CONTACTS**
Key Documents for COVID-19 Follow-Up

1. COVID-19 Interview Tool for Confirmed Cases and Identifying Their Contacts (March 16, 2020)
   • Paper-based interviewing tool to guide your interview with confirmed cases.

2. Close Contact Identification Form (March 16, 2020)
   • Paper-based tool to assist in identifying and tracking close contacts.
     • Space for 5 contacts per page.

3. Isolation Guidance (For Cases)
   • MDPH Guidelines – give these to Confirmed Cases

4. Quarantine Guidance (For Contacts)
   • MDPH Guidelines – give these to quarantined contacts

5. Confirmed Positives Follow-up SOP for LBOHs
   • Outlines the process for following up on positive cases and their contacts.
Background on Follow-Up

- February: Returning travelers (beginning with China) were identified for quarantine.
  - MDPH received CDC lists and created contact events for 14 Day quarantine period & monitoring.
- 1/25/2020: First Confirmed Case in MA (Travel related)
- End of February/Early March – follow-up volume expanded to include positive cases identified here in MA and their contacts.
- As of 3/17/2020: Returning travelers are still asked to quarantine for 14 days. CDC is still sending some lists (and we create MAVEN contact events when available).
- CDC also sends some notifications for Contacts (from planes, Index Cases in other states, etc.)
LBOH Follow-Up: Confirmed Cases

- Confirmed Cases
  - Interview Cases
    - Demographics
    - Clinical Information
    - Risk history (how they may have been exposed)
    - Identifying Close Contacts/Exposures of Concern
  - Answering Questions/Concerns
  - Ensuring Isolation is Followed
    - Use Isolation Guidelines Document
- Use Interview Tool
- Use Close Contact Form
- Use Isolation Guidelines Document
LBOH Follow-Up: Contact Notification

• Create Contact Event in MAVEN
  • Share MAVEN Events with relevant jurisdictions.

• Contact Notification
  • Notify Contacts of Exposures
    • Determine Quarantine
    • Establish Follow-Up Plan
  • Answering Questions/Concerns
  • Ensuring Quarantine is Followed
    • Use Quarantine Guidelines Document

Use MAVEN Tip Sheet

Use Quarantine Guidelines Document
How will I find out there is a positive case in my jurisdiction?

- MDPH runs a report of positive cases once a day and notifies the locals
  - For your first positive, we will call you to discuss the process
  - For subsequent positives, we will assign your LBOH group a task in MAVEN which automatically sends you a notification email
- You may see a positive result come through via MAVEN before you have been notified by MDPH
- You may begin the follow-up process before hearing from MDPH
How is the case notified they are positive?

• Most providers receive the test results electronically and should call the patient upon receipt of results.
• Providers who are not set-up to receive electronic results will get a call from MDPH.
• Some providers are not calling out results right away, so you may be the first one to inform the case they are positive.
  • That is OK. LBOH are frequently the first to notify a patient.
  • Remember, these patients are waiting for these results. They want to know as soon as possible.
What should I tell the case?

- Inform them they are under isolation **immediately (if not already)**.
- They should isolate away from others in the household.
- Provide *MDPH Isolation Guidelines*.
- They will be under isolation until they are cleared. **Guidance Pending on this.**
- Should seek healthcare if symptoms worsen
  - Make Sure to call in advance if seeking medical care so sites can be prepared to receive the case.
- Use the Interview Tool.
  - The data you collect will help inform this outbreak and the epidemiology of this new pathogen. You may be the only person collecting data on this case’s risks, exposures, and clinical outcomes. We are relying on your investigation.
Use the Interview Tool to Guide You

- Page 1 Covers The Confirmed Case and their Clinical Symptoms, Complications, and possible source of exposure.

- We are trying to determine risk, severity of illness, and if there are certain affected populations.

THINK ABOUT THE CASE.
Use the Interview Tool to Guide You

- Page 2 helps describe what is considered “Close Contact” and helps you and the Case brainstorm different categories of interactions with people that might have led to exposures.

- We are trying to determine who should be notified. Where might this case have exposed others?

THINK ABOUT CONTACTS.
Use the Close Contact Identification Form to Make Notes on Individual Contacts

- This is just a tool to help you collect sufficient identifying information on Close Contacts (not a required form).

- Keep copies of this form (tracks 5 contacts per page).

You can add these named contacts to MAVEN.
Let’s Look at the Interview Tool
How do I conduct a contact tracing investigation?

- Ask the case to identify everyone they have had **close contact with** beginning with symptom onset
  - Inquire about air travel and high risk exposures
- **Close contact definition:** Being within 6 feet for 15 minutes or more
  - Medical settings may use a more conservative definition of “close contact.”
- They do not need to identify people they had contact with before symptom onset
- Collect **name, phone number, address, and date of exposure.**
  - Knowing TOWN helps to make sure the right LBOH can see the event and follow up.
What do I do about the contacts?

- Notify contacts they have been exposed to a confirmed case and need to enter quarantine for 14 days from day of exposure
- Send the contacts the *MDPH Quarantine letter*
- Actively monitor the contacts
  - Ideally daily check-ins (text message okay)
  - Check for symptoms and ensure they are quarantining
- Input the contacts into MAVEN
  - Long List of Contacts – USE EXCEL.
    - Can utilize the contact tracing Excel spreadsheet and MDPH can upload into MAVEN
    - This will then create the Contact Events for you and other LBOHs – so be sure to add good notes in the Notes Field.
- Use the Contact Monitoring QP to keep track of monitoring status and temperature
  - *Contacts will now appear in a new workflow! YAY!*
What’s Needed in MAVEN for Contacts?

- Enough Identifying Information to Contact Them.
- Contact Monitoring Question Package (QP#6)
  - Contact Monitoring Status
    - In Progress – we know you are monitoring this contact.
    - Left Blank – we wonder what’s going on
    - Completed – The quarantine is complete.
    - Transfer – needs to go to another jurisdiction (update the notes so we know).
- Last Potential Exposure Date (helps establish quarantine period)
- Last Day of Required Monitoring (14 days after exposure)
- You can track daily temps, but this is not required.
- Once the 14 day quarantine/monitoring period is over and the contact is done, CRF Reviewed in the Admin Question Package will clear the contact from your workflow.
How do I put contacts in MAVEN?

USE MAVEN TIP SHEET

To create one MAVEN contact event at a time:
1. Open the MAVEN event you want to link the created contact to.
2. In the Basic Information section Click View next to Linked Events/Contacts.
3. Under Link Events choose Create Linked Event, the appropriate Link Type (Most will be “CONTACT”), and the Event.
4. Enter Demographic and Contact Information.
5. Click Save

To create MAVEN contacts events in bulk:
1. Open/Download and complete the attached Excel spreadsheet [Download]. Not all fields need to be completed, but please complete at least First Name, Last Name, Date of Birth, and City if possible. Please also make sure to include the event ID that you want the contacts linked to.
2. Attach the spreadsheet to the event you want to link the contacts to.
3. Email [ISIShelp@state.ma.us] with the event ID that the contact list is attached to.
How should I be utilizing MAVEN?

• Monitoring Your Contacts workflow to identify new Contacts
  • Tracking Contacts through their Quarantine Period.
  • Clinical QP and Contact Monitoring QP are key for available exposure info.
  • A summary of the person’s exposure (if available) would be populating the medical notes field in the clinical QP. Last exposure date should be in the Contact Monitoring QP for everyone (as long as everyone is creating contact events correctly).

• Sharing Events with other Jurisdictions
  • If your case or a contact works somewhere else, etc.
  • If you created a contact for another jurisdiction, you can share the index case that named the contact, etc.

• Monitoring New Positive Cases (Confirmed events)
  • Enter your interview data so we can track this outbreak and its effects.
  • Creating their new contacts to ensure quarantine.
I have too many contacts for me to notify or actively monitor, what should I do?

- Prioritize household members/Close Contacts
  - Should be quarantining away from the case to prevent recurring exposure
- Partner with the Index Case to help in notifications.
- Prioritize high risk settings/settings of interest.
  - Follow-up LTCFs, nursing homes, doctors offices, and schools
- If you identify a setting where numerous exposures took place (i.e. work, conference, camp) then notify the organization
  - They should be able to send out a general notification so that you don’t have to contact all individuals
  - Large Gatherings: Remember most people would be considered at low risk and DPH/CDC have only rarely recommended public notifications in a setting like this
I have too many contacts for me to notify or actively monitor, what should I do?

- Try to get the events into MAVEN
- Try to check-in daily but less frequently is acceptable.
  - Once you establish contact and inform them of quarantine guidelines, they can text you to touch base.
When is isolation over?

• The case must have 2 negative PCR tests at least 24 hours apart.
• Testing can begin once the case is without ANY symptoms for 24 hours.
• An NP swab may be collected and sent to any lab.
  • If the first test is PCR negative, the patient may have another specimen collected when they get the results. If the second test is negative, the patient may be released from isolation.
  • If the first test remains PCR positive, the patient may submit another specimen >4 days later. Specimens may be collected every 4 days thereafter until the first negative specimen is obtained. The patient may not be released from isolation until two PCR negative tests have been confirmed.
• Close contacts should remain in quarantine through the 14 days since last exposure.
• Note: Biogen will be coordinating clearance testing of Biogen employees.
Quarantine FAQs

• If someone is in quarantine, is their family quarantined as well?
  • A. No. Their family members are not quarantined as long as the quarantined individual remains asymptomatic. If the quarantined individual develops symptoms, they must immediately isolate from their family and the family is now under quarantine from their last contact because they are close contacts.

• If someone in quarantine tests NEGATIVE, how long must they stay in quarantine?
  • A. They must stay in quarantine until the 14 day period has passed AND their symptoms have resolved.

• How long do household contacts have to quarantine?
  • A. Through 14 days after their LAST exposure to the case. If complete isolation isn’t possible for the case, then the 14 days starts when the confirmed case is finally cleared to exit isolation.
Sharing Cases

• If my case works in another town, what should I do?
  • SHARE the MAVEN event with the appropriate jurisdiction so you both can communicate on the follow-up.

• Who should I Share with?
  • Share with the full LBOH TOWN MAVEN users. It is easier than picking individual users.
MAVEN Questions

• What events in MAVEN can I see?
  • A. You can see all events in your jurisdiction, as well as events that have been shared with you. But not every event will be in your workflows. You may have to look for an event.
    • Use the SEARCH feature.
    • Pull up a case by MAVEN ID.
    • Look at SHARED cases (or share with yourself)
    • New Contact Events Workflow (Previously contact events weren’t in your workflows so you have to know to look for them.)
    • Look at Reports
MAVEN Questions

• What about MAVEN events with no lab results?
  • Sometimes events might not have an action item because they were created to document notes or consultations, and lab tests might be pending.
  • Check the notes for instructions or ask MDPH if unsure.
Lab Questions

• Do LBOHs see all lab tests done for COVID-19?
  • A. Not at this time. Positive lab tests will create MAVEN events (if there wasn’t one already) for new cases. Negative labs will only append to an existing MAVEN event.
    • So if “Joey” gets tested through a commercial lab and is negative, it does not currently create a MAVEN event.

• When will I see lab results on a MAVEN event?
  • Lab results will append to matching MAVEN events as soon as they are available. Check the Lab Tab.
    • Your town’s First Positive – you will receive a call.
    • Subsequent positives – you will receive a LBOH Group Task (via email) that will alert you to the positives.
    • New Cases should show up in your IMMEDIATE workflow.
FAQ

- What about the children of people in isolation?
  - Children should remain quarantined away from the case to prevent exposure
  - If this is not possible, then the quarantine period of child will restart every time the child is exposed to the case
- Do I need to notify the school of a case if a child?
  - If the child is asymptomatic, no notifications need to occur because there was no exposure
  - However, this child should begin quarantine ASAP
- What about the contacts of contacts?
  - You do not need to investigate the contacts of asymptomatic contacts
- What about contacts in another jurisdiction?
  - Will show up in the contact workflow for the town if the address is properly input
- What if a contact develops symptoms?
  - They would be eligible for testing and should isolate while awaiting results
- What if the test comes back negative?
  - If a person under quarantine tests negative, they still need to complete their quarantine in the event that COVID-19 infection occurs after the testing is done
Massachusetts Department of Public Health
Telephonic Interpreter Services
Available to Municipalities for Coronavirus Response
February 18, 2020

• Massachusetts has a contract (PRF63) for telephonic interpretation services.
• Eight vendors are shown on the next slide.
• Cities and towns should reach out to a vendor or vendors and set up an account
  with them, mentioning the state contract PRF63.
• Some vendors will bill DPH directly if they setup a group account for this
  purpose.
• When used for interpreters in response to coronavirus, monthly invoices from the vendors
  to cities and towns can be submitted to MDPH at the following e- mail address -
  sli.invoices@state.ma.us
• MDPH will pay the vendors directly for telephonic interpretation services utilized by
  municipalities for coronavirus follow-up through June 2020.

Updated on February 18, 2020 from the MDPH webinar with local public health – February 13, 2020
Massachusetts Department of Public Health Telephonic Interpreter Services
Available to Municipalities for Coronavirus Response February 18, 2020

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<td>Certified Languages International</td>
<td>Dickey McMath</td>
<td>503-484-2317</td>
<td><a href="mailto:dmcmath@certifiedlanguages.com">dmcmath@certifiedlanguages.com</a></td>
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<td>Interpreters and Translators, Inc.</td>
<td>Pamela McMahon</td>
<td>860-730-6149</td>
<td><a href="mailto:pmcmahon@ititranslates.com">pmcmahon@ititranslates.com</a></td>
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<tr>
<td>Interpreters Unlimited, Inc.</td>
<td>Shamus Sayed</td>
<td>858-866-1130</td>
<td><a href="mailto:shamus.sayed@iugroup.com">shamus.sayed@iugroup.com</a></td>
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<td>JRivera Associates, Inc.</td>
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<td>Lionbridge Technologies, Inc.</td>
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<td><a href="mailto:mmacrina@transperfect.com">mmacrina@transperfect.com</a></td>
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Contact us at:

- **MDPH Epidemiology Program**: 617-983-6800
- **How to Contact the Maven help desk in ISIS with questions**:
  - **MAVEN Help Desk** [isishelp@state.ma.us](mailto:isishelp@state.ma.us)
  - MAVEN Contact Telephone: 617-983-6801