COVID-19 Webinar for Case Investigation and Follow-up

Tools for LBOHs

April 24, 2020

Hillary Johnson, Infectious Disease Epidemiologist
Scott Troppy, Surveillance Epidemiologist
Bureau of Infectious Disease and Laboratory Sciences
MA Department of Public Health
MAVEN Status Map as of 4/24/2020

Massachusetts Virtual Epidemiologic Network

Massachusetts Virtual Epidemiologic Network (MAVEN) is a web-based disease surveillance and case management system that enables MDPH and local health to capture and transfer appropriate public health, laboratory, and clinical data efficiently and securely over the Internet in real-time. The system interfaces with Electronic Laboratory Reporting (ELR) efforts, has automatic (24/7/365) notification of state and local officials of any event requiring their attention and geographic information system (GIS) activities. MAVEN will replace the current paper-based methods of data exchange between MDPH, local public health, and clinicians. For more information please contact isishelp@state.ma.us or by phone at (617)-983-6801.

This map displays 349 out of the 351 cities and towns in Massachusetts receiving disease notifications electronically through the MAVEN System as of April 24, 2020.

*Boston reporting data via BoSS MAVEN.

For more detailed information please zoom in on the map or click on town.

MAVEN Status April 2020

- Online (349)
- Offline (2)
MAVEN On-Call Events
3/1/2020 - 4/23/2020

<table>
<thead>
<tr>
<th>Program Area</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unassigned</td>
<td>32</td>
</tr>
<tr>
<td>Division of Global Populations</td>
<td>10</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>526</td>
</tr>
<tr>
<td>Immunization (COVID-19)</td>
<td>15,430</td>
</tr>
<tr>
<td>Informatics and Surveillance (ISIS)</td>
<td>1,383</td>
</tr>
<tr>
<td>Total On-Call MAVEN Events</td>
<td>17,381</td>
</tr>
</tbody>
</table>

*these data are accurate as of 4/23/20 at 6:30PM.
For Reference what our call volume usually looks like….

<table>
<thead>
<tr>
<th>Year</th>
<th>Total On-Call Events Created</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>6,739</td>
</tr>
<tr>
<td>2016</td>
<td>12,830</td>
</tr>
<tr>
<td>2017</td>
<td>12,605</td>
</tr>
<tr>
<td>2018</td>
<td>9,296</td>
</tr>
<tr>
<td>2019</td>
<td>10,652</td>
</tr>
<tr>
<td>So far in 2020</td>
<td>17,381</td>
</tr>
</tbody>
</table>

*these data are accurate as of 4/23/20 at 6:30PM.*
# MAVEN User Requests & Training

**3/1/2020 - 4/23/2020**

<table>
<thead>
<tr>
<th>MAVEN Status</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pending Users</td>
<td>52</td>
</tr>
<tr>
<td>Processed Users</td>
<td>748</td>
</tr>
<tr>
<td>New Users</td>
<td>800</td>
</tr>
<tr>
<td>Total MAVEN Users</td>
<td>1,414</td>
</tr>
</tbody>
</table>

*these data is accurate as of 4/23/20 at 6:30PM.

**Pending** = MAVEN user request form received and VG account has been created and waiting on MAVEN Training (Mon and Thur from 11-12:30)

**Processed** = MAVEN accounts created and training has happened – users are in the system.

**New** = total new users (internal and external users).

**Total MAVEN Users** = Includes MDPH, LBOH, Infection Prevention and other trained staff.
MAVEN Help Desk Emails  
3/15/2020 - 4/23/2020  
isishelp@state.ma.us

<table>
<thead>
<tr>
<th>Month</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>March</td>
<td>2,383</td>
</tr>
<tr>
<td>April</td>
<td>7,816</td>
</tr>
<tr>
<td>Total Emails received</td>
<td>10,199</td>
</tr>
</tbody>
</table>

*these data is accurate as of 4/23/20 at 6:30PM.*
CTC Webinar - Wednesday, 4/22

Link to the webinar recording
https://www.dropbox.com/s/nk9l1rbyqojwkt/COVID19%20Community%20Tracing%20Collaborative-20200421%201909-1.mp4?dl=0

CTC webinar presentation slides attached
General information about the Community Tracing Collaborative

The CTC will provide answers to unanswered written questions in the coming days.

If you have additional questions, please contact the CTC directly at COVID19CommunityTracingCollaborativeQuestions@mass.gov

Thank you for all you do every day to keep people safe and save lives.

Kelly Driscoll
COVID-19 Command Center
Executive Office of Health and Human Services
(857) 283-3655
What’s Ahead? | Roll-Out Timeline

**Rollout**
- LBOH request help from CTC during scale up
- **April 15-22**
  - 200 trained CTC Staff
  - LBOH selects cases for CTC by 11:59 pm
  - DPH extracts “yes” cases by 10 am
  - Introductory info. on CTC to all LBOH
  - Webinar
- **April 23**
  - 1-pager sent to all LBOH on procedures for CTC
  - CTC expands from 1:1 outreach to widespread communication of procedures

**Scale-Up**
- CTC expands to areas in high need
- **April 23-30**
  - 600 trained CTC Staff
  - Established relationships and preferred communication between CTC and LBOH

**Surge**
- CTC expands to all of MA
- **May 1 onward**
  - 900 trained CTC Staff
  - Goal: All cases investigated; all contacts traced
  - Active care resource coordination at local level
- **April 30**
  - All “yes” and blanks will be sent to CTC
  - All “no” stay with LBOH
  - High risk cases referred back to LBOH
  - LBOH can refer cases to CTC at any time
MAVEN Misc. for today

• COVID-19 Case Investigation Wizard happening this evening
• Clear cache and cookies when you start the day
• Please don’t request a merge/de-duplication for your event in the Notes section. You need to email isishelp@state.ma.us with your request. Please let us know the Event ID and which one you want as the preferred Event ID.
• Please update addresses in the participants tab and demographic question package (tip sheet in MAVEN help).
• Workflows are not functioning due to volume of cases.
  • Complete your Steps 1-5 to move cases out of the workflows
# MAVEN COVID-19 Wizard

## Question Packages

<table>
<thead>
<tr>
<th>Question Package</th>
<th>Person</th>
<th>Last Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Administrative</td>
<td>Event ID</td>
<td>04/23/2020</td>
</tr>
<tr>
<td>2. Demographic</td>
<td>Test COVID CASE</td>
<td>04/23/2020</td>
</tr>
<tr>
<td>3. Clinical</td>
<td>Test COVID CASE</td>
<td>04/23/2020</td>
</tr>
<tr>
<td>4. Risk/Exposure/Control &amp; Prevention</td>
<td>Test COVID CASE</td>
<td>04/23/2020</td>
</tr>
<tr>
<td>5. Contact Monitoring</td>
<td>Test COVID CASE</td>
<td>04/23/2020</td>
</tr>
<tr>
<td>6. Epi-linked and Outbreak Information</td>
<td>Test COVID CASE</td>
<td>04/22/2020</td>
</tr>
<tr>
<td>7. ECR Information</td>
<td>Test COVID CASE</td>
<td>04/22/2020</td>
</tr>
</tbody>
</table>

## Wizards

- **COVID-19 Case Investigation Wizard**
New Immediate Workflow for COVID-19

**MAEDSS-12612**

Create new WF: LBOH Notification for Immediate Disease (COVID only)
First Responders Report

• Based on Confirmed Case Status
• Review the tip sheet
• Will be removed from report when Contact Status Monitoring is updated to “Completed” in QP#6
MAVEN Housekeeping Items

• Due to the volume of confirmed and contact COVID-19 events, some MAVEN events are not appearing in their appropriate MAVEN workflows. These events may seem to “disappear” between workflows, as well. One way that you can find them is by running the COVID-19 Confirmed Case Line List or the COVID-19 Contact Line List reports under the MAVEN report feature. For confirmed cases you will still receive email notifications of immediate disease events.

• We plan to create a COVID-19 Wizard where all of the questions for your investigation are in one place – we will demonstrate the wizard on the webinar tomorrow.

• We plan to add additional variables to track cases that have been sent to the Community Tracing Collaborative (CTC) in MAVEN. Some variables under consideration are: event/contact has been contacted, event/contact has been updated. We hope that these two variables can help you to better track information for your CTC events.

• You will notice that COVID-19 Confirmed Case Line List now has death data listed in this report (Outcome, Death Date, Location of Death). Look to the right side of the report to see these variables.
COVID 19 Questions

• COVID19CommunityTracingCollaborativeQuestions@mass.gov
COVID Requested Assistance as “Yes” or “No”
Step 1 removes event from immediate WF
Step 2 - Investigation Started - can be Yes/No
Step 3 LBOH completes information so we know who is requesting assistance
Step 4 removes from LBOH Pending WF and the Contact COVID WF
Step 5 removes from Final Review WF
Race/Ethnicity

Located in the Demographic QP #2
MAVEN functionality refresher

- Help Section on MAVEN
- Race/Ethnicity in the Demographic Question Package #2
- Additional variables added to Risk/Exposure Question Package
  - *Question: Employed at, admitted to, or visited a healthcare setting?*
- Address updates/Demographic updates (gender, dob, address, city/town)
- Communication events in MAVEN for 351 towns/city
- Reports
- Searching for Events or Cluster
MAVEN Help Section

How to Contact the Maven help desk in ISIS.
We are available M-F (9-5p.m.)

- ISIS Help Desk 617-983-6801
- ISIS Fax Number 617-983-6813
- isishelp@state.ma.us
  (do not email names or identifying information - use the MAVEN Event ID)
- Epi-of-the-Day and Epidemiologist on Call 617-983-6800
- Maven Change Request Document (please print, complete and out fax back to ISIS to request changes, enhancements, corrections to the MAVEN database)

MAVEN Online Help

- COVID-19 LBOH
- General Information
- Frequently Asked Questions (FAQs)
- Division of Global Populations (DGP)
- ePostcards/Webinars
Select Official Address hyperlink to update the event Official City

Old address is displayed
Follow-up for Positive COVID-19 Cases and their Close Contacts

Tools for LBOHs

April 24, 2020

Hillary Johnson, Infectious Disease Epidemiologist
Scott Troppy, Surveillance Epidemiologist
Bureau of Infectious Disease and Laboratory Sciences
MA Department of Public Health
Topics Today

- What to do about PROBABLE events.
- Hospitalized Cases still need follow-up.
- Clusters in Group Homes
- Reminder Language Services
- CTC Key Reminders
- Transferred – when to use this
  - (for sending out of state)
- Tips for Staying Organized
- Your Questions
Tuesday & Friday Webinars for LBOHs

Now Tuesdays AND Fridays at 11am!!

- Isolation of Cases and Quarantine of Contacts is the goal until that strategy changes/evolves.
- MAVEN is the main reporting source and where you should document your work.
- Focusing on Priority Activities
- Clusters in Facilities in your community need your help.
  - Call Epi Program 617-983-6800 to create cluster events.
Antibody Testing (serology)

• Thus far, all confirmed cases have had PCR testing (NP swabs).
• Lots of serology tests are being developed which will look for antibodies. Some are being reported to MDPH and MAVEN. Questions remain:
  • What do the different antibody test results mean?
    • Evidence of old infection?
    • Evidence of immunity?
    • Evidence of acute infection?
• MA will be reviewing the literature and looking at different studies to help determine what role serology testing should play in COVID-19 surveillance. There may be more data as time goes on. Guidance may change.
• Interview Cases. Why were they tested? Did they have symptoms? Get onset dates.
  • Treat like a case if it sounds like a recent case.

Look in the Lab Tab of a MAVEN event. Call MDPH if you have questions.
# New Case Definition – “Probable”

<table>
<thead>
<tr>
<th>CONFIRMED</th>
<th>• Meets confirmatory laboratory evidence</th>
</tr>
</thead>
</table>
| Probable  | • Meets clinical criteria AND epidemiologic linkage with no confirmatory laboratory testing performed for COVID-19  
OR;  
• Meets presumptive laboratory evidence AND clinical criteria OR  
Epidemiologic linkage.  
OR;  
• Meets vital records criteria with no confirmatory laboratory testing performed for COVID19. |

## Clinical Criteria:
- **At least two of the following symptoms:** fever (measured or subjective), chills, rigors, myalgia, headache, sore throat, new olfactory and taste disorder(s); **OR**
- **At least one of the following symptoms:** cough, shortness of breath, or difficulty breathing; **OR**
- **Severe respiratory illness with at least one of the following:** clinical or radiographic evidence of pneumonia or acute respiratory distress syndrome (ARDS) AND no alternative more likely diagnosis.

## Presumptive laboratory evidence:
- Detection of specific antigen in a clinical specimen
- Detection of specific antibody in serum, plasma, or whole blood indicative of a new or recent infection*

*serologic methods for diagnosis are currently being defined
New Case Definition – What does this mean?

- **CONFIRMED** and **PROBABLE COVID-19 MAVEN Events** should be interviewed.
  - Data Collection & Contact Notification

- **Prioritize CONFIRMED cases (PCR+)**
  - Symptomatic & Asymptomatic Cases should be isolated & interviewed.

- **Probable Cases** – symptomatic cases should still be isolated and we look at symptoms to establish all the timeframes for Isolation (case) and Quarantine (contacts).
  - Asymptomatic Cases with serology tests – more to come.
  - Currently, use the Date of Test (treat like an asymptomatic positive)
When is isolation over? – Using Symptoms

• The **non-test-strategy**. It should be applied to people who test positive for covid-19 and anyone who is clinically diagnosed with covid-19 and not tested.

• **Symptomatic persons with covid-19 (lab-confirmed or clinically diagnosed) who are in home isolation may discontinue home isolation under the following conditions:**
  - At least 3 days (72 hours) have passed since recovery (defined as resolution of fever without the use of fever-reducing medications AND improvement in respiratory symptoms – e.g., cough, shortness of breath) AND
  - At least seven days have passed since symptoms first appeared (illness onset). Onset date (of symptoms) would be considered “day zero.”

• Therefore, anyone with covid-19 should stay home for a minimum of seven days. They should only discontinue isolation if at least 72 hours have also passed since “recovery.”

*Guidance issued 3/16/2020*
When is isolation over? – Using Testing

- Initial Guidance from CDC required two negative tests:
  - The **test-based strategy** is largely unchanged (two negative swabs at least 24 hours apart, resolution of fever without the use of fever-reducing medications, and improvement in respiratory symptoms).
  - Still an option (but not the best use of resources).
**When is isolation over? – Asymptomatic Cases**

- **Asymptomatic persons** with lab-confirmed covid-19 infection may discontinue home isolation when at least 7 days have passed since the date of their first positive covid-19 diagnostic test and they have had no subsequent illness.

  - For 3 days following discontinuation of isolation, these persons should continue to limit contact (stay 6 feet away from others) and limit potential of dispersal of respiratory secretions by wearing a covering for their nose and mouth whenever they are in settings where other people are present.

  - In community settings, this covering may be a barrier mask, such as a bandana, scarf, or cloth mask. The covering does not refer to a medical mask or respirator.
Asymptomatic vs. Symptoms have Resolved

• When looking at a patient who has tested positive for COVID and trying to determine their isolation period and when they can be released, there is a difference between someone who DID have symptoms at some point, vs someone who has NEVER had symptoms.

  • **If patient DID have symptoms at a point, use their ONSET date of symptoms to determine next steps.**
    • Infectious period (begins 2 days prior to onset)
    • Isolation Period (symptoms must resolve before you can apply a Test-based strategy or a non-Test based strategy for releasing them from isolation)

  • **If the patient NEVER had symptoms (but still tested positive), we don't have a symptom onset date to base our work upon. Instead we use the test date and calculate from there.**
    • Infectious period (begins 2 days prior to TEST DATE)
    • Isolation Period (should isolate for 7 days past TEST DATE). Could also use a test-based strategy.
Hospitalized Patients – Still Require Some Investigation

- If your COVID case is hospitalized, the hospital should determine exposures at the facility and determine when a patient should be released from “isolation” (or “transmission based precautions”)

- LBOHs are still responsible for making sure relevant data is entered into MAVEN.
  - In some towns, hospitals are working with LBOHs to assist in reporting and data collection on hospitalized patients – but make sure you know if/how that is happening before just signing off on your Admin Question Package 5 Steps.

  - **Clinical Data** (symptoms, underlying conditions, hospitalization, outcome), **Demographic Data** (Occupation, Race, Hispanic/non-Hispanic), **Risk Question Package** (HCW? Facility Exposures?), etc.
  - **Contacts can still be identified for contact tracing on hospitalized patients.**
    - Sometimes the patient can still talk.
    - Try an Emergency Contact
Clusters

- A facility or location based event that you then link individual patient events to for tracking purposes.
  - LTCF, Rest Homes, Nursing Homes, Group Homes, etc.
- Finding one in MAVEN
- Link individual people events to the cluster

If you cannot find a Cluster or wish to create a new facility cluster, call the Epi Program at 617-983-6800.

We will create the cluster on the phone with you to ensure it is done correctly (and isn’t a duplicate).
Clusters – Events for Facilities in MAVEN

- If you identify a facility (LTCF, Nursing Home, Rest Home, Assisted Living Facility, Jail, state or federal facility, etc.) with positive COVID cases, we want to create a Facility Cluster.
  - Use the SEARCH Feature to Look for clusters in MAVEN (it’s called an Outbreak Event in MAVEN)
  - Call Epi Program 617-983-6800 to create the cluster.

- Link individual confirmed Events to the cluster.

- Don’t create lots of MAVEN suspect events for residents prior to being confirmed. (Positive labs will auto create MAVEN events. Then you just have to link them.)
  - Keep general notes or updates in MAVEN until new confirmed events come in.

- Provide advice on Control Measures, Staffing, PPE, Cohorting, etc.
  - Epi program will assign an MDPH Epi to help consult.
Clusters – General Guide

• Once a Cluster Event is created for a Facility, LBOH can track facility-based notes in the Cluster Event.
  • Notes on Infection Control Activities
  • Check-ins with the Facility
  • Notes on numbers tested/positives among HCWs and residents.

• New positives among residents or staff should create new MAVEN events. LBOH should link those new events to the appropriate facility cluster as they come in.

• No Need to create contact events for all the individual residents.
Clusters – General Guide

• LTCF, Assisted Living Facilities, DIAL (dialysis), hospitals, prisons/jails or shelters will get an assigned MDPH EPI.

• For other types of clusters (group homes, workplaces, etc.) Epi program can help you create the clusters and will provide some initial guidance on follow-up, but you do not need to send frequent updates and there won’t be a State Epi assigned in these smaller scenarios.
  • Any questions, definitely call Epi Program at 617-983-6800 for assistance.
Translation Services are Available (LBOHs are not charged)

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](mailto: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.
# Phone Translation Services Vendors

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Contact Person</th>
<th>Phone #</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<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>
</tr>
<tr>
<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>
</tr>
<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>
</tr>
<tr>
<td>JRivera Associates, Inc.</td>
<td>Jose R. Rivera</td>
<td>209-405-0951</td>
<td><a href="mailto:mrr@jriva.com">mrr@jriva.com</a></td>
</tr>
<tr>
<td>Language Line Services</td>
<td>Alisa Smith</td>
<td>831-648-7174</td>
<td><a href="mailto:asmith@languageline.com">asmith@languageline.com</a></td>
</tr>
<tr>
<td>Lionbridge Technologies, Inc.</td>
<td>John Drugan</td>
<td>978-964-9550</td>
<td><a href="mailto:John.Drugan@lionbridge.com">John.Drugan@lionbridge.com</a></td>
</tr>
<tr>
<td>Telelanguage</td>
<td>Manuela Villa</td>
<td>503-459-5655</td>
<td><a href="mailto:mvilla@telelanguage.com">mvilla@telelanguage.com</a></td>
</tr>
<tr>
<td>TransPerfect Global</td>
<td>Michael Macrina</td>
<td>202-347-2300</td>
<td><a href="mailto:mmacrina@transperfect.com">mmacrina@transperfect.com</a></td>
</tr>
</tbody>
</table>
Community Tracing Collaborative (CTC)

- Submit Questions: COVID19CommunityTracingCollaborativeQuestions@mass.gov

Roll-out Timeline

**Rollout**
- LBOH request help from CTC during scale up
  - April 15-22
    - 200 trained CTC Staff

**Scale-Up**
- CTC expands to areas in high need
  - April 23-30
    - 600 trained CTC Staff
    - Locales with high case burden will be informed CTC enrollment
    - April 23
      - Cases no longer sent to REDCap
  - April 30
    - All LBOH enrolled in CTC

**Surge**
- CTC expands to all of MA
  - May 1 onward
    - 900+ trained CTC Staff
    - Goal: All cases investigated; all contacts traced
    - Active care resource coordination at local level
**Contact Monitoring Question Package**

**Key Variables:**
- **Contact Monitoring Status**
  - In Progress, Completed, Lost to Follow-up, Transfer, Other
- **Last potential Exposure Date**
  - Exposure date – to calculate quarantine.
- **First/Last Day of Required Monitoring**
  - Quarantine Period

These are the most applicable and helpful variables in this question package. Everything else is just a tool for your use if you wish.
Contact Monitoring: Some Reminders

- Some BOHs still follow up on out of state contacts until their quarantine is complete.
  - You don’t need to do this once we notify the other state. They handle it.
- A lot put the complete or partial out of state address in the appropriate places but never enter a last exposure date or a phone number
  - Remember no one can follow-up correctly without enough contact information and a date of exposure.
- Some BOHs use ‘Transferred’ to indicate that they updated the contact’s address to another MA jurisdiction
  - Just use Contact Monitoring Status = Transferred for an Out of State Notification. MDPH will take over and notify the other state.
- Some BOHs notify other states of out of state contacts
  - MDPH will do the notification to Out of State. Make sure all the relevant information is there and then mark Contact Monitoring Status = Transferred.

Best case scenario would be if LBOH updates the address correctly whether it is out of state or in state, enter contact information for the contact, and enter a last exposure date. Then only use ‘Transferred’ if it is an out of state resident and you do not intend to continue to follow the contact to the end of their quarantine and would like DPH to notify the other state for you.

There is a Tip Sheet in MAVEN Help on how to update an address. It is a two step process.
**Time Saving Tips**

- **Use the Interview Tool to help guide your questions.**
  - Don’t worry too much about the questions about how they may have gotten COVID-19 (bottom of page 1).
  - We want to make sure and capture if they are a HCW or if they live in a facility/group home.

- **Look for contacts in MAVEN before trying to create your own.**
  - The contact may already be in the system. If they are, you only need to link the two events.

- **Don’t try to create Clusters. Call Epi Program and we will create them with you on the phone.**

- **With Workflows not working well (due to volume), run your reports to get lists of new cases or contacts.**

Send us your time saving tips to share!
Tips for Staying Organized

• Use the REPORTS feature to pull lists of cases and contacts regularly.

• Set Reminders for yourself
  • Outlook/Calendar lists with MAVEN IDs.
    • Note to Check on Contact (Quarantine Release). Note to Check on Patient (Isolation Release).
  • Use the Tasks Feature – give yourself dates & tasks. Then look in your Tasks Workflow.

• Put your notes in MAVEN right away.
  • Track clinical information in MAVEN, but also your case work status. (Where you are with a case – document your work.)
  • Remember, we are all at risk of being quarantined or even sick. If your notes are in a case, you or a colleague can pick up right where you left off. (also prevents you from needing your notes if you work offsite.)

What helps YOU stay organized?
How to Self Quarantine and Self Isolate


Stay Home – Stay Safe!
Coronavirus Disease 2019 (COVID-19)
How to Self-quarantine and Self Isolate

If you are not sick but are:
• a close contact to someone diagnosed with COVID-19, or
• recently returned from any travel outside Massachusetts,
please take these steps to help stop the spread of COVID-19.

Self-quarantine: Separate yourself from others in case you get sick
1. Stay at home and use a separate bedroom and bathroom if possible.
2. Do your best to stay at least 6 feet away from other people in the house.
3. Do not leave your house to go to school, work or run errands.
4. Do not have any visitors to your house during this time.
5. Wash your hands frequently with soap and water for at least 20 seconds.
6. Do not share eating or drinking utensils with anybody.
7. Monitor your health every day.
8. If you need to seek routine medical care call ahead to your doctor and tell them you are under COVID-19 quarantine.
9. Do not take public transportation, taxis, or ride-shares to get to your appointment.

Monitor your health every day:
• Do health checks every morning and every night or anytime you feel like you might have a fever.
• Take your temperature.
• Be alert for any symptoms of COVID-19, including fever, cough or shortness of breath.

If you have a medical emergency, call 911. Tell them your symptoms and that you are being monitored for COVID-19.

How to determine your last day of exposure:
Your last day of exposure is:
• The last time you were within 6 ft of someone confirmed to have COVID-19, or
• The day you arrived home after travel.

If you do not show signs of COVID-19 for 14 days after the last time you were exposed, your self-quarantine period is finished.

If you:
• get sick during self-quarantine, or
• are sick and a healthcare provider tests you for COVID-19, or
• are told by a healthcare provider that you have COVID-19,
take these steps to help stop the spread of COVID-19.

Self-isolation: Separate yourself from others to keep your germs from spreading
1. If you get sick with fever, cough, shortness of breath, or other signs of respiratory illness, call your healthcare provider and tell them if you have been exposed to COVID-19.
2. If you need to use your healthcare provider, do not take public transportation, taxis, or ride-shares to get to your appointment.
3. Stay at home and use a separate bedroom and bathroom if possible.
4. Stay at least 6 feet away from other people in the house.
5. Do not leave your house to go to school, work or run errands.
6. Do not have any visitors to your house during this time.
7. Wash your hands frequently with soap and water for at least 20 seconds.
8. Do not share eating or drinking utensils with anybody.
9. Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing.
10. Clean surfaces that you touch every day with a household disinfectant.
11. Make a list of everyone you have been close to (within 6 feet of for at least 15 minutes), since you first got sick. Those people who have been exposed to COVID-19 and should be asked to self-quarantine.

If you have a medical emergency, call 911. Tell them your symptoms and that you have, or may have, COVID-19.

How long do you need to isolate?
For most people who have relatively mild illness, you will need to stay in self-isolation for at least 7 days. You can resume public activities once you have:
• gone for three days without a fever (and without taking fever-reducing medications like Tylenol), and
• experienced improvement in your other symptoms (for example, your cough has gotten much better).

More information about how to self-isolate is available on the CDC website.

If you have questions about isolation or quarantine, you can call your Local Board of Health or the Department of Public Health's On-Call Epidemiologists at 1-781-983-6800.
Your Questions: