# COVID-19 Outbreak Reporting using the MDSS Aggregate Case Report Form

V4 03/20/2024

## COVID-19 Cluster/Outbreak Reporting

- While all clusters and outbreaks are required to be entered into MDSS aggregate, only those in following settings are included at MDHHS Seasonal Respiratory Viruses:
  - Long-Term Care Facility (e.g., SNF, assisted living, adult day care, group home, etc.)
  - K-12 School (e.g., classroom, before/after school programs, etc.)
  - Childcare/Youth Programs (e.g., daycare, camps, extracurricular activities, sports, etc.)
  - Jail/Prison/Detention Center
  - Healthcare (e.g., inpatient, outpatient, dental practices, dialysis, etc.)
  - Shelters/Settings that provide services for people experiencing homelessness
- Please add and update cluster/outbreak cases in MDSS weekly. This includes updating the outbreak "Investigation Status" so that outbreaks are properly marked as New, Ongoing, or Completed.
- MDHHS staff will pull the data from the MDSS Aggregate to update the website.
- Individual cases, including those associated with an outbreak, must still be reported
  as their own cases in MDSS. The Aggregate Case Report is used to summarize the
  overall outbreak.

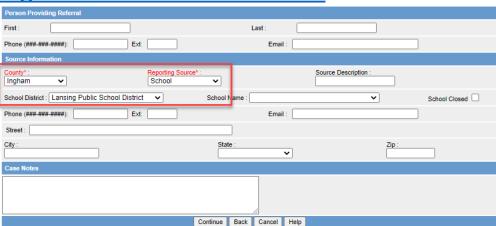
## Outbreak Definition Guidance

- **Healthcare:** CSTE <u>Proposed Investigation/Reporting Thresholds and Outbreak</u>
  <u>Definitions for COVID-19 in Healthcare Settings</u> (updated August 10, 2022)
- Schools: CSTE <u>COVID-19 K-12 School Surveillance Guidance for Identification and Classification of Outbreaks</u> (updated September 1, 2022)
- Workplace: CSTE <u>Investigation Criteria and Outbreak Definition for COVID-19 in Non-residential, Non-Healthcare Workplace Settings</u> (July 14, 2020)

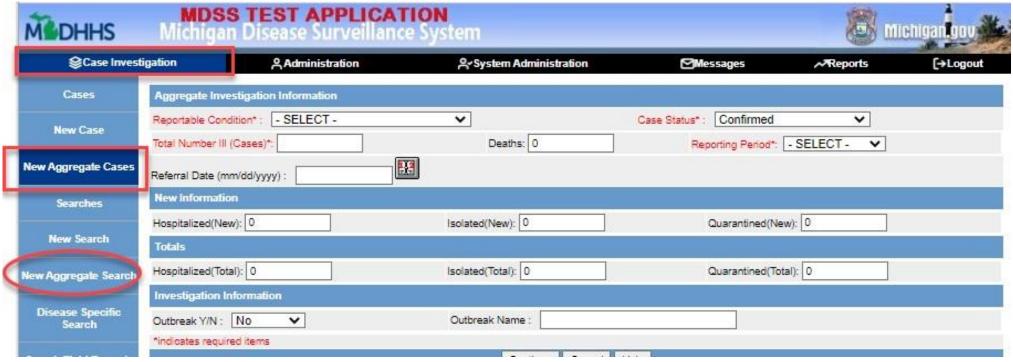
# K-12 School Aggregate Reporting (Non-Outbreaks)

- All schools must report, at a minimum, weekly aggregate counts of COVID-19 to the LHD. In addition, schools must document individual-level, identifiable information on these cases.
- These data can be compiled into one county-level daily aggregate MDSS report.
  - Mark the case status for these aggregate reports as Confirmed.
  - Mark these aggregate cases as Outbreak = No.
  - Under Source information, please select the County, Reporting Source = School, and the School District.
  - Leave the investigation status as Completed after entering in all information.
- Additional guidance is available in the Managing CD in Schools Guidance.





## Where to Enter New Aggregate Case



Outbreaks should be reported as an Aggregate Case Report in MDSS. To enter a new case, select 'New Aggregate Cases' from the Case Investigation tab. Once entered, the form can be found and edited by using the 'New Aggregate Search' function.

#### This guidance is specific to reporting COVID-19 outbreaks as an aggregate report.

For additional info on reporting clusters and outbreaks in general, refer to the tip sheet at: Reporting Clusters or Outbreaks Using the MDSS Aggregate Case Report Form

### For Cluster or Outbreak Report:

**Required Fields** 

**Recommended Fields** 

Total Number III (Cases): This is the field MDHHS uses to capture the number of cases for reporting purposes. Include all confirmed, probable, and suspect cases update weekly if new cases are reported. The number in this field will autopopulate the field with the same name in the "Outbreak" tab.

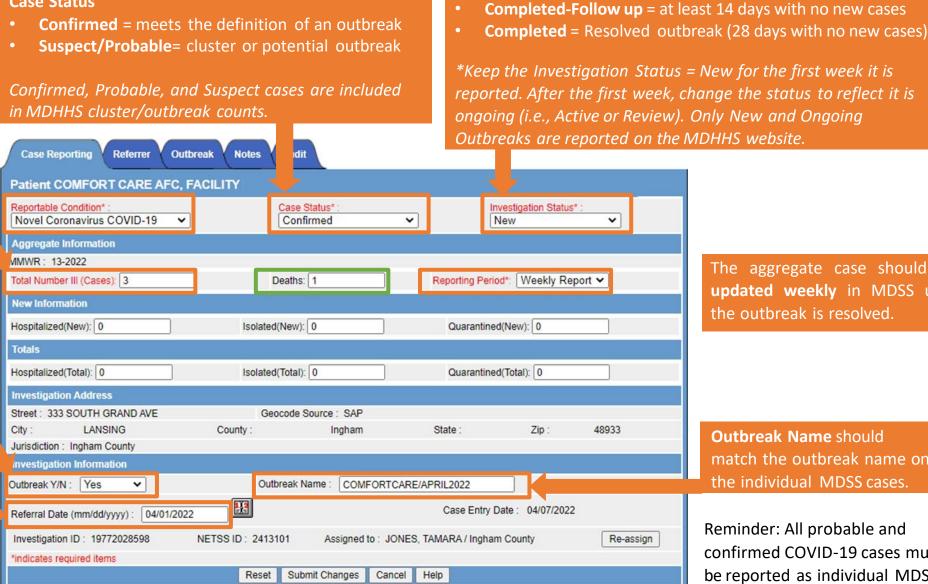
#### Outbreak Y/N = Yes

This field should be marked yes for both outbreaks and clusters (Outbreak = No is used for aggregate COVID cases, ILI, etc. reported by schools).

#### Referral Date =

Date the cluster/outbreak was reported to or recognized by public health.

#### **Case Status**



\*Keep the Investigation Status = New for the first week it is reported. After the first week, change the status to reflect it is ongoing (i.e., Active or Review). Only New and Ongoing

**Investigation Status** 

**New** = Newly reported outbreak\*

**Active or Review** = Ongoing outbreak

The aggregate case should be updated weekly in MDSS until the outbreak is resolved.

Outbreak Name should match the outbreak name on the individual MDSS cases.

Reminder: All probable and confirmed COVID-19 cases must be reported as individual MDSS cases.

**Required Fields** 

**Recommended Fields** 

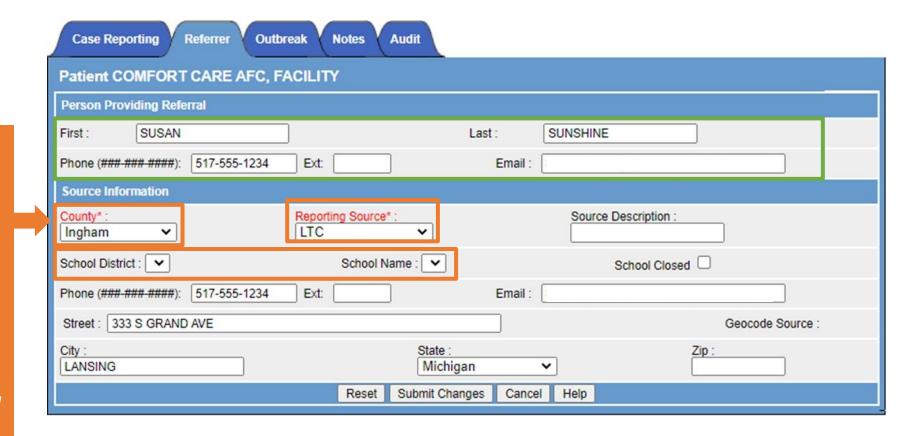
**County** is based on facility/school/event location.

Note: Currently, the aggregate case jurisdiction in MDSS is based on the county listed in this section.

**Reporting Source**: list the type of facility associated with the outbreak.

Note: For reporting purposes, outbreak type will be pulled from information listed on the "Outbreak" tab.

Note: When School is selected, School District and School Name options will appear in the drop-downs.



#### **Required Fields**

#### **Recommended Fields**

#### Type of Facility (select ONE that best describes the setting)

- This is the field MDHHS uses to categorize the setting type on the MDHHS outbreak website.
- Some types have drop-down subcategories. For those listed below, please also select a subcategory.
  - Long Term Care Facility (LTC)
    - Skilled Nursing Facility
    - Assisted Living
    - Adult Day Care
    - Adult Foster Care
    - Group Home
    - Other
  - Healthcare
    - Inpatient
    - Outpatient
    - Other
  - Corrections
    - MDOC
    - Jai
    - Detention Center
    - Juvenile Detention
    - Other
  - Event/Mass Gathering
    - Wedding
    - Funeral
    - Fair/Concert
    - Other
- Reminder, only clusters/outbreaks in the following categories are posted online: Long-Term Care Facility, K-12, Healthcare, Corrections, Childcare/Youth Program, Shelters.

Case Reporting   Referrer   Outbreak   Notes   Audit
Patient COMFORT CARE AFC, FACILITY
Type of Outbreak: ☐ Gastrointestinal ☐ Respiratory ☐ Rash ☑ Other ☐ COVID19  Facility/Event Information
Facility/Event Name : Comfort Care AFC
Street : 333 South Grand Ave City : Lansing
County: Ingham State: Michigan Zip: 98909
Contact First Name: Joe Contact Last Name: Smith Phone: 517-555-1234
Affected Unit(s)/Floor(s): West Wing
Type of Facility  ✓ Long-Term Care Facility (LTC) Adult Foster Care ✓ Healthcare ✓  Corrections ✓ Childcare/Youth Program K-12 School  Event/Mass Gathering ✓ Restaurant Senior Apartments/Retirement Center  Shelters ✓ Other
Epidemiology
Onset Date of First Case (mm/dd/yyyy):  Date of Last Onset (mm/dd/yyyy):  Date of Exposure (mm/dd/yyyy):  03/01/2022
Duration of Symptoms : Duration Units O Hours O Days  Incubation Period: Incubation Units O Hours O Days
Suspected Etiology:
Total Number III (Cases): 3 III Adults : III Children :
Ill Residents /Patients/ Patrons : 2 Total Population : 12
III Employees : 1 Total # Employed : 12
III Food Handlers : 0 Secondary Cases :
Hospitalized Cases: 1 Deaths: 1

**Required Fields** 

**Recommended Fields** 

#### Type of Facility (select ONE that best describes the setting)

- - - Adult Foster Care

  - - MDOC
  - - Wedding

    - Fair/Concert
    - Other

Case Reporting Referrer Outbreak Roles Adult					
Patient COMFORT CARE AFC, FACILITY					
Type of Outbreak: ☐ Gastrointestinal ☐ Respiratory ☐ Rash ☑ Other ☐ COVID19  Facility/Event Information					
Facility/Event Name : Comfort Care AFC					
Street: 333 South Grand Ave City: Lansing					
County: State: Michigan V Zip: 98909					
Contact First Name: Joe Contact Last Name: Smith Phone: 517-555-1234					
Affected Unit(s)/Floor(s): West Wing					
Type of Facility  Long-Term Care Facility (LTC)  Corrections  Corrections  Restaurant  Senior Apartments/Retirement Center  Shelters  Workplace  College/University  Onset Date of First Case (mm/dd/yyyy):  03/01/2022  Duration of Symptoms:  Duration Units Hours  Days  Nate of Facility  Healthcare  K-12 School  Senior Apartments/Retirement Center  Other Both; junior high/middle  First Case (mm/dd/yyyy):  Oset Date of Exposure (mm/dd/yyyy):  Oset					
Total Number III (Cases): 3 III Adults : III Children :					
III Residents / Patients / Patrons : 2 Total Population : 12					
III Employees: 1otal # Employed : 12					
III Food Handlers : 0 Secondary Cases :					
Hospitalized Cases : 1 Deaths : 1					
K-12 School will have a dropdown in a future MDSS Version. For now, please also mark					

"Other" and list the following in the free text field:

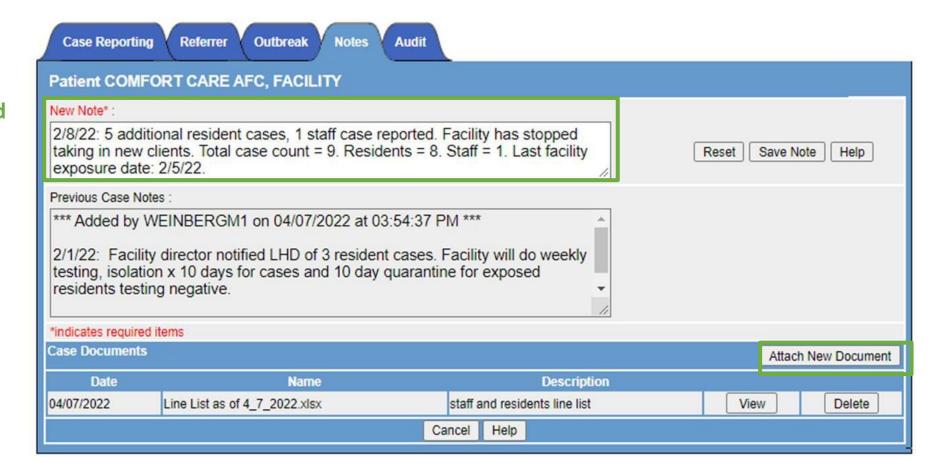
- who is affected (students; staff; both) AND
- the affected grades (pre-school-elementary; junior high/middle; high school)

For COVID-19 outbreaks, the **Symptom Presentation** and **Specimen Testing** sections do <u>not</u> need to be filled out.

It is recommended to document notes in the *Consultation Provided* & *Additional Actions and Notifications* Sections

Symptom Presentation			
Symptom(s)	Symptom present	Number of Cases with Symptom	Total # of Cases with Information Available
Vomiting	○ Yes ○ No		
Diarrhea	○ Yes ○ No		
Nausea	○ Yes ○ No		
Abd Cramps	○ Yes ○ No		
Fever (highest recorded)	○ Yes ○ No		
Bloody Stools	○ Yes ○ No		
Respiratory(e.g., coughing, wheezing)	○ Yes ○ No		
Pneumonia	○ Yes ○ No		
Rash	○ Yes ○ No		
Itching	○ Yes ○ No		
Skin and soft tissue wound/damage	○ Yes ○ No		
Other : (specify)	○ Yes ○ No		
Specimen Testing			
Declined Stool - Norovirus Stool - Barrier Sto	acterial Stool - (	Ovum and Parasites  Wound /Skin Cultures:	
Specimens Collected :	aboratory Performing Tests :	Shipping Da	Results :
Specimens Collected :  Consultation Provided Environmental cleaning guidelines Infect	Performing Tests :  ition control precaution  Visitor restrictions		results .
Specimens Collected:  Consultation Provided  Environmental cleaning guidelines Infect  Patient cohorting, isolation and restrictions  Specimen collection and submission Oth  Additional Actions and Notifications  LHD MDHHS Bureau of Laboratories	Performing Tests :  dion control precaution  Visitor restrictions	Employee restrictions Closed units to transfer and a	results .
Specimens Collected:  Consultation Provided  Environmental cleaning guidelines Infect Patient cohorting, isolation and restrictions Specimen collection and submission Oth Additional Actions and Notifications  LHD MDHHS Bureau of Laboratories	Performing Tests :  ition control precaution  Visitor restrictions her  MDARD  ME	Employee restrictions Closed units to transfer and a	results .
Consultation Provided  Environmental cleaning guidelines Infect Patient cohorting, isolation and restrictions Specimen collection and submission Oth Additional Actions and Notifications  LHD MDHHS Bureau of Laboratories Federal Agencies (e.g., CDC, FDA, USDA)	Performing Tests :  ition control precaution  Visitor restrictions her  MDARD  ME	Employee restrictions Closed units to transfer and a	Nesuis .
Specimens Collected:  Consultation Provided  Environmental cleaning guidelines Infect Patient cohorting, isolation and restrictions Specimen collection and submission Oth Additional Actions and Notifications  LHD MDHHS Bureau of Laboratories Federal Agencies (e.g., CDC, FDA, USDA)  Person Providing Report to Public Health  First:	cion control precaution Visitor restrictions Der MDARD ME MDHHS Public Int	Employee restrictions Closed units to transfer and a	idmits .

Option to add notes and to attach documents pertaining to the investigation.



## Outbreak Investigation Support is Available

- Regional Epidemiologist and Regional Support Epidemiologist Assistance
  - Conduct data analysis and prepare outbreak summary
  - Assist with OMS\* outbreak entry and monitoring data analysis
  - Provide MDSS and OMS technical support and training
  - Provide situation updates
  - Assist with inter-jurisdictional communication
- MDHHS Infection Prevention Unit
  - Assist with outbreak/cluster investigations in Long-term Care (LTC), Adult Foster Care (AFC), and Homes for the Aged (HFA).
  - To request support email <u>MDHHS-IPRAT@michigan.gov</u>