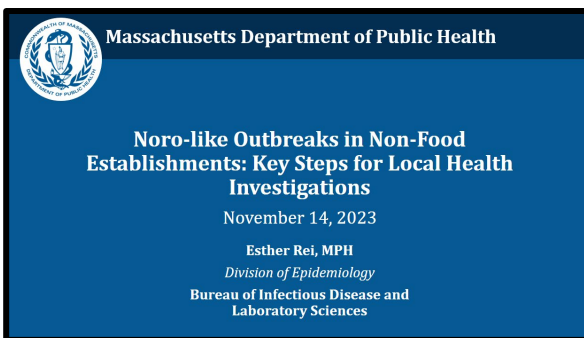




Massachusetts Department of Public Health

MDPH Tuesday Infectious Disease Webinar Series

Tools for Local Boards of Health



November 14, 2023

Hillary Johnson, MHS

Senior Epidemiology Advisor to Local Health, Division of Epidemiology

Scott Troppy, MPH, PMP, CIC

Senior Epidemiologist – MAVEN User Management & Data Visualization Lead

Kate Hamdan, MPH

Surveillance Epidemiologist, MAVEN Training Team Lead

Julie Coco, MPH

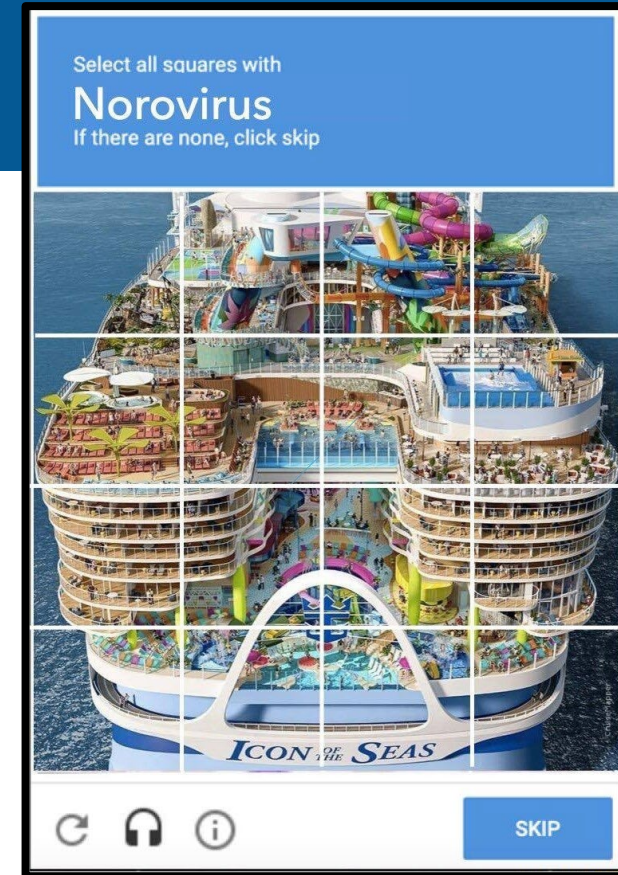
Internship Program and Training Coordinator, Division of Epidemiology

Petra Schubert, MPH

Emerging Infections Coordinator, Division of Epidemiology

Agenda November 14, 2023

- **MAVEN Release This Week**
 - New Local Health Reports!
- **COVID-19 Guidance Reminders for HCWs & HC Settings**
- **Expanded TB Screening for Humanitarian Parolees**
 - Anna Hippchen, RN & Michael Boyer, MS, Division of Global Populations and Infectious Disease Prevention
- **End of Vibrio Season Wrap Up!**
 - Johanna Vostok, MPH, Foodborne & Waterborne Illness Coordinator, Division of Epidemiology
- **Noro-like Outbreaks in Non-Food Establishments: Key Steps for Local Health Investigations**
 - Esther Rei, MPH, Epidemiologist, Division of Epidemiology



2023 Infectious Disease Tools for LBOH Webinar Schedule!



- You help us identify topics, needs, & content!
- Be sure to send ideas, requests, and questions to Hillary and Scott!

MAVEN Help has Guidance Documents and
Previous Webinars:

<http://www.maven-help.maventrainingsite.com/toc.html>

23/24 Upcoming Schedule!

All Registrations:	https://maven-webinars.constantcontactsites.com/
2 nd Tues 11/14/23	Noro-like Outbreaks in Non-Food Establishments
4 th Tues 11/28/23	4 th Tuesday Office Hours
2 nd Tues 12/12/23	2023 MAVEN Wrap Up & Review
	<i>*No December 2023 Office Hours</i>
2 nd Tues 1/09/24	MIIS Tips and Tricks for LBOH
4 th Tues 1/23/24	*4 th Tuesday Office Hours

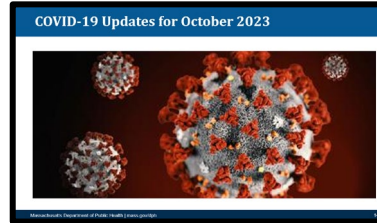
Next Office Hours: Tuesday, November 28, 2023

Updates – A quick recap for November 14, 2023

We Last Met October 10, 2023:

RESPIRATORY ILLNESS SEASON!

- RSV Updates
- COVID-19 Guidance Reminders
- **NEW!** Viral Respiratory Illness Reporting Dashboard
 - Lizzy Mello, MS, Senior Surveillance Epidemiologist
- Respiratory Illness Immunization Resources for LBOHs
 - Josh Norville, MPH, Epidemiologist, Data Assessment Unit
- Influenza Surveillance For Local Boards of Health (2023)
 - Joyce Cohen, MPH, Influenza Coordinator, Division of Epidemiology



[PDF SLIDES: Influenza Season for LBOH](#)

[WEBINAR: Presentation Recording](#)



Always Remember you can see recent webinar recordings and slides in MAVEN Help.

Bookmark the URL!

MAVEN Help: <http://www.maven-help.maventrainingsite.com/toc.html>



MAVEN Release Highlights

- **Added Jurisdiction name (city) to LBOH Notification for Immediate Disease workflow** for triage and ability to see which towns have disease events for multi-jurisdictions.
- **Added new Occupation Field (Free Text)** to all pertinent wizards.
- **Created a new LBOH Assessment Report.** This report pulls a set of key indicators to help LBOH monitor capacity for their town or region. *(report will go live December 2023)*

MAVEN Release Highlights

- Created two new iterations of the **Event Information Extract by Disease** for **regional** MAVEN users.

LBOH Event Information Extract by Disease and Region

The screenshot shows the MAVEN Reporting interface. The 'Category' is set to 'Custom Reports'. The 'Select Report' dropdown is 'Event Information Extract by Disease and Region'. The 'Description' field contains a detailed text about the report. The 'Event Date Start' is set to '01/01/2023'. The 'Disease*' dropdown is open, showing a list of diseases including Amebiasis, Anthrax, Arbovirus (other), Avian Influenza, and Babesiosis. The 'Select the relevant Question Packages that pertain to the chosen disease*' dropdown is open, showing a list of packages including 1. Administrative, 2. Demographic, 3. Clinical, 4. Vaccine and IG Information, and 5. Risk/Exposure/Control & Prevention. The 'Report Format*' is set to 'Comma Separated Values'. The 'Classification*' dropdown is open, showing a list of classifications including Confirmed, Contact, Probable, Revoked, and Suspect. The 'Would you like to run this report for all your towns or individual towns*' dropdown is set to 'All Towns'. A red arrow points to the 'All Towns' dropdown.

LBOH Event Information Extract by Disease Category and Region

The screenshot shows the MAVEN Reporting interface. The 'Category' is set to 'Custom Reports'. The 'Select Report' dropdown is 'TEST_14385_Event Information Extract by Disease Category and I'. The 'Description' field contains a detailed text about the report. The 'Event Date Start' is set to '01/01/2023'. The 'Select an Enteric or Zoonotic Disease Category*' dropdown is open, showing a list of categories including Enteric Diseases, Mosquito-borne Diseases, Tickborne Diseases, 4. Vaccine and IG Information, and 5. Risk/Exposure/Control & Prevention. A red arrow points to the 'Enteric Diseases' dropdown. The 'Select the relevant Question Packages that pertain to the chosen disease*' dropdown is open, showing a list of packages including 1. Administrative, 2. Demographic, 3. Clinical, 4. Vaccine and IG Information, and 5. Risk/Exposure/Control & Prevention. The 'Report Format*' is set to 'Comma Separated Values'. The 'Classification*' dropdown is open, showing a list of classifications including Confirmed, Contact, Probable, Revoked, and Suspect. The 'Would you like to run this report for all your towns or individual towns*' dropdown is set to 'All Towns'. A red arrow points to the 'All Towns' dropdown.

MAVEN Release Highlights

- **Updated the LBOH COVID workflows to hold 7 days of cases from first positive specimen date (previously it was 3 days).**
 - If you need to review and find all COVID cases, then continue to use the LBOH Confirmed and Probable report.
- The **COVID Variant of Concern Extract** report has been modified to pull out SARS events with sequencing lab results, regardless of status as variants of concern.
- **Revised *Vibrio* to a non-immediate disease** for Wednesday, November 1st, 2023 - Tuesday, April 30th, 2024.

MAVEN Release Highlights

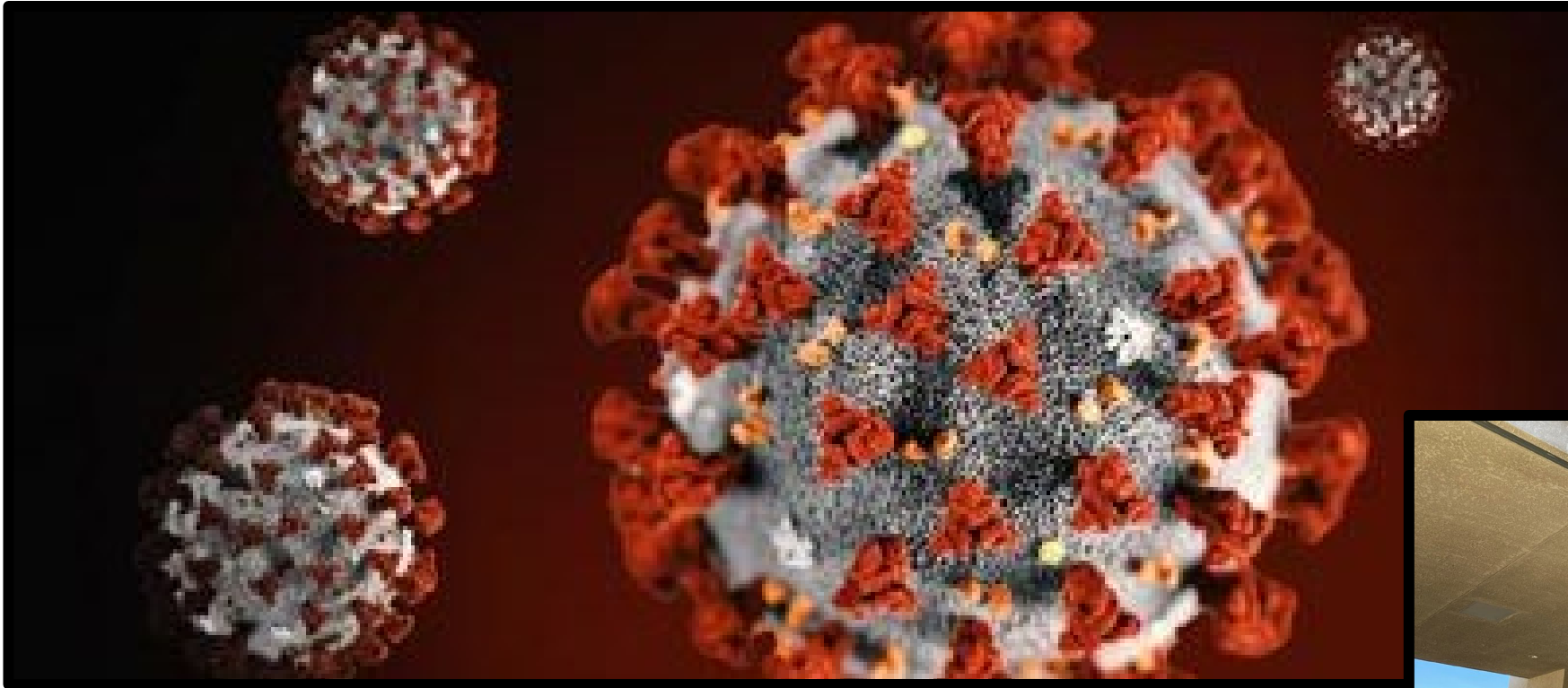
- **Created LBOH wizards for Vaccine Preventable Diseases:**
 - (Measles, Rubella, *Haemophilus influenzae* and *Streptococcus pneumoniae*)
- **Created a Division of Global Populations (DGP) Contacts section** in Communication Events.
 - DGP contacts will typically be the assigned TSA nurse for the town. DSAI staff will upload these contacts so you will see them populate over time.

DGP Contacts					
First Name	Last Name	Title	Email	Phone	Mobile Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MAVEN Release Highlights – RMSF Updates

- Due to updated CSTE language, “**Rocky Mountain spotted fever (RMSF)**” will now fall under “**Spotted Fever Rickettsiosis, including RMSF.**”
- All previous “RMSF” Maven events will now be under “Spotted Fever Rickettsiosis, including RMSF” Maven events.
 - **From the CSTE Case Definition:** Spotted fever rickettsioses are a group of tickborne infections caused by some members of the genus *Rickettsia*. Rocky Mountain spotted fever (RMSF) is an illness caused by *Rickettsia rickettsii*, a bacterial pathogen transmitted to humans through contact with ticks.

COVID-19 Guidance 2023 – Healthcare Settings



Isolation and Exposure Guidance (Last Update 2022)

	<u>General Population</u>	<u>School & Childcare</u>
Isolation for Cases	<ul style="list-style-type: none"> Isolate 5 Days Masking Days 6-10 <p><u>To End Masking Early:</u></p> <ul style="list-style-type: none"> 2 Negative Tests to end masking in Day 6-10. Start testing Day 6 <p><u>Refuse Masking and don't want to test?</u></p> <ul style="list-style-type: none"> Isolate 10 days 	<ul style="list-style-type: none"> Isolate 5 Days Masking Days 6-10 <p><u>To End Masking Early:</u></p> <ul style="list-style-type: none"> 1 Negative Test to end masking in Day 6-10. Start testing Day 5 <p><u>Refuse Masking and don't want to test?</u></p> <ul style="list-style-type: none"> Isolate 10 days <p>Follow Gen Pop Guidelines OUTSIDE School Time</p>
Exposed Contacts	<ul style="list-style-type: none"> Must Mask 10 Days Get Tested Day 6 or Later <p><u>No Guidance for Ending Masking Early.</u></p> <ul style="list-style-type: none"> Must Mask Whole 10 Days if you CAN mask. 	<ul style="list-style-type: none"> Must Mask 10 Days Get Tested Day 6 or Later <p><u>No Guidance for Ending Masking Early.</u></p> <ul style="list-style-type: none"> Should Mask Whole 10 Days if you CAN mask. <p>Follow Gen Pop Guidelines OUTSIDE School Time</p>

<https://www.mass.gov/info-details/covid-19-isolation-and-exposure-guidance-for-the-general-public>

<https://www.mass.gov/info-details/covid-19-isolation-and-exposure-guidance-for-children-and-staff-in-child-care-k-12-out-of-school-time-ost-and-recreational-camp-program-settings>

Isolation Guidance for Healthcare Personnel (HCP)

[Mass.gov Guidance for Health Care Personnel with SARS-CoV2 Infection or Exposure \(last update 10/13/2022\)](#)

- **Isolation for HCP:**
 - **Symptomatic:** An isolating HCP who had COVID-19 symptoms may return to work:
 - after 5 days have passed since the first positive test was taken; **AND**
 - symptoms have substantially improved, including being fever-free, for 24 hours; **AND**
 - the HCP received a negative test (antigen) on Day 5 or later.
 - **Asymptomatic:** An isolating HCP who has been asymptomatic and is isolating may return to work after 5 days once:
 - the HCP received a negative test (antigen) on Day 5 or later.
- **Return To Work Precautions:** Any HCP who returns to work prior to 10 days since their first positive test was taken should avoid caring for patients who are moderately to severely immunocompromised until after 10 days has passed since their positive test.

Exposure Guidance for Healthcare Personnel (HCP)

[Mass.gov Guidance for Health Care Personnel with SARS-CoV2 Infection or Exposure \(last update 10/13/2022\)](#)

- **Exposure Guidance for HCP:**
 - **Healthcare Setting Exposure:**
 - Asymptomatic HCPs with a healthcare setting exposure may continue to work, provided they remain asymptomatic.
 - All HCP should wear PPE appropriate for their duties and must at least wear a facemask and self-monitor for symptoms for 10 days.
 - **Household or Community Exposure:**
 - HCP should be tested and have a negative result before return to work unless recovered <30 days in which case, no test is required.
 - All HCP should wear PPE appropriate for their duties and must at least wear a facemask and self-monitor for symptoms for 10 days.

LTCF COVID-19 Reporting Burden

- CMS requires weekly reporting to **NHSN**, including cases, deaths and vaccination status of staff and residents [COVID-19 Nursing Home Data - Centers for Medicare & Medicaid Services Data \(cms.gov\)](#)
- The MA State Legislature requires reporting of all cases among residents and staff (and hospitalizations and deaths) to be reported in **REDCap (Chapter 93** of the acts of 2020) [Archive of Chapter 93 COVID-19 Data | Mass.gov](#)
- The Bureau of Healthcare Safety and Quality (BHCSQ) requires reporting of any COVID-19 deaths to Healthcare Facility Reporting System (**HCFRS**)
- All positive antigen results for tests conducted in the facility must be reported to DPH via **Casetivity**
- **Epidemiology** only asks facilities to report new cases if they have gone 28 days without COVID-19 case activity, thus indicating a new “cluster” the new BRF can be used and should **ONLY BE COMPLETED ONCE** for each reported cluster: [Infectious Disease Case Report Forms \(mass.gov\)](#)

How Can LBOHs Help LTCFs?

- Supporting facilities with vaccines and PPE if needed.
- Many LBOHs with excess home test kits have offered to provide to facilities for visitor and family use.
- Please don't request case line lists from facilities but instead consider periodic check-ins to see how facilities are doing.
- Become familiar with available published data sources if more information is desired.

LTCF MAVEN Clusters

- **NEW COVID Cluster Events** should only be created in MAVEN for a nursing home or rest home if they have not had a staff or resident case in the prior 28 days. (Cases within 28 days of a previous case remain part of the existing cluster event.)
 - **Please first confirm that there is not an existing (open) cluster event in MAVEN!**
 - Currently, 40% of licensed nursing homes have an open clusters
 - **If no existing open cluster event in MAVEN, recommend the facility report via new [MDPH online reporting form](#) (which creates the MAVEN cluster event). **LBOH generally do not need to create these cluster events manually.****
 - LBOH can see MAVEN cluster events in their jurisdiction and are welcome to contribute notes or updates if applicable
 - Please ensure that the following variables are completed in MAVEN:
 - **Last onset/positive date (Respiratory/ILI QPKG)**
 - Exposure setting name (Standard QPKG)
 - Exposure setting type (Standard QPKG)
 - Zip (Standard QPKG)
- All healthcare facility clusters will automatically be closed 28 days from the last onset/positive date.
 - CMS and Chapter 93 reporting by the facility are the best resources for weekly case numbers and additional information.

Use the Online Form or Create a Cluster Manually?

- We encourage Long Term Care Facilities (LTCFs), Acute Care, Assisted Living, and Dialysis to submit their own [Case Report Forms via online form](#).
 - This will ensure proper naming and facility-type variables, etc. are correct.
 - LBOH can also utilize the [online form](#) which would create the MAVEN event immediately.
 - Cluster Events do not appear in LBOH workflows, however,
 - LBOH can then search in MAVEN for the outbreak event to enter additional notes or follow-up.
 - LBOH can run a [Cluster Line List Report](#) to see a list of clusters in your jurisdiction.
- If LBOH wishes to create a cluster event directly in MAVEN, please utilize this tip sheet to ensure accuracy:
 - [Creating, Naming, and Searching for Cluster Events in MAVEN Tip Sheet](#)
 - Please call Epi Program 617-983-6800 with any questions or for assistance!



Massachusetts Department of Public Health

Expanded TB Screening for Humanitarian Parolees

November 14th, 2023

Anna Hippchen, RN & Michael Boyer, MS

With Marisa Chiang, Jessica Hunnewell, & Sergut Wolde-Yohannes

Updates

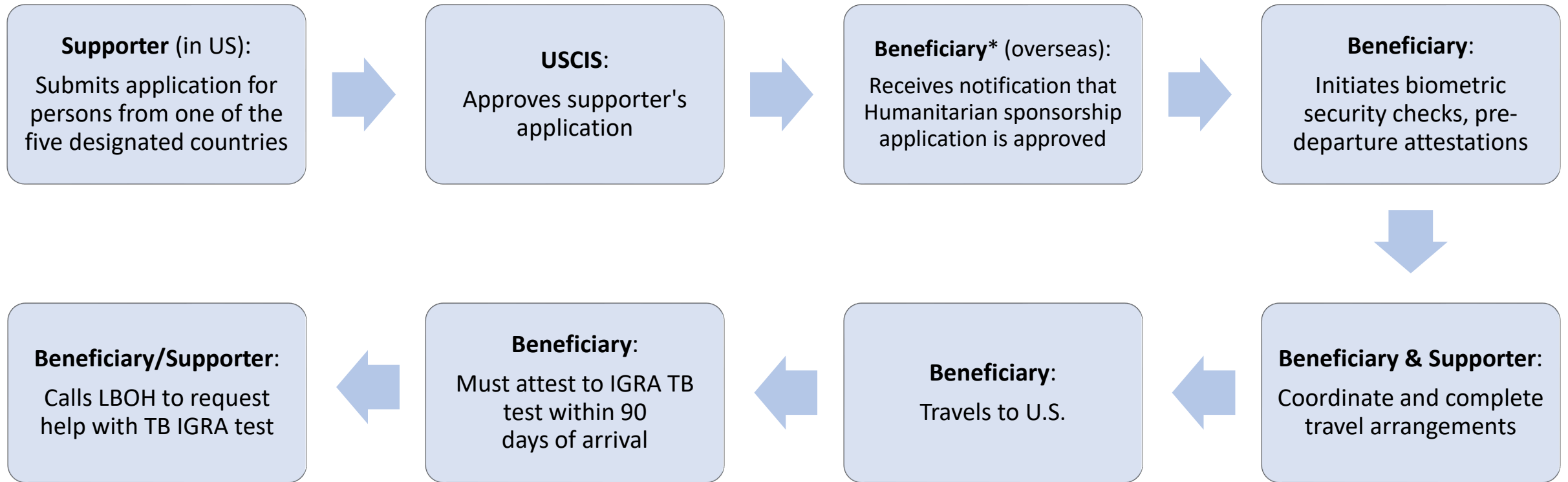
- As of 10/1/23, funding to support IGRA access in MA for Uniting for Ukraine (U4U) arrivals ended.
 - Our Division was able to test 174 arrivals
 - From 49 different MA communities
 - U4U arrivals are expected to meet USCIS attestation for IGRA testing within 90 days of arrival.
- As of 1/5/23, Humanitarian parole pathways opened for persons from Cuba, Haiti, Nicaragua, & Venezuela
 - Must meet USCIS attestation requirement for an IGRA test within 90 days & appropriate follow-up.



New Opportunity

- ELCK-5 Grant
 - Through short term funding from the Centers for Disease Control and Prevention (CDC), DPH aims to improve access to Tuberculosis services for Humanitarian Parolees
 - Estimate covering the cost of 500-600 IGRA tests via Quest Diagnostics
- Who Qualifies?
 - Humanitarian Parolees from Cuba, Haiti, Nicaragua, Venezuela, & Ukraine
 - Not needed for children under the age of 2

The Process



Local Boards of Health's Role

1. Complete the DPH Humanitarian *Parolee: Request for IGRA Test* form
2. Fax form to DPH/Division of Global Populations at 617-887-8791.
 - a. DPH will create MAVEN-TB event(s).
3. Download the Quest lab order from the MAVEN event(s).
4. Provide education about TB test and identify nearby Quest Patient Centers.
 - a. DPH will notify LBOH when IGRA TB test results are available in MAVEN.
5. Provide TB IGRA test results verbally within 5 days of results being available. Mail a paper copy of the lab report together with a result letter to resident.

Resulting

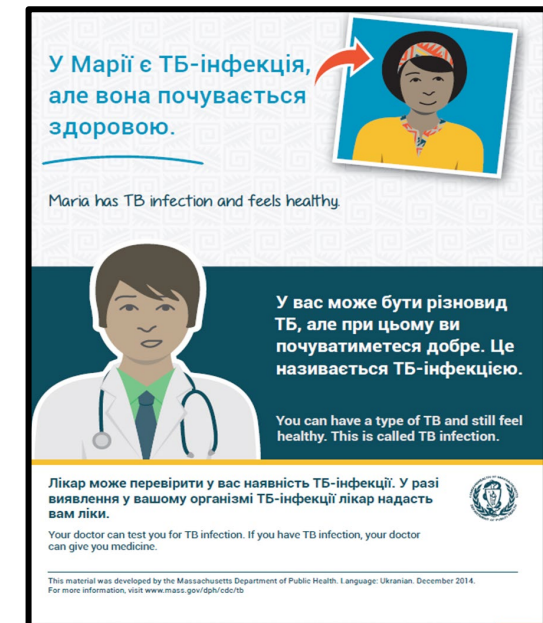
- If the IGRA result is **NEGATIVE**:
 - Provide brief education and information about TB.
 - No additional follow-up is needed.
- If the IGRA result is **POSITIVE**:
 - Initiate referral to the nearest TB clinic.
 - Provide education and information about TB and the importance of keeping their TB clinic appointment.
 - Continue to follow-up if person initiates treatment for TB Infection or Disease
- If the IGRA result is **INDETERMINATE**:
 - Consult with DPH, individual may require repeat testing.

- ❖ Resulting letter templates will be available on MAVEN Help
- ❖ Remind resident to submit their attestation for IGRA TB test results through their own USCIS online portal.

Resources

- Please reference the USCIS websites for in depth descriptions on how humanitarian parole is granted for Cubans, Haitians, Nicaraguans, Venezuelans, and Ukrainians (U4U) and subsequent public health attestation requirements.
- <https://www.uscis.gov/CHNV>
- <https://www.uscis.gov/ukraine>
- [Welcome.us](https://www.welcome.us)

With any further questions, please call the Division of Global Populations (DGP) directly at **617-983-6970**





Massachusetts Department of Public Health

Thank You!

**Division of Global Populations and Infectious Disease Prevention
Bureau of Infectious Disease and Laboratory Sciences
BIDLS-TBGeneral@mass.gov**

October 31st marked the end of Vibrio season!

- **May 1 – October 31 (Vibrio season):** all *Vibrio* events in MAVEN are changed from routine to immediate to ensure prompt investigation of *Vibrio parahaemolyticus* or *Vibrio species* detected in stool specimens
 - Vibrio bacteria naturally increase in coastal water during the summer. Prompt investigation of these cases facilitates traceback of shellfish and any needed closures of harvest areas.
- **November 1 – June 30:** only cases of *Vibrio cholerae* (any specimen source) warrant immediate case investigation
 - Goal is prompt investigation of individuals with cholera disease, which is very rare (0-5 cases reported annually in the US¹)
 - Most of these cases are non-cholera *Vibrio cholerae* infection (e.g., not cholera toxin-producing serogroup O1 or O139 that causes more severe illness)

For a more in-depth review:

Cyclospora and *Vibrio* Case Investigations (June 2022) [Slides](#), [Recording](#)



¹ <https://www.cdc.gov/cholera/infection-sources.html>



Massachusetts Department of Public Health

Noro-like Outbreaks in Non-Food Establishments: Key Steps for Local Health Investigations

November 14, 2023

Esther Rei, MPH

Division of Epidemiology

**Bureau of Infectious Disease and
Laboratory Sciences**