MDPH Tuesday Infectious Disease Webinar Series

Tools for Local Boards of Health

October 25, 2022

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Updates for today, Tuesday, 10/25/2022

- MAVEN software release – planned for 11/4/2022
  - Occupation and Industry – changes for the MAVEN release that is happening on 11/4
  - New functionality in Admin Question Package #1 (*Assign to Me*) for Step 3
Check your Immediate, Routine & Pending Workflows

- Reminder to check your LBOH Workflows
  - LBOH Notification for Immediate Diseases (4 cases)
  - LBOH Notification for Routine disease (216 cases)
  - LBOH Case Report Forms (CRF) are pending (996)
    - Cases in these workflows range from February 22–October 22
  - LBOH Notification but no follow-up required (3,044)
    - cases in this workflow as of today
**Step 3 (LBOH/Agency Investigator)**

Ability to auto populate **Step 3 (LBOH /Agency Investigator)** in the Admin QP with relevant information (name, title, agency, phone number)
<table>
<thead>
<tr>
<th>Occupation</th>
<th>Industry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clothes Salesman</td>
<td>Department Store</td>
</tr>
<tr>
<td>Personal Care Attendant</td>
<td>Home Health Care Services</td>
</tr>
<tr>
<td>Head Custodian</td>
<td>Elementary School</td>
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</tbody>
</table>
Occupation and Industry (QP#2)

• Added a new field free text for Occupation to match our free text Industry field (standardized code fields for Occupation & Industry) [MAEDSS-13570]

*NIOCCS is a free web application used to translate industry and occupation text found in surveys, death certificates, and medical records into standardized codes.

I/O codes (using NAICS) will populate the two fields via an API that is ran late in the day.
Topics Today

- **Wastewater Poll**
- **MAVEN Updates**
  - Pending G Release Brief Preview
  - Industry and Occupation Variables
  - Auto-fill “assign to me” Admin Step 3 Option.
- **Webinar Highlights Review**
- **Communication Events**
  - Your Regional and Shared Services should be noted.
  - Specific Disease Assignments should be noted.
- **Ebola Situational Update: Traveler Monitoring**
  - LBOH Traveler Monitoring is Needed
- **WhatsApp Messenger**
  - A popular method for communicating with cases and contacts. Let’s learn more!
- **Guest Presentation:**
  - Influenza Surveillance in MA – Joyce Cohen, MDPH
MDPH Conducts Infectious Disease Tools for LBOH Webinars Every Other Week

Upcoming Topics! Register Now!

| All Registrations! | https://maven-webinars.constantcontactsites.com/
|-------------------|--------------------------------------------------|
| 8-Nov-22 | Group A Strep (GAS) Case Investigations: Acute Care, Long-term Care and Beyond
| 6-Dec-22 | Introduction to Mumps Case Investigations
| 20-Dec-22 | Introduction to Routine Vaccine Preventable Disease (VPD) Case Investigations

*No Webinars 11/22/22 or 1/3/23

Reminder: Each webinar begins with updates and timely topics prior to the featured disease training, so make sure to register each session to stay current!

MAVEN Help has Guidance Documents and Previous Webinars:


• MDPH presents Every Other Week on Tuesdays 11:00-12:30
  • Updates in Guidance.
  • Troubleshooting MAVEN.
  • How to conduct case investigations and contact tracing in different settings.
  • Target Audience: Health Agents, Epis, Contact Tracers, and Public Health Nurses doing this work.

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Next Webinar: Tuesday, November 8, 2022
Updates – A quick recap for Oct. 25, 2022

We Last Met Oct. 11, 2022:

- COVID-19 Long Term Care Updates- Melissa Cumming
- Ebola Situational Update: Traveler Monitoring
- Universal Tips and Resources
  - Translation Services
  - MIIS & Vaccine Questions
  - Tips for Contacting Providers & Patients
  - Lost to Follow-Up

- Disease-Specific Top Reminders
  - Epidemiology & Surveillance Overview
  - Foodborne & Enteric (Gastrointestinal (GI)) Disease
  - Tickborne Disease
  - Hepatitis A
  - Hepatitis C
  - Pertussis (Whooping Cough)
  - Monkeypox
  - COVID-19

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

Bookmark the URL!

Contacting the Case Patient

Q. How many times should you try to contact a case or contact prior to selecting “lost to follow-up?”

A. General rule of thumb that we use as Epidemiologists is THREE attempts. We usually vary it across different times to try to get in touch with the case.

- **Try texting.**
- **Try calling at different times.** Calling at least once after 5pm might help if the individual works a typical 9-5 job.
- **Check Number.** Did you confirm you have the correct number or if there is an alternative number/emergency number from the ordering provider?
  - You can likely complete a LARGE amount of the required data fields after speaking with the provider.
- **Mail a letter via U.S. post.**

If you completed the interview but the case never returned your final call at the end of isolation, or if you successfully notified a contact but then lost touch with them on your additional assessment calls, that is not Lost to Follow-up.
Troubleshooting with Cases

• **MISSING CONTACT INFORMATION:** The data in the event is only as good as what the lab reported electronically. You may need more information in order to contact the case.
  
  • Call ordering facility
    • Get Emergency Contact Info
  • Check MIIS
  • Check other Town Information Sources
  • Mail letter to address if no phone.
Lost to Follow-up Summarized

• **When is someone Lost to Follow-Up?**
  • Your health department may have guidance on this effort.
  • Try calling minimum 3 times. At least once try texting. Try different times of day.
  • Try an emergency contact number.
  • Snail Mail a letter to their street address.

• **What MAVEN steps do we take if someone is Lost to Follow-up?**
  • Make sure to enter any data you do know. Whatever you were able to determine, even if you didn’t actually interview the patient (so if a provider gave you info, etc.) you can enter that.
  • In the Admin QP under
    • **Step 4 - Case Report Form Completed:** Mark NO.
    • Then in the drop down reason, select lost to follow-up.
COVID-19 Submitted Questions

• Q. Is Massachusetts suggesting the LBOHs continue to follow up on Covid cases?

• A. At this time, MA is not recommending universal case investigation and contact tracing, which is in alignment with CDC’s updated guidance for COVID-19. Local jurisdictions can identify subsets of COVID-19 cases for investigation based upon local priorities. This may include assistance with large outbreaks and providing recommendations for control and mitigation in certain settings.
Communication Events – We Use Them

- **Communication Events** are events within MAVEN that hold information for our Local Board of Health users and affiliated contacts for 351 cities & towns in Massachusetts.
  - There is an event for each city/town and they contain board of health contact information such as addresses, fax numbers, MAVEN users, and more.
  - Local Boards of Health, MDPH Epidemiologists, and Division of Surveillance, Analytics and Informatics (DSAI) staff rely on Communication Events to ascertain relevant points of contact at a board of health.
  - Importantly, this is also where MAVEN points of contacts can notify us if they will be taking time off, as well as notify us of who the primary/backup MAVEN contact is in your office.
Communication Events – We Use Them

- **Regional Collaborations, Coverage Assistance, Partnerships for follow-up** should ALL be noted in Communication Events.
  - This includes **emergency weekend coverage**. Who should MDPH call regarding an immediate event on the weekend or after hours?
  - Are you splitting up and **assigning specific diseases** to certain users?
    - For example, if *Ebola* or *Monkeypox* goes to a specific user, **YOU HAVE TO NOTE IT** in the communication event.

- **MDPH Epis look for notations on who to contact for a specific disease.** We ALSO look at last login dates. We don’t want to spin our wheels contacting users who are not active.

- **Consider Communication Events to be living documents** – with frequent updates to your coverage schedules and plans. Be sure to update accordingly.
Communication Events Need Updates

- There is a [GREAT Tip sheet in MAVEN](#) that describes how to find your Communication Event and how to update it.

  - Please go in and add notes on Emergency After Hours Coverage, who does any specific infectious diseases (even if it is temporary coverage), note when staff are out on leave and coverage has been assigned to someone else, etc.

  - If you are part of a regional collaboration and certain diseases are handled by specific regional users, you MUST note this.
Ebola Situational Update

- **Areas affected as of Oct. 24, 2022:**

  - When travelers from Uganda arrive in the US, they need to be assessed for risk and then monitored for the remaining days of a potential 21-day incubation period.

  - To date, no suspected, probable, or confirmed cases of Ebola have been reported in the United States and the risk of Ebola domestically is low.

    - And we want to keep it that way – thus the public health monitoring.

Areas Affected CDC Map
Ebola Situational Update: LBOH Needed

• The process for monitoring is very simple:
  • MDPH receives lists of travelers from CDC, MAVEN Contact events are created, and LBOH are contacted with detailed instructions:
    • Contact the Traveler to do a preliminary risk assessment and confirm contact information.
      • Update MAVEN.
    • Establish a plan for additional monitoring for the remaining incubation period based upon traveler’s preferred method of communication (phone/text/email/etc.)
      • High = Daily
      • Present in Designated Outbreak Area = At least 2x weekly
      • Present in Outbreak Country but not Designated Outbreak Area = Weekly
    • Contact MDPH Epi Program if traveler develops symptoms and needs evaluation.
      • Not every symptom will require Ebola testing. MDPH will help triage appropriate action steps.
Ebola Situational Update: LBOH Needed

- **LBOH follow-up is needed at this time.**
  - MDPH has received over 70 travelers at this time, and LBOH assistance in follow-up is critical to help manage this volume.
  - Traveler Monitoring is NOT a clinical task and can be conducted by health agents/Epis/Community Health Workers, etc. It does not require a PHN at this time.
    - We know PHNs are busy with flu clinics, etc!
    - This is the perfect activity for new regional collaboration staff!
Communicating With Travelers

• Many Travelers utilize the WhatsApp app on their cell phone to communicate.
  • This is a popular messaging/texting/video calling app for international travelers
    • It can be used with just WiFi and doesn't require cellular data
    • It can be used with iPhone or Android phones easily
    • It can be used anywhere in the world.

• To learn more about this very easy to use app (which can be downloaded to a cell phone AND to your desktop), check out this article:

• This is likely going to be a more common texting and communication tool for many residents (CDC even notes it as a common method for contacting travelers in this outbreak monitoring situation).

This is not an ‘official endorsement,’ but is meant to share a common tool that many travelers may be utilizing so you can determine if this app is right for your team...
Communicating With Travelers

• The WhatsApp is actually very user friendly – I’ve tried it!

• Look for someone in your jurisdiction to utilize it for this work. It can be downloaded to a work smart phone AND a work desktop computer.

  • If you utilize this app, you will likely increase the successful outreach for this and other MAVEN investigations and follow-up, particularly among tech-savvy and/or frequently mobile cases and contacts.

• Be sure to consult with your jurisdiction’s privacy requirements first.

  • WhatsApp utilizes end-to-end encryption, and there are additional two-step verification settings available.

This is not an ‘official endorsement,’ but is meant to share a common tool that many travelers may be utilizing so you can determine if this app is right for your team…