Updated Guidance on Reporting COVID-19 Outbreaks and Clusters

Updated December 6, 2023

Background

NC DHHS continues to provide resources and expertise to assist with preventing transmission of COVID-19. The following updated guidance increases flexibility for local health departments to investigate, report, and implement control measures while accounting for differences in setting size, setting type, and transmission dynamics. No changes were made in the outbreak definitions. The following changes were made to cluster definitions:
- Shortened time period from 14 days to 7 days between the cases in a setting to report a cluster.
- Shortened time period from 14 days to 7 days since the last reported case in a cluster to declare it over.

Outbreak Guidance

NC DPH recommends the following definition for reporting outbreaks of COVID-19 in congregate living settings.

Criteria to report an outbreak in a congregate living facility
- Two or more cases* of COVID-19 in residents or staff within 14 days in the same facility.

Criteria to declare an outbreak over
- 14 days since the date of specimen collection of the most recent outbreak-associated case in the facility

Local health departments should continue to report outbreaks in congregate living settings, including:
- Long-term care facilities
- Correctional facilities
- Housing facilities for migrant workers (e.g., farmworkers)
- Shelters

Cluster Guidance

In settings that are not congregate living– including occupational, educational, and other community settings– it can be difficult to determine if a cluster of cases is occurring due to transmission within the setting or spread in the broader community.
NC DPH recommends the following definition for reporting clusters of COVID-19 in non-congregate living settings.

Criteria to report a cluster in a non-congregate living setting
- Five or more cases* of COVID-19 within 7 days with evidence of epidemiologic linkage between cases OR
- Fifteen or more cases* of COVID-19 within 7 days associated with the same setting or facility in the absence of specific information about epidemiologic linkage.

LHDs may choose to investigate and report clusters that do not meet these criteria at their discretion based on local factors not addressed in this document (e.g., in small settings where fewer than 15 cases represents a majority of the total in that setting or a setting with high-risk populations).

Criteria to declare a cluster over:
  • Seven days since the date of specimen collection of the most recent cluster-associated case in the setting or facility.

The definitions of non-congregate living settings are broad, but might include the following:
  • Occupational settings
    o Food processing plants
    o Production or distribution facilities/Factories
    o Construction sites
    o Office buildings
  • Educational settings
    o Childcare facilities
    o Schools
    o Colleges or universities
  • Community settings
    o Religious gatherings
    o Treatment Centers
    o Independent Living/Retirement Centers
    o Other large gatherings or events
    o Retail
    o Restaurants

*For the purposes of counting cases for outbreak and cluster management and reporting, confirmed, probable, and suspect cases according to the CSTE case definition should be included. This includes self-administered tests.

Reporting

Local health departments should continue to report COVID-19 and any influenza or influenza-like illness (ILI) outbreaks and clusters to NC DPH via REDCap. Disease or laboratory confirmation is not necessary prior to reporting. Respiratory outbreaks or clusters without disease or laboratory confirmation should be reported as influenza-like illness (ILI) outbreaks. Local health departments should report outbreaks and clusters within 24 hours of identification.
Questions about outbreak and cluster reporting guidance may be sent to outbreak-data@dhhs.nc.gov or addressed to your TATP nurse or the epidemiologist on call (919-733-3419).