Policy Title: Investigation of Communicable Diseases and Conditions
No. [Example X.XXX-0X]

Purpose: This policy sets the standard for the health department to investigate suspect cases of communicable diseases and conditions within their jurisdiction.

Policy: The local health department will investigate all reports of communicable disease according to local and state laws and in accordance with the recommendations of the Centers for Disease Control and Prevention.

The authority for this policy is derived from:
NCGS §130A-41(b)
NCGS 130A -144
10A NCAC 41A .0103
10A NCAC 41A .0201 through .0205

Approvals:

_________________________ __/__/____
Director of Nursing    Date Signed

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Medical Director    Date Signed

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Health Director    Date Signed

Procedure:
1. The health director will assure that trained staff is available 24/7 to investigate reports of communicable diseases and conditions from the NC Division of Public Health, hospitals, private health care providers, emergency response personnel, correctional facilities, long term care facilities, schools, child care facilities, restaurants, other government agencies, and private citizens.
2. The health director, or his/her designee, will designate a clinician (registered nurse, nurse practitioner, physician extender, or physician) to be responsible for the communicable disease program(s).
3. The health director, or his/her designee, will assure that all staff who have direct responsibility for communicable disease/condition investigation have educational preparation (formal and/or continuing education) to perform public health disease investigations. At least two (2) staff members will be assigned this responsibility. Within one (1) year of employment, every Public Health Nurse with responsibility for disease surveillance and investigation will complete the course “Introduction to Communicable Disease Surveillance and Investigation in North Carolina”.
4. The health director, or his/her designee will ensure that control measures have been implemented for each case in accordance with § 130A-144, 10A NCAC 41A .0201 CONTROL MEASURES - GENERAL, 10A NCAC 41A .0202 CONTROL MEASURES- HIV, 10A NCAC 41A .0203 CONTROL MEASURES - HEPATITIS B, 10A NCAC 41A 0204 CONTROL MEASURES - SEXUALLY TRANSMITTED DISEASES and 10A NCAC 41A .0205 CONTROL MEASURES - TUBERCULOSIS.
5. Disease investigations generally begin by first contacting the physician of record for additional information. If there is no physician of record, or if the physician of record does not respond to requests for information promptly, or if the physician is not able to provide complete disease investigation information, then individuals may be contacted.
6. When efforts to investigate a report of communicable disease have been made and insufficient information has been obtained to complete the investigation, the health director, or his/her designee shall report the case with the information that has been received and document the investigation attempts. With the exception of HIV/Syphilis and TB investigations which will
follow their specific program guidance regarding investigations, the minimum effort to investigate diseases are as follows:

a. High Profile Diseases (Category A Diseases, Hepatitis A, & N. Meningitidis) – Individual cases within this category should be investigated immediately. Termination of the investigation should only be made in consultation with NC DPH epidemiologist.

b. Bacterial STDs – At least 3 attempts to investigate the reported disease. One attempt must be through written correspondence to the provider. If provider fails to respond, contact the patient and verify that the patient received appropriate treatment.

c. Hepatitis B Acute, Chronic, Lab/Condition Report: At least 3 attempts to contact the provider, one of which must have been through written correspondence. Patients should not be contacted until at least one attempt to reach the provider has been made. The public health nurse should make at least 3 attempts to contact the patient regarding contacts and control measures before assigning the event to the state.
   i. Exception: Hepatitis B lab/condition reports may be assigned to the state without contacting the provider or patient. Please refer to the HBV Business Rules for guidance.

d. Foodborne and Diarrheal Disease – At least 3 attempts to contact the provider, one of which must have been through written correspondence, and 3 attempts to contact the patient regarding food history and exposure.

e. Hepatitis C - At least 3 attempts to contact the provider, one of which must have been through written correspondence, and 3 attempts to contact the patient regarding risk history and public health control measures.

f. Bacterial, Vectorborne, Viral and Zoonotic Diseases - At least 3 attempts to contact the provider, one of which must have been through written correspondence.

g. The health director, or his/her designee will contact the NC Division of Public Health On Call Epidemiologist in cases of
   i. unusual public interest
   ii. when coordination with the North Carolina State Laboratory of Public Health or Centers for Disease Control (CDC) is required, or
   iii. if additional guidance on a disease or control measure is needed.

7. Nothing in this policy shall prohibit a health director or his/her designee from implementing public health control measures for a suspect case while a disease investigation is in progress.
8. Reportable diseases and conditions can be found in 10A NCAC 41A .0101. Nothing in this policy shall prohibit a health director or his/her designee from investigating an outbreak of a disease or condition that occurs which is not required to be reported, but which represents a significant threat to the public health.

References:
NCGS 130A-41(b)
NCGS 130A-144
10A NCAC 41A