Steps for Local Health Department Staff to Submit New Outbreaks and Clusters to Communicable Disease Branch using REDCap

REDCap is being used to collect outbreak and cluster information from Local Health Departments to ensure more complete information is obtained. This eliminates the need to submit CD Outbreak Worksheets. The following two steps will allow local staff to notify the communicable disease branch about outbreaks and clusters with more complete information. All subsequent updates should be made in NC COVID.

1. Go to this [REDCap](#) link to submit your initial outbreak/cluster information. A login is not required.

2. Complete the survey and then select “Submit” at the bottom of the screen.

NOTE: You will have the option to create a PDF of your submission after selecting “Submit”. See dotted circle in screenshot below.
The following information will be requested in the survey. Required fields are marked with an asterisk “*”.

**Submitter Information**
1. Submitter name*
2. Submitter email address*
3. Submitter phone number*
4. Submitter County*

**Outbreak/Cluster Facility Information**
5. Outbreak/Cluster Facility Name*
6. Outbreak/Cluster Facility Address (this is especially important for nursing homes, adult care homes, residential care homes, etc. so that we can be assured we’re referencing the proper facility)

**Outbreak/Cluster Information**
7. Date outbreak identified by LHD
8. Has this facility previously had a COVID-19 outbreak or cluster?
   - If Yes, what was the NC COVID ID# for the previous outbreak?
9. Is this an outbreak or a cluster? * Definitions are provided in the survey.
   - Type of setting (You can choose from the drop down menu listed below)

<table>
<thead>
<tr>
<th>Type of OUTBREAK classification in drop down menu</th>
<th>Type of CLUSTER classification in drop down menu</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing home facility</td>
<td>Agriculture</td>
</tr>
<tr>
<td>Residential care facility</td>
<td>Food Service</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>Camp</td>
</tr>
<tr>
<td>Shelter</td>
<td>Childcare</td>
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<tr>
<td>Migrant worker housing</td>
<td>Church</td>
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<tr>
<td>Other</td>
<td>Clinic</td>
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<td></td>
<td>College or University</td>
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<td></td>
<td>Community Event</td>
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<td></td>
<td>Construction or Contractor</td>
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<td>Doctor’s Office</td>
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<tr>
<td></td>
<td>Food Processing or Packaging</td>
</tr>
</tbody>
</table>

10. First date of symptom onset (or specimen collection date if asymptomatic)
11. Most recent date of symptom onset (or specimen collection date if asymptomatic)

**Cases in residents/students/patrons**
12. Total number of residents/students/patrons in setting
13. Number of exposed residents/students/patrons
14. Number of laboratory confirmed residents/students/patrons*
15. Number of hospitalized residents/students/patrons
16. Number of deaths in residents/students/patrons

**Cases in faculty/staff/employees**
17. Total number of faculty/staff/employees in setting
18. Number of exposed faculty/staff/employees
19. Number of laboratory confirmed faculty/staff/employees*
20. Number of hospitalized faculty/staff/employees
21. Number of deaths in faculty/staff/employees

**Response and follow-up**
22. This is a high profile outbreak that may attract media attention (Y/N)
23. The LHD would like a call with the state outbreak team to discuss this outbreak (Y/N)
24. Resource requests were entered into WebEOC for this outbreak (Y/N)
25. Notes (Text box)