



COVID-19 and Seasonal Influenza: Interim Guidance for Health Care and Public Health Providers

APPENDIX 5: COVID-19 CASE AND CONTACT SHAREPOINT REPORTING TOOL

1. DAILY CASE LINE LIST REPORTING IN SHAREPOINT

During the COVID-19 pandemic, the California Correctional Health Care Services (CCHCS) institutions shall report to the Public Health Outbreak Surveillance COVID-19 SharePoint by the next business day all cases of COVID-19 among patients where the positive test for diagnosis was performed at an outside lab (community hospitals, public health labs) and all false-positive test results as determined by the institution CME or Chief P&S.

2. DEFINITIONS TO GUIDE REPORTING

CONFIRMED CASE

A positive laboratory test for the virus that causes COVID-19 in at least one respiratory specimen. A positive antigen test should be reflexively confirmed using a molecular test.

SUSPECTED CASE

Acute illness compatible with COVID-19 of unknown etiology without a conclusive test result for the virus that causes COVID-19.

ACUTE ILLNESS COMPATIBLE WITH COVID-19

Either (1), (2), or (3), in the absence of a more likely diagnosis:

(1) Acute onset or worsening of at least two of the following symptoms or signs: fever (measured or subjective); chills; rigors; myalgia; headache; sore throat; nausea or vomiting; diarrhea; fatigue; or congestion or runny nose; OR

(2) Acute onset or worsening of any one of the following symptoms or signs: cough; shortness of breath; difficulty breathing; olfactory disorder; taste disorder; confusion or change in mental status; persistent pain or pressure in the chest; pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone; or inability to wake or stay awake; OR

(3) Severe respiratory illness with at least one of the following: clinical or radiographic evidence of pneumonia, or acute respiratory distress syndrome (ARDS).

RE-POSITIVE TEST

A positive test for SARS-COV-2 (the virus that causes COVID-19) in a patient who has previously tested positive.

FALSE POSITIVE TEST

A test which incorrectly indicated that a virus was present. A positive test for the virus that causes COVID-19 may be determined to be a false positive by the laboratory performing the test (e.g., Quest Diagnostics), the institution Chief Physician and Surgeon (CP&S), or the Chief Medical Executive (CME); see “Concern for COVID-19 False-Positives: What to Do” subsection in the [Testing](#) section.

3. SHAREPOINT REPORTING REQUIREMENTS

The following events require next business day reporting to the COVID-19 SharePoint: https://cdcr.sharepoint.com/sites/cchcs_ms_phos (CDCR networking is required for access).

- Cases where the positive test for diagnosis was performed at an outside lab (community hospitals, public health labs).
- False-positive test result determinations. (Note that a first-ever positive test result from Quest or a positive point of care [POC] test performed at the institution will auto-generate records in SharePoint. This record may be used to report a false positive test result.)

4. RESOLVING CASES IN SHAREPOINT

Cases are resolved in the Quality Management (QM) Monitoring Registry based on the date of the first positive test, active isolation orders, and out-to-medical status. Cases no longer need to be resolved in SharePoint.



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5. REPORTING FALSE POSITIVES TO SHAREPOINT

False positives (as determined by the institution CME or CP&S or by the lab) must be documented in the medical record by the CME or CP&S or designee and then reported to SharePoint (see the Concern for COVID-19 False Positives: What to Do subsection in the [Testing](#) section).

Enter the specimen collection date and test result (positive). Enter the date of release from isolation. Select the ***Reason case closed*** as “False positive documented by CME or CP&S; not a case.”

CCHCS data systems will then ignore positive tests collected on that date for that patient when determining the patient’s COVID-19 status. The date in the SharePoint report must match the date of the positive test in other CCHCS data (e.g., from Quest or the influenza-like illness (ILI) POC Results PowerForm) for the status to update correctly. The positive result on that date will be listed as “DETECTED (Possible False Positive)” in the patient’s Lab Results Report in the QM COVID-19 monitoring registry historical Lab Results Report. These data systems changes will occur no sooner than 5 days after the collection date to allow time for false positive case determinations and documentation in the medical record.

6. REPORTING RESOLVED CASES IN RETURNING PATIENTS

When a patient with confirmed active COVID-19 is released from CDCR prior to meeting the criteria for release from isolation (e.g., unresolved) and later returns to CDCR, the patient will **no longer** initially show in the COVID-19 monitoring registry with a status of Confirmed Active, because of the new reliance of the QM registry on time since the first positive test, active isolation orders, and out-to-medical status for determining active/resolved status. Therefore, no action is needed in SharePoint.

7. REQUESTING RECORD DELETION

SharePoint users in the institutions can update but not delete records. To request deletion of a duplicate record or a record entered in error, change the CDCR number to “DELETE”. Send an email to Sharon.Albers@cdcr.ca.gov and cc Amber.JonesHarvel@cdcr.ca.gov .

Subject line: “Requesting deletion of PH SharePoint record_<institution>”

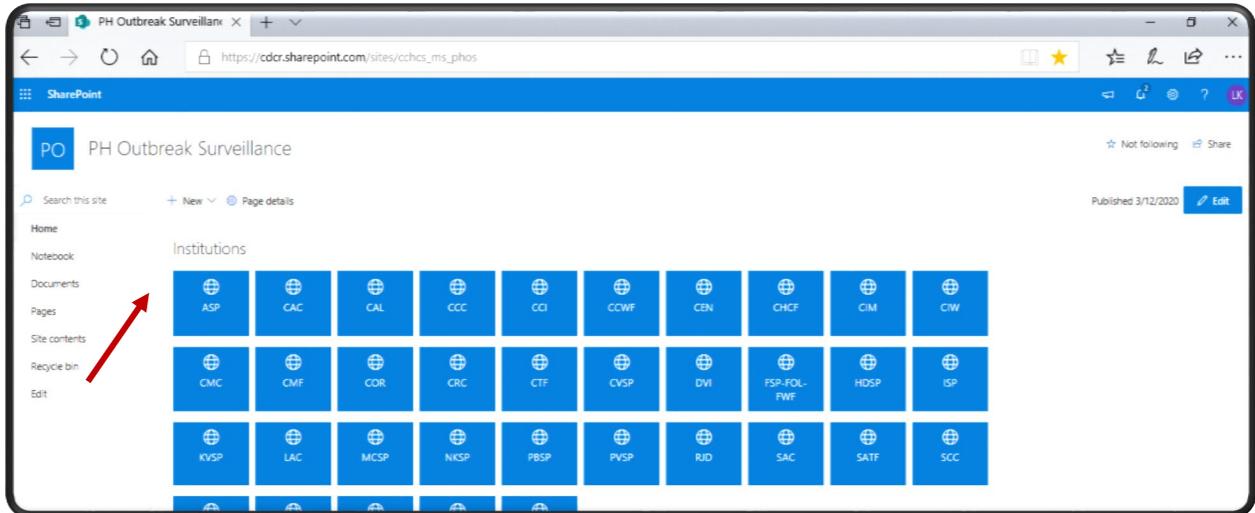
Include the date of report, reporting institution, and the patient’s last name in the email message.



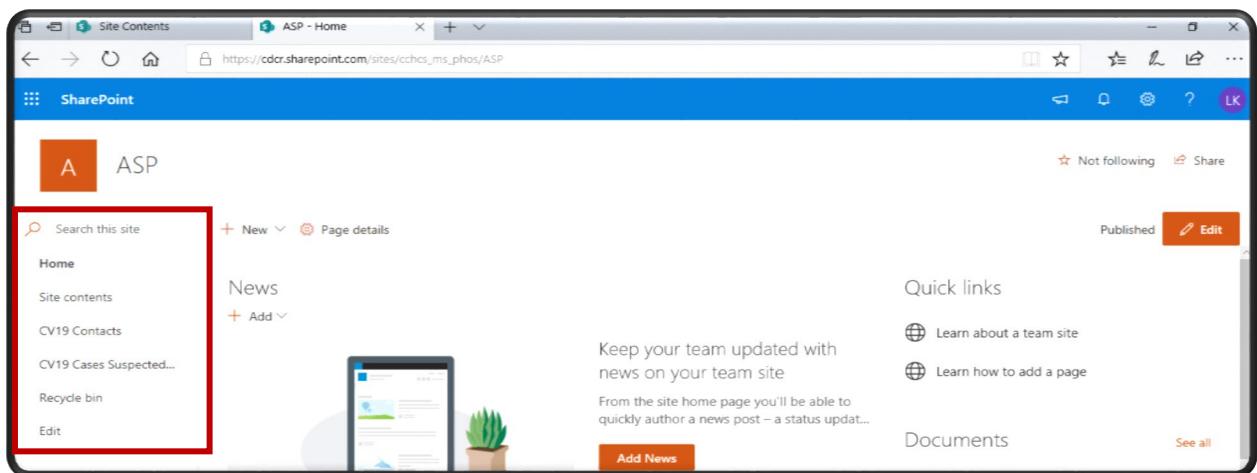
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8. REPORTING IN SHAREPOINT

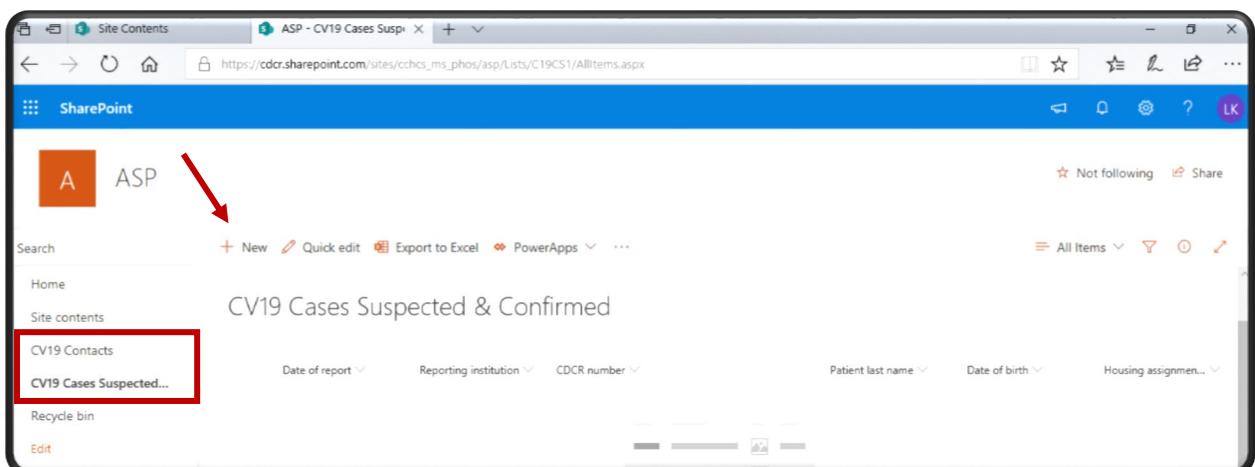
From https://cdcr.sharepoint.com/sites/cchcs_ms_phos, click on your institution.



Each institution has a home page with a navigation panel on the left.



To access the CASES line list, click on **CV19 Cases Suspected & Confirmed**. To access the CONTACTS line list, click on **CV19 Contacts; reporting contacts is now optional**. This guide applies to both the CASES and CONTACTS line lists. To add a new patient to a line list, click on **New**.





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A new record (data entry form) will open on the right.

SharePoint
ASP
CV19 Cases Suspected & Confirmed

New item

Date of report
3/23/2020
Date of the first report of this suspected or confirmed case of COVID-19.

Reporting institution
ASP
Default value is hub institution; if the patient is at a CCF, select the CCF from the drop down menu.

CDCR number *
Enter value here

Scroll through the form to enter data. Brief instructions are provided below the form fields. Refer to the **Data Definitions** section below for detailed instructions for each field in the CASES and CONTACTS line lists. Click on **Save** at the bottom of the form to add the report to the line list.

Release from isolation criteria for COVID-19
Select options
Does the patient meet any of the above criteria for release from isolation for COVID-19? If so, check all that apply. Always refer to current guidance prior to releasing a patient with suspected or confirmed COVID-19 from isolation.

Case closed
Select options
Check the box if the case is closed

Reason for closing case
Select options
Select all that apply.

Transfer institution
Select an option
If the patient was transferred to another CDCR institution or CCF, select that institution from the drop-down menu

Date case closed
Enter a date

Save Cancel

Saving the form adds the report to the line list.

ASP
CV19 Cases Suspected & Confirmed

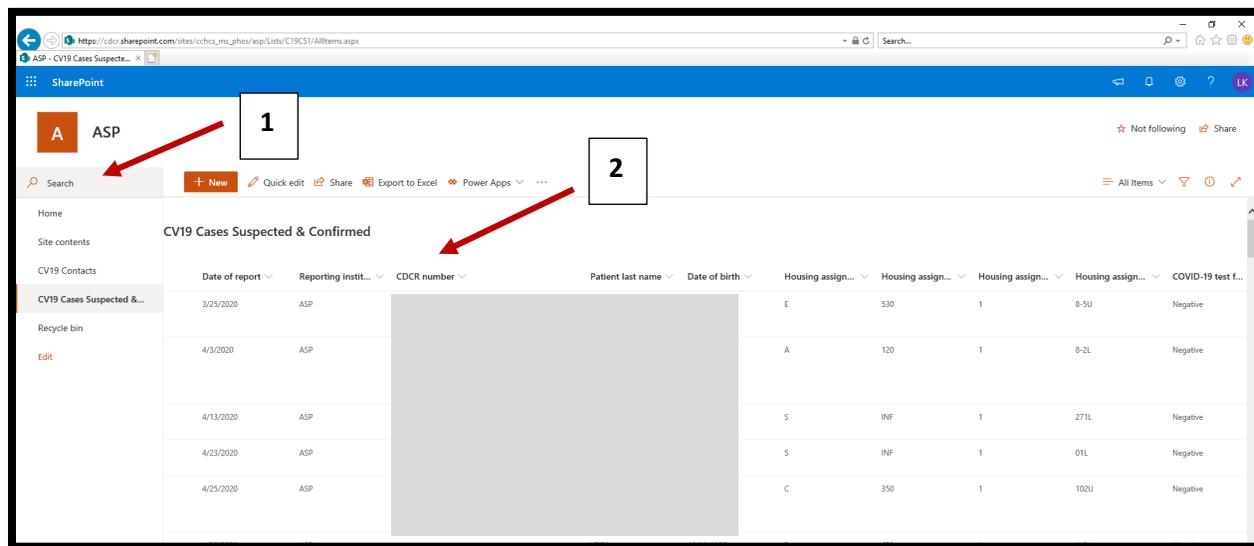
CV19 Cases Suspected...	Date of report	Reporting institution	CDCR number	Patient last name	Date of birth	Housing assignmen...
	3/23/2020	ASP	AB1234	Smith	8/15/1995	



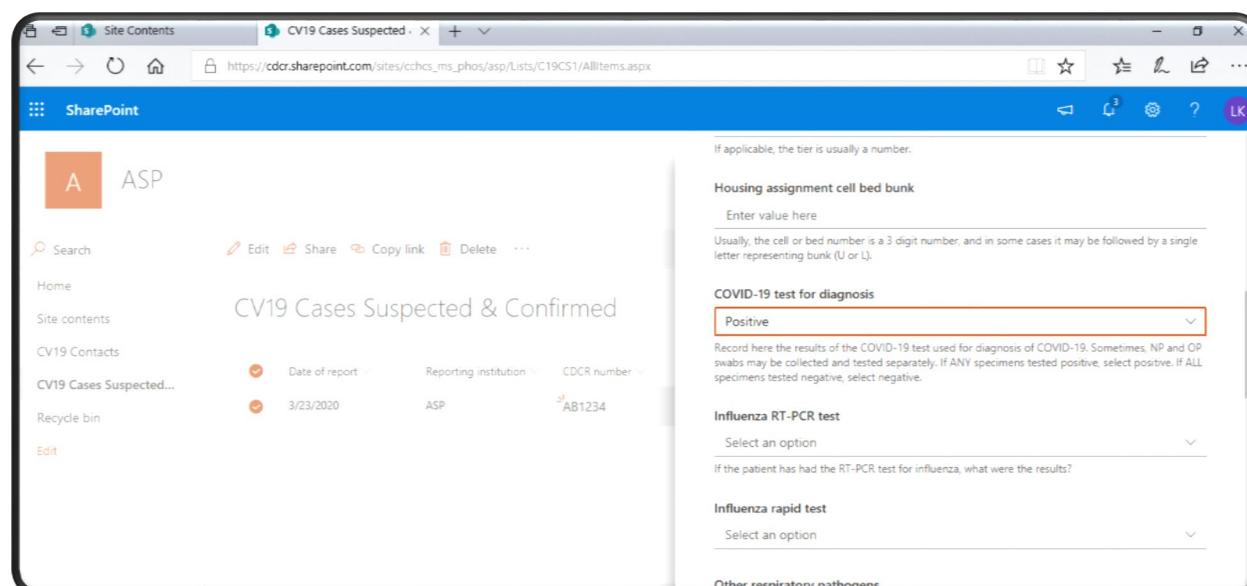
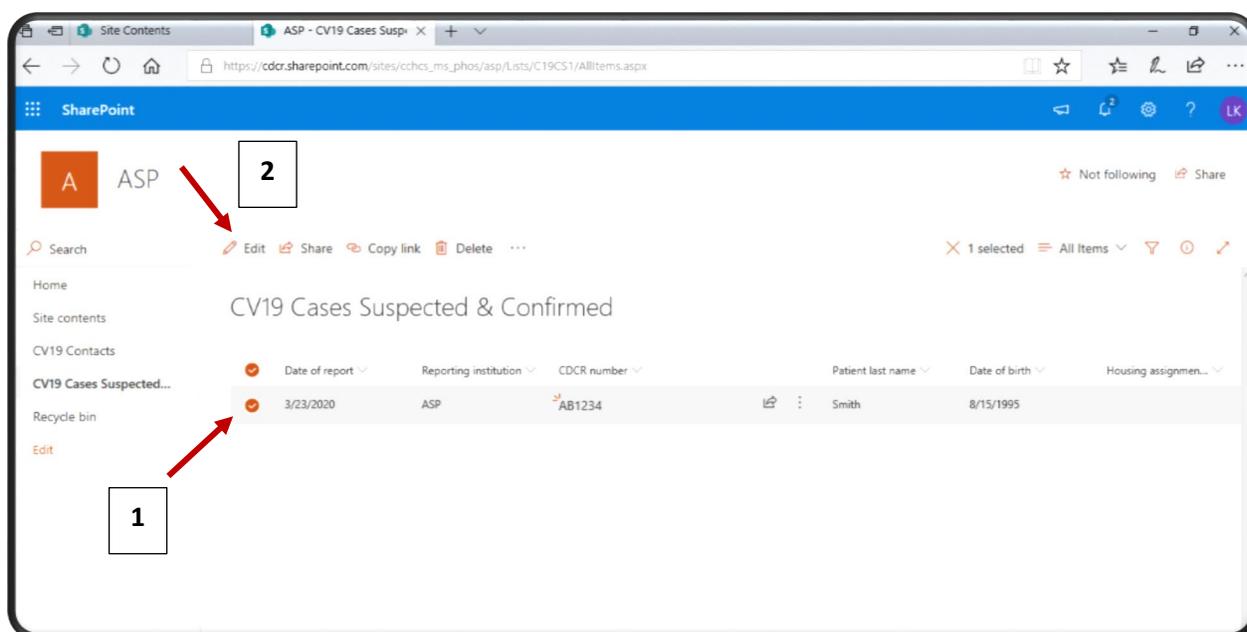
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To locate a record among many in the line list, use the **Search** box [1] or click on a column heading (e.g., CDCR number, Patient last name) [2] and select **Filter by**.

Any column may be custom filtered to subset the line list to records of interest (e.g., released from isolation and ready to close) for editing directly in the line list (refer to the **Quick Edit** feature instructions below).



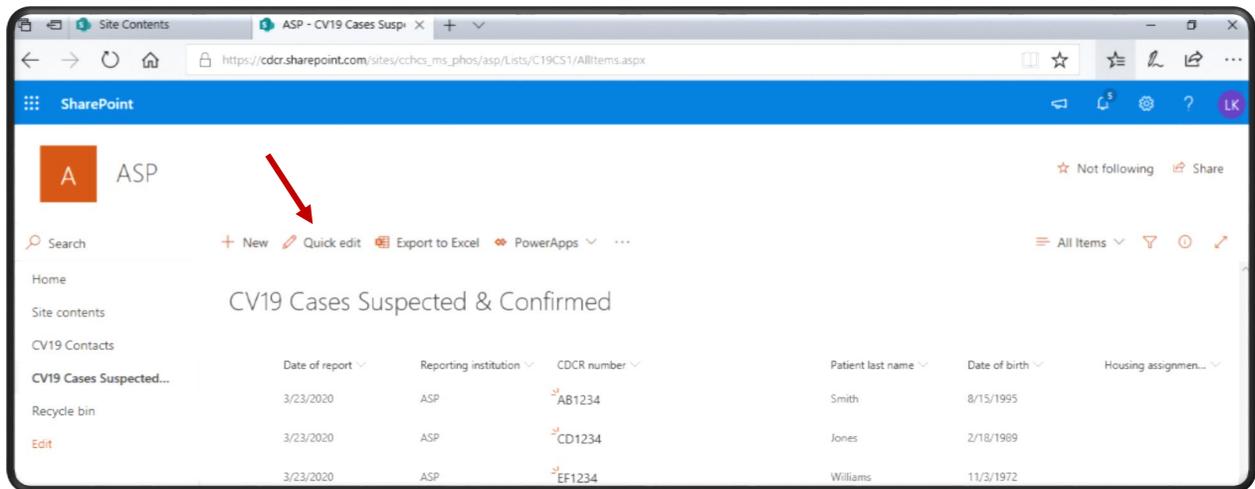
To enter updated information after saving the form, click on the row [1] to select the record in the line list, then click on **Edit** [2] to re-open the form.



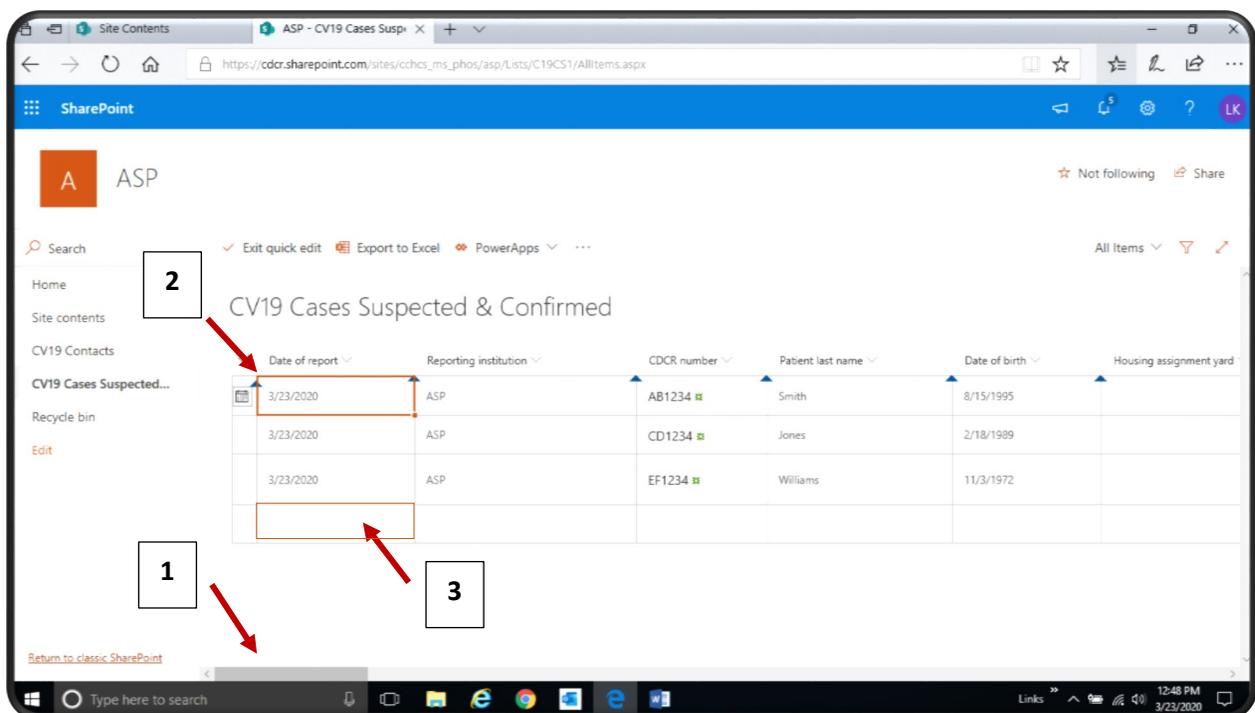


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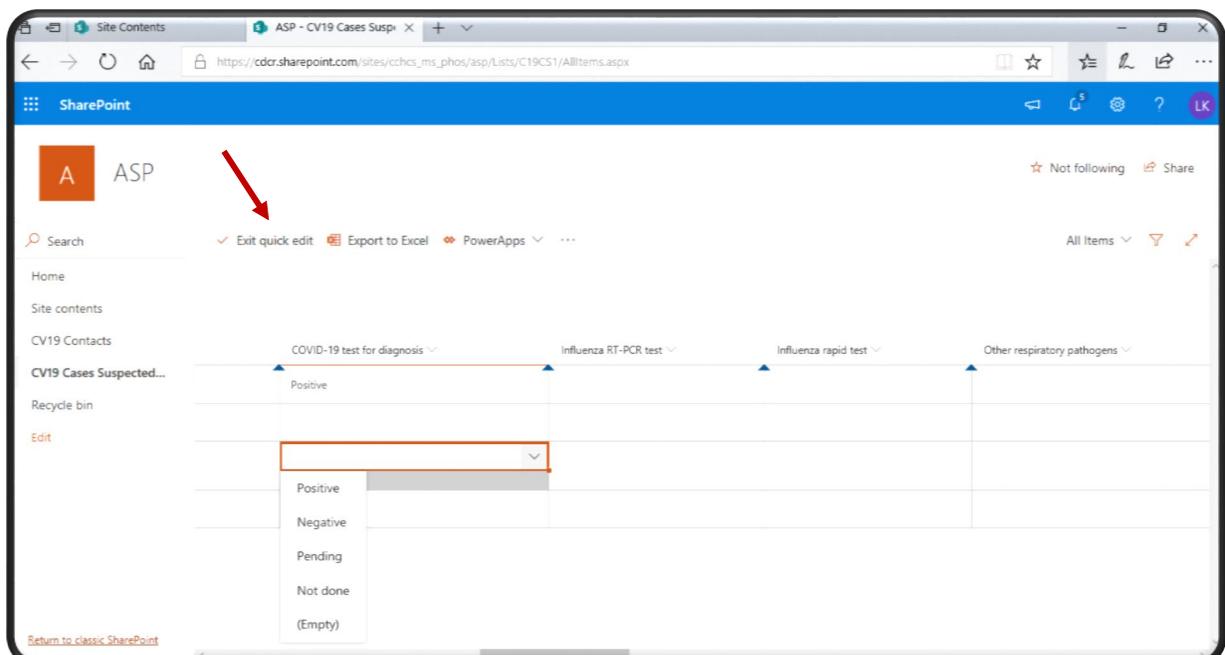
To edit a record directly in the line list, you can also click on **Quick Edit**.



Use the scroll bar [1] to move across the line list. Clicking on any field [2] will highlight it and enable an update to be entered. You can also cut and paste from an Excel spreadsheet into a blank row [3] in SharePoint (e.g., to add a list of CDCR numbers to initiate reports for new patients).



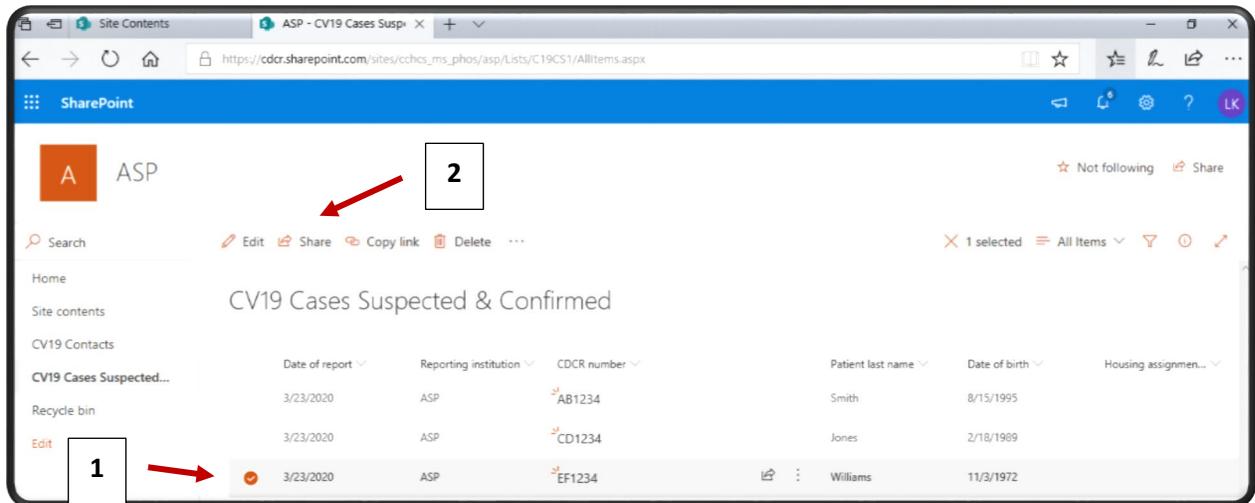
After entering new information into the line list, click on **Exit Quick Edit** to save the update.



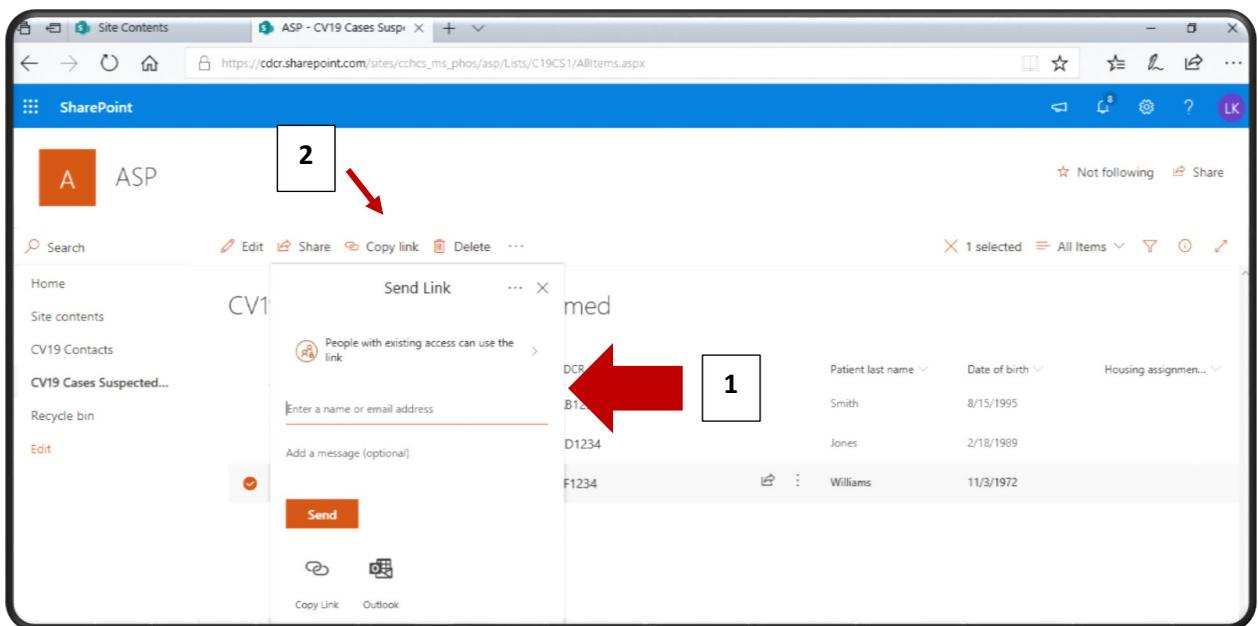


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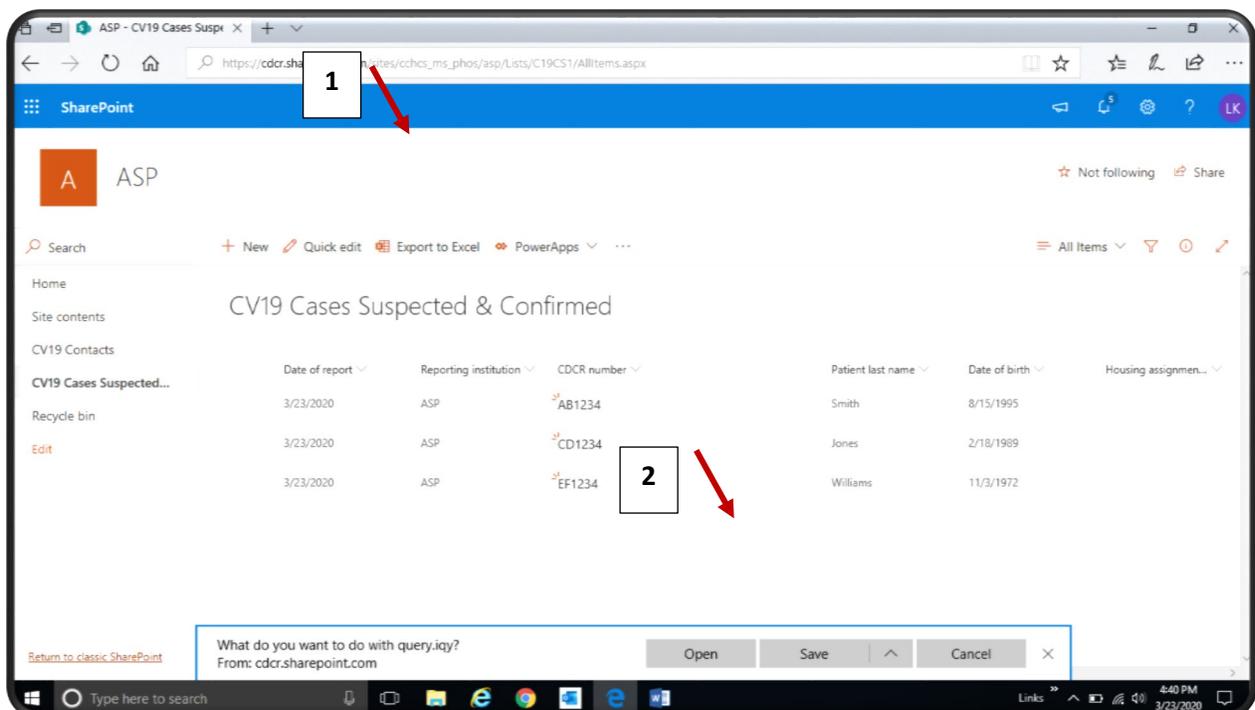
To share a link to an individual case report (e.g., to communicate with other health care staff in the institution), select the record by clicking on it [1] and then click on **Share** [2].



A link to the case or contact report can be sent by entering an email address in the pop-up [1] or by clicking on **Copy Link** [2] and pasting the generated link into a separate email thread.



Click on **Export to Excel** [1] to create a copy of your CASES or CONTACTS line lists into a spreadsheet that can be saved for other non-reporting activities. Click on **Open** or **Save** [2] to view or save the spreadsheet in Excel.





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9. DATA DICTIONARY

COVID-19 CASES SUSPECTED AND CONFIRMED

Field	Definition / Instruction
Date of report	The date that the suspect or confirmed case-patient was initially reported. This field is auto-populated and should not be edited.
Reporting institution	The default value (auto-populated) is the hub institution. If the patient is at a Community Correctional Facility (CCF), select the CCF from the drop-down menu.
CDCR number Patient last name Date of birth	In addition to the CDCR number, enter the patient's last name and date of birth. These identifiers are needed to identify the patient correctly and link to other CCHCS data and the Quality Management (QM) COVID-19 Monitoring tool. Enter the birth date in M/D/YYYY format.
Housing assignment yard Housing assignment building Housing assignment tier Housing assignment cell bed bunk	Enter the patient's housing location (optional, for institutional use). Usually, the cell bed or number is a 3-digit number. In some cases, it may be followed by a single letter representing an upper or lower bunk (U or L).
COVID-19 test for diagnosis	Select an option from the drop-down list to record the result or status of the COVID-19 test used for diagnosis. Sometimes nasopharyngeal (NP) and oropharyngeal (OP) swabs may be collected and tested separately. If ANY specimens tested positive, select Positive. If ALL specimens tested negative, select Negative. Other options include Pending, Refused, Not tested-Probable case within outbreak, or Not tested-Other. Do not update this value later as a patient with a confirmed case is re-tested as part of a strategy to release from isolation.
COVID-19 test laboratory	Select an option from the drop-down list to record where the test for diagnosis of COVID-19 is or was performed. The options are Quest Diagnostics, Outside hospital lab, Local public health lab, State public health lab, Point of Care, Other. [Are there other labs to include?]
COVID-19 test type	Select an option from the drop-down list to record the type of test. The options are PCR (NAAT), Antigen test, Viral culture, Antibody test, or Other test.
COVID-19 collection date	Enter the date that the specimen was collected for the tested used for the diagnosis of COVID-19. Do not update this value later as a patient with a confirmed case is re-tested as part of a strategy to release from isolation.
Respiratory pathogen co-infection	Select any respiratory pathogens, confirmed by laboratory testing, present while the patient was infected with the virus that causes COVID-19. The options are: No co-infection, Influenza A, Influenza B, RSV, Other co-infection.
Symptoms	Select all symptoms that apply at any time during this illness from the drop-down list. The options are: Cough (new onset or worsening of chronic cough), Shortness of breath (dyspnea), Fever >100.4F (38C), Subjective fever (felt feverish), Other symptoms not listed above, Asymptomatic, Unknown. Only select Asymptomatic if the patient has not had any symptoms of COVID-19 at any time during their infection.
Date of symptom onset	Enter the first date that the patient had any of the symptoms associated with COVID-19. Enter the date in M/D/YYYY format.
Date of symptom resolution	Enter the last date that the patient had any of the symptoms checked above. Enter the date in M/D/YYYY format.
Close contact	In the 14 days prior to symptom onset, did the patient have close contact with a confirmed case of COVID-19? Refer to the current COVID-19 guidance for definitions of close contact. Select an option from the drop-down list.
Cluster of influenza-like illness (ILI)	Is the patient linked to a cluster of ILI? Select a response from the drop-down list.
Patient hospitalized (outside hospital)	Has the patient been hospitalized at an outside hospital for this illness? Select an option from the drop-down list.



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Field	Definition / Instruction
Hospital name	If the patient was admitted to an outside hospital or seen in the emergency room (ER), enter the hospital's name.
Hospital level of care	Select the <u>current</u> level of care (LOC) for the patient at an outside hospital from the drop-down menu (e.g., intensive care unit – ICU, ICU/Vent, Telemetry, Med/Surg, ER).
Hospital admission date	Enter the date the patient was admitted to the hospital. Enter the date in M/D/YYYY format.
Hospital discharge date	Enter the date the patient was discharged from the hospital. Enter the date in M/D/YYYY format.
Return placement LOC	Select the level of care of the patient when they returned to the institution from the hospital (e.g., correctional treatment center - CTC, outpatient housing unit - OHU, skilled nursing facility - SNF, Housing Unit) from the drop-down menu.
Isolation status	Select the patient's current isolation status (e.g., alone in Airborne Infection Isolation Room - AIIR, at an outside hospital, released from isolation) from the drop-down list.
Date isolation began	Enter the date the patient was isolated. Enter the date in M/D/YYYY format.
Date released from isolation	Enter the date the patient was released from isolation. Enter the date in M/D/YYYY format.
Reason for closing case	<p>If the case has been closed, select the reason from the drop-down menu. The options are:</p> <ul style="list-style-type: none">• COVID-19 ruled out through testing or an alternative diagnosis• Confirmed case, the patient recovered and was released from isolation• Confirmed case, the patient died• Patient transferred to another CDCR institution• Transferred to another agency (e.g., Bureau of Prisons - BOP, Immigration and Customs Enforcement - ICE, Department of State Hospitals - DSH)• Released from CDCR (e.g., parole, discharge)• False positive documented by CME or CP&S; not a case• Patient returned to CDCR >21 days from positive test; case resolved• Other
Transfer institution	If the patient was transferred to another institution or CCF before COVID-19 was ruled out or, if confirmed, before recovery, select the institution or CCF from the drop-down list.
Date case closed	Enter the date that the case was closed in M/D/YYYY format. This is the date that the closure was entered into SharePoint.
Modified	The auto-populated date and time of the most recent edit/update to the report. This date/time cannot be edited by the user.
Modified by	The auto-populated user who last edited the report. This entry cannot be edited by the user.



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COVID-19 CONTACTS – *NO LONGER REQUIRED*

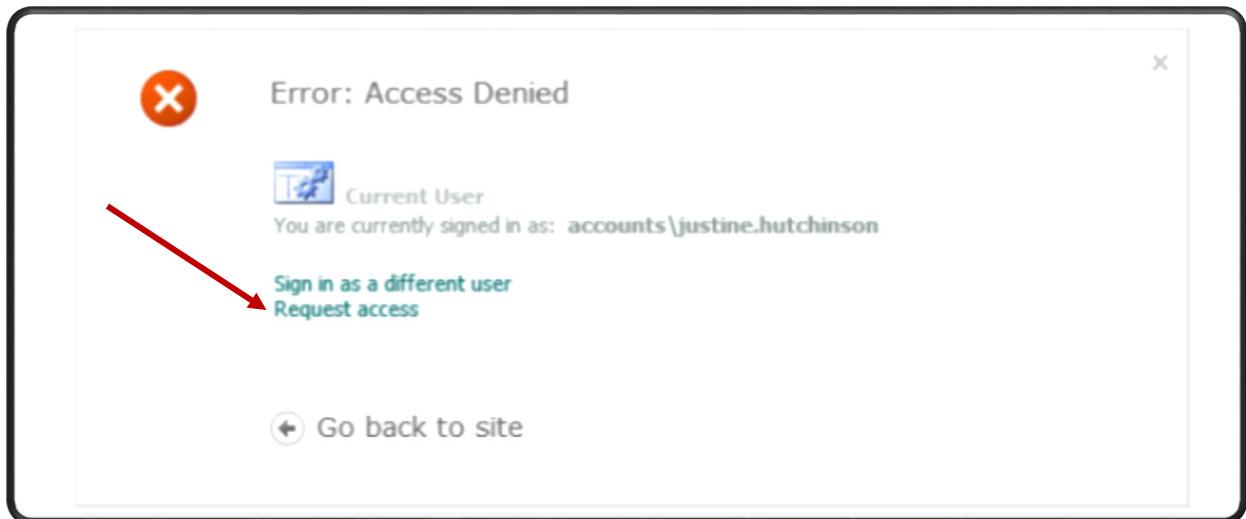
Field	Definition / Instruction
Date of report	Date that the contact to a confirmed case of COVID-19 was initially reported. This field is auto-populated and should not be edited.
Reporting institution	The default value (auto-populated) is the hub institution. If the patient is at a CCF, select the CCF from the drop-down menu.
CDCR number Patient last name Date of birth	In addition to the CDCR number, enter the patient's last name and date of birth (M/D/YYYY). These identifiers are needed to identify the patient correctly and link to other CCHCS data and the QM COVID-19 Monitoring tool. Enter the birth date in M/D/YYYY format.
Housing assignment yard Housing assignment building Housing assignment tier Housing assignment cell bed bunk	Enter the patient's housing location (optional, for institutional use). Usually, the cell bed or number is a 3-digit number. In some cases, it may be followed by a single letter representing an upper or lower bunk (U or L).
Type of contact	Select all reasons that apply to the current quarantine from the drop-down list. Use "close contact" as defined by the current COVID-19 guidance. The options are: <ul style="list-style-type: none">• Close contact with confirmed COVID-19 case• Close contact with suspected COVID-19 case• Not a contact to COVID-19• Other
Date of last exposure	This date is used to calculate the end of the quarantine period. This value must be updated if the patient is re-exposed to COVID-19. Enter the date in M/D/YYYY format.
Quarantine start date	Enter the earliest date that the patient was placed on quarantine. Enter the date in M/D/YYYY format.
Quarantine end date	Enter the anticipated (future) or actual (past) end date of the quarantine for this patient. Enter the date in M/D/YYYY format.
Type of quarantine	How is (or was) the patient being quarantined. Select an option from the drop-down list.
Reason quarantine ended	Select all options that apply for the reason(s) the patient's quarantine ended from the drop-down list. The options are: <ul style="list-style-type: none">• 14 days without re-exposure, did not develop COVID-19• Confirmed diagnosis of COVID-19• Determined not to be a contact• Transferred to another CDCR institution• Transferred to another agency (e.g., BOP, ICE, DSH)• Released from CDCR (e.g., paroled, discharged)• Other
Transfer institution	If the patient transferred to another CDCR institution or CCF before completing quarantine, select the institution or CCF from the drop-down list.
Modified	The auto-populated date and time of the most recent edit/update to the report. This date/time cannot be edited by the user.
Modified by	The auto-populated user who last edited the report. This entry cannot be edited by the user.



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10. REQUESTING ACCESS TO THE COVID-19 SHAREPOINT

1. Visit the URL for the SharePoint: https://cdcr.sharepoint.com/sites/cchcs_ms_phos.
 - a. If you do not have access, an error message will display.
 - b. Click on **Request access**.



2. After you submit your access request, you may be contacted by a member of the SharePoint administration team asking what type of access you need. Respond that you need read-write access, and specify which institution.
3. Verify access by visiting the URL for the SharePoint: https://cdcr.sharepoint.com/sites/cchcs_ms_phos.