Good evening, please see notes from today's Ops Meeting below. I've also attached the update Epi & Monitoring Summary that is reporting from 8am-3pm today to allow us to get on our new schedule of 3pm-3pm daily. Thanks for all your efforts, Lindsay

2/10/2020

Monday, February 10, 2020
12:36 PM

General update:
- 40,652 cases and 910 deaths globally
- 12 cases identified in US

Surveillance and Epidemiology Branch (Katrina)
- Case Investigation Division (Darlene)
    - Activities
        - DGMQ notification over weekend, monitoring asx travelers, 1 became a POC d/t cough
        - Calls are coming in from individuals who have arrived prior to and following the federal quarantine and we did not receive DGMQ notifications of them
- Surveillance Division (John)
    - Activities
        - Epi Summary:
            - 0 confirmed cases
            - 3 closed PUI
            - 11 POC- include 4 active, 7 closed
        - Epi and Monitoring Summary reporting period will be 3pm to 3pm
        - eCR meeting with CDC taking place 2/11 to show us how we can author. Also working with DoIT.
        - PUI form is live in NHEDSS for all 4 conditions: PUI, PUI contact, POC, Asx Travelers (self-monitoring).

Surveillance and Epidemiology Branch Action Items:

☐ **Darlene will update nCoV disease investigation protocol:**

☐ **Algorithm update (monitoring section)**

☐ **To reflect who will check cue for test results from LIMS and what is COOP**

☐ **To reflect need for notification of PHL when provider has been notified of PUI/POC results (PHL_LIMS_Group@dhhs.nh.gov with underscores between PHL_LIMS_Group).)**

☐ **Self-monitoring, Monitor Monday/Weds/Friday. If day 14 is over weekend, PHNOC will notify.**

☐ **Darlene to define surge. When do we get there and what are the needs once there?**

☐ **Darlene to define algorithm for testing in house (public facing guideline)**

☐ **Katrina to propose weekend reporting period to ensure we do not go 3pm Friday-3pm Monday without an Epi and Monitoring Summary**

Countermeasures Branch (Neil)
- Monitoring Division (Adnela)
  - o Activities
    - Self-monitoring form will be live in NHEDSS today
      - Does not plan to repeat PUI forms, may remove PUI form from Asx Travelers Dx once Monitoring form is available
    - Active monitoring log being built in NHEDSS (POC/PUI)
    - 23 travelers, 2 pending contact, all: mainland china, medium risk, movement restrictions (verbal agreement)
    - All contact Tracing and Monitoring: hoping for more automated process this week
    - TIMS app- some limitations
      - Messages cannot be changed or edits, come automated from system
      - Ask fever, cough, SOB. If answer yes, notification to follow up with person.
      - Only asking one phone number for HOH that could represent entre family (what happens if
      - Need to enroll folks into app (first contact by PHN)
      - Active for 14 days, need to re-enter if more than 14 days
      - If they don't want to use system, they can text STOP
    - RedCap System- Illinois
      - Similar feature, run it themselves
      - Can modify messages
      - Asking people to opt in
      - More modification capabilities
      - Dash board with overall view to start with

- Don't know if we have to pay for it

Countermeasures Branch Action Items:

☐ **Adnela to assume all DGMQ are asx travelers, enter in NHEDSS, determine best manner in which to delineate those who have been interviewed vs those not yet interviewed**

☐ **Adnela to move forms from word to excel to make them easier to track**

☐ **Adnela to follow up with Illinois about their RedCap System**

Laboratory and Testing Branch (Dan)
- Kits arrived this morning, beginning verification process, hope to begin testing by end of week, timing dependent on how the verification process goes
- 1000 tests can be completed on Kits provided by CDC
- EUI- approved only for those who fit PUI definition

Laboratory and Testing Branch Action Items:

☐ **Dan will determine reagent costs, will collect and report, overtime for staff, courier, etc to determine "cost per test"**

Risk Communications Branch (Nomana)
- Connected with DHHS translation services, assured quick turnaround if needed
- Website updates
  - Everything from last week completed
- Social Media
  - Post one a day to BIDC FB page
  - Awaiting feedback from leadership on equity workgroup suggested post
- Internal communications:
  - DHHS weekly update
  - DPHS weekly update

Risk Communications Branch Action items

☐ **Nomana will ensure web updates for counts from Surveillance and Epi Branch will remain at 10AM**

☑ **Taylor to develop informal email to ICPs to send updated links (Katrina sent 2/10, 5PM)**

☐ **Nomana and Lindsay to connect re: plans to communicate with EMS**

☐ **Jake to complete review and have write up for DHHS Intranet posted**

<u>Other</u>
- **Action items are to be completed by next Ops meeting, unless otherwise noted**

<u>Overall Ops Action Items</u>

☐ **Lindsay will work with SME and IC to determine if we will allow for biofire on all specimens being submitted to PHL for nCoV. Lindsay will make request to IMT, if indicated: $3,670 per kit, 28 patients per kit. Would like to order 2.**

    ☐ **Depending on results of this conversation, Lindsay to request update to protocol**

☐ **Lindsay will work with SME and IC re: HAN- timing and content**

    ☐ **Create outward facing guidelines for who we will test so it is clear to providers**

☑ **Beth to repeat request to CDC for TIMS access**

<u>Attendance:</u>

☑ Lindsay Pierce

☑ Beth Daly

☑ Elizabeth A. Talbot

☐ Ben Chan

☐ Leigh Cheney

☑ Craig Bouloc- phone

☑ Stephanie Locke- phone

☐ Lisa Morris

☑ Katrina Hansen

☑ Darlene Morse

☑ John Dreisig

- [ ] Abby Mathewson
- [x] Andria Scacheri
- [x] Dan Tullo
- [ ] Fengxiang Gao
- [ ] Chris Bean

- [x] Neil Twitchell
- [x] Adnela Alic

- [x] Nomana Khan
- [ ] Megan DeNubila- vacation
- [x] Taylor Selembo
- [ ] Kelly Jones
- [x] Carolyn Fredette
- [x] Jake Leon- phone
- [ ] Kathy Remillard