



State of New Jersey
DEPARTMENT OF HEALTH
OFFICE OF THE STATE EPIDEMIOLOGIST
PO BOX 369
TRENTON, N.J. 08625-0369
www.nj.gov/health

CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

MARY E. O'DOWD, M.P.H.
Commissioner

To: Local Health Departments
From: New Jersey Department of Health (NJDOH), Communicable Disease Service (CDS) and Office of Local Public Health (OLPH)
Date: February, 2015
Subject: Protocol for Local Health Departments/Officers Responding to Non-Compliant Persons under Active Monitoring for Ebola Virus Disease (EVD)

The NJDOH CDS and OLPH developed the following protocol for local health departments (LHD) responsible for non-compliant persons under active monitoring for Ebola virus disease (EVD). This protocol applies to asymptomatic adults (age \geq 18 years) or adults caring for children under active monitoring who have been classified as "low risk" for EVD. Further information on active monitoring and risk categories can be found on the NJDOH website at <http://nj.gov/health/cd/vhf/techinfo.shtml>.

DEFINITIONS

- **Active monitoring** means that the local public health authority is responsible for establishing regular communication with individuals who were potentially exposed, including initial and final consultations, and checking daily to assess temperature and for the presence of symptoms, rather than relying solely on individuals to self-monitor and report symptoms if they develop. The purpose of active monitoring is to ensure that, if individuals with epidemiologic risk factors become ill, they are identified as soon as possible after symptom onset so they can be rapidly evaluated and isolated.
- **Initial consultation** means the first time a LHD makes contact with a person on active monitoring, where the LHD outlines the following activities that will occur for the 21 day monitoring period following departure from an EVD-impacted country or potential exposure to Ebola:
 - Twice daily temperature checks using an Food and Drug Administration approved thermometer (e.g. oral, tympanic, rectal, axillary or noncontact),
 - Self-monitoring for Ebola-like symptoms,
 - Immediate reporting to LHD of elevated temperature (more than 100.4° F or 38° C) and/or Ebola-like symptoms and contacting 9-1-1 for transport to hospital,
 - Daily communication with LHD, to report temperature checks and health status, either by phone or email, or other acceptable methods allowed by the LHD,
 - Notification to the LHD before extended stay / relocation to another residence.

- **General monitoring period (GMP)** is a non-medical term that means the majority of the time period when a person is under active monitoring. This time period includes days 0-16 following departure from an EVD-impacted country or potential exposure to Ebola.
- **Late monitoring period (LMP)** is a non-medical term that means the time period when a person is near completion of active monitoring, including days 17-21 following departure from an EVD-impacted country or potential exposure to Ebola.
- **Close out consultation** means the last time a LHD makes contact with a person, when the person has completed his/her active monitoring period for the 21 days following departure from an EVD-impacted country or potential exposure to Ebola.
- **Check-in** means the daily communication between a person under active monitoring and the LHD, using whatever method of communication that has been agreed upon during the initial consultation.
- **Non-compliance** means a person who is undergoing active monitoring and misses one or more check-ins.
- **Unannounced site visit** means a visit to the person's home or temporary residence, where the LHD does not contact the person first and where the visit may occur at a different time than previously agreed upon. During an unannounced site visit, the LHD should follow social distancing guidelines until staff can ascertain whether a person is still asymptomatic. In addition, if the unannounced site visit will be occurring after-hours, the LHD should follow their established policies and protocols regarding home visits conducted during nighttime and non-business hours.
- **Active Monitoring Agreement** means a written agreement detailing the measures for those under active monitoring, signed by the person or parent/guardian for minors and the LHD.
- **CDRSS** means the NJDOH CDS's secure, Internet-based Communicable Disease Reporting and Surveillance System.

GUIDELINES

Person does not respond or cannot be located by LHD for initial consultation:

- The LHD should make three (3) attempts to contact the person by phone and/or email within 24 hours of the CDRSS Notice. If the person cannot be located within that initial 24 hours, the LHD should make a site visit to the person's home or temporary residence within 48 hours, utilizing the LHD's routine procedures for site visits. If the person is still not located, the LHD should document in CDRSS and contact the CDS as soon as possible during business hours. The CDS will work with the Centers for Disease Control and Prevention (CDC) Division of Global Migration and Quarantine (DGMQ) to determine if the contact information recorded in CDRSS is correct or if the person may have traveled to another state or jurisdiction. Additional measures may be required if the initial address recorded in CDRSS is accurate and will be determined on a case-by-case basis by the NJDOH CDS.

Non-compliance during the general monitoring period (GMP):

- **GMP Step 1:** First missed check-in after initial consultation contact: If a person misses a check-in, the LHD should make three (3) attempts to locate the person by phone and/or email during the 48 hours following the close of business of the day of the person's missed check-in. If contact is made, the LHD should identify and remedy any barriers in communication that prohibit timely check-ins (e.g., language barrier, problems with phone / email technology). Also, the LHD should

make the person aware of the potential consequences of additional missed check-in as discussed below in GMP Step 2 and 3 below.

- If the person cannot be located within 48 hours and three (3) phone attempts, document in CDRSS and carry out the action items listed in GMP Step 2.
- **GMP Step 2:** Second missed check-in: If a person cannot be located after completion of GMP Step 1 or misses a check-in for a second time, the LHD should conduct an unannounced site visit. The unannounced site visit should be made at the completion of unsuccessful attempts from GMP Step 1 or within 24 hours following the close of business of the day of the second missed check-in. During the site visit, if contact is made with the person, then the LHD should request that the person sign two copies of the Active Monitoring Agreement, give the person one copy of the agreement and verbally review actions that may occur if the person misses another check-in, including the possible issuance of a legal quarantine order. At this time, the LHD should identify and remedy any barriers in communication that prohibit timely check-ins (e.g., language barrier, problems with phone / email technology).
 - The LHD should make a minimum of two (2) attempted site visits over the course of 48 hours to reach the person. It is recommended to vary the time of day for these site visits. The LHD may continue to attempt to reach the person by phone during this time period, in addition to the unannounced site visits.
 - If the person cannot be located within 48 hours and two (2) site visits following the second missed check-in, the LHD shall document in CDRSS and contact the CDS as soon as possible during business hours.
- **GMP Step 3:** Third missed check-in: If a person misses a check-in for a third time, the LHD should contact the CDS about taking other action, including issuing a legal quarantine order .

Non-compliance that begins during the late monitoring period (LMP):

- **LMP Step 1:** First missed check-in: If a person misses a check-in, the LHD should make three (3) attempts to locate the person by phone and/or email during the 48 hours following the close of business of the day of the person's missed check-in. If contact is made, the LHD should identify and remedy any barriers in communication that prohibit timely check-ins (e.g., language barrier, problems with phone / email technology). Also, the LHD should make the person aware of the importance of completing the full time period of active monitoring, and the need for a close out consultation.
 - If the person cannot be located within 48 hours and three (3) phone attempts, document in CDRSS and carry out the action items listed in LMP Step 2.
- **LMP Step 2:** Second missed check-in: If a person cannot be located after completion of LMP Step 1 or misses a check-in for a second time, the LHD should conduct an unannounced site visit. The unannounced site visit should be made during the 24 hours following completion of unsuccessful attempts from LMP Step 1 or the close of business of the day of the second missed check-in. During the site visit, if contact is made with the individual, the LHD should identify and remedy any barriers in communication that prohibit timely check-ins (e.g., language barrier, problems with phone / email technology). Also, the LHD should make the person aware of the importance of completing the full time period of active monitoring, and the need for a close out consultation.

- The LHD should make a minimum of two (2) attempted site visits over the course of 48 hours to reach the person. It is recommended to vary the time of day for these site visits. The LHD may continue to attempt to reach the person by phone during this time period, in addition to the unannounced site visits.
 - If the person cannot be located at the completion of LMP Step 2 or within 48 hours and two (2) site visits following the second missed check-in, LHD shall document in CDRSS and carry out the actions listed in LMP Step 3.
- **LMP Step 3:** Third missed check-in: If a person still cannot be located after a first or second missed check-in and completion of LMP Step 2 or misses a check-in for a third time, the LHD should continue with daily phone attempts to reach the person.
 - If the person cannot be located by the end of their monitoring period, the LHD should document in CDRSS and carry out the actions listed in the section below titled “Person who does not respond or cannot be located for close out consultation.”

Person who does not respond or cannot be located for close out consultation:

- If a person misses the check-in on his/her last day of active monitoring and close out consultation, the LHD should make three (3) attempts to perform a close out consultation with the person by phone and/or email.
 - These attempts should be made during the 72 hours (3 days) following the close of business of the last day of the person’s active monitoring period.
 - If, at the end of 72 hours, the person has not responded to phone calls / email, the LHD should make a site visit to the person’s home or temporary residence.
 - The site visit should be made within 24 hours following the close of business of the day where the last phone call was made.
 - If the site visit is unsuccessful, the LHD should attempt a second site visit during the next 24 hours.
 - If both site visits were unsuccessful and close out consultation was not completed, the LHD should document this information in CDRSS and contact the CDS.
 - The CDS will work with the LHD and liaison to other agencies to ascertain the final health status of the person, in place of a close out consultation. The CDS will document the final health status and means of ascertainment in CDRSS.

RESOURCES

For general information on EVD, refer to the NJDOH website at <http://www.state.nj.us/health/cd/vhf/index.shtml> or the CDC website at <http://www.cdc.gov/vhf/ebola/>. For more specific information on active monitoring in NJDOH, refer to the following:

- Protocol for Active Monitoring
http://nj.gov/health/cd/vhf/documents/ebola_active_monitoring.pdf
- Flow Chart for Active Monitoring
http://nj.gov/health/cd/vhf/documents/ebola_active_monitoring_flowchart.pdf
- Addendum for Active Monitoring
http://nj.gov/health/cd/vhf/documents/ebola_active_monitoring_add.pdf
- Social Distancing Guidelines
http://nj.gov/health/cd/vhf/documents/ebola_Interim_Social_Distancing.pdf
- Active Monitoring Agreement (attached below)

NEW JERSEY DEPARTMENT OF HEALTH AGREEMENT FOR ACTIVE MONITORING

It is very important for both your own and public safety that you monitor your health for the 21 days following your departure from the Ebola Virus Disease (EVD) affected region. Information regarding Ebola, including the State's Active Monitoring Policies, can be found through the NJ Department of Health website: <http://www.state.nj.us/health/cd/vhf/techinfo.shtml>

Please review and sign below acknowledging that you will cooperate with all local, state and federal public health authorities, and will comply with the measures outlined below:

1. Take your temperature morning and night, and record any symptoms **two times a day** as instructed by the local health department.
2. Report your temperature and any symptoms to the local health department **once each day** as instructed.
3. If your temperature is above **100.4 degrees Fahrenheit**, or if you experience **severe headache, joint and muscle aches, sore throat, weakness, diarrhea, vomiting, stomach pain, or skin rash**, you must immediately call the local health department. If you require medical attention, you must be evaluated at a hospital and should call 9-1-1 for transport by Emergency Medical Services (EMS). If you call 9-1-1, then you must alert the 9-1-1 dispatcher that you recently traveled from an EVD affected region and are currently under active monitoring with your local health department so that the responding emergency medical service providers may take appropriate precautions while providing you with medical care.
4. Be aware that persons with EVD do not necessarily run a fever; questions about symptoms or change in health status should be reported to the local health department.
5. If you intend to travel outside of New Jersey during the 21 day monitoring period, you must notify your local health department prior to traveling.
6. **Your active monitoring period will run from _____ to _____.**

To contact your local health department, call:

During work hours Monday – Friday (_____ AM to _____ PM) _____ - _____ - _____

After work hours, weekends and holidays _____ - _____ - _____

Ask for: _____

Email: _____

Signature of Local Health Department Representative

Date

Printed Name of Local Health Department

I understand and agree to fully comply with the measures listed above.

Signature of Traveler

Date

Printed Name of Traveler

If minor (under 18 years of age), then parent or legal guardian of that minor must also sign

Printed Name of Parent / Legal Guardian

Signature of Parent / Legal Guardian