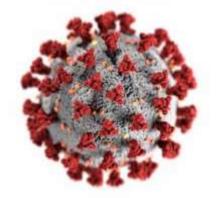
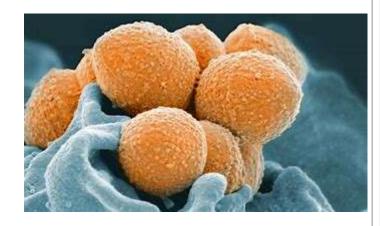


Novel Coronavirus (COVID-19)





Respiratory Disease Outbreak at a Local Intermediate School

February 2024

Outbreak Overview

- CCBH notified on 2/5/2024 of high volume of absent students at local primary school grades 3-5
- ~80 students absent that day, with a typical absentee amount reportedly being ~30-40 kids
- Early reports indicated possible GI illness based on information from facility nurse and administration

Possible Exposure Events

Thursday, 2/1/2024- KIS in school for full normal day, evening school events included talent show and aftercare

Friday, 2/2/2024- KIS in school for full normal day, evening school events included talent show, basketball game, and aftercare

-No cafeteria lunch is served at this school, and no non-prepackaged foods were served at any event

Initiation of Investigation

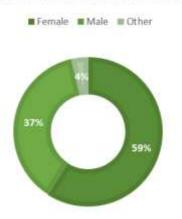
- Based on illness volume and ongoing GI illness outbreaks statewide an investigation was started
- Case-Control Study
 - -Surveymonkey
 - Absentee list was used to Identify sick individuals
 - -School agree to offer survey link to all students, staff, and families to provide controls
 - Demographics, illness, symptoms, severity, duration, possible exposures

Survey Results

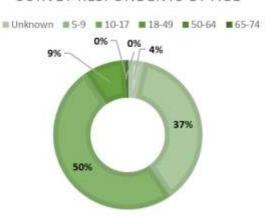
- A total of 292 survey responses were recorded
- After cleaning and deduplication (thanks Kyley),
 166 records were included in our data set

Respondent Demographics

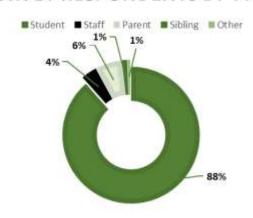




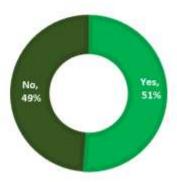
SURVEY RESPONDENTS BY AGE



SURVEY RESPONDENTS BY TYPE

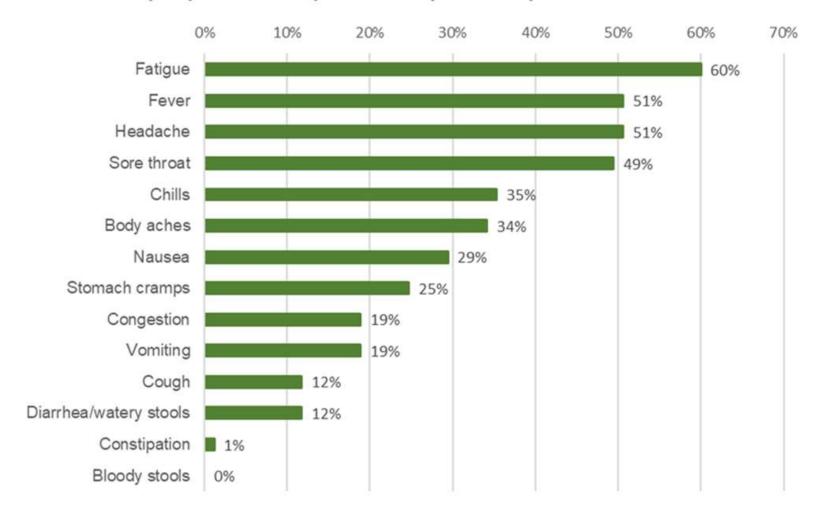


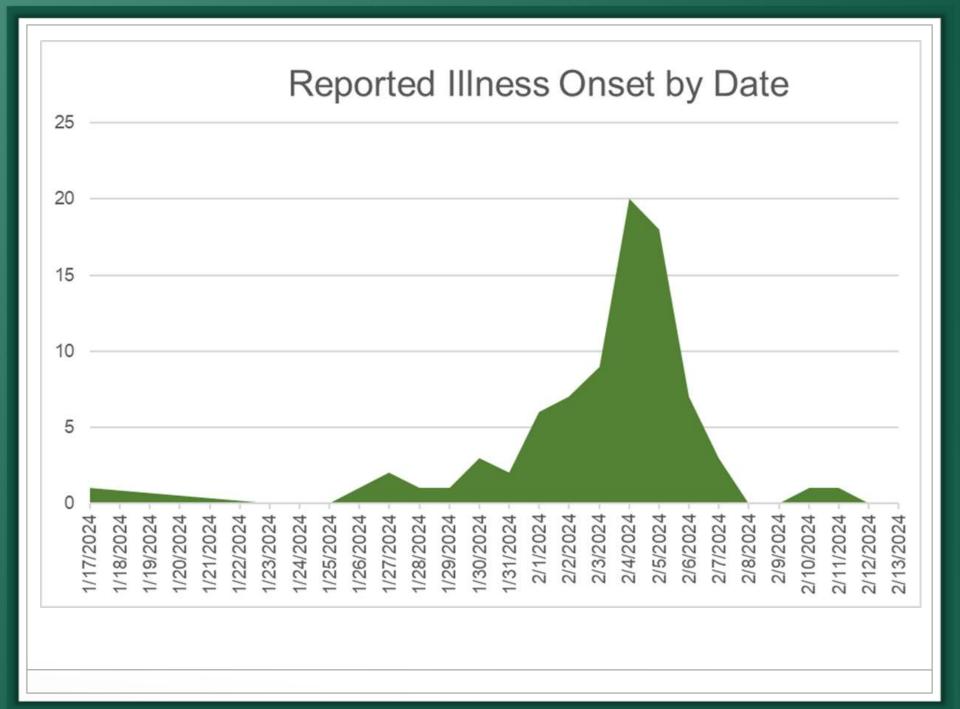
SURVEY RESPONDENTS REPORTING ANY ILLNESS



| Table 1. Illness attack rates by demographics | | | | |
|---|-----|---------|-------|-------------|
| | III | Not III | Total | Attack Rate |
| | n | n | n | % |
| Total | 85 | 81 | 166 | 51.2 |
| | | | | |
| Student | 75 | 71 | 146 | 51.3 |
| Parent | 7 | 3 | 10 | 70 |
| Staff | 2 | 4 | 6 | 33.3 |
| Sibling | 1 | 1 | 2 | 50 |
| Unknown | 0 | 1 | 1 | 0 |
| | | | | |
| Female | 50 | 48 | 98 | 51 |
| Male | 28 | 34 | 62 | 45.2 |
| Unknown | 1 | 5 | 6 | 16.7 |
| | | | | |
| 5-9 years | 24 | 37 | 61 | 39.3 |
| 10-17 years | 51 | 32 | 83 | 61.4 |
| 18-49 years | 9 | 6 | 15 | 60 |
| 50-64 years | 0 | 0 | 0 | *** |
| 65-74 years | 0 | 1 | 1 | 0 |
| Unknown | 1 | 5 | 6 | 20 |
| | | | | |
| White | 80 | 70 | 150 | 53.3 |
| Black/ African American | 1 | 0 | 1 | 100 |
| Asian/ Asian American | 0 | 1 | 1 | 0 |
| American Indian/ Alaska Native | 0 | 0 | 0 | *** |
| Native Hawaiin/ Pacific Islander | 0 | 0 | 0 | *** |
| Other | 3 | 5 | 8 | 37.5 |
| | | | | |
| Non-Hispanic | 81 | 81 | 162 | 50 |
| Hispanic | 4 | 0 | 4 | 100 |
| | | | | |

Symptoms Reported by III Respondents





Not a GI Outbreak?

- 83.5% of sick respondents only reported symptoms consistent with respiratory illness
- Only 19% reported vomiting and 12% reported diarrhea
- No statistically significant risk associated with specific days or events
- Specific causes cited: 3 COVID-19, 7 Flu, 7 Strep throat
- CDI team obtained positive lab results for 3 Flu cases and 3 Strep throat cases, allowing us to designate this as a respiratory outbreak

Limitations and Challenges

- Incomplete data set from school
- Initial reporting and assessment subject to possible experience bias
- This made instrument design inadequate for most likely actual causes
- Multiple identified pathogens makes overall analysis difficult (different illnesses which are similar but may still have differences is symptoms and course history)

Conclusions and Discussion

- This "outbreak" was likely related to multiple clusters of common respiratory diseases overlapping (and a few cases of GI illness probably)
- Communicating directly with staff in building is best source of information
- Requesting all information upfront at one time
- Making sure not to jump to conclusions

Questions?