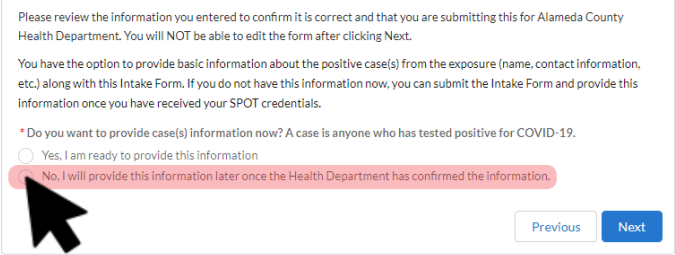




COVID-19 REPORTING: NON-HEALTHCARE WORKPLACES

Once the reporting threshold has been met, follow the directions below to use the **SPOT Intake Form** to report COVID-19 case clusters at **non-healthcare** workplaces.

Step	Action	Screenshot
1.	Navigate to spot.cdph.ca.gov	
2.	Click the "New Users" button on the left	
3.	Select "Long Beach" Local Health Jurisdiction (LHJ)	
4.	Select "Report Workplace Exposure"	

<p>5.</p>	<p>Input required Key Point of Contact for Location information:</p> <ul style="list-style-type: none"> <input type="checkbox"/> First Name <input type="checkbox"/> Last Name <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Title/Role 	<p>Complete this form to report a workplace, congregate setting, or other location exposure for Alameda County Health Department.</p> <p>Key Point of Contact for Location <i>Once approved by your local health department, this person will be granted access to SPOT to enter information about the exposure on behalf of the organization.</i></p> <p>*First Name - Key <input type="text"/></p> <p>*Last Name - Key <input type="text"/></p> <p>*Email - Key <input type="text"/></p> <p>*Phone - Key <input type="text"/></p> <p>Title / Role - Key <input type="text"/></p>
<p>6.</p>	<p>Input required Location of Exposure fields for the worksite where exposure occurred:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Location Name <input type="checkbox"/> Location Type <input type="checkbox"/> Street <input type="checkbox"/> City <input type="checkbox"/> Zip/Postal Code 	<p>Location of the Exposure <i>Name and address of the school facility or site where the exposure took place.</i></p> <p>*Location Name <input type="text"/></p> <p>*Location Type <input type="text"/></p> <p>*Street <input type="text"/></p> <p>*City <input type="text"/></p> <p>*Zip/Postal Code <input type="text"/></p> <p>State CA</p>
<p>7.</p>	<p>Input required Exposure Information fields for case(s) being reported:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Start Date of Exposure <input type="checkbox"/> Specific Place in Location <input type="checkbox"/> Number of COVID-19 Positive Cases <input type="checkbox"/> Do people live at this location? 	<p>Exposure Information</p> <p>*Start Date of Exposure <input type="text"/></p> <p>End Date of Exposure <input type="text"/></p> <p>*Specific Place in the Location <input type="text"/></p> <p>*Number of COVID-19 Positive Cases <input type="text"/></p> <p>Number of Close Contacts <input type="text"/></p> <p>Total Number of People at the Location <input type="text"/></p> <p>*Do people live at this location? <input type="text"/></p> <p>If yes, what is the resident capacity? <input type="text"/></p>

<p>8.</p>	<p>In response to “Do you want to provide case information now?” select: “No, I will provide this information later once the health department has confirmed the information”</p>	 <p>Please review the information you entered to confirm it is correct and that you are submitting this for Alameda County Health Department. You will NOT be able to edit the form after clicking Next.</p> <p>You have the option to provide basic information about the positive case(s) from the exposure (name, contact information, etc.) along with this Intake Form. If you do not have this information now, you can submit the Intake Form and provide this information once you have received your SPOT credentials.</p> <p>* Do you want to provide case(s) information now? A case is anyone who has tested positive for COVID-19.</p> <p><input type="radio"/> Yes, I am ready to provide this information</p> <p><input checked="" type="radio"/> No, I will provide this information later once the Health Department has confirmed the information.</p> <p>Previous Next</p>																																												
<p>9.</p>	<p>A summary of all information entered will appear</p>	 <table border="1"> <tr> <td>First Name</td> <td>Last Name</td> </tr> <tr> <td>John</td> <td>Smith</td> </tr> <tr> <td>Birthdate</td> <td>Language</td> </tr> <tr> <td>March 3, 1990</td> <td>None</td> </tr> <tr> <td>Mobile Phone</td> <td>Home Street Address</td> </tr> <tr> <td>9999999999</td> <td>1234 Plymouth Rock</td> </tr> <tr> <td>City</td> <td>State</td> </tr> <tr> <td>Imperial</td> <td>California</td> </tr> <tr> <td>Zip</td> <td>Occupation/Job Title</td> </tr> <tr> <td>92251</td> <td>Explorer</td> </tr> <tr> <td>Resident/Staff in Congregate Setting</td> <td>Last Date On Site</td> </tr> <tr> <td>None</td> <td>August 22, 2022</td> </tr> <tr> <td>Date entity notified of positive test</td> <td>Has person received COVID-19 vaccine?</td> </tr> <tr> <td>Work Area/Department (for Staff)</td> <td>None</td> </tr> <tr> <td>Race</td> <td># People in Their Unit/Floor/Area/Dept</td> </tr> <tr> <td>Gender</td> <td>Ethnicity</td> </tr> <tr> <td>None</td> <td>None</td> </tr> <tr> <td>Symptom Onset Date</td> <td>Ever Symptomatic?</td> </tr> <tr> <td>August 22, 2022</td> <td>Yes</td> </tr> <tr> <td>Test Result</td> <td>Test Date</td> </tr> <tr> <td>None</td> <td>August 22, 2022</td> </tr> <tr> <td>Notes</td> <td>Test Type</td> </tr> </table>	First Name	Last Name	John	Smith	Birthdate	Language	March 3, 1990	None	Mobile Phone	Home Street Address	9999999999	1234 Plymouth Rock	City	State	Imperial	California	Zip	Occupation/Job Title	92251	Explorer	Resident/Staff in Congregate Setting	Last Date On Site	None	August 22, 2022	Date entity notified of positive test	Has person received COVID-19 vaccine?	Work Area/Department (for Staff)	None	Race	# People in Their Unit/Floor/Area/Dept	Gender	Ethnicity	None	None	Symptom Onset Date	Ever Symptomatic?	August 22, 2022	Yes	Test Result	Test Date	None	August 22, 2022	Notes	Test Type
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<p>10.</p>	<p>After reviewing the summary for accuracy, scroll to the bottom of the page and click “Finish”</p>																																													

11.

After submitting you will receive **two** emails from **CA COVID Team:**

1. An **automatic notification email** with the message that the SPOT Intake Form was submitted successfully, a copy of information entered, and links to various resources
2. You will receive a second email once LBDHHS **successfully processes** your SPOT Intake Form; this email contains the location and exposure details and instructions on how to report additional cases linked to this cluster

SPOT Intake Forms are typically processed within 1 business day



A. Example of Automatic Notification Email

The Long Beach Department of Health and Human Services has processed the intake form for Central Perk with a start date of 8/8/2022, 3:14PM.

To report additional cases identified within the next 14 days, please notate "2nd floor office" in the **Specific Place in the Location** field. You may also use the **Notes** field to add any additional notes and/or requests for follow up, if necessary.

Thank you,

COVID-19 Response Team
Long Beach Department of Health and Human Services



B. Example of Successful Processing Email

How to Report Additional Cases Linked to Cluster

To report additional cases linked to this case cluster submit another SPOT Intake Form, inputting the same **Specific Place in Location** and a message in the Notes section.

IMPORTANT: When reporting additional cases, under "Number of COVID-19 Positive Cases" input the number of **NEW** cases, **not** the total number of cases in the cluster. The processing confirmation email from LBDHHS will confirm that the total case count has been updated.