## RRT training package

## A4.1d Investigation Report template

## Annex 7A: Sample district outbreak report framework (from IDSR guidelines).

Title/Description (include disease/condition investigated) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Period\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Place (Villages, Neighborhoods, District, Province)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Executive summary**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. Introduction:**

* + Background
  + Reasons for investigation (public health significance, threshold met, etc.)
  + Investigation and outbreak preparedness

**II. Methods:**

* + Dates of investigation
  + Site(s) of investigation (health care facilities, villages, other)
  + Case finding (indicate what was done regarding case finding, e.g., register review, contact investigation, alerting other health facilities, other)
  + Lab specimens collection
  + Description of response and intervention (include dates)
  + Data management

**III. Results:**

* + Date and location of first known (index) case
  + Date and health facility where first case was seen by the health care system
  + Results of additional case finding
  + Lab analysis and results
  + With text, describe key features of results of time, place, and person analysis
  + For detailed results by time (epi curve), place (map), and person characteristics (tables) and line lists
  + Results of response and evidence of impact

*NB: Include the following in the report: epi curve; place (spot map); person characteristics (table) and line lists.*

**IV. Self-evaluation of the timeliness and quality of preparedness, outbreak detection, investigation, and response**

Epidemic Preparedness

|  |  |  |
| --- | --- | --- |
| **Indicator** | **Yes** | **No** |
| Were adequate drugs and medical supplies available at the onset of the outbreak |  |  |
| Were treatment protocols available to health workers? |  |  |
| Does the district epidemic management committee regularly meet as part of epidemic preparedness?  Was an Epidemic Preparedness and Response plan available? |  |  |

**Outbreak Detection**

|  |  |  |  |
| --- | --- | --- | --- |
| **Indicator** | **Date 1** | **Date 2** | **Interval** |
| Interval between onset of index case (or occurrence of an unusual cluster at the community level) [date 1] to arrival of first outbreak case at the health facility [date 2]  (Target: <3 days) |  |  |  |
| Interval between initial outbreak case seen at the health facility (or date of  outbreak threshold crossing at the health facility) [date 1] and reporting to the district health team [date 2]  (Target: within 24 hours) |  |  |  |
| Cumulative interval between onset of index case (or occurrence of an unusual cluster at the community or health facility) [date 1] to notification to the district [date 2]  (Target: <7 days) |  |  |  |

**Outbreak investigation**

|  |  |  |
| --- | --- | --- |
| **Indicator** | **Yes** | **No** |
| Were case forms and line lists completed? |  |  |
| Were laboratory specimens taken (if required)? |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Indicator** | **Date 1** | **Date 2** | **Interval** |
| Interval between notification of district [date 1] and district field investigation conducted [date 2]  (Target: within 48 hours) |  |  |  |
| Interval between sending specimens to the lab [date 1] and receipt of results by the district [date 2]  (Target: 3-7 days, depending on type of test) |  |  |  |

**Outbreak response:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Indicator** | **Date 1** | **Date 2** | **Interval** |
| Interval between notification of outbreak to district [date 1] and concrete  response by the district [date 2]  (Target: within 48 hours of notification) |  |  |  |

**Evaluation and Feedback:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Indicator** | **Date 1** | **Date 2** | **Interval** |
| Interval between end of the outbreak [date 1] and finalization of outbreak report with case forms/line list sent to national level [date 2]  (Target: 2 weeks) |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Indicator** | **Yes** | **No** |
| Did the outbreak management committee meet to review investigation results? |  |  |
| Was feedback given to health facilities and community? |  |  |

**V. Evaluation of other aspects of the response:**

**VI. Interpretations, discussion, and conclusions**:

**VII. Recommended public health actions:**

Comment on following levels: community, health facility, district, partners, provincial, and national

District Epidemic Committee Chairperson:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Signature

District Medical Officer:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Signature

Date reported completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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