**Scenario**

The [appropriate job role – CD nurse, clerk, Epi, etc.] is reviewing MDSS when they see a case of bacterial meningitis in a 15-year-old female resident – Hannah Parker. Before the [appropriate job role – CD nurse, clerk, Epi, etc.] can gather leadership to alert them to the case, she receives a call directly from the infection control team who provides more information about the case. The family just returned from a trip to Florida where Hannah performed with the [School Name] High School Marching Band in a national marching band competition. Hannah’s parents sought care for her after she experienced a migraine that seemed to be abnormal compared to previous migraines and that progressively worsened throughout the day. After experiencing vomiting and an altered mental state and confusion with identifying her parents, her parents called 911 who transported Hannah to [hospital name]. Upon arrival to the ER, given the presentation, the physician immediately suspected meningitis and ordered a lumbar puncture to collect cerebral spinal fluid for testing. Patient was admitted and started on antibiotics. She is not yet intubated and shows some improvement with antibiotics. The gram stain grew out Gram Negative Diplococci. Preliminary culture results are pending.

The [appropriate job role – CD nurse, clerk, Epi, etc.] immediately convenes with the [appropriate job roles – Nursing Director, Medical Director, Nursing Supervisor, etc.] to discuss. During the meeting, Hannah’s mom’s returns the call. She explains that she and her husband had acted as chaperones on the trip and traveled with Hannah and her classmates by bus to Orlando for a national marching band competition at Disney World. They spent five days on the trip and had been to multiple locations, restaurants, and sites throughout the trip. They’d only been home one day when Hannah began experiencing a severe headache. Her mom immediately suspected COVID from traveling but she tested negative twice.

Hannah’s mom was unable to confirm specific details about items she may have shared with others, but she was able to provide a list of names and phone numbers for Hannah’s close friend group who likely had the most contact with her as roommates and members of the clarinet section, as well as those she likely would have eaten meals with or spent the most time with. She is also able to provide contact information for the band leader to acquire a list of individuals who participated in the trip.

After the call concludes, the group briefly discusses next steps and determines it is necessary to activate the leadership response team and that this incident requires a full activation based on the topic. As the group sets up a meeting time, the CD line receives a few calls from worried parents of students who participated in the trip.

Further communication with the parents of other students on the trip confirms that some of Hannah’s friend shared water bottles during the competition, utensils and cups throughout the trip, and the swapping of clarinets during practice. One student confirms that Hannah shared her water bottle with multiple people throughout the competition while marching in the Florida heat. Another student also confirms that a secret party was held in one of the hotel rooms where attendees shared drinks from cups found in the hotel room closet, though the student refused to provide the names of others who were in the room during the party but estimates there were about 20 students in attendance. Multiple parents also provide information about the day before the competition started when multiple high schools were bussed to a local gymnasium in shifts to practice due to severe storms that moved through the area.

**Intended Audience**

[Change titles as appropriate] Health Officer, Medical Director, PPHS Director, Nursing Supervisor, CD Nurse, Epidemiology, EPC, Health Promotions Coordinator, Health Promotions Specialist, Immunizations Coordinator

**Objectives and Tasks**

1. Ensure participating staff understand the role they might fill during this type of response as well as the role/responsibilities of [agency name] as we fit into the “bigger picture” of the response.
2. Identify if there is a need for [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] activation. Determine thresholds that would warrant [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] activation (partial or full) and identify possible triggers for changes in activation (ex., scaling up or down).
3. Understand the process for activating the [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] and the steps taken for notification, alerting key partners, initial meeting, etc.
4. Identify pre-event incident action planning items (i.e., things we need to accomplish or develop now prior to this type of incident occurring – materials for the [enter name of your public health EOC/command center: ex., PHECC, EOC, etc.] activation process, templates, etc.).
5. Identify potential communication and/or print/digital materials needs.
6. Identify who is at highest risk for this type of incident. What additional needs should we consider for our Access and Functional Needs population?

**Possible Reference Materials**

* Emergency Response Activation Checklist
* [MDHHS A-Z Page](https://www.michigan.gov/mdhhs/keep-mi-healthy/communicablediseases/recentupdates/diseaselisting) – Bacterial Meningitis ([link to CDC Case Definition](%E2%80%A2%09https%3A/ndc.services.cdc.gov/case-definitions/meningitis-other-bacterial-1996/))
* [CDC Bacterial Meningitis Page](https://www.cdc.gov/meningitis/bacterial.html)
* MDHHS – [Meningococcal Disease Information and Investigation Guidelines](https://bit.ly/3Ki5jYX)
* "*Control of Communicable Diseases Manual*"- 21st edition
* [Agency] CD Manual – [Include internal link to your CD plan]