OCFS Upstate COVID Tracker Data Metrics

**Data to Capture**

|  |  |
| --- | --- |
| Date of Entry  | Date of Birth |
| First Name | Last Name |
| Division  | Program  |
| Symptomatic?  | Exposed to Known COVID-19 Case?  |
| Seen by Medical Staff?  | Advice of Medical Staff (even if not seen)  |
| Date Test Administered:  | Date Test Results Received:  |
| Test Result  | Hospitalized/Isolated?  |
| Date OCFS form 7065 Sent:  | Has There Been Contact with Others?  |
| Others in Contact: Youth, Parents, Staff?  | Others Monitored?  |
| Date Birth Parents Notified:  | Date DOH Notified |
| Date ACS Notified  |  |

*\*NOTE: The report out should be aggregated daily and cumulative*

**Metrics to Report Out**

* Name
* Date of Birth
* Division
* Program
* Symptomatic
* Seen by Medical Staff
* Date test administered
* Date Test Results received
* Test Result(s)
* Hospitalized/Isolated
* Contact with others? Yes, who?
* Other Monitored
* Date Birth Parent notified
* Date DOH notified
* Date ACS notified