

Utilization of CDC COVID-19 data tracking Maps For Source Control Decision Making

CDC recommends the use of [COVID-19 Community Level](#) and [Community Transmission](#) maps when making infection control decisions and/or implementation of interventions for example source control.

There might be some confusion related to the CDC [Community Levels](#) and [Community Transmission](#) maps, and their use, when making source control decisions. Below is information taken from the CDC webpage and we hope you find it beneficial.

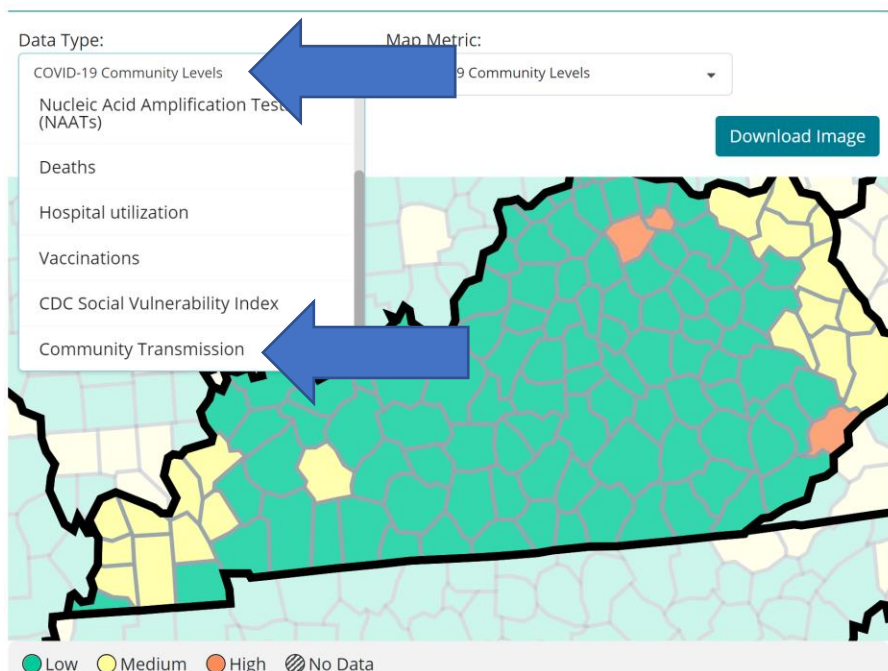
The COVID-19 Community Level and Transmission Map information can be found at: [CDC COVID Data Tracker: County View](#).

[The COVID-19 Community Levels](#) is used to determine the **impact** of COVID-19 on communities.

[Community Transmission Levels](#) is used to describe the amount of COVID-19 **spread** within each county. Health Care Providers should use this map to direct infection control interventions such as source control.

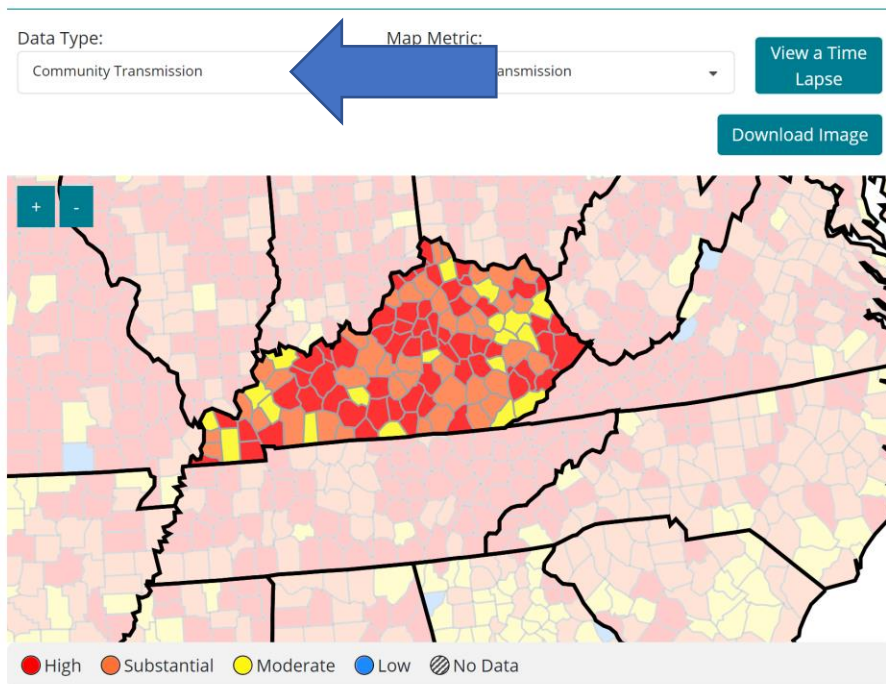
It is important to note if both maps have your county in red, source control and other infection control interventions are recommended.

The picture below is from the CDC web page referenced above. Once on the page, use the drop-down box to select Community Transmission, to see your county's data.



When you click on the Community Level our state appears mostly in the green. Which if used for Infection Control decision making could be misleading since it does not relate to Transmission.

However, if you click on Community Transmission our state looks mostly red and orange. This data should also be used when making infection control decisions and when to implement source control to prevent the transmission of COVID-19, in the health care facility.



To Clarify, when the CDC [Community Transmission](#) map indicates the providers, county is in a high level (red) then the facility staff should use source control in patient care areas, per CDC recommendations.

CMS direction is also for providers to refer to their county [Transmission](#) rate data when making source control decisions. In addition, providers should develop and refer to their infection control policies and procedures, when making decisions regarding the use of source control.

We hope this information has provided some clarity on the use of the CDC COVID-19 Maps for Infection Control and Source control decision making purposes.

In addition, below is a cut and paste from the CDC web site referencing the 2 different maps and source control decision making for your reference.

When SARS-CoV-2 [Community Transmission](#) levels are high, source control is recommended for everyone in a healthcare setting when they are in areas of the healthcare facility where they could encounter patients.

- HCP could choose not to wear source control when they are in well-defined areas that are restricted from patient access (e.g., staff meeting rooms) if they do not otherwise meet the criteria described below and [Community Levels](#) are not also high. When [Community Levels](#) are high, source control is recommended for everyone.

When SARS-CoV-2 [Community Transmission](#) levels are **not** high, healthcare facilities could choose not to require universal source control. However, even if source control is not universally required, it remains recommended for individuals in healthcare settings who:

- Have suspected or confirmed SARS-CoV-2 infection or other respiratory infection (e.g., those with runny nose, cough, sneeze); or
- Had [close contact](#) (patients and visitors) or a [higher-risk exposure](#) (HCP) with someone with SARS-CoV-2 infection, for 10 days after their exposure; or
- Reside or work on a unit or area of the facility experiencing a SARS-CoV-2 outbreak; universal use of source control could be discontinued as a mitigation measure once no new cases have been identified for 14 days; or
- Have otherwise had source control recommended by public health authorities