

Contact Investigation: An Introduction

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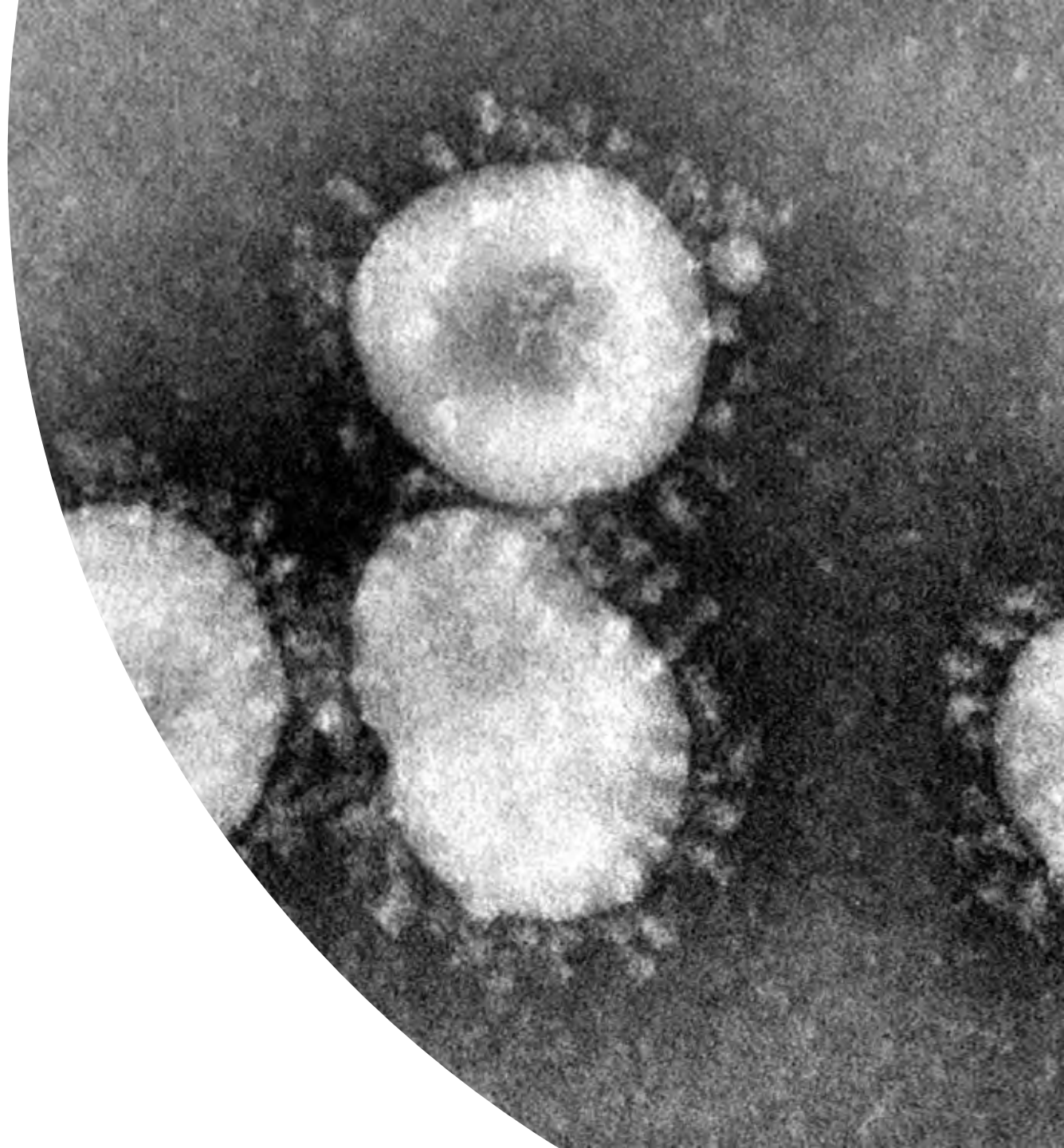
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What are Coronaviruses?

- Enveloped RNA viruses
- Named for club-like spikes on surface
- >20 of them, 7 cause human disease
- Most usually cause mild cold-like symptoms
- Exceptions include SARS, MERS, and COVID-2019

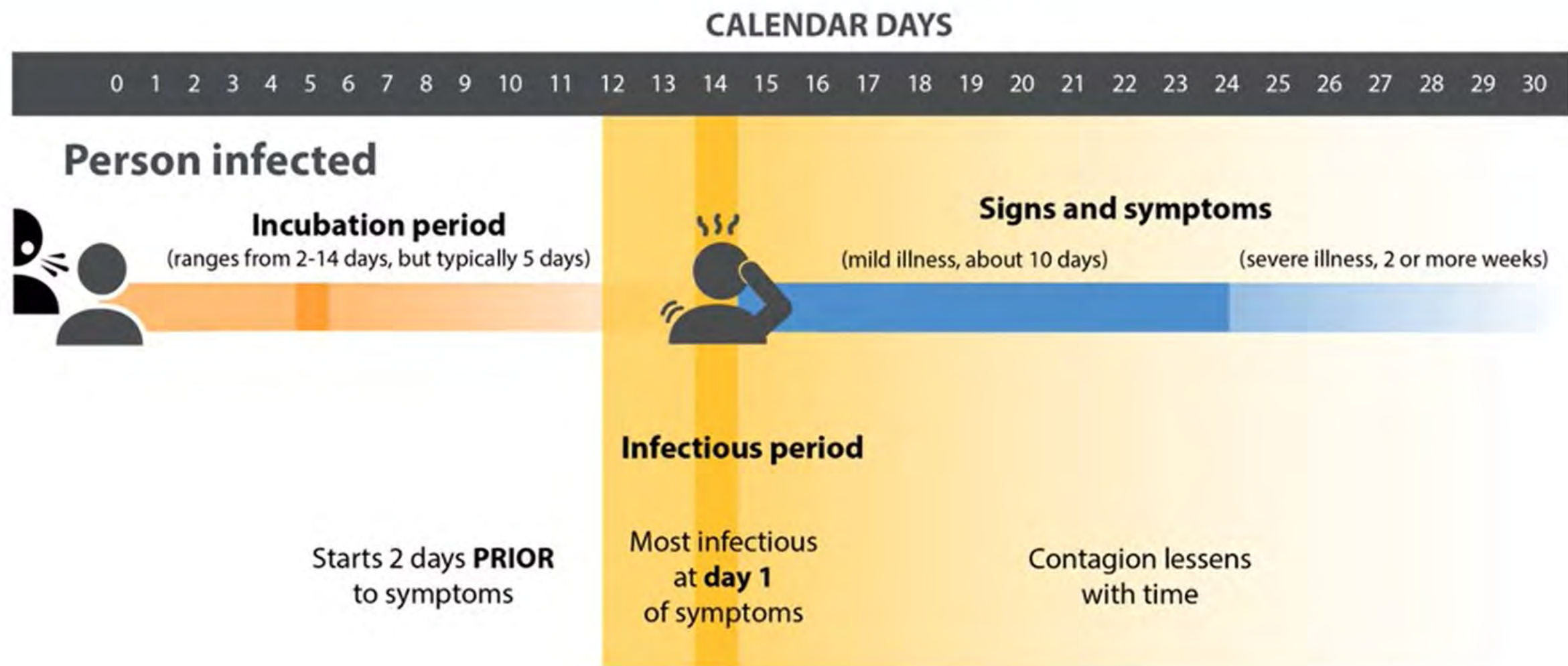


Key Facts for Contact Investigation

- Time from exposure to onset of illness:
 - Average: 5 days
 - Almost all by 12 days
- Modes of transmission:
 - Droplets ill person breathes out or coughs
 - Contact with ill person's secretions
- Infectious period:
 - Mostly while person is sick
 - Possibly several days before



Timeline of Infection: Infectious Period

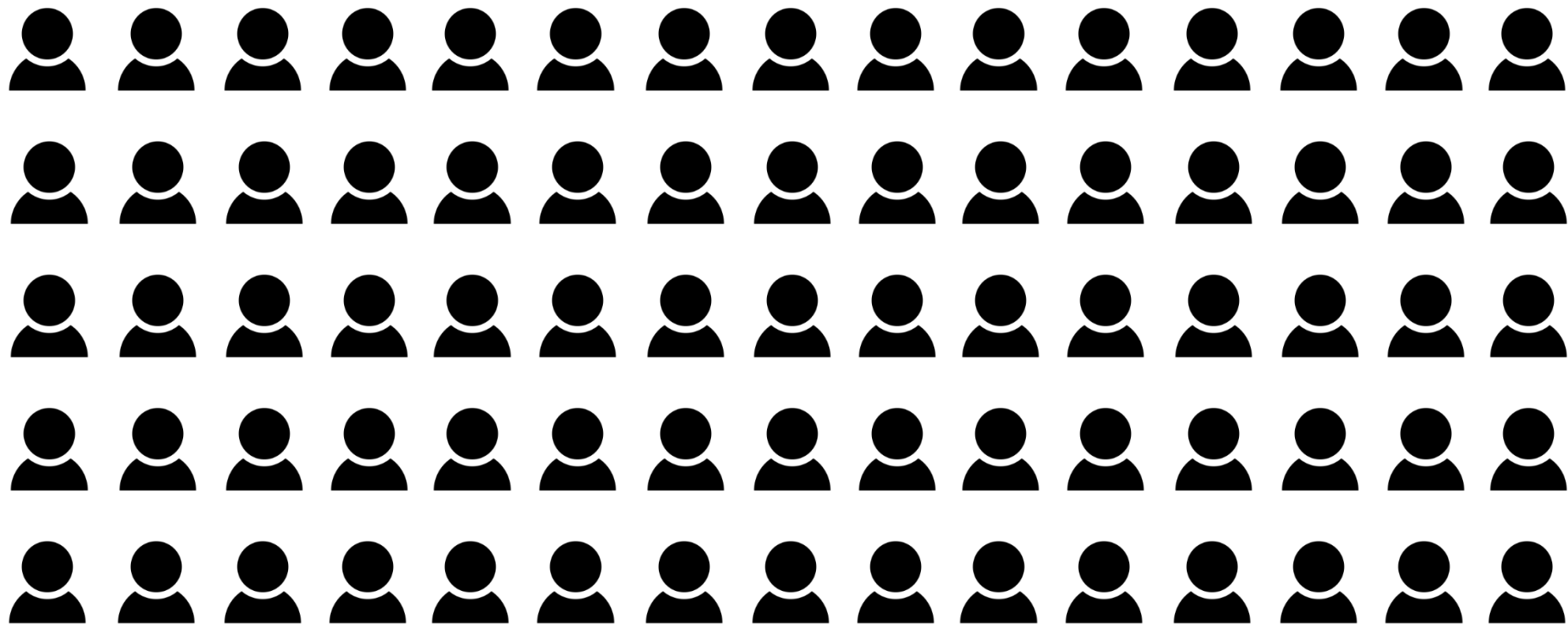


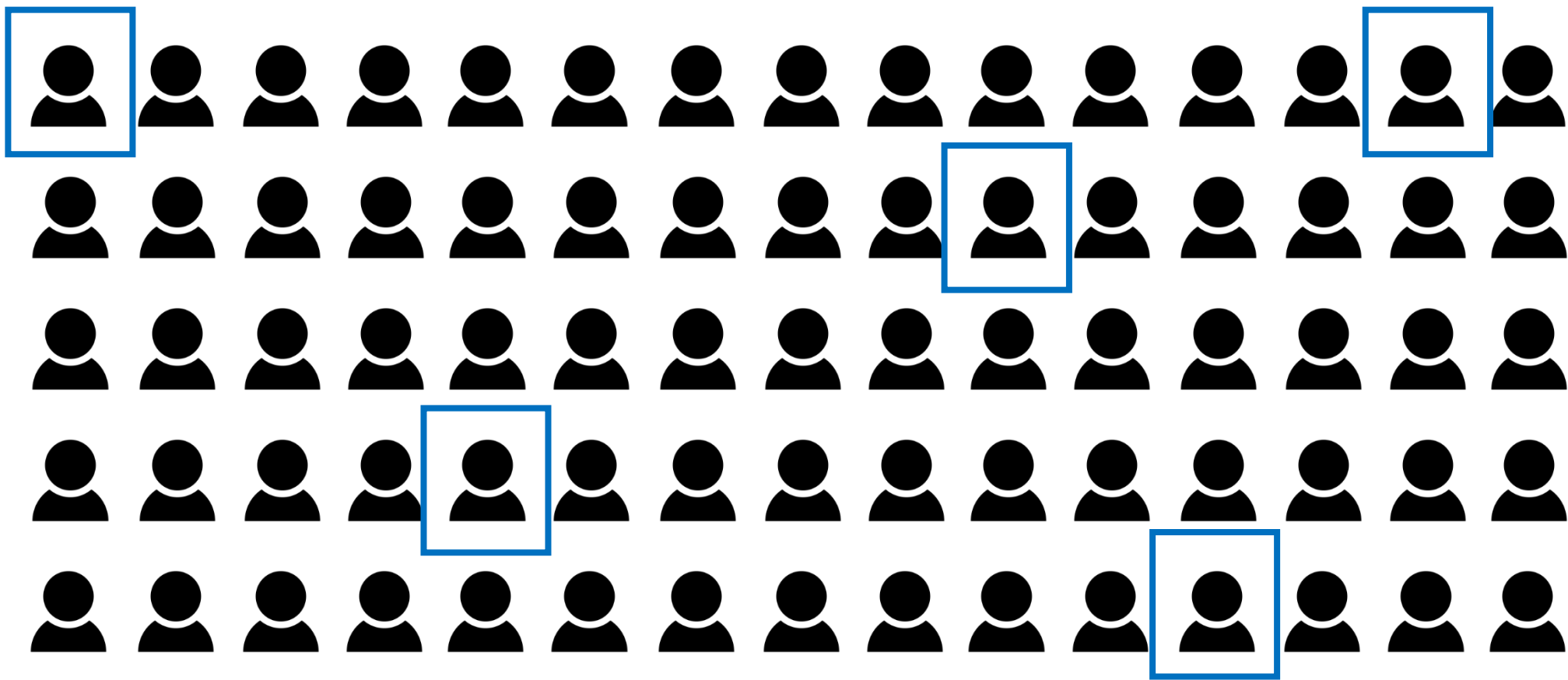
Defining Their Infectious Period

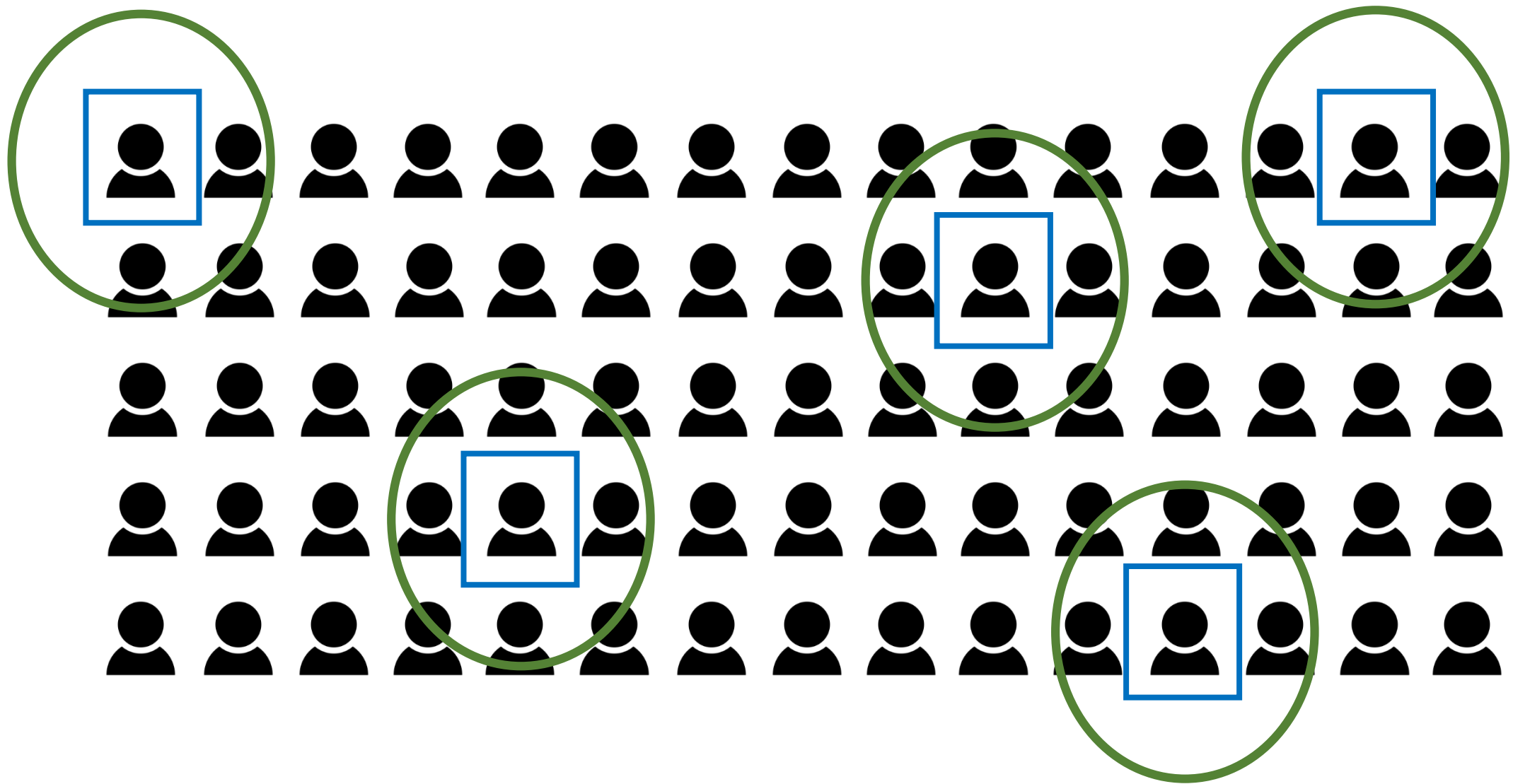
- ▶ Let's assume that you call the case on May 10
- ▶ They tell you that they became ill on May 9
- ▶ You know that they were infectious for about 2 days before they became ill, and will be for at least 10 days after their onset

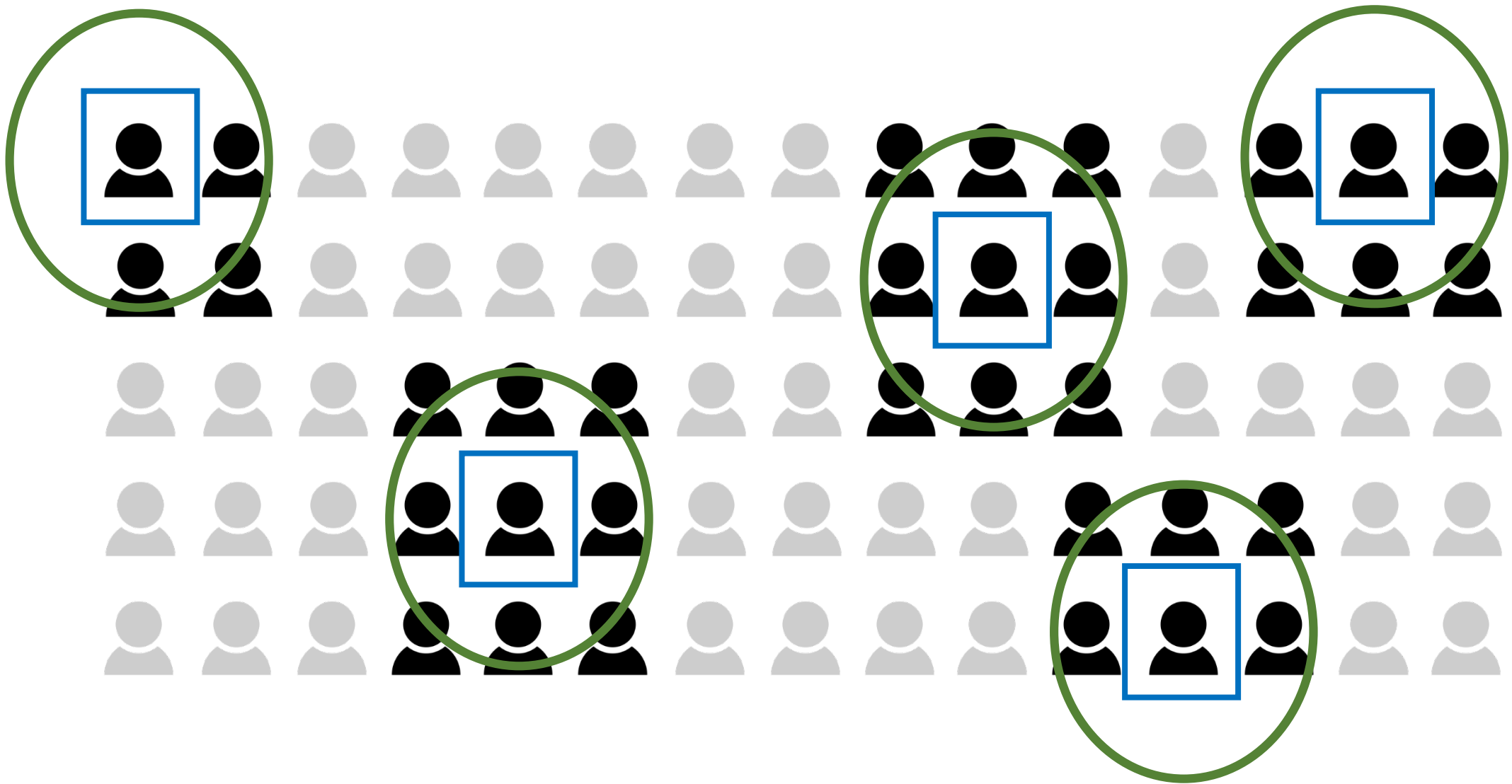
May 9 + 10 days = May 19

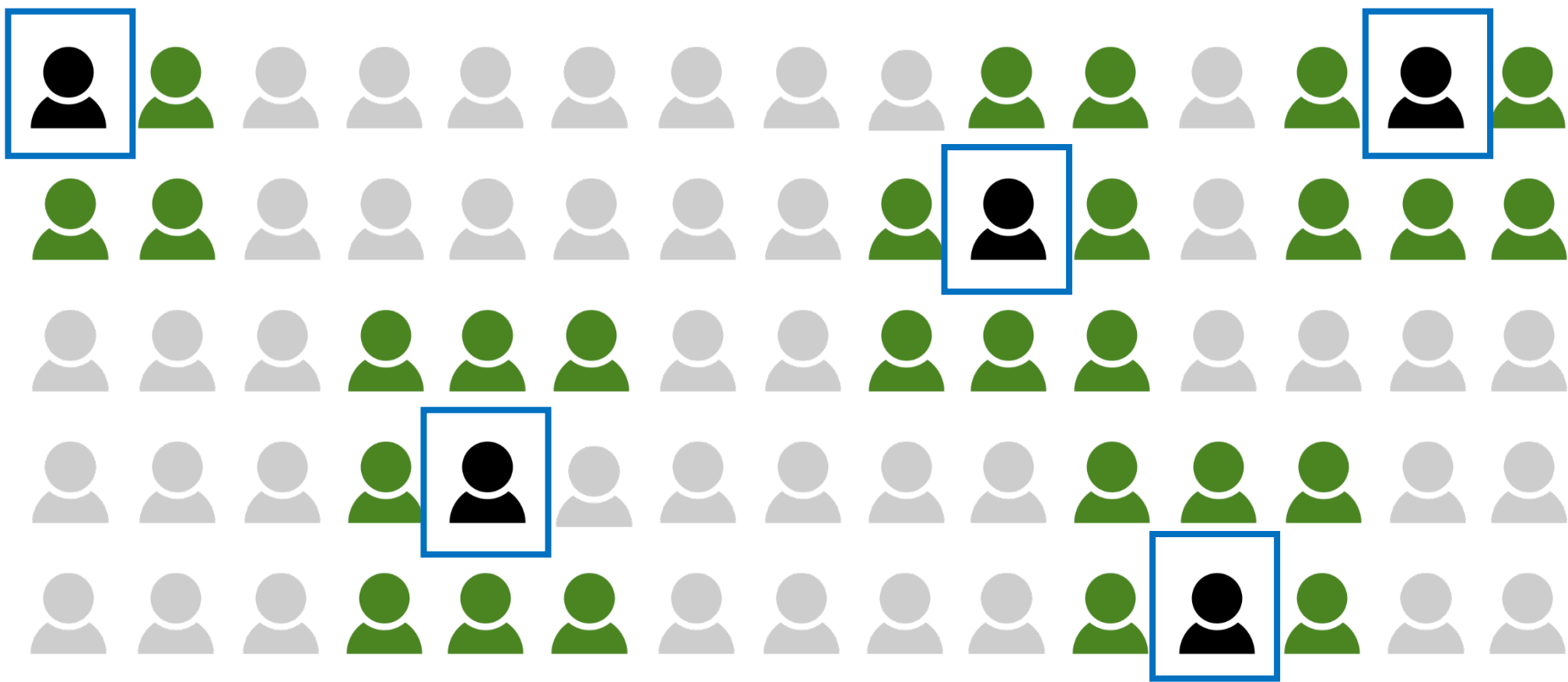


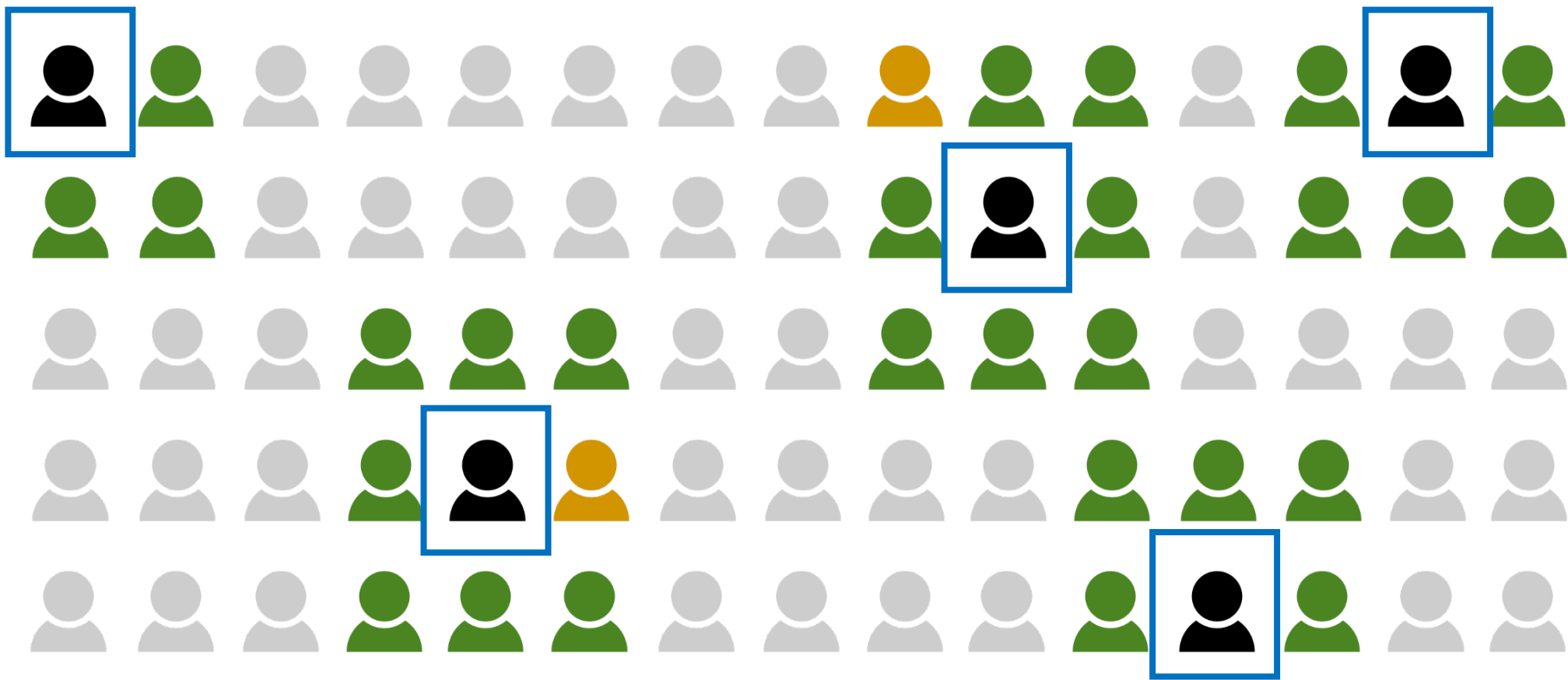


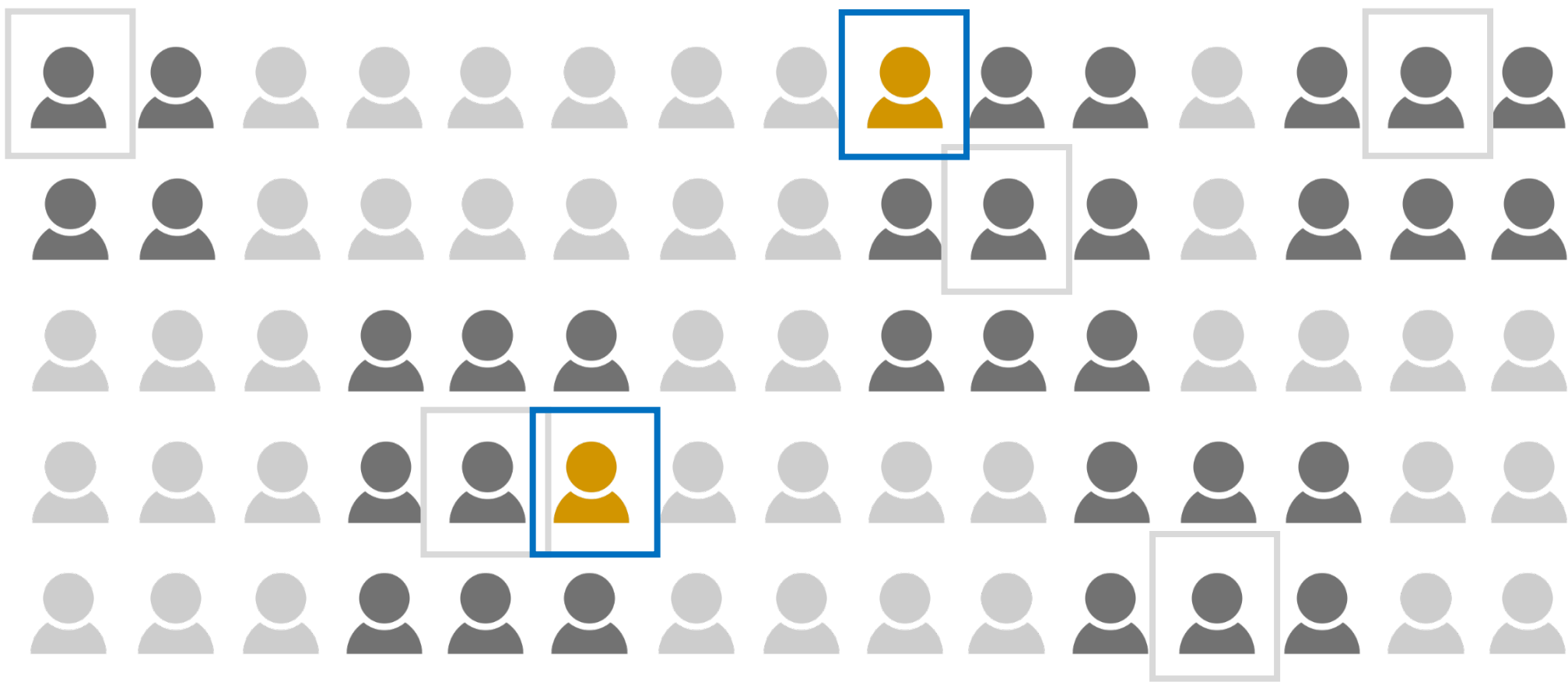








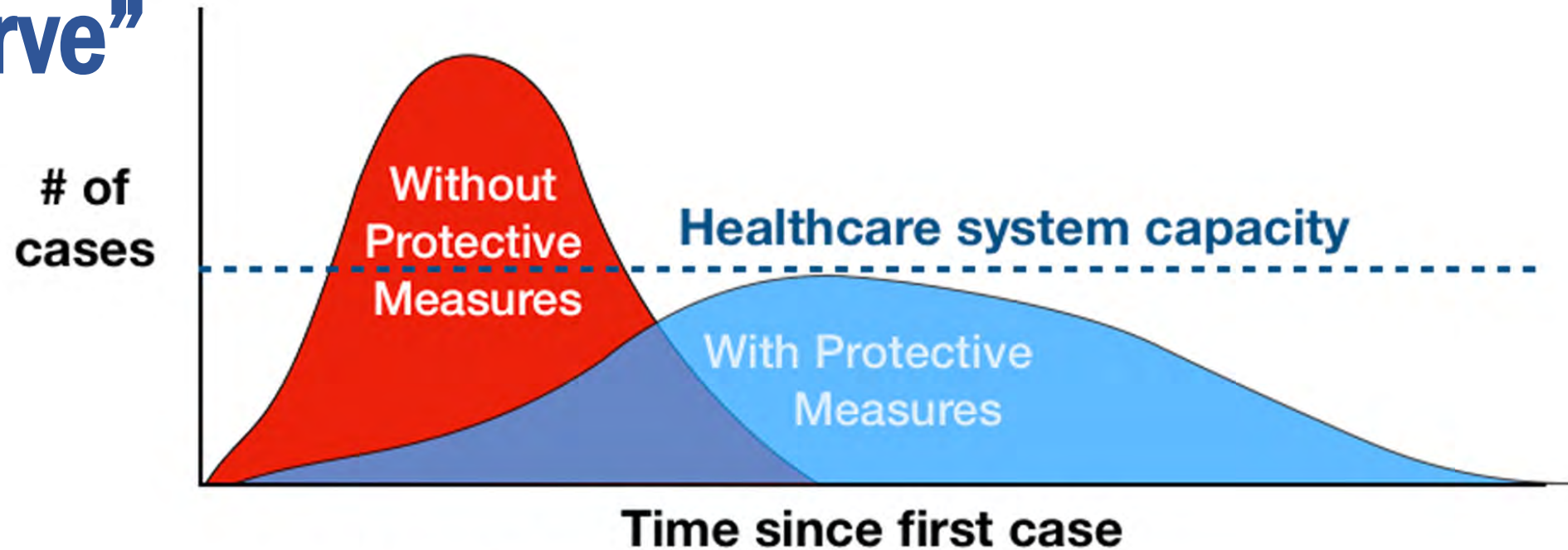






Contact investigations are
key to **stopping the
outbreak** and **saving lives.**

Contact investigations can help “flatten the curve”



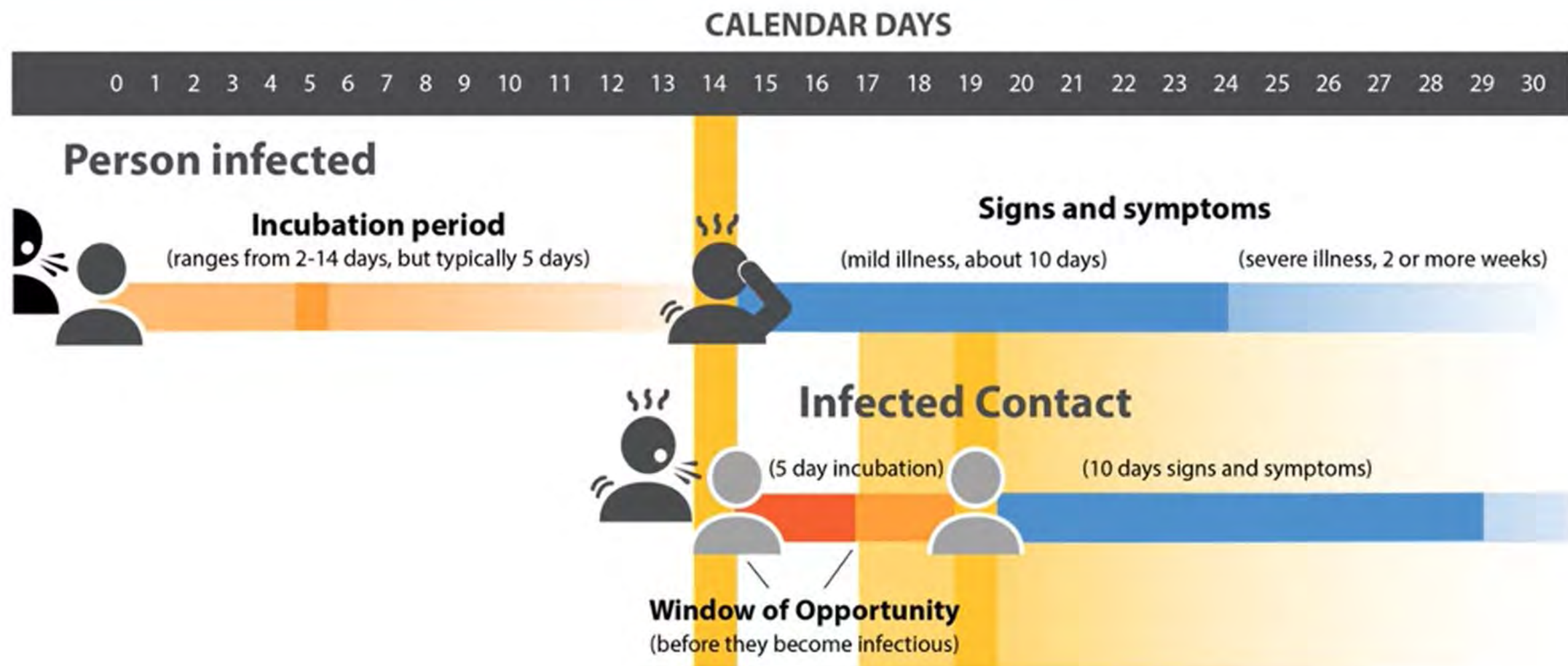
Adapted from CDC / The Economist

Goal: Prevent Further Spread of Illness

Identify people who:

- Were exposed to an ill person while that person was infectious**
- Need some public health action to prevent further illnesses
(Example: Stay Home Order)**

Timeline of Infection: Window of Opportunity



Goal: Prevent Further Spread of Illness

Share information with contacts about

- Symptoms to watch for
- How they can prevent spread of infection to others
 - Describe what quarantine/isolation means



Use Simple Words

- ▶ **Avoid technical words**

- ▶ Case
- ▶ Contact
- ▶ Infectious period

- ▶ **Use simple words**

- ▶ Someone who is sick
- ▶ Someone who's been around a sick person
- ▶ The time in which you can spread coronavirus to others

Using Simple Words: Example

“Why are you calling me?”

Don't

- ▶ *“You came in close contact with a case during their infectious period.”*

Do

- ▶ *“I’m calling to let you know that you were recently around someone who tested positive for coronavirus. Because you spent some time with them, you may also get sick.”*

Communicate One Message or Question at a Time

- ▶ **One question at a time**
 - ▶ Asking multiple questions simultaneously will confuse people
 - ▶ Asking multiple questions at once will not give you clear answers
- ▶ **One message at a time**
 - ▶ Your goals are to get information and *ALSO give* information
 - ▶ People take time to process new information as you talk
 - ▶ Check in frequently to see if they understand you

Plan and Resources

Identify challenges with quarantine (contacts) and isolation (case)

- Food
- Medication
- Laundry
- Financial Resources
- Special Needs



Have Tribal resources ready to support challenges

Give a end date for quarantine/isolation

Assess Needs for Medical Care

Refrain from giving medical advice – refer them to their Primary Care Provider (PCP)

Advise to seek immediate care and **call 911** if:

- Chest pain that doesn't go away
- Trouble breathing
- Blue in the face or lips
- Disoriented or trouble talking

Reminders

- Recommended to follow-up every day
- Allow person to ask questions and get clarification





Steps to Contact Tracing

1. Once you are notified of a case and have their contact information review the “Case Interview Script” document before contacting the person. It has links in it for the “OHA COVID-19 form”. Review the “COVID-19 Form”.

Case Interview Script

COVID-19 Case Interview Script & Protocol

General Suggestions:

- The primary goal of leaving a text or voicemail is to get the case on the phone with you.
- Leaving a voicemail after the first call attempt is good practice – it allows the case to associate your number with a name and reputable agency, rather than as a spam caller
- It is okay to call the case more than once in the same day; this may help to indicate the urgency of your call
- It is a good idea to explore different modalities (e.g. text) if you are unable to contact cases by phone
- Texting can lead to conversation gains, but **DO NOT** text your case before the first call attempt, we recommend texting cases after your second call attempt

Before calling review:

- ☐ [Use the current COVID-19 Report Form](#)

Leaving a Voicemail Message:

“Hi this is [interviewer name] from [agency name]. I am contacting you about your recent illness. Please call me back at [predetermined contact number]. I will be in the office [availability]. If I don’t answer, please leave a voicemail and I’ll get back to you as soon as possible.”

Case Interview Script for COVID-19

Hi, this is [interviewer’s name] calling from [agency name]. May I speak with [respondent name]? (or “Am I speaking with [respondent name]?”)

IF THE CONTACT IS A LESS THAN 18 YEARS OLD, ASK TO SPEAK TO THE PARENT OR GUARDIAN OF THE MINOR FIRST.

COVID-19 Form

COVID-19 (Novel Coronavirus)		Orpheus ID	<input type="checkbox"/> Confirmed <input type="checkbox"/> Presumptive	<input type="checkbox"/> Suspect <input type="checkbox"/> No case
Name _____ <small>LAST, first, initials (a.k.a.)</small>		County _____		
Address _____ <small>Street City Zip</small>		<div>High Risk</div> <ul style="list-style-type: none"><input type="checkbox"/> *Lives in LTC/Assisted Living/Memory Care<input type="checkbox"/> *Works in LTC/Assisted Living/Memory Care<input type="checkbox"/> *Lives in healthcare/EMS<input type="checkbox"/> *Lives in jail or correctional facility<input type="checkbox"/> *Works in jail or correctional facility<input type="checkbox"/> *Unstably housed/homeless<input type="checkbox"/> Elderly (>60 years of age)<input type="checkbox"/> Immunocompromised<input type="checkbox"/> Pregnant<input type="checkbox"/> Works with vulnerable populations <p>* If YES to any of these, contact your Lead once interview is complete.</p>		
If Congregate setting, List type and Point of Contact: _____ If unstably housed, give details: _____				
Phone number _____ / _____ <small>home (H), work (W), cell (C), message (M) home (H), work (W), cell (C), message (M)</small>				
E-mail _____ Preferred Communication (email, phone, snail mail)				
ALTERNATE CONTACT _____ <small>LAST, first, initials home (H), work (W), cell (C), message (M)</small>				
DEMOGRAPHICS				
DOB ____ / ____ / ____ if DOB unknown, AGE ____ Sex <input type="checkbox"/> Female <input type="checkbox"/> Male Preg <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK				
Language _____ Country of birth _____ <input type="checkbox"/> refugee				
Worksites/school/day care center _____ Occupation/grade _____				
RACE, ETHNICITY, LANGUAGE, AND DISABILITY (REALD)				
RACE AND ETHNICITY				
How do you identify your race, ethnicity, tribal affiliation, country of origin, or ancestry? Speci _____				
Which of the following best describes your racial or ethnic identity? Check all that apply.)				
Amer Indian/ Alaska Native <input type="checkbox"/> American Indian <input type="checkbox"/> Alaska Native <input type="checkbox"/> Canadian Inuit, Metis First Nation <input type="checkbox"/> Indigenous Mexican Central American South American	ASIAN <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino/a <input type="checkbox"/> Hmong <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Laotian <input type="checkbox"/> South Asian <input type="checkbox"/> Vietnamese	Native Hawaiian/ Pacific Islander <input type="checkbox"/> Guamanian <input type="checkbox"/> Chamorro <input type="checkbox"/> Micronesian/ Marshallese/Palaun (COFA) <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Tongan	Middle Eastern/ Northern African <input type="checkbox"/> Northern African <input type="checkbox"/> Middle Eastern	White <input type="checkbox"/> Eastern European <input type="checkbox"/> Slavic <input type="checkbox"/> Western European <input type="checkbox"/> Other White

2. Contact the case. Using the “Case Interview Script,” complete the “COVID-19 form” as thoroughly as possible

Case Interview Script

COVID-19 Case Interview Script & Protocol

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Phone number _____ / _____ <small>home (H), work (W), cell (C), message (M) home (H), work (W), cell (C), message (M)</small>				
E-mail _____ Preferred Communication (email, phone, snail mail)				
ALTERNATE CONTACT _____ <small>LAST, first, initials home (H), work (W), cell (C), message (M)</small>				
DEMOGRAPHICS				
DOB ____ / ____ / ____ if DOB unknown, AGE ____ Sex <input type="checkbox"/> Female <input type="checkbox"/> Male Preg <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK				
Language _____ Country of birth _____ <input type="checkbox"/> refugee				
Worksites/school/day care center _____ Occupation/grade _____				
RACE, ETHNICITY, LANGUAGE, AND DISABILITY (REALD)				
RACE AND ETHNICITY				
How do you identify your race, ethnicity, tribal affiliation, country of origin, or ancestry? Spec _____				
Which of the following best describes your racial or ethnic identity? Check all that apply.)				
Amer Indian/ Alaska Native <input type="checkbox"/> American Indian <input type="checkbox"/> Alaska Native <input type="checkbox"/> Canadian Inuit, Metis First Nation <input type="checkbox"/> Indigenous Mexican Central American South American	ASIAN <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino/a <input type="checkbox"/> Hmong <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Laotian <input type="checkbox"/> South Asian <input type="checkbox"/> Vietnamese	Native Hawaiian/ Pacific Islander <input type="checkbox"/> Guamanian <input type="checkbox"/> Chamorro <input type="checkbox"/> Micronesian/ Marshallese/Palaun (COFA) <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Tongan	Middle Eastern/ Northern African <input type="checkbox"/> Northern African <input type="checkbox"/> Middle Eastern	White <input type="checkbox"/> Eastern European <input type="checkbox"/> Slavic <input type="checkbox"/> Western European <input type="checkbox"/> Other White

3. Send the case a “Preventing COVID-19 for Cases” letter by mail, text , or email.

Dear [REDACTED],

You are receiving this letter because you were recently diagnosed with COVID-19, and we want to provide you with steps to help prevent the disease from spreading to people in your home and community.

Symptoms of COVID-19

The most common symptoms of COVID-19 are fever, cough, and shortness of breath. Sometimes people may have loss of taste or smell, diarrhea, sore throat, and muscle pain, and they may feel very tired. Most people with COVID-19 will have mild disease, but some people will get sicker and may need to be hospitalized.

Stay home except to get medical care

You should stay home except if you need medical care. Do not go to work, school, or public areas. To the extent possible, avoid using public transportation, ride-sharing, or taxis.

Separate yourself from other people and animals in your home

Stay in your own room and away from other people in your home as much as possible. Use a separate bathroom, if available. Increase airflow in shared spaces like the kitchen or bathroom by opening windows. If you need help, have just one person who is healthy provide care.

Available at:

<https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2295.pdf>

4. Call all contacts found through the case interview ASAP using the “Contact Interview Script”, ideally within 24 hours of interviewing the case. Contact tracers can typically manage 8-10 contacts.

CONTACT Interview Script

*If no answer, leave a generic **voicemail**:*

Hi, this is [interviewer name], I am helping [agency name] in their COVID-19 response. I am part of a team that is following up on people who may have been exposed to COVID-19 and it is important that I talk with you. Please call me back at [predetermined contact number]. I will be in the office [availability]. If I don't answer, please leave a voicemail and I'll get back to you as soon as possible.”

If voicemail is full or unavailable, please note this along with the day and time, then try again at different times. Please attempt to make contact 3 times.

Hi, this is [interviewer's name], I am helping [agency name]. May I speak with [respondent name]? (or “Am I speaking with [respondent name]?”)

IF THE CONTACT IS LESS THAN 18 YEARS OLD, ASK TO SPEAK TO THE PARENT OR GUARDIAN OF THE MINOR FIRST.

IF THE PERSON PREFERS A LANGUAGE OTHER THAN ENGLISH, PLEASE TELL THEM YOU WILL CALL THEM BACK WITH AN INTERPRETER. PROCEED WITH INTERVIEW ONCE YOU HAVE AN INTERPRETER ON THE LINE.

4a. Send each contact a “COVID Prevention for Contacts” letter by mail, text, or e-mail.

Dear {Enter name of contact}:

You are receiving this letter because you have been exposed to someone diagnosed with COVID-19. We want to help you and those around you stay safe and healthy. It is important that you know how to get medical help safely and, should you get COVID-19, how to avoid spreading it to others. This letter describes how to monitor yourself, how to keep yourself safe, and what you should do if you develop symptoms.

Starting today and until please:

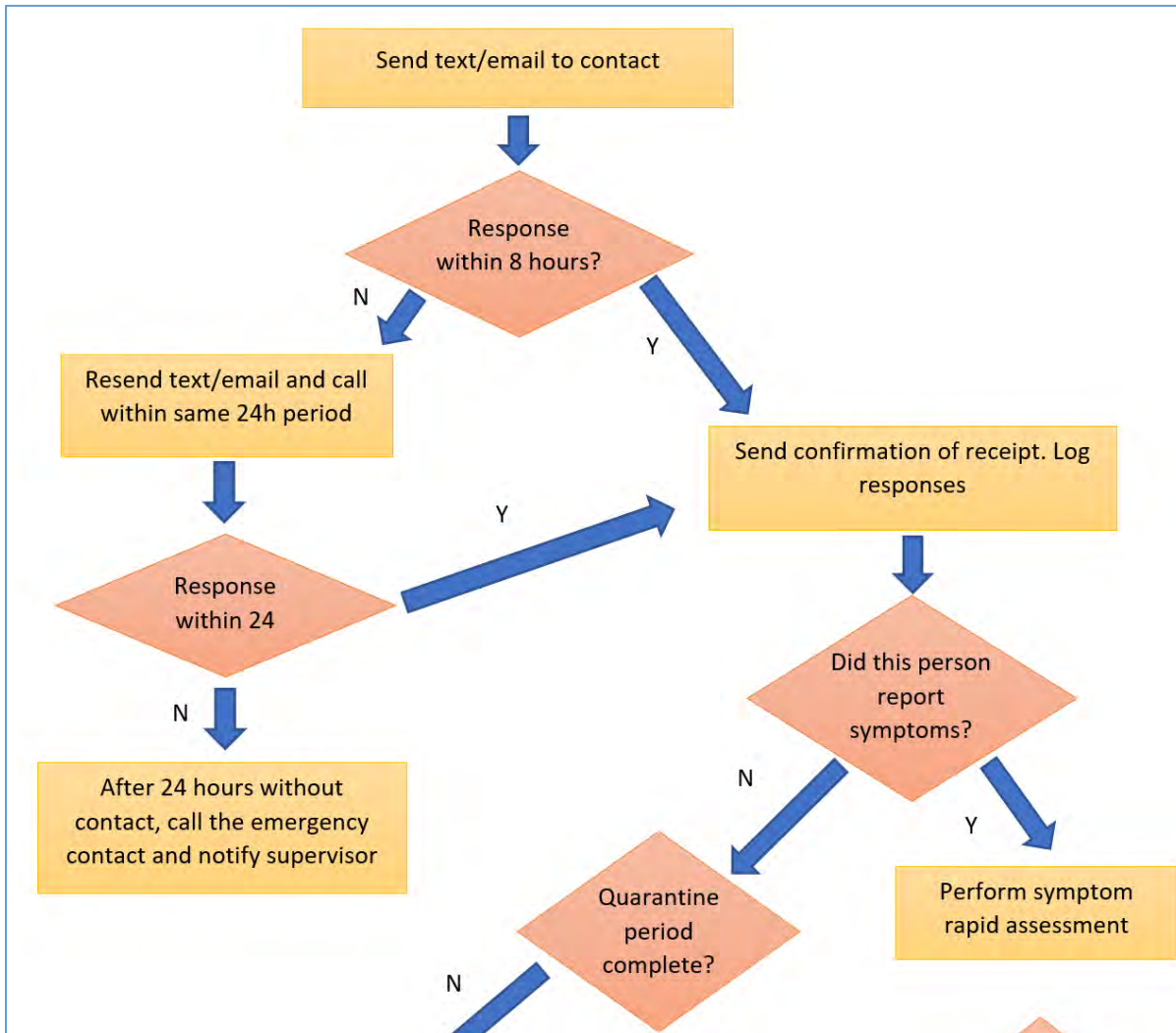
- Stay at home as much as you can. Practice physical distancing, including avoiding group settings and staying at least 6 feet from other people. You may exercise outside alone. If you are a healthcare worker, please consult with occupational health at your facility.
- Check your temperature each morning and evening and record the temperature using the chart at the end of this letter. Check your temperature with a digital thermometer the same way every day, at about the same time. Do not let anyone else use the thermometer during this period.
- Monitor yourself for cough, shortness of breath, difficulty breathing, or new loss of taste

Available at:

<https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2294.pdf>

5. Use the “Active Surveillance Script” to follow-up with contacts. Follow the chart on page 1 and script on page 2 based on the situation.

Active Surveillance Script, Page 1



Active Surveillance Script, Page 2

Email or text template:

Hello [contact name], this is [contact monitor name]. I am helping [agency name] with daily symptom checks.

Have you:

- 1) Developed a temperature of 100°F or greater? IF YES, please provide your highest temperature
- 2) Experienced any of the following symptoms: cough, shortness of breath or difficulty breathing, loss of smell or taste, sore throat, abdominal pain, headache, chills, runny nose, diarrhea, muscle aches, nausea, or vomiting? IF YES, please list which symptoms.

Thank you! If you have any problems or questions, please let me know or contact your local health department at [LPHA phone number]

Confirmation template:

I have received your response and I will review the information you provided. Thank you for helping prevent the spread of COVID-19.

If symptoms are reported:

Symptom rapid assessment

If the individual reports two of the following, send “presumptive” script (B) and immediately triage to LPHA/case investigator

- Cough
- shortness of breath
- fever (>100F)
- loss of smell or taste
- radiographic evidence of viral pneumonia*

(*requires clinical diagnosis; you will not encounter this)

6. If, during monitoring, a contact develops COVID symptoms or tests positive for COVID, repeat steps 1-5.

Either cough, trouble breathing, or

At least *two* of the following symptoms:

Fever

Headache

Chills

Sore throat

Muscle Pain

New loss of sense of taste or smell



**Please thoroughly review the forms you will use
(ID, OR, WA, or tribal forms)**

We're glad to take questions!

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Thank You