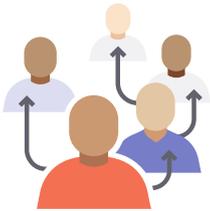


Tips to Improve COVID-19 Control Through Better Case and Contact Follow-Up

Containing COVID-19 requires a rapid, focused response at each step of the case investigation process: testing, isolation, contact tracing, and quarantine (learn more about the [“Box-It-In”](#) approach). What are some lessons learned about how to make this process more effective? We have compiled “top tips” from jurisdictions across the United States working to make case investigation and contact tracing programs more effective. Programs may find some or all of these tips helpful to increase participation in case investigation and contact tracing, particularly in areas with high rates of refusal or “unable-to-locate” Index Cases.



Outreach to Cases and Contacts

Making quick contact with COVID-19 Index Cases and Contacts is a critical part of an effective control strategy. Any delays in reaching Index Cases and Contacts for interviews will delay the time to isolation and quarantine and increase the risk of further disease transmission.

Use these tips to improve timeliness:

1. Implement creative approaches to reach Index Cases and Contacts:

- Send a text before placing a call to an Index Case or Contact explaining that they are about to receive an important call from the health department.
- Ask Index Cases to inform their Contacts that they will be receiving a call from the health department.
- Evening and weekend calls usually yield better results.
- Calling twice, in quick succession, gets more people to pick up the second time. Many people assume unfamiliar numbers are robocallers. Robocallers don't use this method.
- Consider mailing or hand-delivering a letter if you don't receive a response in a timely manner.
- Use social media to reach Index Cases and Contacts, including for ongoing monitoring. Many people without calling plans do have phones with Wi-Fi internet access. Some jurisdictions have found success in reaching a significant number of Contacts through Facebook Messenger.

- 2. Work with mobile carriers to ensure calls from case investigators or contact tracers do not appear as “unknown” or “restricted.”** Use the name of your contact tracing program or health department as the name on the caller ID to encourage individuals to answer calls from the health department.
- 3. Enable in-bound calling for Index Cases and Contacts that need a way to return a voicemail or text message from a contact tracer.** Ensure the person answering the phone is well-equipped to provide essential information.
- 4. Try to reach all new Index Cases at least once before a second attempt at Index Cases that didn’t respond.** Calling all Index Cases at least once may yield more responses than trying repeatedly to reach a single Index Case.
- 5. Assign one point-of-contact person (and provide their call-back number and email address) to each Index Case or Contact.** This provides a human touch and helps ensure continuity of care.
- 6. Develop a simple, easy-to-read explainer on contact tracing to distribute at testing sites.**



Workforce, Training, and Data Systems

Effective tools and trainings can increase efficiency. Consider these tips to improve overall workforce performance:

- 1. Contact tracers must be both empathetic listeners and capable health communicators.** Empower bilingual tracers with checklists and scripts in the most commonly spoken languages in your jurisdiction.
- 2. Integrate contact tracing with case investigation by having the same person conduct the interview and notify resulting Contacts.** Developing a sense of rapport can help to elicit information and accelerate the contact tracing process.
- 3. Recruit trusted community members, who can help build trust in the community.**
 - Train and employ representatives of trusted community organizations as case investigators and contact tracers. Make sure people who call are from the same demographic or community and speak the same language. Listen to community organizations about what issues are arising in their investigations and adjust protocols to address their needs.
 - Use community health workers either as case investigators/contact tracers or as liaisons between the health department and the Index Cases and their Contacts.
 - Within schools, consider employing school district employees (e.g., school nurses) as case investigators and contact tracers, as parents are more likely to pick up the call and be open and communicative.
 - Consider engaging health plan and provider networks to conduct investigation and tracing.

4. **Identify and design technology solutions to support efficient workflow for staff and supportive services for people with COVID-19 and their Contacts.**
5. **Track indicators through common dashboards and problem-solve collectively to improve the collection and frequent analysis of important metrics, such as:**
 - a. Time from symptom onset (or first positive test) to isolation;
 - b. Number of Contacts reached within 24 hours;
 - c. Proportion of cases that arise among quarantined Contacts.
6. **Develop internal trainings to address the linguistic, legal, digital, and generational barriers to providing support to vulnerable populations such as immigrants, the uninsured, or those who are housing insecure.**
7. **Evaluate training methods and performance metrics of contact tracers on a regular basis to identify areas for improvement.** Develop a model for training-related peer support and mentorship, for topics like enhanced investigation techniques or system troubleshooting.



Contact Gathering and Active Case Finding

Once an Index Case has been located for an interview, it's important to reach and test as many Contacts as possible for effective COVID-19 control. The following tips can help ensure that case investigation interviews result in complete Contact gathering and maximize the effectiveness of the investigation process.

1. **Use a checklist (as opposed to a script) to establish rapport and address the person's concerns.** One experienced interviewer said, "The case investigator should be answering more questions than asking." More natural conversation can yield much richer information, more easily. Ensure two-way communication by listening carefully to what Index Cases and Contacts want to talk about, as this could result in more responsive reactions to adopting prevention measures.
2. **In addition to gathering Contacts during the Index Case's infectious period ("forward" tracing), elicit information about the potential source of infection during the 14 days before onset (sometimes called "backward" tracing).** Backward tracing may be able to identify and stop larger chains of transmission that would otherwise be missed by only conducting forward tracing.
3. **Ask Index Cases to look at their social media, text history, and credit card bills to jog their memories about who they were in contact with during their potential exposure and infectious periods.**
4. **Use digital solutions to facilitate improved, opt-in information sharing.**
5. **Encourage and facilitate testing of all Contacts.** Develop a process for contact tracers/case investigators to make active referrals for testing or, if possible, directly schedule an appointment for testing for a Contact at the time of the exposure notification.

6. During backlogs, investigate the most recent Index Cases first (also called a “modified last-in-first-out approach”) and prioritize highest-risk cases (e.g., in congregate settings, clusters around a gathering, outbreaks in school setting, etc.)



Support Isolation and Quarantine So Cases and Contacts Complete It Successfully

Treat isolated patients and quarantined Contacts as VIPs. Directly support or partner with community-based organizations to support daily needs and family responsibilities so these are not barriers to effective isolation and quarantine. Consider including these services, which are being provided by other jurisdictions and communities:

- Referral to financial support programs, such as information on unemployment, stipends for wage replacement, emergency relief funds (for rent, utilities, etc.).
- COVID-19 care package: masks, thermometer, hand sanitizer, baby wipes, and diapers.
- Coordination of support with household tasks, including grocery shopping, laundry and pharmacy trips. If the Index Case/Contact can't afford these services, connect them to a neighborhood Mutual Aid group or volunteer to facilitate delivery of donations from a food pantry or local organization.
- Facilitation of health care appointments (including telehealth), including transportation, information on finding a primary care physician, and obtaining health insurance.
- Counseling and other social and emotional care, including domestic violence, and mental health support.
- Facilitation of COVID-19 testing for Contacts.
- Free access to unlimited entertainment services for the isolation/quarantine period such as on-demand movies and learning channels, e-books, etc.
- Free access to a cell phone and Wi-Fi for those who do not have it.
- Daily home visits for those experiencing social isolation.
- Provision of temporary housing for those who can't isolate/quarantine safely with household members.
- Possible rent- and mortgage-relief policies for those impacted by COVID-19.
- Resources for appropriate medical evaluation of any Index Cases or Contacts who become symptomatic.
- Regular follow-up with Contacts to watch for symptoms and identify emerging needs.
- Provision of companion animal services, such as free dog walking and temporary re-homing of pets .



Public Communication

Use public communication to help educate communities about the case investigation and contact tracing process, reinforce trust in public health departments, and encourage a sense of ownership and personal responsibility in the process. Consider the following tips:

- 1. Establish a media and community engagement campaign ([see one example here](#)) that does the following:**
 - a. Includes and advertises branded caller ID designation.
 - b. Engages local community leaders, public officials, and influencers who can identify important communication channels as well as act as trusted messengers to amplify clear and empowering messages.
 - c. Uses all available communication channels including television, radio, and social media, along with official websites, to regularly reinforce messages.
 - d. Develops and shares messages that dispel local misinformation and direct the public to reliable sources.
 - e. Uses cultural sensitivity and language diversity when developing messages and outreach materials.
 - f. Tailors messages to reach specific audiences, including disproportionately affected populations within the community.
 - g. Makes clear how data will and will not be used (e.g., the identity of Index Cases will never be shared with Contacts; personal information will not be shared with employers, police, immigration officials, and landlords, etc.).
- 2. Consider partnering with community-based organizations to develop and execute media campaigns to ensure their networks are being reached and the content is responsive to the specific fears and barriers the community faces.**
- 3. Consider revising the titles of contact tracers and case investigators. Suggestions include: “Patient Support Specialist,” “COVID-19 Prevention Specialist” or “Care Resource Coordinator.”**
- 4. Ensure two-way communication. Listen carefully to inform future communications efforts.**

The Resolve to Save Lives’ US COVID-19 Response Team works closely with US public health departments to respond to the challenges of COVID-19. To learn more about our work, please visit <https://preventepidemics.org/covid19/us-response/>.