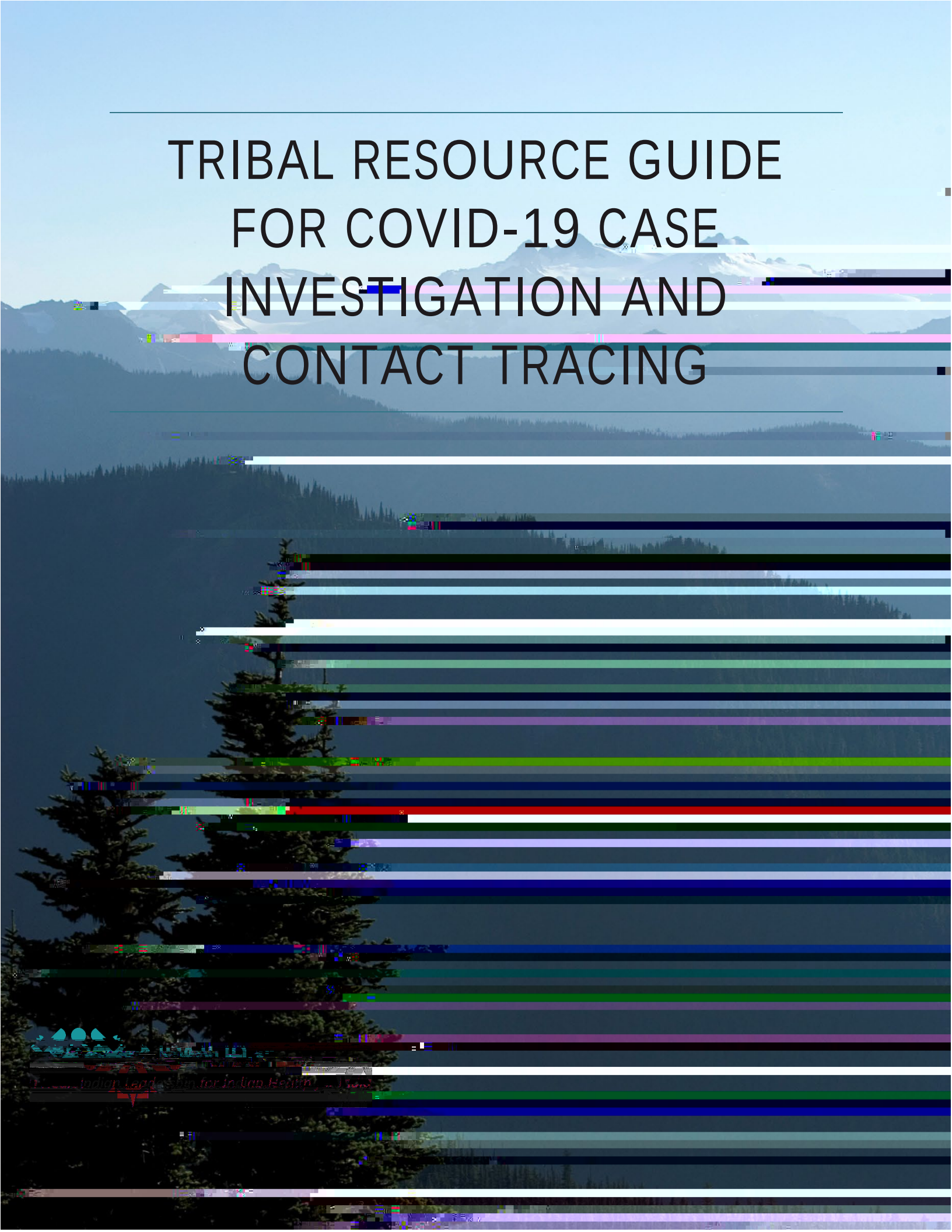
TRIBAL RESOURCE GUIDE FOR COVID-19 CASE INVESTIGATION AND CONTACT TRACING



ACKNOWLEDGMENTS

This guide was created by the Northwest Tribal Epidemiology Center's COVID-19 Response Team and draws from the collective wisdom of our partners and Northwest Portland Area Indian Health Board's member tribes.

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Overview

The Northwest Portland Area Indian Health Board (NPAIHB), Northwest Tribal EpiCenter (NWTEC) has put together and compiled this Resource Guide to assist the tribes in the fight against the COVID-19 Pandemic. Our hope is that this will be a helpful resource for the tribal communities.

Understanding COVID-19

On February 11, 2020 the World Health Organization announced an official name for the disease that is causing the 2019 novel coronavirus outbreak, first identified in Wuhan China. The new name of this disease is coronavirus disease 2019, abbreviated as COVIf. T.6 (C)-3.5 (h]TJETpppppppp270.6 (ab)2)-0ID

Case Investigation & Contact Tracing (CI-CT) in Tribal Communities: Key Considerations[2]

Contact tracing and case investigation refers to the process of identifying people who have been

- Broad community engagement is needed to foster an understanding and acceptance of local case investigation and contact tracing efforts within each community.
- Significant social support may be necessary to allow clients with probable and confirmed COVID-19 diagnoses to safely self-isolate and close contacts to safely self-quarantine.
- Due to the magnitude of the pandemic, jurisdictions will likely need to build up their workforce, recruit from new applicant pools, and train individuals from varied backgrounds.
- The use of digital contact tracing tools may help with certain case investigation and contact tracing activities but will not replace the need for a large public health workforce.

1. Establish Workforce

The chart below shows a simple example of how the essential roles of a Case Investigation-Contact

The table below gives some examples of the kinds of existing staff that might be suited to each role, and details of the job duties. Within each tribe, the specifics may differ and this is intended only as a starting point in developing your workforce and duties.

Roles and Responsibilities of Key Tribal Health Staff to Support COVID-19 Case Investigation & Contact Tracing

Role	Description	Classifications-Workforce Performing these Activities
Surveillance Triage and Support		

Role	Description	Classifications-Workforce Performing these Activities
Contact Tracer	Communicates with contacts to notify them of exposure, provides disease and transmission information, gathers data on demographics,	

Role	Description	Classifications-Workforce Performing these Activities
	mentoring. Recognizes staff for exceptional and outstanding performance.	
Care Resource Manager		

Hiring Options

Tribal Community

Hiring Case Investigators and Contact Tracers from within your tribal community can be a good strategy as local Contact Tracers are familiar with tribal services, culture and geography, and may face less challenge with establishing rapport. This will lead to better adherence to the isolation/quarantine guidelines.

If Case Investigators and Contact Tracers already have social or family relationships with the contacts and cases they are working with, privacy concerns may need to be addressed. Another consideration when hiring local Case Investigators and Contact Tracers is boundary setting; small tribal communities are close-knit and it may be difficult for Case Investigators and Contact Tracers to "turn off" when they are not on duty, potentially leading to burn out.

Sample Job Descriptions

- Sample Tribal Contact Tracer job description
- Case Investigator COVID-19 Response Job Description
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2. Develop CI-CT Protocols and Processes

Workflow

Case Reporting

The process begins with the identification of a confirmed or probable case. If staffing is limited, tribes may opt to prioritize confirmed cases. Possible sources of case identification:

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Case Interview and Contact Elicitation

The Case Investigator will complete the initial interview to elicit all close contacts who were exposed to the case during their infectious period. Tribes should develop scripts and forms or data collection tools for Case Investigators to record this information (see forms and data management sections), and determine what methods of contact to use, and maximum number of contact attempts. In some communities, in-person outreach may be necessary.

The Case Investigator will provide instructions to self-isolate, the expected timeline and criteria for release, and offer support services. A daily symptom check-in will be set up. Ideally, the same Case Investigator will contact the case each day to monitor symptoms, answer questions, and provide any support services that are needed.

Case Investigators will immediately report to the CI-CT Lead any cases who were at mass gatherings or congregate settings while infectious (e.g., shelter, school, health care facility, or workplace). Notification

and investigation for these situations will be directed by the Incident Command (see CDC guidance on outbreak and congregate setting investigation).

Contact Tracing

All contacts identified in the case interview will then be assigned to Contact Tracers. Contact Tracers should attempt to reach the contacts within 24 hours. At a minimum, Contact Tracers must receive the name of the contact, at least one potential way to reach them (may be via employer, friend, or family member), and the date of last exposure to the case.

Contact Tracers will notify contacts of their exposure, provide quarantine and testing instructions, information about expected quarantine timeframe and criteria for release, and offer support services. Tribes should determine protocol for handling contacts that live outside the tribal jurisdiction, and exactly what that jurisdiction is. If it is to depend on tribal enrollment or AI/AN race, be sure to include that question in your intake script.

Discontinuing Isolation or Quarantine

The criteria for discontinuing isolation and quarantine continue to change as we learn more about the disease. For the latest criteria, visit CDC.gov. Currently, the criteria are:

For a person with mild to moderate illness who is not severely immunocompromised:

- At least 10 days have passed since symptoms first appeared and
- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved

If the person was asymptomatic throughout their infection, they may discontinue isolation when at least 10 days have passed since the date of their first positive viral diagnostic test.

For a person who has a severe to critical illness or is severely immunocompromised, CDC recommends extending the isolation to up to 20 days from symptom onset, together with the other criteria, and to consider consultation with infection control experts.

Close contacts must quarantine for 14 days from last exposure to the virus,
for COVID-19 or feel healthy. The incubation period for the virus is 2 to 14 days, so symptoms may appear at any time between 2 to 14 days after exposure to the virus.

Note that a negative test is not recommended as criterion for discontinuing isolation because recent findings have demonstrated that people may continue to shed virus fragments for several weeks or months after they are no longer infectious. These viral fragments are not capable of making copies of themselves, and therefore cannot cause COVID-19 in another person, but they will sometimes result in a positive test. For this reason, the CDC recommends the above symptom-based strategy for determining when to end isolation, rather than a test-based strategy which may unnecessarily keep people in isolation. More information can be found here.

Tribes may want to have Contact Tracers alert Clinical Support staff when they believe one of their cases or contacts has met the criteria for discontinuation, and have the Clinical Support staff sign off. If staffing resources are limited, tribes may opt to give Contact Tracers authority to discontinue asymptomatic cases/contacts

3. Coordinate Support Services

To maximize adherence to isolation and quarantine orders, it is important that community members are offered the support they need to stay home and stay healthy. Tribes should prepare a community resource guide which can be used by Case Investigators and Contact Tracers. The process to request services, as well as eligibility criteria and delivery limits should be included.

A Tribal Community Resource Guide should include the following:

- Tribal COVID-19 phone numbers
- Clinic number
- Pharmacy number
- Ambulance service number
- Community/Public Health Nursing Department phone number
- Community Testing outreach phone number
- Mental Health Provider services phone number
- Emergency Mental Health phone numbers
- Financial resources such as tribal emergency assistance funds, utilities relief, etc.
- Resource phone numbers for:
    - Food assistance/resources
    - Shelter/housing resources
    - Cleaning assistance and/or supplies
    - Medical supplies and PPE such as thermometers, gloves, masks
    - Laundry assistance for those who normally use a laundromat
    - Community outreach/welfare check

are also a critical part of the support needed to ensure cases and contacts follow isolation/quarantine orders. Those who will not be reporting to work or school need to provide documentation of their order to stay home to their schools or employers as quickly as possible. Ideally these letters should be sent from the clinic or CI-CT team to avoid cases and contacts leaving home to pick them up.

Case Investigators and Contact Tracers may send the letters themselves, or communicate requests for letters to the CI-CT Lead or Clinical Support staff. Case Investigators and Contact Tracers need to know when the letter has been sent to communicate this back to the case/contact. There should be a similar process to srd (s)-3.I-7sr1.2 ([p)-sr1.2 ([p)-7nenl257 T) (o)-4.12.6 (n)5 (T)-5.he)0.7 (C)-2.5 (Ie)-5.7 (-0.004 Tw [s-7sr1.2 ([p

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Sample Isolation Work/School Release Letter
Sample Quarantine Work/School Release Letter
Sample Isolation Discontinuation Notice for Work/School
Sample Quarantine Discontinuation Notice for Work/School

5. Develop Scripts & Forms

Tribes should develop community-specific case investigation and contact tracing scripts and forms their CI-CT team. Sample scripts and forms are found here:

Sample close contact notification of exposure and intake interview script
Sample case investigation script (from Washington DOH)
Case investigation form – fillable PDF
Close contact intake form - fillable PDF
Close contact 14-day symptom tracking log – fillable Word document

7. Train Case Investigators-Contact Tracers

Some of your CI-CT training will be specific to your tribal policies and the protocol established by your team. Case Investigators and Contact Tracers from outside the tribal community should also receive some background on the history and culture of the tribal community, and cultural considerations for communication.

For general contact tracing training, there are several free high-quality courses and other training resources tribes can use to train new Case Investigators and Contact Tracers.

General Training Courses

- Johns Hopkins University COVID-19 Contact Tracing Via Coursera
- ASTHO - Making Contact: A Training for COVID-19 Contact Tracers
- Northwest Center for Public Health Practice - Every Contact Counts
- Learn about other CDC-funded trainings

Tribal Contact Tracing Training Resources

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8. Develop Contact Tracing

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9. Establish Tribal Resolutions and Policies

Tribal codes, resolutions and policies to support CI-CT efforts are essential, and as public health authorities and sovereign nations, tribes are able to act swiftly to put these into place. These steps are critical to establishing jurisdictional relationships between tribes and state and local governments in contact tracing efforts. They also set the stage for providing clear guidance to community members. Without strong tribal policies and resolutions to support isolation and quarantine orders such as paid leave policies, job protection, and access to resources, community members will be less likely to follow isolation and quarantine orders. Enforcement of isolation and quarantine orders may take a number of forms, and each tribe will have to determine the degree to which isolation and quarantine is mandated by tribal law or voluntary.

Resources for developing Tribal Policies and Codes

- American Indian Health Commission offers a wide range of sample plans, policies, codes and resolutions specific to tribal communicable disease emergency response, as well as webinars about developing and implementing them.
- USET: Tribal Administrative Leave Provisions for those ordered to quarantine/Isolate:
- Department of Labor: Family First Coronavirus Response Act Paid Leave
- CDC criteria for employees to return to work, per 'adapted' CDC guidelines. CDC recommends a symptom-based strategy for determining when 'person' can return to work.
- National Conference of State Legislatures: Defining essential workers
- CDC Outbreak Investigation Guidance
- Challenge Seattle: Role of Employers in Effective Contact Tracing
- NPAIHB COVID-19 Policy and Legislative Resources
- National Indian Health Board: Reopening During COVID-19: Considerations for Tribal Nations
- OSHA Guidance on Preparing Workplaces for COVID-19

Other Contact Tracing and COVID-19 Response Resources

- Northwest Portland Area Indian Health Board (NPAIHB)
  - https://npaihb.org
  - https://www.indiancountryecho.org/
- National Indian Health Board (NIHB)
  - https://www.nihb.org/
- American Indian Health Commission (AIHC)
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