More Than Contact Tracing: A Strategy to Contain and Prevent the Spread of COVID-19 in the District of Columbia

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CORE DISEASE INVESTIGATION AND SURVEILLANCE

DISEASE IN POPULATION → SURVEILLANCE
Observation of symptoms | Testing | Prevalence surveys

TEST RESULTS TO DC HEALTH → CASE IDENTIFICATION

CASE INTERVIEWED → CASE INVESTIGATION
Determine symptom onset | Assess clinical acuity and home environment | Make appropriate referrals | Set up symptom monitoring | Enumerate contacts | Clear from isolation

CONTACTS NOTIFIED → CONTACT TRACING
Assess symptoms | Assess home for safe quarantine | Make appropriate referrals | Set up monitoring | Clear from quarantine

DATA COLLECTION → ANALYSIS AND MODELING
Describe trends and disparities | Predict outcomes
CORE MEASURES TO STOP THE SPREAD

- Testing
- 'Tracing'
- Isolation and Quarantine
- Public Trust
- Technology
- Policy
Mass Testing

Neighborhood Testing

Provider Testing

3,613 TESTS PER 1 MILLION POP (7 DAY AVG)
### ‘TRACING’ – KEY ROLES IN SCALABLE WORKFORCE

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<th>DC Health</th>
<th>Contact Trace Force</th>
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<td>Epidemiological investigations</td>
<td>Cultural and linguistic competency</td>
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<td>Complex cases and vulnerable populations</td>
<td>Large-scale virtual contact tracing</td>
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**DC Health**
- Epidemiological investigations
- Complex cases and vulnerable populations
- Expert guidance to sectors
- Ongoing training of contact tracers

**Contact Trace Force**
- Cultural and linguistic competency
- Large-scale virtual contact tracing
- Resource coordination
- Targeted field outreach
Case interviewer collects information about people, businesses, and places the patient has been in contact with.

Based on patient’s needs, case interviewer will connect patient with other resources.

Case interviewer documents information about contacts.

Contact interviewer begins calling close contacts and, if necessary, directs them to testing.

Contact interviewer reaches out, if necessary, to affected businesses and public places.

Contact interviewer and case interviewer continue to follow up with and monitor patient and contacts.
KEY TO SUCCESS: LEVERAGING TECHNOLOGY

- Partnership with Accenture for Salesforce Solution
- Partnership with Google/Apple for Exposure Notification
KEY TO SUCCESS: BUILDING PUBLIC TRUST

- Hiring from Community
- Credible Messengers
- FQHC Partnership
- Public Information
KEY TO SUCCESS: FOLLOW-UP AND SUPPORT FOR I/Q

HOME VISIT PILOT

GOALS
- Decrease loss to follow-up
- Assess needs for safe isolation, social supports and clinical care and link to services
- Ensure accurate and complete data collection
HOME VISIT PILOT - ELIGIBILITY CRITERIA

- Missing and incorrect phone numbers
- Reached by phone (at least once) by the virtual team, but investigators were unable to complete outreach or PHM interviews
- Has complex needs better met by in-person engagement
HOME VISIT PILOT – PRELIMINARY FINDINGS

VISIT ATTEMPT
Outcome of Visit Attempt
- Reached: 59%
- Not Reached: 41%

VISIT OUTCOME
Outcome of Visit
- Not Reached: 13%
- Reached: 88%

INTERVIEW
Interview Status After Visit
- Complete: 60%
- Incomplete: 40%
THANK YOU!

For more information on the District’s COVID-19 response, visit coronavirus.dc.gov

For more information about DC Health, visit dchealth.dc.gov

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