

COVID-19 Webinar Series: Contact Tracing—How it's done, and how you can help

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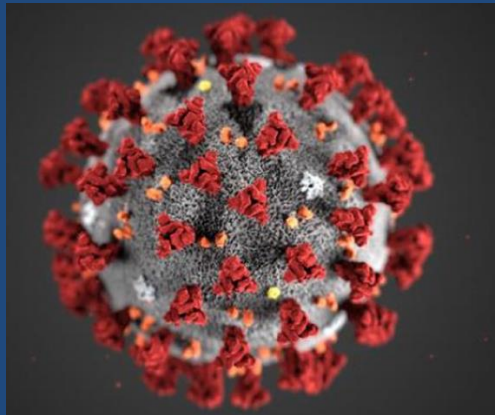


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- **CAPT Sara Luckhaupt, MD, MPH, Medical Epidemiologist, NIOSH**
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Construction and COVID-19 Updates



G. Scott Earnest, Ph.D., P.E.

National Institute for Occupational Safety and Health

Centers for Disease Control and Prevention

U.S. Department of Health and Human Services

16 July 2020



Two hair stylists with **COVID-19**
spent at least 15 minutes with 139 clients

EVERYONE WORE FACE COVERINGS  **NO CLIENTS ARE KNOWN TO BE INFECTED***



WEAR CLOTH FACE COVERINGS CONSISTENTLY AND CORRECTLY TO SLOW THE SPREAD OF COVID-19

*No clients reported symptoms; all 67 customers tested had negative tests

CDC.GOV

bit.ly/MMWR71420

MMWR

Considerations for Wearing Cloth Face Coverings

Help Slow the Spread of COVID-19



- CDC recommends that people wear cloth face coverings in public settings and when around people who don't live in your household, especially when other [social distancing](#) measures are difficult to maintain.
- Cloth face coverings may help prevent people who have COVID-19 from spreading the virus to others.
- Cloth face coverings are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings.
- Cloth face coverings should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

Evidence for Effectiveness of Cloth Face Coverings

Who Should Wear A Cloth Face Covering?

Who Should Not Wear a Cloth Face Covering

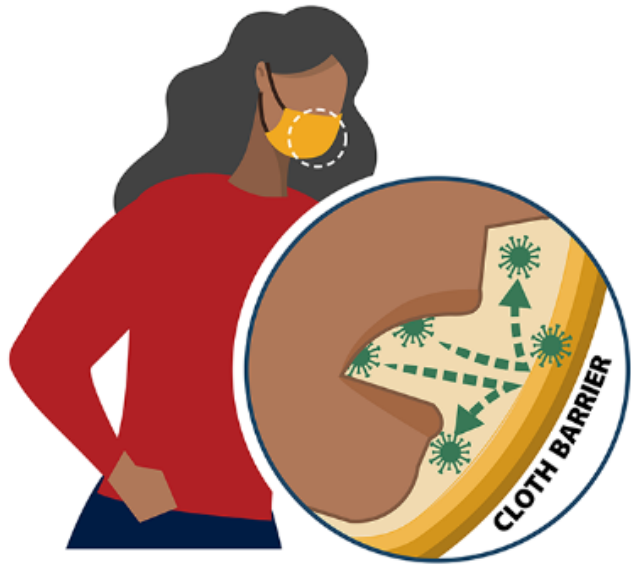
Feasibility and Adaptations

Face Shields

Surgical Masks

Recent Studies

Evidence for Effectiveness of Cloth Face Coverings



Cloth face coverings are recommended as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the cloth face covering coughs, sneezes, talks, or raises their voice. This is called source control. This recommendation is based on what we know about the role respiratory droplets play in the spread of the virus that causes COVID-19, paired with [emerging evidence](#) from clinical and laboratory studies that shows cloth face coverings reduce the spray of droplets when worn over the nose and mouth. COVID-19 spreads mainly among people who are in close

contact with one another (within about 6 feet), so the use of cloth face coverings is particularly important in settings where people are close to each other or where social distancing is difficult to maintain.



Who Should Wear A Cloth Face Covering?

General public

- CDC recommends all people 2 years of age and older wear a cloth face covering in public settings and when around people who don't live in your household, especially when other [social distancing](#) measures are difficult to maintain.
- COVID-19 can be spread by people who do not have symptoms and do not know that they are infected. That's why it's important for everyone to wear cloth face coverings in public settings and practice [social distancing](#) (staying at least 6 feet away from other people).
- While cloth face coverings are strongly encouraged to reduce the spread of COVID-19, CDC recognizes there are specific instances when wearing a cloth face covering may not be feasible. In these instances, [adaptations and alternatives](#) should be considered whenever possible (see below for examples).



Wear a Face Covering to Protect Others

- Wear a face covering that covers your nose and mouth to help protect others in case you're infected with COVID-19 but don't have symptoms
- Wear a face covering in public settings when around people who don't live in your household, especially when it may be difficult for you to stay six feet apart
- Wear a face covering correctly for maximum protection
- **Don't** put the face covering around your neck or up on your forehead
- **Don't** touch the face covering, and, if you do, wash your hands or use hand sanitizer to disinfect





Take Off Your Cloth Face Covering Carefully, When You're Home

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place covering in the washing machine (learn more about [how to wash cloth face coverings](#))
- Be careful not to touch your eyes, nose, and mouth when removing and wash hands immediately after removing.

Recent Studies:



- Schwartz KL, Murti M, Finkelstein M, et al. Lack of COVID-19 transmission on an international flight. *CMAJ*. 2020;192(15):E410. [PMID: 32392504](#)
- Anfinrud P, Stadnytskyi V, Bax CE, Bax A. Visualizing Speech-Generated Oral Fluid Droplets with Laser Light Scattering. *N Engl J Med*. 2020 Apr 15. doi:10.1056/NEJMc2007800. [PMID: 32294341](#)
- Davies A, Thompson KA, Giri K, Kafatos G, Walker J, Bennett A. Testing the efficacy of homemade masks: would they protect in an influenza pandemic? *Disaster Med Public Health Prep*. 2013;7(4):413-8. [PMID: 24229526](#)
- Konda A, Prakash A, Moss GA, Schmoldt M, Grant GD, Guha S. Aerosol Filtration Efficiency of Common Fabrics Used in Respiratory Cloth Masks. *ACS Nano*. 2020 Apr 24. [PMID: 32329337](#)
- Aydin O, Emon B, Saif MTA. Performance of fabrics for home-made masks against spread of respiratory infection through droplets: a quantitative mechanistic study. medRxiv preprint doi: <https://doi.org/10.1101/2020.04.19.20071779>, posted April 24, 2020.
- Ma QX, Shan H, Zhang HL, Li GM, Yang RM, Chen JM. Potential utilities of mask-wearing and instant hand hygiene for fighting SARS-CoV-2. *J Med Virol*. 2020. [PMID: 32232986](#)
- Leung, N.H.L., Chu, D.K.W., Shiu, E.Y.C. *et al.* Respiratory virus shedding in exhaled breath and efficacy of face masks. *Nat Med*. 2020. [PMID: 32371934](#)

Adjunctive PPE—Face Shields

Roberge RJ (2016) at <https://dx.doi.org/10.1080/15459624.2015.1095302>

- Research on face shields in preventing transmission of infectious respiratory diseases is limited but promising
- Lindsley et al (2014) reported 96% and 92% reductions in risk of inhalational exposure after a cough for a face shield distance of 18 inches and 72 inches.
 - <https://www.doi.org/10.1080/15459624.2013.877591>
- Due to lack good facial seal peripherally that can allow for aerosol penetration, face shields should not be used as solitary face/eye protection, but rather as adjunctive to other PPE.



For More Information



- CPWR COVID-19 Clearinghouse <http://covid.elcosh.org/>
- CDC COVID-19 Construction: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/construction-workers.html>
- CDC Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 website: www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html
- CDC Prepare your Small Business and Workers for the Effects of COVID-19 website: www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html
- NIOSH Directory of Construction Resources <https://www.cdc.gov/niosh/construction/default.html>
- OSHA COVID-19 Construction: <https://www.osha.gov/SLTC/covid-19/construction.html>
- CDCINFO: 1-800-CDC-INFO (1-800-232-4636) | TTY: 1-888-232-6348 | website: www.cdc.gov/info

COVID-19 Webinar Series:

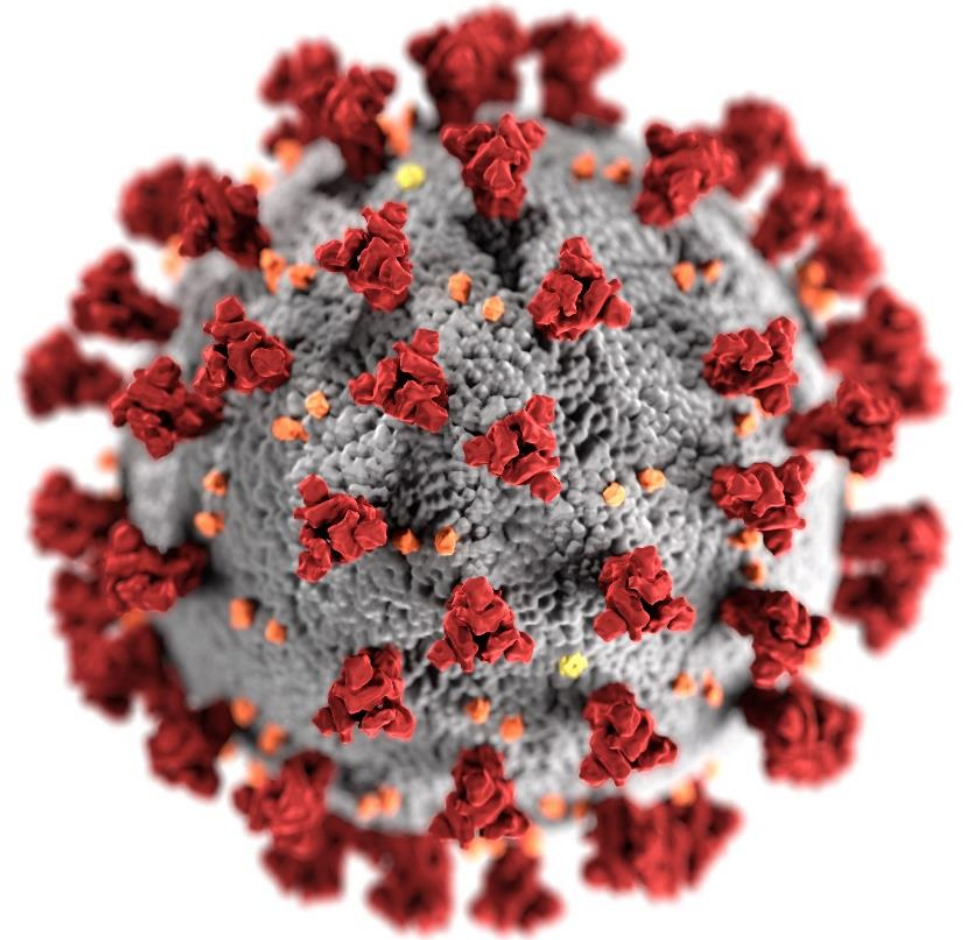
Contact Tracing—How it's done, and how you can help

NIOSH Speakers:

CAPT Sara Luckhaupt, MD, MPH

LCDR Corey Butler, MS, REHS

Webinar hosted by CPWR-The Center for Construction Research & Training, July 16, 2020



cdc.gov/coronavirus

Background

- Core disease control measures employed by local and state health department personnel for decades (e.g., TB, STD)
 - **Case investigation:** working with a patient who has been diagnosed with an infectious disease
 - Public health staff work with a patient to help them recall everyone with whom they have had close contact during the timeframe while they may have been infectious
 - **Contact tracing:** providing support to people (contacts) who may have been infected through close contact with the patient



Overview

- **Case investigation** and **contact tracing** are essential interventions in a successful, multipronged response to COVID-19
- All confirmed (symptomatic and asymptomatic) and probable COVID-19 patients should receive follow-up to prevent further spread of the virus in the community
- Prompt identification and isolation of patients and quarantine of contacts can effectively break the chain of disease transmission



Authority & Resources

- Authority and responsibility for these interventions are vested in state, tribal, local, and territorial health departments
- Multisector partnerships are essential to scale up comprehensive case investigation and contact tracing for COVID-19
- [CDC's Health Department Contact Tracing Resources](#)



Prioritization

- Case and contact follow-up must happen quickly to be successful
- Particular consideration should be given to
 - Potential for disease complications among patients with underlying health conditions
 - Potential to expose others at higher risk for severe disease
 - Potential for spread (exposure of numerous people)
 - Potential to interrupt critical infrastructure



Technology Assets

- Digital Tools can enhance program functionality in a number of areas
 - Surveillance systems and case management
 - Contact tracing data management
 - Active monitoring—daily temperature and symptom checks—of patients (during isolation) & contacts (during quarantine)
 - Inter-jurisdictional collaboration
 - Essential with cross jurisdictional outbreaks, flight exposures, travel of critical infrastructure workers, etc.
 - Exposure notification using proximity apps
- [Digital Contact Tracing Tools for COVID-19](#)—this fact sheet describes different digital contact tracing tools for COVID-19 by primary purpose and primary user



Referral to Isolation

- **Health Care Providers**
 - Refer to home isolation ASAP with symptom-based diagnosis or positive viral test
- **Businesses and Workplaces**
 - Refer to home isolation ASAP when identified as symptomatic during a workplace health screening (e.g., temperature check & symptom screen upon entry/exit) or after a positive viral test through a workplace testing program



Case Investigation & Contact Tracing in the Workplace

- Health departments can typically perform with existing staff
 - Surge staff rarely needed
- COVID-19 response may be delayed due to
 - Large volume of patients
 - Quick and easy transmission
- Employers can prepare and help limit the spread in the workplace



Health Department Collaboration with Employer

- When a case is identified that impacts a work environment, the health department may:
 - Not engage with the employer
 - Ask for employer's help in understanding the work environment and identifying exposures and contacts in the work setting
 - Rely on the employer to carry out the case investigation and contact tracing of employees in the work environment



Preparing for Case Investigation and Contact Tracing

- Before a case, employers can
 - Identify a COVID Coordinator or a COVID Team to oversee COVID-19 activities
 - Identify, and if possible, contact or visit the health department website
 - Create a [COVID-19 preparedness, response, and control plan](#)
 - Review CDC's [case investigation](#) and [contact tracing](#) guidance to prepare to interact with public health
 - Encourage employees to work with the health department



Preparing for Case Investigation and Contact Tracing

- **After a case, employers can**
 - Prepare and quickly provide information and records about
 - The workplace
 - Potential workplace contacts
 - Workplace operations without revealing confidential personnel records or confidential business information
 - Respond by supporting employees, and then follow up quickly by doing workplace hazard evaluation and prevention activities



Workplace Infection Control and Response (WICAR) Tool

Interim Customizable Non-Healthcare Workplace Infection Control Assessment and Response (WICAR) tool — Coronavirus disease 2019 (COVID-19)

This tool is intended to assist health departments, employers, and occupational safety and health professionals with assessment of infection prevention and control programs and practices in non-healthcare workplaces in order to make recommendations regarding COVID-19. Information to complete an assessment can be gathered through review of written policies and procedures, discussion with workplace management and worker representatives, and direct observation if a site evaluation is planned. This tool is not intended to assess regulatory compliance. If feasible, direct observation of infection prevention and control practices is encouraged. This tool should be used by qualified public health or health and safety professionals familiar with the topics and content of the tool (assisted as needed by CDC/NIOSH project officer(s) and state or local public health entities).

This tool can serve as a template for assessing a workplace; elements and response options can be removed or added depending on the local situation, assessment goals, and workplace characteristics.

Overview

- Section 1: Facility and workforce characteristics**
- Section 2: Facility policies and procedures**
- Section 3: Infection prevention and control policies and practices**
- Section 4: Guidelines and other resources**
- Section 5: Direct observation of facility practices**



Roles and Responsibilities - Workplace Contact Tracing

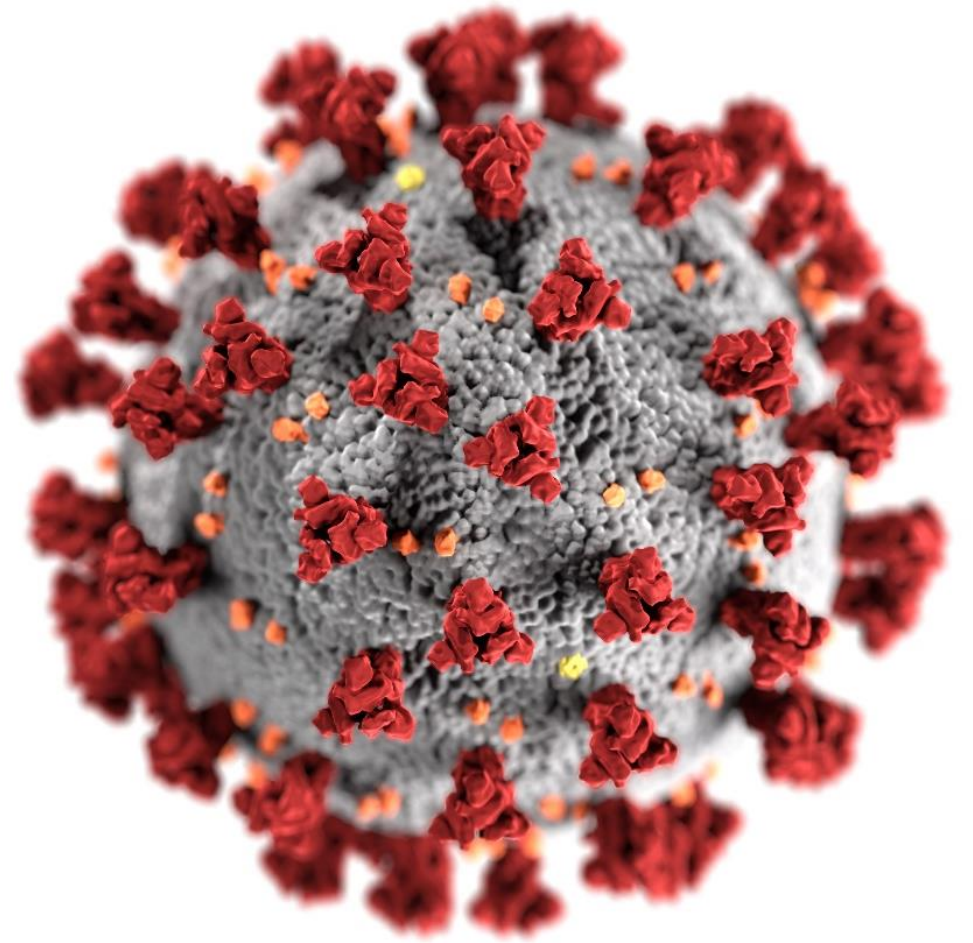
- Collaboration is essential to interrupting the spread of COVID-19 in the workplace
 - Roles and responsibilities should be discussed between health departments and employers
 - All activities conducted must be in accordance with applicable public health authorities, and workplace and medical privacy and confidentiality laws



Thank you for the opportunity for discussion!

- Health Department Contact Tracing: Get and Keep America Open: Supporting states, tribes, localities, and territories
www.cdc.gov/coronavirus/2019-ncov/php/open-america/contact-tracing-resources.html
- Businesses and Workplaces: Plan, Prepare, Respond
www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html





For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.





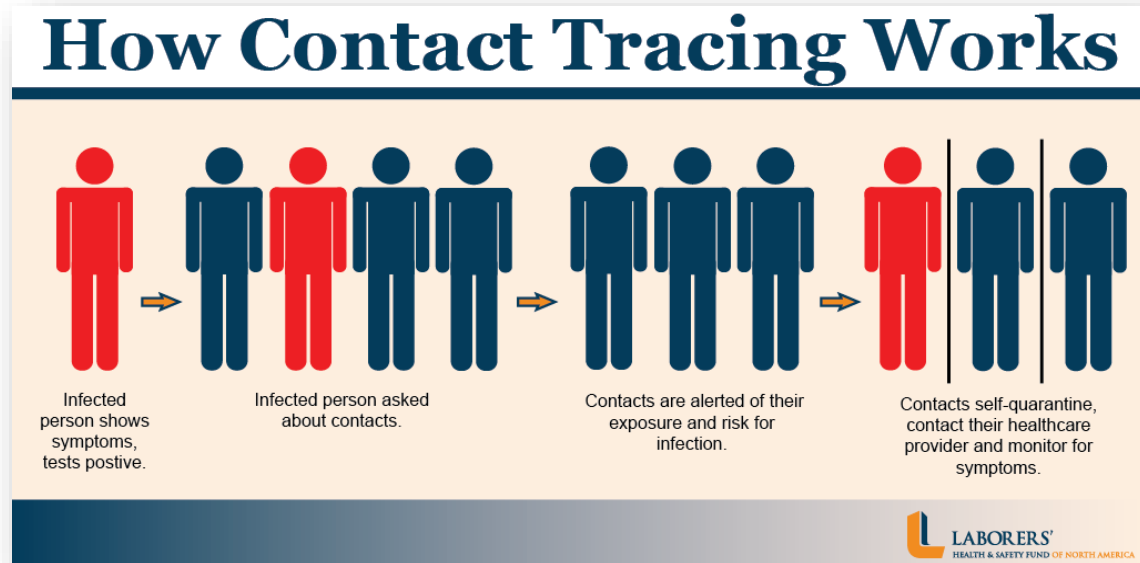
Contact Tracing for COVID-19 In Construction

Travis Parsons
Associate Director,
Occupational Safety & Health

Contact Tracing In Construction



- Process used to **identify, educate, and monitor** people who have had close contact with an infected person
- Increased risk for infection and spreading the virus to others
- Helps exposed individuals understand their risk and limit further spread





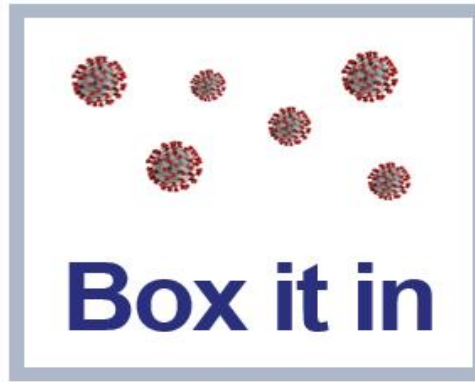
TEST

Widely



ISOLATE

All infected people



Box it in

To get us all working again



FIND

Everyone who has been in contact with infected people



QUARANTINE

All contacts quarantine for 14 days



Goals of Contact Tracing

- Interrupt ongoing transmission
- Reduce the spread
- Alert contacts to the possibility of infection
- Offer preventive counseling or prophylactic care
- Offer diagnosis, counseling, and treatment to already infected individuals
- Learn about the epidemiology of a disease in a particular population



Time is of the essence



- Identifying contacts and ensuring they do not interact with others is critical to protect from further spread.
- Case investigators and contact tracers need to:
 - Immediately identify and interview people with SARS CoV-2 infections and COVID-19 (i.e., disease)
 - Support isolation of those who are infected
 - Warn contacts of their exposure, assess their symptoms and risk, and provide instructions for next steps
 - Link those with symptoms to testing and care

Benefits

- Educates infected people about what steps to take to avoid further spread
- Helps exposed contacts separate themselves from others to stop the spread
- Links infected and exposed people with community resources during quarantine or self-isolation



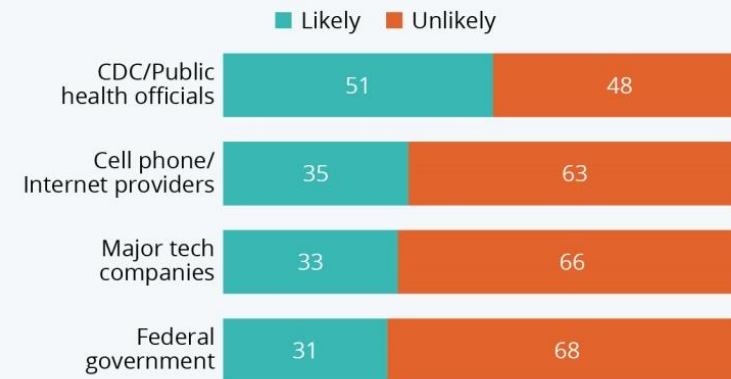
Limitations

- Doesn't stop all asymptomatic spread
- Must be done quickly to be effective – **Cannot hesitate**
- Potential privacy and confidentiality issues
- Relies on buy-in and cooperation



Americans Refuse Contact Tracing

Percentage of U.S. adults who are likely/unlikely to use a cell phone-based COVID-19 contact tracing system



Survey of 980 U.S. adults conducted May 8-11, 2020
Sources: Ipsos, Axios



statista

How Employers Can Assist

- Maintain attendance records, including employees' scheduled shifts
- Keep track of EVERYONE who enters the jobsite
- Take the extra steps of keeping track of workers within specific areas, groups of workers who work together on a specific task or workers who are in close contact



What About Workers?

- The intention isn't to interrogate or pass judgment – it's to collect information to keep everyone safe
- All data collected during this process must be kept confidential
- Only used to track COVID-19 cases and monitor risk in the workplace



Example from Massachusetts Department of Health



How answering the call stops the spread



We're All In This TOGETHER!



- Leave it up to the professionals
- Keep it as simple as possible (KISS)
- Questions???
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