

A Virtual Contact Tracing Guide for COVID-19 and Beyond



**Elizabeth Glaser
Pediatric AIDS Foundation**
Fighting for an AIDS-free generation

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Background

The Ministry of Public Health (MOH) in Cameroon has been at the forefront of the national COVID-19 response, with the support of key stakeholders. The Catalyzing COVID-19 Action (CCA) project, a FIND and Unitaid-funded initiative, has supported the MOH's mission to curb the COVID-19 pandemic. The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) received the award for the CCA project in 2021. The CCA project has shown strong leadership and partnership with the MOH in the fight against COVID-19 in Cameroon by integrating COVID-19 interventions with existing essential platforms and implementing innovative contact tracing strategies.

The CCA project has demonstrated a comprehensive and innovative approach to address the COVID-19 pandemic. The CCA project integrated COVID-19 interventions with HIV, TB, and maternal and child services to improve public health response. It also introduced new medication for the treatment of severe cases to reduce mortality, created demand and community engagement for COVID-19 screening and testing, and traced contacts of COVID-19 cases in person.

A notable innovation of the CCA project was the successful implementation of site-level virtual contact tracing in 2023. Facing challenges conducting in-person tracing and testing of contacts of confirmed COVID-19 cases, the EGPAF Cameroon CCA team collaborated with Nkomo Medical Centre, a public hospital, and a health district team to use a line list, which is a list of potential contacts of COVID-19 positive index cases, and appointed a focal point to be in charge of implementing the virtual contact tracing approach. The focal point was a healthcare worker designated by the health facility to manage COVID-19-related tasks, and their responsibilities included screening eligible individuals, conducting COVID-19 tests, maintaining a contact list for COVID-19 cases, coordinating with the health district to reach out to contacts for screening and testing, and providing follow-up care for COVID-19-positive patients, either over the phone or through home-based care. The focal points' engagement and dedication to this approach contributed immensely to the success of virtual contact tracing. Mrs. Yara, the focal point of Nkomo Medical Centre, says,

“It is critical to create a climate of trust with the patient and focus on their wellbeing. Patients appreciate it when you make time for them. This trust encourages patients to share correct details about their contacts for virtual follow-up and bring them to the health facility for testing.”

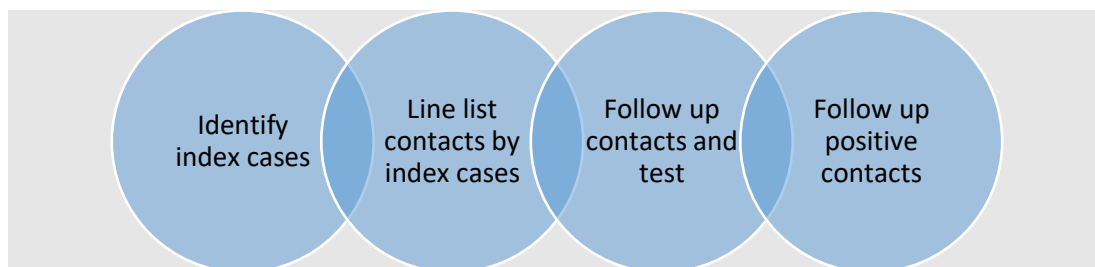
This innovative approach to virtual contact tracing was piloted at Nkomo Medical Centre and expanded to other CCA project sites in the West, Littoral and Centre regions. EGPAF developed a virtual contact tracing standard operating procedure (SOP) and conducted training sessions for focal points. The SOP encompassed guidelines on tracking and following up on contacts of confirmed positive COVID-19 clients and was disseminated across the various healthcare facilities supported by the project in the Littoral, West, and Centre regions of Cameroon. The EGPAF Cameroon team also ensured the effective execution of the virtual contact tracing by advocating for health facility administration to oversee the activity and support the focal point when needed; holding monthly site coordination meetings to discuss challenges and solutions; conducting follow-up phone discussions with the focal point to monitor progress and resolve issues; and making regular site visits to check focal points' compliance with the standard operating procedures and activities. EGPAF's strategic collaboration with key stakeholders and innovative approach to identify clients served as a model for enhancing COVID-19 response efforts in healthcare facilities and communities across the CCA project regions.

Key Steps of the Virtual Contact Tracing Procedure

This document outlines the essential steps for virtual contact tracing of COVID-19 cases, using technology to simplify and speed up the process of finding and following up with possible contacts in a digital setting.

1. The health facility staff identifies the index case.
2. With the index case's consent, the focal point collects and records the contact list for each index case using the designated line list form. The index case may request not to be referenced in contact dialogue.
3. The focal point shares the contact list with health district officials.
4. In the meantime, the focal point at the health facility initiates phone calls to line listed contacts.
5. If the contact does not answer the phone during the first call, the focal point calls the contact three to four times within two weeks after the first call. If the contact still does not answer, the focal point declares them unreachable.
6. During the phone call, the focal point introduces themselves, identifies the health facility, and explains the purpose of the call. Unless authorized, the focal point does not disclose the index's name. The focal point only informs the contact of COVID-19 exposure and the need for testing.
7. The focal point classifies contacts into high- or low-risk groups based on their association with the index case. On the first call, the focal point invites all high-risk, symptomatic, and non-symptomatic patients to be tested in the health facility or schedules them for a home visit with a community health worker for COVID-19 services (including screening, education, awareness, and/or sensitization of COVID-19).
8. Once the contact has been made, the focal point conducts virtual follow-up via phone calls with contacts classified as low-risk, or as high-risk who tested negative on days 3, 7, and 14.
 - o The focal point checks for signs, symptoms, and risk factors in all high-risk contacts who previously tested negative for COVID-19.
 - o The focal point asks the contact about COVID-19 signs and symptoms and documents them on the contact follow-up register.
 - o The focal point asks if there are any new signs or symptoms since the last phone call and notes how long they have persisted.
 - o If the contact experiences any symptoms during a follow-up call, the focal point invites them to a health facility for clinical evaluation and testing.
 - o Before ending the call, the focal point thanks the patient and arranges a time for the next follow-up.
9. The focal point records the date of contact and indicates whether the person was reached.
10. A community health worker assists when there are many contacts around the index case, particularly in the home or direct neighborhoods.

Figure 1: Components of the Virtual Contact Tracing Cascade



Achievements

Virtual contact tracing is a key strategy to increase identification of COVID-19 positive clients. Table 1 below shows the virtual contact tracing cascade from April to August 2023. The table shows contact tracing cascade across all regions. The listed contacts took a COVID-19 test at a high rate of 62%. The contacts who interacted with COVID-19 positive clients also tested positive at a high rate of 13%. These results demonstrate the effectiveness and importance of virtual contact tracing. Even though COVID-19 is no longer a public health emergency, we should not neglect this strategy and we should continue to strengthen community interventions to limit the spread of disease.

Table 1: Contact Tracing Cascade

| Contact Tracing Cascade | | | | | | |
|-------------------------|------------|----------|-----------|-----------|-------------|-------|
| | April 2023 | May 2023 | June 2023 | July 2023 | August 2023 | Total |
| Index cases | 18 | 11 | 6 | 22 | 57 | 114 |
| Line-listed contacts | 48 | 66 | 32 | 109 | 174 | 429 |
| Contacts tested | 34 | 55 | 19 | 62 | 97 | 268 |
| Positive cases | 2 | 9 | 1 | 1 | 9 | 35 |

Conclusion

As the COVID-19 pandemic continues to pose a global threat, virtual contact tracing is a vital strategy to contain the virus and prevent further transmission. Virtual contact tracing has many advantages over in-person contact tracing. It can reach more people faster and more efficiently, which can slow down the spread of COVID-19 and stop outbreaks. It can protect contact tracers from exposure by avoiding physical contact and travel. It can offer convenience and comfort to contacts, who can get notified and informed from their home. And it can scale and adapt to the changing needs of COVID-19 or any other pandemic. Virtual contact tracing is not only a smart and safe way to fight COVID-19, but also a potential game-changer for future public health emergencies.

For More Information Please Contact:

Thebisa Chaava, Technical Advisor
tchaava@pedaids.org

Simo Leonie, CCA Program Lead
lsimo@pedaids.org

Hanna Tesfasyone, Senior Program Officer
htesfasyone@pedaids.org

Elizabeth Glaser Pediatric AIDS Foundation

www.pedaids.org     @EGPAF
