



Community Contact Tracers

SCCT Pilot Overview

Background

WHO guidelines for the COVID-19 outbreak recommend that cases are identified, advised to isolate, and that contacts are traced, advised to quarantine and then followed up to identify new cases. Contact tracing is not currently part of UK Guidelines but there is a groundswell of opinion that it should be, particularly in areas with high populations, poverty and where communication may pose a challenge, as the lockdown is eased or during subsequent waves. Both cases and contacts are in need of support to isolate effectively and to access stretched health care.

Local Authority and NHS staff have the appropriate contact tracing skills but are relatively few in number. IT solutions may take months to mature. The workload will vary with time and region. Volunteers could be recruited and trained to undertake contact tracing on a scale to make a significant difference. Volunteers could support patients and their contacts to remain effectively isolated. Cases can be identified from symptoms where laboratory tests are not available.

We propose a “proof of principle” pilot scheme to assess the efficacy and feasibility of a community based volunteer contact tracing programme using minimal resources, remote contact, mixed referral sources and using symptoms to identify untested index cases.

Aims

To assess the efficacy and feasibility of:

- recruitment, training and retention of community volunteers;
- telephone based interview of index cases to identify contacts;
- telephone based interview of close contacts to advise on effective self-isolation;
- follow up of quarantined contacts to insure further new cases are identified and their contacts traced;
- support for cases or contacts if symptoms progress;
- support contacting NHS 111 and other helping agencies if required;
- maintaining volunteers’ and users’ confidence, confidentiality and satisfaction.



Community Contact Tracers

Outcome measures

Will include the numbers of: volunteers recruited, cases enrolled, contacts isolated, new index cases identified, new index cases isolated, volunteer time expended, case/contact/volunteer satisfaction.

Method

Referrals will be sought from GP practices and community groups within a limited urban area. Volunteers will be recruited and trained to protocol. Volunteers will contact index patients to explain contact tracing, record symptoms of cough, fever and loss of taste/smell, take verbal consent and request contact details of close contacts.

Volunteers will phone each contact with an introduction, symptom check, advice to strictly self isolate, advice should symptoms develop. Cases and contacts will be offered a daily call for assessment, support and advice. If the contact develops symptoms, volunteers will enrol her/him as a second wave index case. Data will be collected using forms which will be entered on a central database. Volunteers will be supported and supervised by retired doctors including public health specialists and GPs.

Data collection, analysis and reporting

Data will be collected by volunteers using forms which will be entered to a database centrally. Patient, contact and volunteer satisfaction will be assessed by questionnaire. Data will be collated and a report written to inform the feasibility and efficacy of this pilot.

Future plans

Outcomes will be shared with others wishing to replicate or develop this methodology. If contact tracing is adopted more widely it could be taken over by NHS or local authorities, referrals taken from 111 and links made with electronic contact tracing apps.

Group email

Website <https://www.communitycontacttracers.com/>



Community Contact Tracers

Founders of Sheffield Community Contact Tracers

Andy Jackson Trust Manager, Heeley Trust

Dr Bing Jones former Associate Specialist in Haematology

Dr Jack Czauderna former GP

Dr Jeremy Wight former Director of Public Health

Dr Joan Miller former Consultant in Public Health

Dr Mike Tomson former GP and Mediciens sans Frontieres volunteer

Dr Paul Redgrave former Director of Public Health