



National Urban Search & Rescue Response System

Contract Tracing Process

Introduction and Scope

Contact tracing is a critical disease control measure used to identify, notify, and inform individuals potentially exposed to a contagious disease in order to protect them and prevent further spread. During these unprecedented times of international impacts from COVID-19, contact tracing and other basic public health measures have assumed exceedingly important positions in addressing impacts from the virus.

The National Urban Search and Rescue (US&R) Response System (the System) has established two goals for operations during times of COVID-19 outbreaks:

- Protect the workforce
- Continuity of mission

Throughout the past year, the System has had several instances in which individuals have tested positive for COVID-19 after exposing other System members. The ensuing contact tracing has often been ad hoc, based on the availability of a Subject Matter Expert (SME) at the time rather than a more consistent process.

This contact tracing tool has been developed for the System and is meant to be utilized for either System resource or Incident Support Team (IST) personnel. For an IST this is the official process, however System resources may utilize their own contact tracing methodology if one is established. In either case however, Attachment L, the *US&R Form 18-020 Contact Tracking Form*, should be utilized to report to the IST and the US&R Branch on the adequacy of the contact tracing effort. There is no personally identifiable information included on this form.

Roles and responsibilities

The System resource leader is responsible for ensuring an adequate contact tracing effort is executed and reported.¹ These activities typically rely on Safety and Medical SMEs within the respective organizations to accomplish the contact tracing. Though a public health activity, contact tracing does not need to be accomplished by a medical provider, however, adequate training is required to understand concepts such as period of infectivity and the tools utilized in the process.

- System Resources
 - Typically, a task force Medical Team Manager or Medical Specialist will coordinate with a Safety Officer to ensure completion of contact tracing when a deployed System member receives a notification of a positive test from a close contact, received a positive test result themselves, or becomes symptomatic.
 - In the case of a System resource such as an MRP, assistance may be requested from the IST.

¹ For the Task force, this can be either TFL while in field or program leader while at home base.



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- Different task force personnel at the home duty station may be responsible for contact tracing (i.e., positive test that occurs immediately after demobilization).
- The task force will make recommendations regarding risk mitigation of the individuals exposed, utilizing Attachment F, *COVID-19 Exposures Decision Algorithm*).
- While in the field, the US&R Branch, working through the IST, may offer additional insight to System resource as to how their actions can impact the broader System.
- Incident Support Teams
 - The Medical Officer will coordinate with the Safety Officer to ensure completion of contact tracing when a deployed IST member receives a notification of a positive test from a close contact, received a positive test result themselves, or becomes symptomatic.
 - If the test is received after demobilization, or follow on actions are required after demobilization, the System may activate a separate IST resource (e.g., Medical Specialist, Medical Officer) to continue contact tracing efforts.
 - The IST Leader (or designee), with SME assistance, will issue risk mitigation guidance regarding IST individuals exposed in the field utilizing Attachment F, *COVID-19 Exposures Decision Algorithm*.
- Individual System Members
 - Every System member is responsible for:
 - Not reporting for deployment when they don't meet the medical prescreening requirements.
 - Promptly reporting any notification identifying them as a close contact.
 - Promptly reporting any onset of symptoms.
 - Answering contact tracing questions honestly and comprehensively.
 - Following their organization's risk mitigation guidance.

The Process

Several over-riding principles apply:

- A close contact to an infected individual is defined by the Centers for Disease Control and Prevention (CDC) as someone who was within six feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from two days before illness onset (or, for asymptomatic patients, two days prior to test specimen collection) until the time the patient is isolated.²
- A close contact should be notified of their exposure, ideally as rapidly as possible and within 24 hours of identification.

² <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact>



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- Individuals shall be interviewed (either index patient or potential close contacts) verbally.
- Guidance for individuals deemed “close contacts” should be available, actionable, and supported.
- Medical and general logistical support may be required for System members attempting to follow guidance provided.
- Both the index patient and potential contacts answers to questions can be considered part of their “public health” record. As such, this information should be stored as any other medical information for the individual.

The following steps should be followed:

- Address individual index case needs:
 - Ensure index case has had proper medical evaluation and care once learning of test result.
 - Ensure index case is appropriately isolated whether at home base or in the field).
 - Ensure on-going logistical and medical support.
- Interview index patient to establish potential close contacts
 - Use Attachment J to conduct interview and identify potential close contacts.
 - Establish a potential time of infectivity that precedes symptom onset by 48 hours.
 - Include non-System personnel in questions regarding potential exposures.
- Assessments for Potential Contacts
 - Utilize additional response documentation (e.g. ICS 205) or other deployed personnel to obtain contact information for potential close contacts.
- Potential Contact notified and interviewed
 - Use *US&R Form 18-019 Close Contact Interview Form* to conduct interview of potential close contacts.
- Provision of guidance (testing)
 - Provide guidance/recommendations to individuals established as contacts of the index case.
- Ongoing monitoring and adherence to post-mission medical direction.

Reporting requirements

- Reporting
 - File US&R Form 18-020 with IST, Sponsoring Agency, and US&R Branch. *Note: during some contact tracing efforts, there may be several updates to this form submitted for one case.*