Today Hava Phillips, a registered nurse and supervisor of the county’s communicable disease program, took questions from local reporters about Humboldt County’s COVID-19 contact tracing program.

This is a Machine translation of the video — meaning it might be a little rough! — is posted below.

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**Good afternoon. We’re here with Hava Phillips, Public Health Clinic and Communicable Disease Program Supervisor for the August 13th media availability. Thank you for being here with us.**

**Would you like to start by sharing any issues of interest with the community?**

I’d love to be able to just say thank you to everybody who has you know participated in making contact tracing work in Humboldt county and that definitely includes my team and a number of teams here at Public Health - our contact tracers our investigators our interpreters including the ones who are just now coming on - all of our staff here at Public Health. And also really includes our community people who have you know chosen to give up activities that are really important to them in order to protect their friends and their family and the communities around them. People who’ve spent hours and hours on the phone with us helping us figure out who we need to be contacting to let them know they’ve been exposed.

I just there’s been just a huge amount of work on this from a whole lot of different angles, and it’s meant a lot, and I really appreciate it.

**The Times-Standard asks, “How long does it take to train contact tracers and what does that training look like?”**

One kind of important thing to think about when you’re looking at contact tracing is that it really is a team effort.

We have contact tracers who are the people who are reaching out making phone calls collecting information and bringing it back to the team, and we have our data management crew who is responsible for taking all of that information and making sure that it gets recorded where our team can use it to investigate, where locally we can use it to get data out to the community and where at a state level we can get that information reported to the state for them to use in their statistics.

And then another part of that group is the investigator who oversees the entire overarching investigation and makes decisions about isolation and quarantine, and decisions about whether or not an exposure is significant and requires investigation of facilities.

A lot of different decision making processes go into that and so for the contact tracers specifically that training includes about 20 hours of online training that the State of California has put together for that purpose.

And following that folks come in and they observe our experienced contact tracers on calls for a while, and then that kind of switches and the experienced contact tracers will observe them on calls for a while, and then once they’re able to make those calls on themselves by themselves they go onto an experienced team to make sure that they have the support that they need.

And then at that point they’re ready to go on their own.

And the amount of time that that takes really depends on how many hours the contact tracer has available per week, because a lot of our contact tracers are people who have other jobs that they’re doing in addition to this or who have you know volunteered their time with the County, and so it’s not necessarily the case that everyone’s got 40 hours a week to put into this.

So the time it takes can be variable, but it’s typically around two or three weeks.

**The Times-Standard asks, “Have some people chosen not to work with contact tracers after testing positive or being exposed to a confirmed case?”**

You know, most people are really conscientious. Most people in this community really genuinely just want to be able to protect their friends and their family and their community and will go to pretty incredible lengths to make sure that we have the information that we need to be able to contact all of those people.

There are occasionally folks who are um you know afraid to share information with us for a variety of reasons, or have some concerns about working with Public Health for whatever reason.

It is typically the case that even the people who are very reluctant in the beginning when it comes down to it will make sure that we get the information that we need it to be able to reach out to the people who need to know that they were exposed.

**The Times Standard asked, “What is the process for determining if a case was community transmission? i.e x number of contact were contacted and didn’t have it so when we’re looking at a transmission for cases.”**

We categorize them as either travel acquired, or community transmission, or contacts to a known case, or under investigation, and so essentially community transmission is when we have fully investigated the case we have all the answers that we’re going to get and there is no evidence that this person traveled during their exposure period and also no evidence that they were a contact to one of the cases that we already know about.

In that situation then they are considered community transmission, essentially just meaning that they picked it up somewhere in Humboldt County and we’re not completely sure where.

**The Lost Coast Outpost asks, “What determines whether a person has had close contact with someone who has been infected? Under what circumstances is that closed contact asked to quarantine?”**

So there is a technical definition for close contact, and there is also a degree of clinical skill and critical thinking that goes into that decision.

So nationally and at the state level, the definition of a close contact is someone who has been within 15 feet - I’m sorry I’m gonna back that up, I get these numbers reversed all the time - somebody who has been within six feet of an infectious individual for 15 minutes or longer, but of course there are exceptions to that.

If the person has only been within six feet for two minutes but the person who was infectious was coughing the entire time and nobody was wearing a mask we would make an exception and we would say you’re a close contact. So we look at every single situation on a case-by-case basis but in general a person is quarantined if they are within six feet for 15 minutes or longer.

**The Lost Coast Outpost asks, “What is the thing or lack of a thing that most hampers contact tracing in Humboldt County?”**

It’s a harder question, and I’m going to say I’m going to say testing in Humboldt County. We’re tremendously lucky because our local lab here at Public Health is a really really high quality lab and able to run a lot more tests rapidly for us as part of contact tracing than a lot of counties even larger counties have access to, and so that has made us able to test everybody that we needed to test for a contact investigation even when testing was pretty tight.

But at the same time in order to to investigate a case you have to know that it exists, and so having really well-supported testing in the community at large where everybody who wants to get tested can be tested and can get those results back in a short enough time period that we can notify their contacts while it still makes a difference - having that available is critical to being able to do really good contact tracing.

And so as I’m sure everybody has noticed there are times when you know no matter how hard everybody is working there just aren’t enough materials to do that kind of testing and so when that happens, it makes more - it’s a lot more challenging to get our contact tracing done when the lab testing is not able to keep up.

**KMUD News asked, “Are cases determined to be infectious via community transmission also correlated to any other factors such as indoor or outdoor location, visible proximity to a known case, type of face covering used, or frequency of hand washing?”**

Yeah it’s … you know with over with somewhere in the neighborhood of 300 cases at this point. there have certainly been a couple that have been genuinely perplexing to us in terms of where they got it from, but in almost every situation you can go back and find that point where exposure is likely a situation where you know people were in a car together. or you know in in close quarters without their masks on, or at a group gathering, and so there is absolutely a correlation between positive cases and the, you know, prevention measures that that we’re all trying to have in place.

**KMUD News asked, “Thank you for the dashboard of information for our listeners who do not have access to that website can you please describe the trends and demographics of COVID cases in Humboldt thus far?”**

We’re definitely seeing an increase in cases in Humboldt County. It’s a strong upward trend and I don’t think that we expect to see that change in the near future. We’re seeing cases in individuals across age groups and across races and ethnicities, but currently are the majority of our cases are in young adults - young to middle aged adults - and our cases are I think the most cases are people who identify as white in Humboldt County and then as a subset secondarily people who identify as Latino.

**The Redheaded Blackbelt asks, “We understand that something like five percent of state workers from other agencies have been assigned to be trained as contact tracers. How is the integration of teams working? Could you describe how the workflow happened?”**

The integration of teams has been amazing. We do in fact have contact tracers from a wide variety of backgrounds at this point from different county programs as well as our volunteers, and we have found that having that huge variety of different experiences has been really valuable to our team in general and to our ability to reach out to different communities. So I would say that the integration has gone very well, and we’ve had a lot of people who are just genuinely dedicated and willing to put in a lot of time and effort to make sure that we get the work done that we need to.

In terms of what that integration looks like, the the team setting that I described earlier is a pretty good visual.

We typically have an investigator, a couple of contact tracers and somebody who does data management participating in any given investigation and people will put in you know their time and their expertise wherever that is so folks who have more experience with interviewing are more likely to be doing contact tracing and it’s been a pretty good system thus far.

**The North Coast Journal asks, “What are the biggest challenges to conducting effective contact investigations locally and how have those changed through the duration of the pandemic?”**

Well, I mentioned earlier that the lab testing has been a challenge through the duration of the pandemic.

In the very beginning, any sample had to be sent out to the CDC, and following that there was a time when we weren’t able to get all the supplies that we needed.

There have been times when we had absolutely everything we needed and we were able to push a huge number of tests through a local lab very quickly, and there have been just peaks and valleys in there and that that definitely is one challenge that impacts investigations. And then you know from a different angle investigations are a huge challenge to the community. People are being asked to make sacrifices that are not insignificant - to stay away from funerals, to avoid being close to family who are vulnerable, to you know maybe not be in school full-time.

There’s a lot that’s challenging about preventing the spread of disease that is challenging to the community that it impacts and so I would say that that’s absolutely one of the primary challenges.

**The North Coast Journal asks, “What is the average number of contacts found per new COVID-19 case and what is the highest number of contacts from a single case found to date?”**

The average number for locally anyways it really depends a lot on the individual and what their activities were. And I should throw out there that just because an individual had high risk activities that some people don’t have a choice. There are some people whose jobs are in public service and positions that kind of put them in harm’s way, and so it’s not a judgment - they’re just people who are naturally higher risk than others, and so in terms of the number of contacts it really depends on what their activity was.

If we have individuals who are able to stay home, work from home um you know essentially their only activity is grocery shopping and the only people they’ve seen in the last two weeks are the people they live with the number of contacts there is very very limited.

Sometimes it’s only one person and the community exposure is essentially non-existent a lot of times, and in other cases where we have people who have you know either have been or have had to be out in the community in more public settings we can see a double digit number of contacts per person, and I think an important thing to keep in mind is that we’re not just looking at a single case and the contacts of that case.

We then have to look at the contacts of those contacts as those people come back positive.

And so you can start with a single person who has you know 15-20 contacts if five of those people come back positive and each of them has ten contacts of their own and two of each of those comes back positive you can end up with hundreds and hundreds of cases that you’re monitoring related to a single positive result.