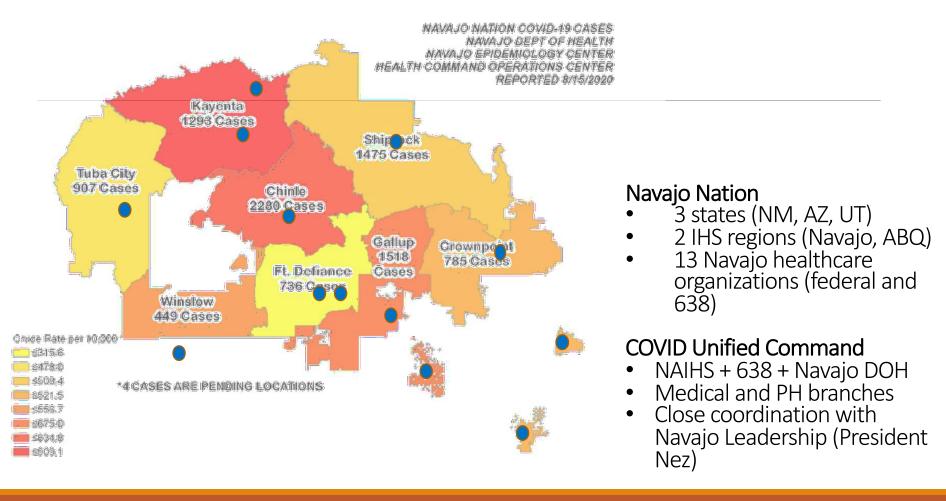
COVID-19 Contact Tracing in Navajo Nation

JILL MOSES, MD MPH SONYA SHIN, MD MPH

PORTLAND AREA ECHO

AUGUST 26, 2020

Map 1. Navajo Nation Cases by Service Unit or Tribal Organization



Navajo Nation Contact Tracing Response

- Rapid epi responses at SU/638's
- Staff reassigned to COVID
- Different data systems
- Limited home support
- Recruited key partners, e.g.
 JHU, COPE / Partners In
 Health

Response

(March – April)

Coordinated Efforts

(May – June)

- Unified CT data system
- Standard Operating Procedures
- Volunteer assistance for CT
- FEMA & NGO's assist with home support

- Aim for suppression
- Gating Criteria & Standardized Metrics
- Community of Practice best practices
- Workforce planning and sustainability

Unified Strategies
July - August

Core elements of Navajo Nation COVID-19 Public Health Response

Navajo Nation Health Command - Public Health Emergency Orders

Public Health Ops

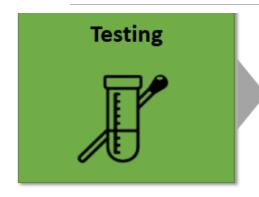
Medical Ops

Epidemiology

Case Management Public Health Messaging

Community Mitigation Isolation facilities

Navajo Nation Case Management Strategies / Teams

















Expanded Contact Tracing - Progress to date



Contact Tracing Volunteer program

- Diné and regional public health students
- Training, certification, quality assurance

Site support

- Team integration on CommCare
- Case Management huddles
- Team / 1:1 check-ins

Transition to sustainable workforce

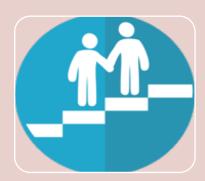
- Certification & work study opportunities
- Paid workforce

Expanded Contact Tracing

Strategic Goals





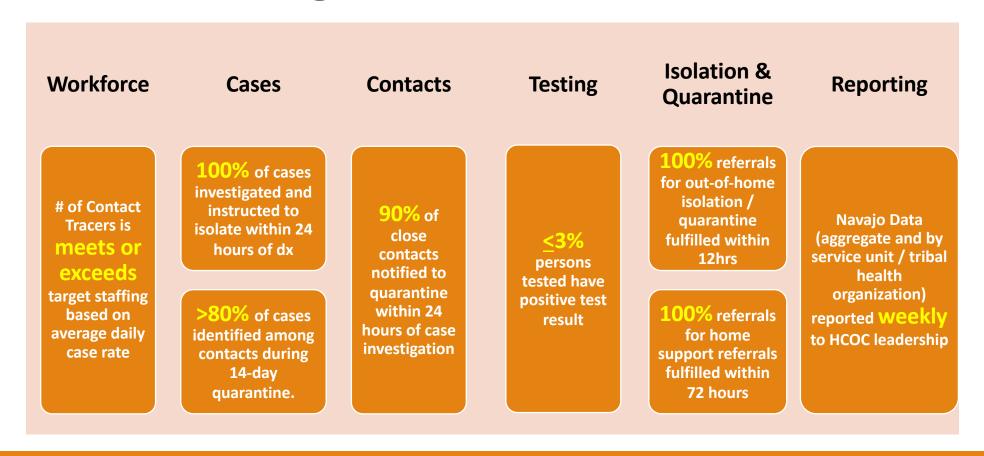


Unified data and workforce system

Flexible and responsive team

Long-term public health capacity in Navajo Nation

Case Management Metrics



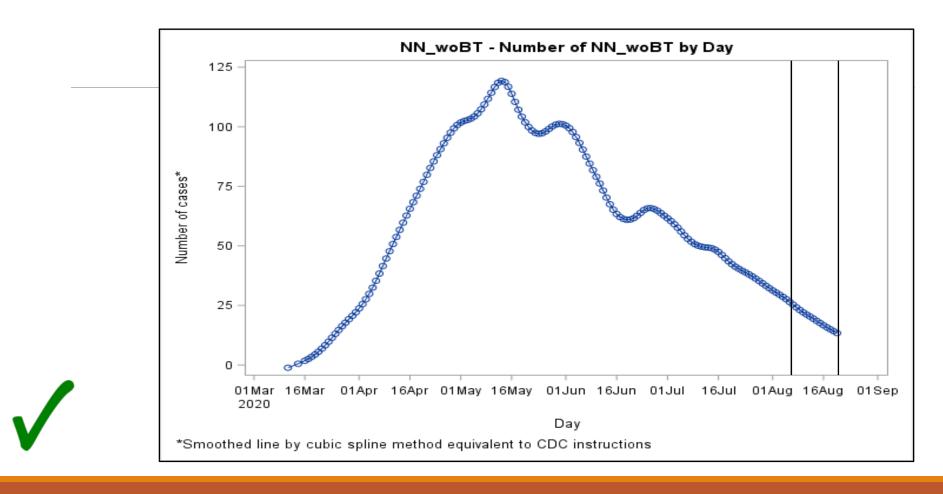


Gating Measures and Indicators

	Phase 0	Phase 1	Phase 2	Phase 3
Cases		- 11100	- 111100 _	
			Downward trajectory and	Downward trajectory and
			no evidence of sustained	no evidence of sustained
Downward trajectory		Downward trajectory	rebound	rebound
Average daily number of new cases per 100000 population				
over the last 14 days	≥25 cases per 100K	10-24 cases per 100K	1-9 cases per 100K	<1 cases per 100K
		*Percentage of positive	*Percentage of positive	*Percentage of positive
		tests equal to or less than	tests equal to or less than	tests equal to or less than
Testing	>10%	7-10%.	4-6%	≤3%
		Inpatient or ICU beds	Inpatient and ICU beds	Inpatient and ICU beds
Hospital Capacity		<80%	<75%	<70%
				30 contact
	5 contact tracers/daily	5 contact tracers/daily	5 contact tracers/daily	tracers/100,000
Public Health Capacity	new case**	new case**	new case**	population**
	Extensive Community Spread	Substantial Community Spread	Minimal to Moderate Community Spread	Zero to Minimal Community Spread
Disease Spread	Disease Risk High	Disease Risk High	Disease Risk Moderate	Disease Risk Low
Recommended Control				
Effort to Reduce Spread	Shelter in place	Aggressive	Moderate	Baseline

^{*}Gating Threshold Ver 3.0. Analysis are completed over a 14 day period and there is a 3 week assessment time after each transition

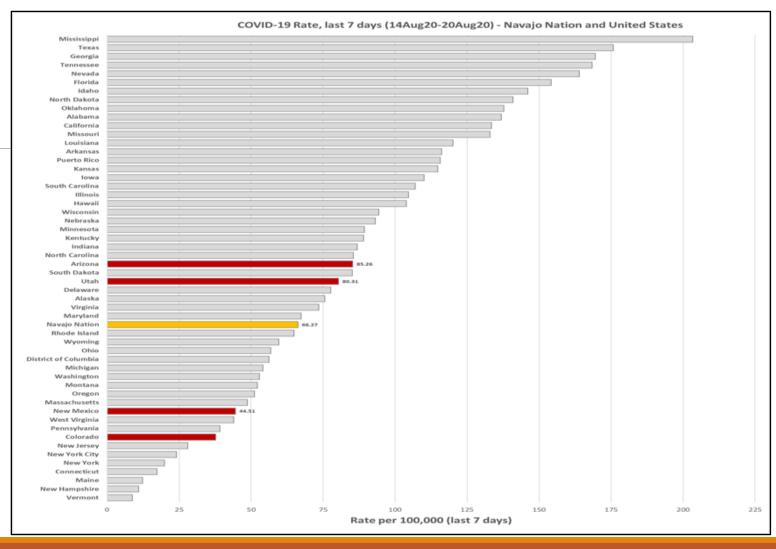
Cases – Is there a 14 day downward trajectory?



Cases – Incidence

Navajo Nation has moved from 20th rank to 34th rank



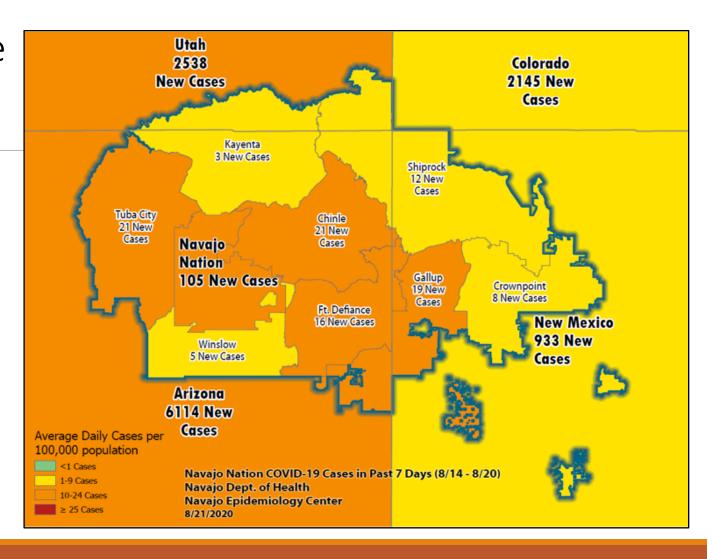


Interpretation: The Navajo Nation COVID-19 7-day incidence rate in comparison to state-level rates across the United States. The Navajo Nation's rate is 66.27/100,000 persons, which is 34th highest compared to states. State-level data were obtained from CDC on August 20, 2020 via: https://www.cdc.gov/covid-data-tracker/index.html#cases.

Cases – Incidence

There were 11 Average Daily Cases per 100000 population over the last 14 days for Navajo Nation.







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Ahéhee' To all of our partners!

Acknowledgements and Disclaimers

The opinions expressed in this presentation do not necessarily reflect the official views and policies of the Department of Health and Human Services, and the Indian Health Service, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Disclosures:

Dr. Moses serves as the HCOC Case Management Lead for Navajo Nation and is the Director of Public Health at the Chinle Service Unit

Dr. Shin serves as HCOC Contact Tracing Lead for Navajo Nation, the Director of Research for the 501(c)3 organization, COPE, and is an IHS employee at Gallup Indian Medical Center.