

Before calling, review:

- Before calling, review the script, the contact tracing form, and other information that you have been provided for COVID-19 including resources on addressing symptoms, transmission, self-isolation, and quarantining, to assist exposed individual.



Leaving a Voicemail Message:

- "Hi this is [Contact Tracer first and last name] from [agency name/ component]. I am part of a team that is conducting voluntary contact tracing. We are contacting DHS personnel who have possibly been exposed to COVID-19 in the DHS workplace, and it is important that I talk with you. Please call me back at [predetermined contact number]. I will be in the office [availability]. If I don't answer, please leave a voicemail, and I'll get back to you as soon as possible."

Contact Script- for Exposed Individual Notification

- Hi, this is [Contact Tracer first and last name] calling from [agency name/component]. May I speak with [close contact first and last name]? (or "Am I speaking with [close contact first and last name]?")
- "We recently learned that an individual in the workplace tested positive for COVID-19. We are conducting voluntary contact tracing to determine whether you or others have been exposed to any such individual(s). We are calling to check on you and provide you with resources on public health recommendations."
- "Before we begin, I would like to provide you with the following privacy notice: DHS is requesting information as part of this call for the purpose of maintaining and ensuring a healthy workforce and a safe DHS workspace. Further, this information will help the Department in slowing down the spread of COVID-19 by notifying those individuals who may have been exposed to the disease so that they can take appropriate precautions in minimizing exposure to other DHS personnel. DHS may use the information I collect from you to provide notifications to other potentially exposed DHS personnel. If you are DHS contractor, student, intern, or volunteer, I will not be collecting any medical information from you. No personally identifiable information will be shared on you to others in an identifiable format. However, information contained from this call may be shared with my supervisory contact tracer to ensure data is appropriately collected. In addition, for federal employees and detailees, if you report symptoms of COVID-19, this information may be shared with your supervisor so that he or she may work with you on your work status. Further, no personally identifiable information collected from this call will be shared outside of DHS. This collection is voluntary. However, your participation is requested because contact tracing is a key strategy for preventing further spread of COVID-19."
- "For your awareness, DHS has identified introductory contact training to educate and inform the workforce on contact tracing. It's only 45 minutes and very helpful. I will email you the training information after this call."
- "Can you please confirm the spelling of your name?"
 - [Complete Section I of the COVID-19 Contact Tracing Form]

COVID-19 CONTACT TRACING SCRIPT
Exposed Individual Notification

- Confirm exposure:** “Right now, we are contacting DHS personnel who may have been present at [exposure location AND date]. Did you attend that event?”
 - If No and there are no other potential exposure locations or events listed: The person was not exposed.** “Based on your response, you were not exposed to the COVID-19 positive individual that we are currently investigating.” This concludes our call. Thank you for your time and have a nice day.”
 - End the interview and update the information on the form or database.**
 -  **STOP: This concludes the interaction.**
 - If Yes:**  **The DHS personnel was exposed.** Complete the rest of the interview:
 - “DHS personnel that you may have been in contact with [exposure date and time] have tested positive for COVID-19. They were in contact with you while they were possibly contagious.”

If asked for the identity of the COVID-19 positive individual: “To protect the individual’s privacy, I cannot share the name of the individual. I can only tell you that the individual was present at [exposure date and time].”

Interview questions for all confirmed close contacts:

- “Were you accompanied by anyone at the exposure location?”
 - If Yes: “What are the persons’ First and Last names, locations, phone numbers, work emails, dates of last exposure?” [Complete Section III of the COVID-19 Contact Tracing Form]
 - If No: Continue with next question.
[Document none in Section III of the COVID-19 Contact Tracing Form]
 - “Next, I have a few questions we are asking everyone to help contain this outbreak.” Your participation is voluntary and would help DHS keep the workplace safe for you and your colleagues.”
- Ask about presence in the DHS worksite:**
 - “Since [exposure date], were you physically present at DHS worksite?”
 - “Do you anticipate coming into a DHS worksite in the next 14 days?”
 - If NO to both questions, the DHS federal employee or detailee has not put others in the DHS worksite at risk. Skip questions about symptoms.**
 - If YES to either question, the DHS federal employee or detailee may have exposed others in the DHS worksite.**
 - “Before you return to the DHS worksite, please contact your Supervisor after this call to discuss your work options. Also, it is recommended that you contact your medical provider, and local public health authorities to inform them that you were exposed to a COVID-19 positive person and tell them the symptoms you are experiencing.”

Provide CDC guidance

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Paperwork Reduction Act Burden Notice: Public reporting burden for this form is estimated to average 20 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the information. This collection of information is voluntary. You are not required to submit to this collection of information unless it displays a valid OMB control number. Send comments regarding the accuracy of the burden estimate and any suggestions for this collection to: Office of the Chief Human Capital officer OCHCOPrivacyOfficer@hq.dhs.gov

COVID-19 CONTACT TRACING SCRIPT
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- o “The Center for Disease Control’s current guidance is that you should isolate yourself and restrict activities outside your home, except for getting medical care. For example, the CDC guidance is that you do not go to work, school, the grocery store, or public areas for 14 days after your last exposure to the contagious person.”
- o “I will email you a list of resources which includes CDC guidance. Please review the CDC’s guidance. Some of things you may consider to protect others in your household is to stay in a specific room and away from other people in your home. Restrict contact with pets and other animals. I will email you a document with this information. Please confirm your email?”

Email: _____

[Verify email in Section I of the COVID-19 Contact Tracing Form]

- o “It takes between 2-14 days after being exposed to COVID-19 for symptoms to develop. To protect others, it is important that you isolate and monitor yourself for these symptoms. The CDC recommends that you take your temperature twice a day, once in the morning and once in the evening, until [date of exposure + 14 days]. To get an accurate temperature reading do not eat or drink anything 30 minutes before taking your temperature. CDC suggests during this 14-day period, you should not visit public places, such as stores, churches, schools, and child care settings. After our call today please contact your supervisor to inform them that you have spoken with the DHS Contact Tracer and discuss staying away from the workplace during this 14-day period. Your supervisor can provide you additional information about your work status and how to record your time.”
- o “In the event that you develop COVID-19 symptoms, or your current symptoms change or worsen, call your medical provider and local public health authorities so that you can receive further guidance. I will email you a 14-day COVID-19 symptom self-monitoring tool. Do not submit this to DHS. Its use is not required. This is just a checklist that you may find helpful. If you experience a medical emergency, call 911.”
- o “Your monitoring and recommended isolation period will be ___ / ___ / ___ through ___ / ___ / ___.”
“CDC guidance recommends that individuals on isolation can return to regular activities AFTER the last date of their isolation period. Please contact your supervisor to discuss returning to work.”

End the call

- o “Thanks for your time. Have a nice day. Please contact your supervisor to discuss your work status.”