

COVID-19 Digital Tools in Support of Contact Tracing Design Team Meeting Minutes

May 9, 2020

Meeting Goals and Objectives

To set the scope, objectives, and boundaries of COVID-19 Contact Tracing engagement and the broader development of the coalition

Participants

Name (Alpha Order)	Title	Affiliation
Jason Bonander	Deputy Chief Information Officer	Centers for Disease Control
James Daniel	Director, Public Health Innovation	US Department of Health and Human Services
Adi Gundlapalli	Chief Public Health Informatics Officer – Center for Surveillance, Epidemiology, and Laboratory Services	Centers for Disease Control
Bryant Karras	Chief Informatics Officer	Washington State Department of Health
Judy Monroe	President, CEO	CDC Foundation
Patrick O'Carroll	Head, Health Systems Strengthening Sector	Task Force for Global Health
Dave Ross	President, CEO	Task Force for Global Health
Vivian Singletary	Executive Director – Public Health Informatics Institute	Task Force for Global Health
Jimica Tchamako	Requirements Lab Director – Public Health Informatics Institute	Task Force for Global Health

AIM Statement (Draft of what we believe we would should seek to accomplish)

- 1) To develop and provide guidance to state/local PH officials to assist their understanding of the marketplace of digital tools in support of contact tracing
- 2) To develop and provide guidance to industry partners (tech companies) to ensure technology meets the standards required by state/local PH officials (Requirements) for contact tracing

Meeting Minutes

The design committee discussed the current status of the development of various independent tools for contact tracing which included: Sara Alert, Exposure Notification System, REDCap, Maven COVID-19 Module, Salesforce, and Zendesk. Team discussion fell under the following categories:

What problems do we seek to solve?

- Identify problems in the current approach to digital tools for contact tracing and figure out the best way or strategy to solve them. Convey the inherently human nature of contact tracing and how systems should account for this interpersonal alignment.
- Avoid plurality of the definition of contact and non-interoperable systems, and communicate the implications/risks of independent systems.
- Align and guide states & local Public Health agencies understanding of the components of contact tracing and the digital tools available to support them.
- Get ahead of the issue of public trust related to digital contact tracing. Set the principles around privacy and security.

- Create and set the terminology and glossary related to digital solution(s) for contact tracing.

What does success look like?

- State and local agencies have a reference document to help them choose Contact Tracing solutions to support what their individual efforts.
- State and local agencies understand that they need to make these tools interoperable with other jurisdictions.
- Identify missing standards with interoperability between jurisdictions. Pull in standard organizations (e.g. HL7)
- Develop and share principles that would guide MVP solutions development.
- Develop a contact tracing “consumer guide” for states and local health departments– the guide should include functions and products that align to their needs and structure
- Pull together clear communication and guidance for state and local health departments in a 2-week timeline
- Identify key choke points to contact tracing and delineate these points to smaller working group teams
- Acknowledge Contact Tracing (CT) is a fundamental part of public health and a trajectory to move this initiative forward – ID longer term informatics challenges
- CDC, ASTHO, CSTE, NGA and Tech partners are aligned around contact tracing
- Develop goals for 2, 4, 8, 12 weeks because September and October will be here, and we will be irrelevant if we do not have a clear plan of action beyond 4 weeks.
 - We can NOT let available funding determine whether or not we should convene and act

Project Scope, approach, forum participants

- Core Public Health Experts Meeting (Round 0)
 - ASTHO, NACCHO, CSTE, NGA, CDC, ONC, State and Local Health Departments
- Core Public Health Experts Meeting (Round I)
 - Set out processes and requirements
 - ASTHO, NACCHO, CSTE, NGA, CDC, ONC, State and Local health departments, (technology vendors/implementors with right parameters), Office of Science Technology, IGEA
- Technology vendors (round II)
 - MITRE, Google Health, Apple Health
- Technology implementors (round II)
 - TBD