

# Strategies to support the COVID-19 response in LMICs

## A virtual seminar series

### Resource Page

## Planning for the pandemic: Containment, mitigation & reopening

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### Containment

Recommendations for a containment response:

- Build capacity for widespread testing, tracing, and data sharing to enable case-based intervention
- Integrate testing and tracing into a national syndromic surveillance system
- Build capacity to conduct widespread serologic testing to identify immunity
- Build capacity for a rapid response to isolate, contact trace, and quarantine

### Mitigation

Goals of community mitigation:

- Delay outbreak peak
- Decompress peak burden on hospitals/infrastructure
- Diminish overall cases and health impacts

Recommendations for mitigation phase:

- Convene an expert advisory committee to make recommendations based on emerging data
- Consider the needs of people at risk, such as those in nursing homes and assisted living
- Create a call center to manage the public health response including dissemination of clinical and social support to people experiencing COVID-19 symptoms, coordination of testing, telemedicine, isolation, contact tracing, quarantine, symptom tracking, and other support
- Establish community-based testing sites
- Provide social services to people in isolation, quarantine, and adversely affected by community disease control measures
- Keep the public informed by delivering comprehensive, informative daily messages
- Allow emerging data to inform the response strategy

## Reopening

### Stages of reopening:

Phase I: Community level distancing to slow spread

- Allows for increasing in testing capabilities and health system capacity building

Phase II: Limiting spread through physical distancing and case-based intervention

- Businesses and sectors can open with modifications

Phase III: Looks ahead to when an effective therapeutic or vaccine is available

Phase IV: Identifies policy priorities for improving preparedness for next public health threat

### Conditions for reopening (entering phase II):

- Sustained reduction in cases for at least 14 days
- In state hospitals are safely able to treat all patients requiring hospitalization without resorting to crisis standards of care
- State is able to test all people with COVID-19 symptoms
- State is able to conduct active monitoring of confirmed cases and their contacts (contact tracing)
- Move carefully in stages every 2-3 weeks; review data before proceeding

### Contact tracing:

- Recommend hiring ~ 30/100,000 people in country
- Can be trained quickly – need to be able to understand symptoms, have basic data skills, ability to interview, cultural sensitivity, and risk communication
- Systems needed to protect privacy and ensure confidence

### While remaining open:

- Place high priority on prevention of transmission in vulnerable populations
- Wear cloth facemasks when in buildings or near others
- Practice individual physical distancing at least 6 feet
- Avoid gatherings

### Other considerations:

- Involve stakeholder groups in decision-making to understand needs, capacities, and challenges of different communities
- Outdoor organizations and activities with personal mitigation measures (maintaining 6 feet of separation, wearing nonmedical cloth masks in public) are less likely to result in transmission than indoor activities
- Businesses and sectors that have low contact intensity, low numbers of contacts, and high ability to modify operations in ways that diminish the potential to spread will be safer to reopen sooner and more fully than those with high contact intensity, high contacts, and the inability to modify or mitigate operations
- Public transportation modifications allow people to still travel to work while reducing risks
  - More spacing between people and lower ridership

## Sources and additional resources

1. [https://www.centerforhealthsecurity.org/our-work/pubs\\_archive/pubs-pdfs/2020/200417-reopening-guidance-governors.pdf](https://www.centerforhealthsecurity.org/our-work/pubs_archive/pubs-pdfs/2020/200417-reopening-guidance-governors.pdf)
2. <https://www.centerforhealthsecurity.org/resources/COVID-19/index.html>
3. [https://healthpolicy.duke.edu/sites/default/files/atoms/files/covid-19\\_surveillance\\_roadmap\\_final.pdf](https://healthpolicy.duke.edu/sites/default/files/atoms/files/covid-19_surveillance_roadmap_final.pdf)
4. [https://www.jhsph.edu/covid-19\\_documents/recommendations-for-a-metropolitan-covid-19-response\\_hopkins-bloomberg-3-2020.pdf](https://www.jhsph.edu/covid-19_documents/recommendations-for-a-metropolitan-covid-19-response_hopkins-bloomberg-3-2020.pdf)

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