

Cc: [REDACTED] (10)(2e) [REDACTED] (10)(2e) @rivm.nl
To: BCO-COVID19 [REDACTED] (10)(2e) @rivm.nl; AIOS Stagiair 2 [REDACTED] (10)(2e) @rivm.nl
From: [REDACTED] (10)(2e)
Sent: Fri 11/13/2020 2:33:08 PM
Subject: RE: Contact tracing of Covid-19 cases : operational / technical aspects of your current strategy
Received: Fri 11/13/2020 2:33:09 PM

Hoi,

Ik ben begonnen met een antwoord, wie heeft zin en tijd om dit aan te vullen? Er zijn veel vragen, ik heb geen tijd om ze allemaal 1 voor 1 te beantwoorden.

[REDACTED] (10)(2e)

[REDACTED]
(11)(1)

Van: BCO-COVID19 <[REDACTED] (10)(2e) @rivm.nl>
Verzonden: donderdag 12 november 2020 09:36
Aan: AIOS Stagiair 2 <[REDACTED] (10)(2e) @rivm.nl>; [REDACTED] (10)(2e) <[REDACTED] (10)(2e) @rivm.nl>
CC: [REDACTED] (10)(2e) <[REDACTED] (10)(2e) @rivm.nl>
Onderwerp: FW: Contact tracing of Covid-19 cases : operational / technical aspects of your current strategy

Hoi,
deze zit in de BCO mailbox al een tijdje....is dit gewoon al gedaan (of willen wij niet reageren?) en kan hij bij afgehandeld?
Anders vanmiddag even bespreken?
Groet, [REDACTED] (10)(2e)

Van: LCI Voorwacht <[REDACTED] (10)(2e) @rivm.nl>
Verzonden: vrijdag 6 november 2020 12:50
Aan: [REDACTED] (10)(2e) <[REDACTED] (10)(2e) @rivm.nl>; [REDACTED] (10)(2e) <[REDACTED] (10)(2e) @rivm.nl>
Onderwerp: FW: Contact tracing of Covid-19 cases : operational / technical aspects of your current strategy

Hallo,

Hierbij de reactie van [REDACTED] (10)(2a).
Dear colleagues, the answer for contact tracing is in the attachment.

Met vriendelijke groet,

[REDACTED] (10)(2e)

Landelijke Coördinatie Infectieziektenbestrijding (LCI)
RIVM- Centrum infectieziektenbestrijding

W: www.lci.rivm.nl
T: 030 [REDACTED] (10)(2e)
A: Antonie van Leeuwenhoeklaan 9 3721 MA Bilthoven
P: Postbus 1 3720 BA Bilthoven

From: LCI Voorwacht
Sent: woensdag 4 november 2020 15:18
To: [REDACTED] (10)(2e) ; [REDACTED] (10)(2e)
Subject: RE: Contact tracing of Covid-19 cases : operational / technical aspects of your current strategy

Hallo BCo team *,

Hierbij de reacties tot nu toe. Mochten jullie nog willen reageren op de vraag van [REDACTED] (10)(2a) dan hoor ik het graag * :
Reactie [REDACTED] (10)(2a):
In attachment you will find a document with the asked information. Hopefully this will be enough to inform you.

Reactie [REDACTED] (10)(2a)

[REDACTED]
(10)(2a)

Met vriendelijke groet,

[REDACTED]
(10)(2e)

Landelijke Coördinatie Infectieziektebestrijding (LCI)
RIVM- Centrum infectieziektebestrijding

W: www.lci.rivm.nl
T: 030 [REDACTED] (10)(2e)
A: Antonie van Leeuwenhoeklaan 9 3721 MA Bilthoven
P: Postbus 1 3720 BA Bilthoven

From: LCI Voorwacht <[REDACTED] (10)(2e)@rivm.nl>
Sent: vrijdag 30 oktober 2020 10:07
To: [REDACTED] (10)(2e) <[REDACTED] (10)(2e)@rivm.nl>; [REDACTED] (10)(2e) <[REDACTED] (10)(2e)@rivm.nl>
Subject: FW: Contact tracing of Covid-19 cases : operational / technical aspects of your current strategy

Beste BCO-team,

Vanuit EWRS is er een bericht gekomen van [REDACTED] (10)(2a) met vragen over (forward/backward) contact-tracing. Hieronder staat het bericht van [REDACTED] (10)(2a). Het bericht is een halfuurtje oud dus er zijn nog geen reacties. Zal ik de reacties naar jullie doorsturen? Mocht deze mail beter bij iemand anders neergelegd kunnen worden dan hoor ik het graag!

Met vriendelijke groet,

(10)(2e)

Landelijke Coördinatie Infectieziektebestrijding (LCI)
RIVM- Centrum infectieziektebestrijding

W: www.lci.rivm.nl

T: 030 [REDACTED] (10)(2e)

A: Antonie van Leeuwenhoeklaan 9 3721 MA Bilthoven

P: Postbus 1 3720 BA Bilthoven

Vraag (10)(2a)

Dear colleagues, As part of our recent efforts to improve our strategy for the detection and isolation of confirmed cases and contacts of Covid-19, we are currently exploring options for implementing backward contact-tracing processes in France. By backward contact-tracing, we mean identifying the source of the newly detected cases (events or places where they might have been contaminated to the virus). This might complement forward contact-tracing procedures (ie identifying the contacts of newly detected cases, so as to inform and isolate them quickly). Thus, we would be very interested to hear how other countries are addressing (or considering) this option, through the following questions:

- o Do you currently carry out large-scale forward contact-tracing in your country?
- o Do you currently carry-out large-scale backward contact-tracing in your country? If yes, when did you start doing so?
- o Regarding specific procedures for backward CT,
- What are the tools deployed to follow backward CT procedures (especially digital ones, independently from the use of applications)?
- What are the criteria for identifying clusters requiring further investigation and contact-tracing procedures (targeted communities, contamination delays, etc.)?
- Do you consider the implementation of large-scale backward contact-tracing to be successful?
- o Regarding human resources,
- Is CT (backward or forward) carried out on existing human resources (public health agency or ministry of Health), or is it outsourced to people/organizations recruited for this specific mission?
- How many tracers are currently working on CT (backward or forward)?
- Which profiles are preferred to conduct backward CT? Is outbreak investigation performed by the units in charge of contact-tracing, or by other teams?
- o Regarding the general organization of CT,
- Is CT centralized at a national level, or is it organized at a regional level (if so, is it based on common procedures and coordinated at a national level?)?
- At some point during the epidemic, did you have to prioritize certain CT procedures (i.e. backward vs forward, limited to specific age-groups / specific locations...)?
- Do you consider stopping CT if the epidemiological situation gets worse, and if yes, has a threshold been fixed?
- Is there a public document describing CT in your country, with or without a special focus on backward CT ? If so, would you be willing to share it with us?

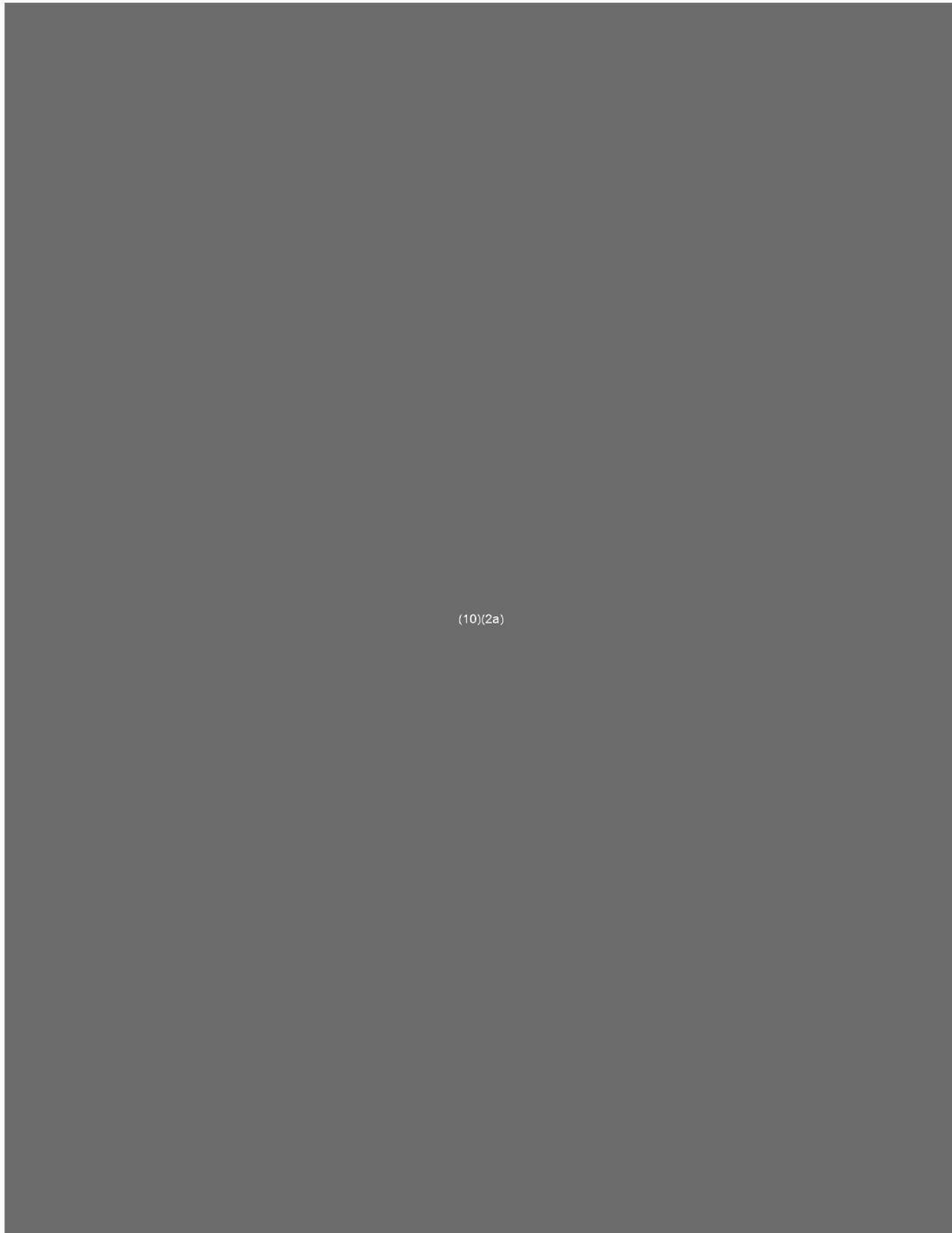
We would be very grateful for any technical or operational information in relation to those questions.

(10)(2e)

(10)(2e)

(10)(2a)

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