

The New York City Test & Trace Corps Take Care Program

PROMOTING SAFE ISOLATION AND QUARANTINE
THROUGH CARE RESOURCE CONNECTION



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CASE STUDIES ON CARE RESOURCE COORDINATION IN COVID-19



The NYC Test & Trace Corps sharing information about testing, safe isolation, and quarantine in February 2021. *Photo courtesy of NYC Health + Hospitals*

This case study is part of a PIH series on care resource coordination for COVID-19. Care resource coordination facilitates the social, material, and other supports that COVID-19 cases and contacts need to safely isolate or quarantine. Today, millions in the U.S. struggle to meet basic needs and not everyone can quarantine and isolate equally. Resource coordination is an essential part of an equitable pandemic response and can be applied far beyond COVID-19.

Each case study in this series is an example of how resource coordination programs have been designed and rolled out in a specific context and is written in collaboration with the program. Implementers reflect on successes, challenges, and share key lessons learned from their experience. There is some variation in terminology across case studies in the series, reflecting each program's unique work. For example, "care resource coordinators," "resource navigators," and "community health workers" can all fulfill a similar function: identifying needs and coordinating resource provision.

In **New York City**, resource coordination is done by Resource Navigators (RNavs) through the **Take Care Program**. This case study describes Take Care's operations, then analyzes key factors to its success, as well as challenges and lessons learned. **Take Care is a model for contact tracing programs seeking to integrate community-based organizations (CBOs) into a centralized response to ensure successful supports for isolation and quarantine.**

BACKGROUND

On June 1st, 2020, New York City launched the NYC Test & Trace Corps, a collaborative public health initiative to respond to COVID-19. One of the largest urban COVID-19 testing and contact tracing programs in the United States (Box 1), Test & Trace is led by NYC Health + Hospitals in close collaboration with the Department of Health and Mental Hygiene, the Mayor's Office of Housing Recovery Operations, and other city agencies. Test & Trace consists of three closely integrated pillars:

1. **Test:** Confidential COVID-19 testing available at no cost across more than 200 testing sites throughout the city regardless of immigration status.
2. **Trace:** Case investigators (CI) and contact tracers (CT) identify and notify the close contacts of COVID-19 cases and monitor individuals during their quarantine and isolation periods.
3. **Take Care:** Cases and contacts are supported to isolate or quarantine through free hotel rooms or support to remain home. If an individual chooses to remain at home, Resource Navigators (RNavs) ensure they have the supports needed to safely isolate or quarantine, such as food or medication.

This case study focuses on the 'At-Home' Resource Navigation portion of Take Care.

BOX 1

PROGRAM OVERVIEW

NEW YORK CITY: 8,336,817 residents

CONTACT TRACERS: ~4,000

RESOURCE NAVIGATORS: ~200-300

RESOURCE NAVIGATOR/SUPERVISOR RATIO: 4:1

IT PLATFORM: Salesforce

CARE RESOURCE COORDINATION MODEL:

Resource Navigators are employed by 10 CBOs in a CBO-based model with strong central coordination

PROGRAM FUNDING: A mix of Federal and City funding

PROGRAM IMPACT: As of February 23, 2021, the Take Care program has:

- ▶ 195,000 referrals completed
- ▶ 223,000 Take Care packages sent to households
- ▶ 10,000 unique hotel guests since program launch June 1, 2020

TOP 3 SERVICE NEEDS: Food, HRA Cash Assistance, Paid Sick Leave, and Housing Assistance.

THE TAKE CARE PROGRAM MODEL

COMMUNITY BASED, CENTRALLY COORDINATED

Successful emergency response must be rooted in local communities. Take Care made an early strategic decision to hire RNavs within local CBOs (listed [here](#)), building robust partnerships to capitalize on CBO knowledge, expertise, language capabilities, and community trust. CBOs hire and manage their own staff, including a program director, supervisors, and Resource Navigators, while

Take Care centrally coordinates program design, system management, and training. CBO teams and supervisors collaborate closely with Take Care leadership, ensuring daily operations are consistent across CBOs. This creates a CBO-based care resource connection model that is fully integrated with the central NYC Test & Trace Corps.

NYC Test & Trace Corps' three pillars



PROGRAM OPERATIONS

SCREENING TO IDENTIFYING INDIVIDUALS IN NEED

All COVID-19 cases in New York City are entered into a centralized database connected to the contact tracing system. A **contact tracer conducts** a 45-minute intake interview, including **standardized screening** to assess if the client needs help with basic necessities during quarantine or isolation (*Appendix 1*). The CT/CI offers all individuals a free Take Care Package (*Box 2*) and a free hotel room for quarantine/isolation. If the individual declines the hotel but indicates a service need, the case is referred to a Resource Navigator.

Within 24 hours of the CT to RNav referral, the **RNav** calls the client, conducts a **detailed needs assessment**, and coordinates access to services (*Figure 1*). Take Care trains RNavs to understand and assess what clients need to safely isolate or quarantine. RNavs use a standard, regularly updated script covering the most frequently requested resources including: food, paid sick leave, medication delivery, health insurance, utilities, mental health support, and domestic violence resources. RNavs are based within CBOs, who understand the nuances of their local context and whose staff are often members of the communities they serve. Resource Navigators speak over 18 languages which allows them to communicate with clients in their language of preference. This helps RNavs rapidly build rapport and trust with cases and contacts to address complex issues.

BOX 2

TAKE CARE PACKAGES

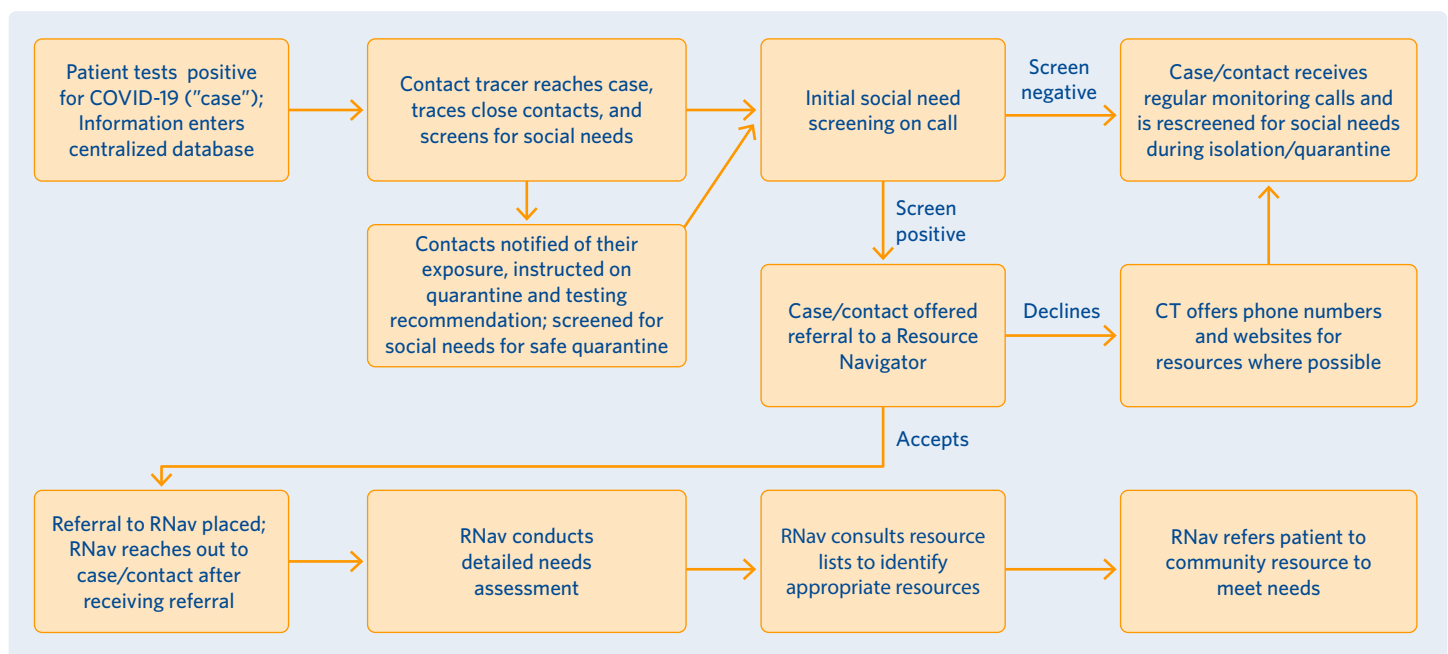
All cases and contacts can opt-in to receive a free support package containing:

- ▶ Face masks
- ▶ Hand sanitizer
- ▶ Thermometer
- ▶ Snacks, games and educational resources
- ▶ Pulse oximeter (for COVID-19 positive patients)

LINKING INDIVIDUALS TO SERVICES

RNavs identify appropriate services using several tools. RNavs use a robust city-wide **resource bank** listing available services and programs across the five NYC boroughs, which evolved from a resource list used by a NYC Health + Hospitals Community Health Worker program. The Take Care resource bank is dynamic and well maintained: newly identified services and supports are added often, and all resources are periodically reviewed to ensure accurate information. These constant updates help the program to adapt to fluctuations in resource availability and promote successful referrals. If needed, RNavs use **NowPow** to supplement the resource bank and identify additional

FIGURE 1: Case investigators and contact tracers identify those in need through standardized screening for social needs during contact tracing. Those clients are then placed in a referral queue for the RNav teams, sorted based on client zip code and language. RNavs then perform detailed needs assessments and connect clients to resources.



services. The **CBO-based** model also allows RNavs to leverage additional local resources and services directly from their CBO and surrounding community. Finally, all RNavs are trained to use **Access HRA**, the online portal for NYC's Department of Social Services where New Yorkers can apply for cash assistance and SNAP benefits.

RNavs connect clients to resources in a number of ways. Some resources, like diapers, wipes, and baby formula are sent directly by the RNav through partnerships with local pharmacies. For others, the RNav contacts the service provider on the client's behalf or refers using a warm-handoff, or a 3-way call with the client and service provider. This helps individuals who may be unable to

follow-up on their own, particularly when resources are difficult to navigate. In other cases, RNavs give the client the service provider's contact information and instructions on next steps. Finally, some RNavs are trained as authorized enrollers for specific benefits, such as accessing health reimbursement arrangements or NYC's city-wide free meal delivery program, called GetFoodNYC.

Though RNavs do not routinely follow-up with clients after a service referral, RNavs can mark a client for a call-back, if follow-up on a specific issue is needed. Clients can receive a first time or additional referral to resource navigation during their routine CT monitoring calls if service needs arise during quarantine or isolation.

EXPANDING ACCESS TO RESOURCE COORDINATION

Over time, the Test & Trace Corps created additional avenues for communities impacted by COVID-19 to engage with RNavs and access support resources. This includes a central COVID-19 hotline, (212) COVID-19, where any resident can call to seek resources for isolation or quarantine. In a unique and powerful addition to the

program, RNavs are also embedded at rapid COVID-19 testing sites. When someone tests positive at these sites, RNavs provide real-time connections to hotels, resources for home isolation, and personal protective equipment. This helps individuals isolate immediately and supports those in need who test negative.

MONITORING AND EVALUATION

Monitoring and evaluation ensures Take Care's operations are data informed. **Data is analyzed on a daily basis and disaggregated** by CBO, borough, zip code, race, ethnicity, and language as part of a commitment to equity. Key performance indicators (Box 3) track the volume and types of needs; the program uses this data to adapt to emerging needs and inform partnerships and planning. In addition to quantitative data, Take Care uses weekly CBO meetings and Google surveys to collect valuable RNav feedback about their on-the-ground experience and close client interactions. Information gathered influences program management and design across all three pillars of the Test & Trace Corps.

BOX 3

KEY PERFORMANCE INDICATORS

- ▶ Take Care Packages distributed
- ▶ Resource navigation referrals received
- ▶ Resource navigation referrals completed
- ▶ Referrals connected to resources
- ▶ Referrals declined
- ▶ Resources requested
- ▶ Hotel guests served
- ▶ % of cases and contacts needing resources

ENABLERS OF TAKE CARE'S SUCCESS

Looking back on Take Care's growth and impact since May, program leadership identified five key decisions and strategies that promoted success:

1. Developing partnerships with local organizations and communities: Take Care worked with many stakeholders, including NYC Health + Hospitals, the Mayor's Office of Housing Recovery Operations, and the Department of Health to establish a common vision for the program. This multidisciplinary coalition helped Take Care overcome early administrative, legal, IT, logistical, and financial obstacles. With the rapid start up, the City relied on the expertise of

different City agency partners to implement training, resource connections, and recovery operations. This included other city agencies like the Department of Small Business Services Workforce Division who assisted with training, and community partners like CUNY. In addition, Take Care avoided "reinventing the wheel," by partnering with trusted, experienced local CBOs. This promoted a centrally managed but locally responsive program embedded within and trusted by

communities. Take Care deliberately recruited CBOs across neighborhoods, cultures, and specializations to create a diverse and responsive program. To further strengthen community linkages, The Test & Trace Corps, in partnership with DOHMH, established a Community Advisory Board to advise on program design, resources, script language, equity, and operations and increased community outreach and engagement to build trust.

- 2. Fostering a culture of collaboration and open communication:** The diverse CBO network is foundational to Take Care's success, but also requires a culture of collaboration and open communication to seamlessly reconcile each partner's unique approach to operations and management. To foster collaboration, Take Care trained the entire CBO network together. The program deliberately built a middle tier of leadership within each CBO to execute centralized plans in a locally adopted way. Regular, scheduled calls between partners foster consistent communication. To promote flexibility, Take Care leadership also encourages informal supplemental texts, calls, and check-ins, both within the program and with other coalition partners.

Program founders knew that navigating the complex web of social supports in the midst of a pandemic would be difficult and expected that challenges would arise. Developing a culture of teamwork, collaborative problem solving, information sharing, and support at all levels of the program was an early priority. For example,

RNavs are encouraged to elevate difficult cases to their managers and to seek support, and RNav supervisors hold regular team check-ins to debrief difficult cases, train on new resources, and offer emotional support.

- 3. Prioritizing equitable and data informed decision making:** Underlying Take Care's growth, expansion, and capacity for continuous improvement over time is its ability to capture, track, and analyze data regularly (see *Monitoring and Evaluation*). For example, Take Care tracks referral volume across participating CBOs to inform real-time decisions around staffing levels at each organization. This quantitative data complements qualitative feedback, which is also valued. For example, screening questions and resource lists evolved over the course of the program in response to feedback from RNavs and a Community Advisory Board. Examples of additions to the script, and services added to the resource bank to address them, include supports for diabetes management and access to/support navigating paid sick leave benefits, as fear over missing work emerged as a key barrier to isolation and quarantine.
- 4. Applying prior lessons learned:** Take Care looked to the work of multiple city agencies and programs, including the Mayor's Office of Housing Recovery Operations (HRO). HRO's past experience with emergency response and disaster recovery (Box 4) influenced program design. Early in the pandemic, NYC Health + Hospitals' Office of Population Health

BOX 4

EMERGENCY PREPAREDNESS: LESSONS LEARNED FROM PAST DISASTERS

A key partner in the NYC Test & Trace Corps Take Care initiative is the Mayor's Office of Housing Recovery Operations (HRO), an office with deep experience in responding to emergencies like the devastation of Hurricane Sandy. HRO guided Test & Trace to apply key lessons learned from those experiences. In particular, they ensured that the COVID-19 response efforts, including Take Care, would be:

- 1. City managed:** To ensure the necessary local expertise and relationships, recovery efforts must be city owned, managed, and led, rather than contracted to others.
- 2. Community based:** Response activities must be hyper local and responsive to the varying needs of specific communities. Spending should be prioritized in impacted communities through contracting, purchasing, and especially through hiring of community residents impacted by COVID-19. This ensures response and recovery dollars assist New York in two ways—directly benefiting workers and aiding recovery.
- 3. Responsive and adaptable:** Engage in daily communication and sharing of information across all partners to receive immediate feedback and allow for continuous improvements.

COVID-19 highlights what HRO and others in the emergency preparedness and recovery space know and advocate for: the need for an ongoing recovery infrastructure that lives on between disasters, including dedicated staff whose fulltime job is emergency preparedness. HRO prioritized such a staff over the past two years,¹ allowing the City to rapidly launch and scale Test & Trace when COVID-19 struck.

¹ <https://www.nydailynews.com/opinion/ny-oped-hard-lessons-six-years-after-sandy-20181029-story.html>

created a Community Health Worker (CHW) program to support patients discharged from the hospital with COVID-19 in connecting with resources. The scripts and resource list CHWs utilized in that program became the building blocks for Take Care. Take Care staff also learned valuable lessons about supporting their staff from the CHW program, who had developed regular team check-ins to address burnout and compassion fatigue during this unprecedented crisis.

5. **Starting and planning to build the program over time:**

Launching a care resource coordination program in the midst of ongoing crisis can feel daunting. Take Care embraced the challenge, and focused on starting somewhere as quickly as possible, knowing their program would evolve over time. This facilitated early provision of services in the pandemic; later

iteration improved and expanded screening questions, resource lists, trainings, and services. One example of such improvement is the program's approach to IT infrastructure. The NYC contact tracing system uses Salesforce, a customer relationship management system, to manage its work. Ideally, RNav resource provision work would occur in the same platform for seamless integration and communication. The initial Salesforce configuration, however, could not capture the data RNavs record and modifying Salesforce would take time. Instead of waiting to start and losing the opportunity to provide crucial resources to thousands of families, Take Care found a workaround: they built their own system using SmartSheets until Salesforce integration could occur.

ADDRESSING CHALLENGES

Challenges arise in any program, especially one to address an unprecedented pandemic. The Take Care team addressed challenges with innovation, partnerships, flexibility, and communication. Lessons learned include:

1. **When service gaps exist, forge partnerships for service delivery.**

The Take Care program assembled and tapped into an impressive network of social service providers to help New Yorkers safely isolate and quarantine, however, unmet needs emerged. Take Care forged several innovative partnerships to address some needs identified over time, including direct cash assistance supported by the Robin Hood Foundation and dog-walking services in collaboration with Wag. In other arenas they face ongoing barriers to supporting New Yorkers in all the ways they would hope, such as coordinating access to childcare, providing greater cash assistance, and facilitating more flexibility around food assistance. Food is not only a basic necessity, but offers comfort during a time of crisis, when families are confined to the home and may be managing acute illness. While the program offers premade meal delivery responsive to various dietary needs and restrictions including Latinx, pan-Asian, Kosher, Halal, Vegetarian, and Non-Specialty meals, some clients express food needs and preferences that cannot be met by the current food delivery program. Take Care continues to pursue future partnerships to address resource gaps.

2. **When case numbers fluctuate, promote flexible staff roles and adapt to maximize impact.**

As in most places across the United States, New York City experienced dramatic fluctuations in the number of COVID-19

cases, including "surges," or rapid increase in cases. Maintaining an appropriately staffed team of Resource Navigators is an ongoing challenge. Test & Trace Corps developed strategies to best utilize staff depending on the caseload:

When caseloads are low: When cases decreased in the summer of 2020, RNavs used the time to build a stronger Take Care program by researching organizations to fill gaps in the resource bank, refining program operations, and launching additional activities such as resource navigation at the point of testing. In addition, RNavs expanded their focus to connect individuals to long-term supports instead of only supporting individuals during their isolation or quarantine period. RNavs reviewed prior cases and followed up with new resources if needed.

When caseloads are high: As caseloads increased, the City recruited new RNavs and RNav supervisors, authorized overtime, recruited new workers, and reassigned those engaged in additional activities back to the fundamental RNav work. In addition, they balanced calls (and therefore workloads) across the CBO partners, and encouraged CBOs to identify surge staff from their existing staffing to work during peak periods. The City also worked with the CBOs to adapt scripts to focus on the highest priority needs in a surge.

NYC TEST & TRACE CORPS TAKE CARE PROGRAM IS HERE TO HELP WITH

A free and safe hotel room including

- Free food (3 meals a day)
- Free wifi, cable tv, and unlimited local phone calls
- Daily medicine delivery
- Onsite medical staff

If a hotel is not right for you, we can help connect you to resources to safely separate at home.

Every New Yorker is eligible, regardless of immigration status.

The Take Care program can also help you obtain paid sick leave if you're eligible, so you don't have to worry about missing work.

Call the Test and Trace Corps hotline at 212-COVID19 or visit nyc.gov/takecare for free help!



3. When individuals fear quarantine or are hesitant to participate in testing or contact tracing, communicate early about available supports. Take Care leverages CBOs' strong relationships with communities to increase engagement with available social services and resources. Take Care, however, is the last stop on an individual's trajectory—in most cases, they must first access testing and participate in contact tracing before receiving a referral to a Resource Navigator. Early in

the pandemic, this meant many people were not aware of the resources available, and there was concern that some individuals were not engaging with Test & Trace because of worries about isolation and quarantine. Take Care worked with trusted messengers, including the CBO partners, to increase awareness of Take Care and its resources. Informal feedback suggests these information campaigns improved willingness to access testing and engage with Test & Trace Corps.

CONCLUSION

In the early months of the COVID-19 pandemic, Take Care developed a robust, centrally coordinated but CBO-based care resource connection model. The program continues to grow, innovate, and improve, and is an essential pillar of NYC's pandemic response. Take Care's experience shows the importance of local engagement, cross-agency and cross-sector (government and non-profit) partnerships, and dedicated workforces that can help individuals navigate complex social service systems. It also demonstrates the

importance of quickly providing social supports in disease control, building trust with impacted communities to break chains of transmission, and building resiliency for the next public health crisis. Take Care's design and lessons learned offer a blueprint for other jurisdictions seeking to establish care resource coordination systems that go beyond just contact tracing or pandemic response, but to the general provision of public health supports and resources, especially for high-need, historically marginalized communities.

For additional information on Take Care, please contact Take Care at T2TakeCareInquiries@nychhc.org.

CONTRIBUTING AUTHORS

Fionnuala Seiferth, MPA, Senior Manager, Operations for Take Care, Test & Trace Corps, NYC Health + Hospitals; Amy A. Peterson, MA, Director, Mayor's Office of Housing Recovery Operations; Katherine Piwnica-Worms, MD, MHS, Senior Director, Pediatric Health Care Delivery, NYC Health + Hospitals; Adrian Gonzalez, MS, Deputy Director Take Care, Test & Trace Corps, NYC Health + Hospitals; Madden Rowell, MD, Director, Office of Ambulatory Care and Population Health, NYC Health + Hospitals; Hannah Lieberman, MPH, Partners In Health; Shada A. Rouhani MD MPH, Partners In Health, Brigham and Women's Hospital

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APPENDIX 1

SOCIAL SUPPORT NEEDS SCREENING ON THE INITIAL CT CALL

CT/CIs ask “To help you remain in your home, except for essential medical care or for emergencies, a Resource Navigator can help connect you with basic necessities such as food, health insurance, medication, methadone delivery, assistance applying for government benefit (such as SNAP), housing, eviction or other tenant issues, and legal assistance. Do you need help with any of the resources I just listed?”

If yes, multiselect checkboxes are displayed for the CT:

- ☐ Food
- ☐ Health insurance
- ☐ Medication
- ☐ Methadone delivery
- ☐ Assistance applying for government benefit (such as SNAP)
- ☐ Housing, eviction or other tenant issues
- ☐ Legal assistance
- ☐ Other