Initially case interviews with confirmed COVID-19 cases included both contact tracing and source investigation. Contact tracing focuses on identifying close contacts (>=15 minutes within 6 feet during contagious period which starts 2 days before symptom onset or before specimen collection for first positive test.) Source investigation looks back over the two weeks before symptom onset to try to determine when and where the case became infected.

Early in the pandemic we were able to spend a lot of time on case interviews and we could do both contact tracing and source investigation. As numbers have grown, and the public has become less interested in talking to contact tracers, we have been forced to reduce the time spent on each case investigation. Less time for each interview necessitates prioritizing identification of close contacts and often means limited or no source investigation. With growing numbers of cases and a backlog of case interviews, we have also needed to triage who to interview. Prioritizing most recent cases for contact investigation can help minimize disease spread.

All of that is a long-winded way of saying we have only a limited amount of information about where disease spread is occurring due to extremely limited capacity for source investigation. We do know that cases continue to arise in congregate residential settings and among employees at a variety of businesses. Among the cases with exposure type specified, the most commonly reported exposure types are household, social events, and employment.

Information about occupation is limited but here is the excerpt from last week's report summarizing what we know about occupation:

Of the 1,814 cases opened in CommCare between December 2 and December 8, 867 (47.8%) provided information about occupation. Occupation was then categorized into the pre-specified list summarized in Table 8, with the largest group (46.9%) falling into the Other category.

Table 8: Occupation Among Interviewed Cases

Occupation	Count	Percent
Other	407	46.9%
Student	123	14.2%
Unemployed	104	12.0%
Health Care	89	10.3%
Worker		
Retired	81	9.3%
Self Employed	29	3.3%
Food Service	19	2.2%
City	6	0.7%
Child Care	6	0.7%
Correctional	3	0.3%
Worker		
Total	867	100.0%

I hope this information is useful. Unfortunately, with the large number of cases in the community and limited capacity for conducting case interviews, it is difficult to identify where exactly transmission is occurring.