**MEETING MINUTES**

**EVENT:**
Testing Surge Workgroup

**Date / Time:**
May 29, 2020 @ 1130

**Author:**
Dale Cowan, NCNG

**Approved:**
August 21, 2020

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**Enter information below: (text box will automatically expand, numbering is automatic)**

**Required Attendees (X=Present):**

<table>
<thead>
<tr>
<th>Attendee</th>
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<tr>
<td>NCDHHS</td>
<td>X</td>
<td>Sec. Mandy Cohen</td>
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<td>NCDHHS</td>
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<td>Dr. Scott Shone</td>
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<td>NCDHHS</td>
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<td>Dr. Zack Moore</td>
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<td>NCDHHS</td>
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<td>Jay Ludlam</td>
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<td>NCDHHS</td>
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<td>Amanda Fuller-Moore</td>
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<td>NCDHHS</td>
<td>X</td>
<td>Alan Myers or Natalie Jackson</td>
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<td>Quest</td>
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<td>LabCorp</td>
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<td>MAKO</td>
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<td>Atrium Health</td>
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<td>UNC Health</td>
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<td>Dr. Melissa Miller</td>
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<td>Old North State Medical Society</td>
<td>X</td>
<td>Dr. Charlene Green</td>
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<td>NCHCA</td>
<td>X</td>
<td>Dr. Mark Massing</td>
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<td>NC Board of Pharmacy</td>
<td>X</td>
<td>Jay Campbell</td>
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<td>NCALHD</td>
<td>X</td>
<td>Stacie Saunders and Lisa Macon-Harrison</td>
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<td>NC HIEA</td>
<td>X</td>
<td>Christie Burris</td>
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<td>NCNG (in support of NC DHHS)</td>
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<td>Dale Cowan</td>
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<td>NCNG (in support of NC DHHS)</td>
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<td>Neil Thomson</td>
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<td>Ernst and Young (in support of NC DHHS)</td>
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<td>Lori Feller, Brian Weeks, Ariel Kuo</td>
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<td>Guests:</td>
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**Agenda:**

1. **Welcome and Roll Call**—Dr. Burns (5 min)
2. **Opening Remarks**—Secretary Cohen, if available (5 min)
3. **New Business**
   a. **Test Trends and Hot Topics**—Dr. Shone (5 min)
   b. **Update on new collection sites or testing partnerships**—Dr. Massing (10 min)
   c. **ELC Grant**—Dr. Shone (15 min)
   d. **Draft Community Testing guidance to reach HMP**—Dr. Dowler (10 min)
   e. **Sub-Workgroup Report Outs**
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- Testing Strategies Vulnerable Populations Recommendations—Dr. Green (5 min)

IV. **Due Outs Assigned and Closing**—Drs. Burns, Tilson or Moore, if available (5 min)

**Tasks / Due Outs:** (List the recommended lead responsible for each task)

<table>
<thead>
<tr>
<th>Due Date</th>
<th>Organization POC</th>
<th>Task</th>
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<tbody>
<tr>
<td>5 June</td>
<td>Surge Workgroup</td>
<td>Email Dr. Burns (<a href="mailto:cardra.burns@dhhs.nc.gov">cardra.burns@dhhs.nc.gov</a>) if interested in serving on a sub-workgroup</td>
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**Discussion by Major Topic:** (Information not covered on slides or handouts)

- Dr. Burns welcomed the group and conducted roll-call.
- Dr. Tilson opened up stating that “a ton of work on testing has been done with 15K tests today (29 May), which is the highest to date.”
  - We are testing people we need to be testing
  - Numbers are still going up – more than 1K positives in one day (29 May)
  - Some other metrics – percent of positives is creeping up (9%) as we’re still finding real disease; an uptick in hospitalization rates; surveillance data (COVID-like illness) is going up
  - Still in the “middle ground” of easing restrictions
  - All trends are on the NC COVID-19 dashboard
- Dr. Shone provided an update on testing and the scientific study council call. Council discussed antigen testing and recommendations are forthcoming
- Dr. Massing followed up on new collection sites
  - Community health centers weekly survey through HRSA
    - ½ of the health centers are responding
    - 2/3 of those reporting have a drive-up/walk-up testing capability
    - ½ of the tests are among racially ethnic minorities
    - Some shortages of PPE, N95 masks and gowns
    - Rates among African American and Non-Hispanic are the same
  - Dr. Capraro (Atrium Health) reported that specimen numbers exceeded the internal cap, so additional specimens are sent to LabCorp
    - 1K tests/day in-house and then 200-300 tests/day sent to LabCorp
    - 10% positives are now at 8%
    - LabCorp positivity rate is higher
    - Mobile testing (Atrium) is providing access to at-risk and underrepresented population of Charlotte (17% positive rate in that population)
  - Natalie Jackson (Quest) reported a surge in testing last week. They are focused on working with Health Departments and getting them up and running
    - 1K PCR tests recently completed on-site
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- Dr. Fallon (Vidant Health) reported plans to expand from 4 to 5 COVID testing platforms pending reagents
  - Greenville lab still reports significant reagent issues but has processed 500 tests/day and hoping to get to 1K tests/day next week
  - Not a significant increase in percent positives this week
  - High production platform utilized as this site using specialized equipment
- Clay Gibson (LabCorp) reported several initiatives in the last week with a 7% positivity rate
- Dr. Cagle (NC Healthcare Assoc.) reported an alarming trend in the Montagnard population in Greenville. Working with the health department and conducting tracing in that community – 10% positive rate among those living in community housing
- Dr. Fuller-Moore (DHHS) reported 55 new CVS testing sites are opening today (29 May)
  - Pharmacy technicians and nurse practitioners at each location
  - Locations spread across NC
  - Daily capacity of 2750 tests across the state
  - Testing available seven (7) days/week
- Dr. Sullivan (Mecklenburg County) reported an increase in testing in the past several days. Increased hospitalizations, too
- Stacie Saunders (NCALHD) reported an increase in cases in Alamance County the last few days due to access to testing
  - Dr. Shone briefed on the ELC grant
    - A mechanism that state received to enhance epidemiology and laboratory capacity
    - Additional money for each state thru ELC enhanced detection
    - Statewide testing plan due 15 June and budget work plans are due 18 June
    - Developing command center to help coordinate PPE and collection/testing supplies
    - Need to submit May and June testing plan by tomorrow (30 May) to CDC
  - Dr. Dowler spoke about the Community Testing Guidance and offering testing where it makes the most sense
    - Best practices from meat processing lead to creating the same for Historically Marginalized Populations
    - The document will be out today (29 May) and will be combined with an explanation which includes a broad overview of general operations at various testing sites as well as some lessons learned
    - Important to go into a community and offer testing, make them feel safe, comfortable and eliminate barriers whenever possible
    - Don’t turn anyone away that wants a test
    - Mobile testing guidance may be next
  - Dr. Burns explained that any type of pop-up site could be expedited and put on the map for Find My Testing Place
  - Dr. Green added that there should be a focus on faith-based communities
    - All-hands needed to reach out to vulnerable populations
• Working on helping to navigate culturally sensitive messaging
• Connect testing and follow-up particularly for fall and winter

Dr. Shone described that the state lab is supporting a similar effort to assure access for high risk and historically marginalized populations in Lee, Chatham and Orange Counties with UNC partnering – identifying underutilized capacity and using it to maximize access

Antigen testing – The scientific council will prepare a similar write-up to the antibody testing.
  o 80% sensitivity for one specific method
  o Needs to be well thought out because of high false negatives

Dr. Burns closed asking if anyone is interested in joining either of the workgroups to email her.

**Next Meeting:** 5 June 2020, 1130-1230
Microsoft Teams [Link]; Phone: 984-204-1487, Conference ID: 575 272 672#