

MEETING MINUTES



EVENT:	Testing Surge Workgroup	Date / Time:	April 24, 2020 @ 1130
Author:	Dale Cowan, NCNG	Approved:	August 21, 2020

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

Required Attendees (X=Absent):

2109					
	NCDHHS	Sec. Mandy Cohen		NCDHHS	Dr. Betsey Tilson
	NCDHHS	Dr. Scott Shone		NCDHHS	Dr. Cardra Burns
	NCDHHS	Dr. Zack Moore		NCDHHS	Michael Leighs
	BCBSNC (in support of NC DHHS)	Alicia Stokes		LabCorp	Traci Butler
	BCBSNC (in support of NC DHHS)	Dr. David Johnson		BCBSNC (in support of NC DHHS)	Dr. Azalea Kim
x	Quest	Alan Myers		МАКО	Josh Arant
		Betsey Swider			
	Duke	Dr. Michael Datto		Atrium Health	Dr. Gerald Capraro
	UNC Health	Dr. Melissa Miller		NC Medical Society	Dr. Garrett Franklin
	NCCHCA	Dr. Mark Massing		NCCHCA	Chris Shank
	NC Board of Pharmacy	Jay Campbell		Mecklenburg Cty	Dr. Meg Sullivan
х	NCALHD	Stacie Saunders		Old North State Medical Center	Dr. Charlene Green
	NCDHHS	Azzie Conley		NCDHHS	Jay Ludlam
	NCNG	Dale Cowan	х	NCNG	Neil Thomson

Agenda:

- I. Old Business and Administrative Items
 - a. Testing Co-Chair(s) Update
 - b. Testing Capacity Survey Update Cardra
- II. New Business
 - a. Testing priority populations
 - b. Review Testing Workstream's proposed testing goal/number
 - c. Ideas/Commitment of how to help get more sample collections or testing right away
 - d. Where additional help is needed
- III. Due Outs Assigned
- IV. Closing—Betsey Tilson, Zack Moore, if available (5 min)



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Tasks / Due Outs	· (List the recomn	anded lead rec	nonsible for a	pach tack)
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Due Date	Organization POC	Task
May 1 st , 2020	All	All Test Surge Workgroup members will connect with their respective professional organizations to increase specimen collection and testing.

Discussion by Major Topic: (Information not covered on slides or handouts)

- Dr. Cardra Burns was charged with being a Tactical Liaison for the Testing Surge Workgroup. The Workgroup will have four co-chairs (Drs Datto, Shone, Green, and Massing). Their roles and expectations are being developed and refined.
- Dr. Burns informed the group that the test surge survey should be completed by 30 April.
- Dr. Shone provided progress made since the last meeting and led a discussion on (1)
 Why are we testing (2) Who should we be testing and (3) Testing criteria and
 prioritization. Testing Surge Workgroup determined to prioritize the following (c/w
 CDC, SLPH):
 - Hospitalized patients
 - Healthcare workers or first responders (e.g., EMS, law enforcement, fire department, military)
 - Patients who live in or have regular contact with a high-risk setting (e.g., long-term care facility, homeless shelter, correctional facility, migrant farmworker camp)
 - Persons who are at higher risk of severe illness and for whom a clinician has determined that results would inform clinical management
 - Symptomatic persons in a food plant or other critical infrastructure
 - Individuals with mild symptoms in communities experiencing rates
 - Additional emphasis on equity and ensuring communities of color have access to testing
- Alicia Stokes walked the workgroup through the testing goals (5-7K/day interim goal) and opportunities to increase collection and testing through the draft "100 County Plan".
- Discussion followed regarding testing supply logistics and short-term strategies to:
 - Increase weekend testing Commitment from NCCHA to connect with FQHCs that have Urgent Care Clinics
 - Reach out to more private-sector labs and identify logistical shortcomings/ rate-limiting factors in supply chains.

Next Meeting:	1 May 2020, 1130-1230
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Microsoft Teams <u>Link</u>; Phone: 984-204-1487, Conference ID: 575 272 672#