

FOR IMMEDIATE RELEASE
Thursday, September 10, 2020

CONTACT: Jennifer Devlin, 703-966-3241
Jennifer.devlin@cox.net

*******PRESS RELEASE*******

REGIONAL COVID-19 OFF-SITE TESTING RESEARCH POINTS TO NEED FOR NATIONAL STRATEGY AND COORDINATION IN TESTING PRACTICES

September 10, 2020 – A qualitative analysis of interviews with 26 regional off-site COVID-19 testing centers (OSCTCs) and public health departments identified the need for a more coordinated national strategy for COVID-19 testing in response to the pandemic. The interviews were conducted between June 8, 2020 and August 10, 2020 by the Network for Regional Healthcare Improvement (NRHI) and NRHI member and research partner, Qualidigm. The interviews focused on access to testing among vulnerable populations and aligning OSCTCs with public health entities, community-based organizations, and other health systems to effectively address the testing needs, limitations, and opportunities across the population.

Key findings including comments from those interviewed include:

PPE shortages are still significantly impacting some OSCTCs – “...like everybody, we were really struggling to get PPE in and it was a constant shortage of one piece...we would just get enough gowns in there and then we would be short on masks and then we would get enough masks and we would be short on gloves. It always seemed like there was one link in the chain that was on a shortage and back order.” “There were talks of how does one reuse PPE, and putting a surgical mask over a N95.”

OSCTCs, particularly smaller ones, must work together to increase PPE buying power or to trade supplies – “It’s another one of these...each man for himself...the larger systems have their vendor relationships.” “The minimums for some of these folks selling PPEs is 3 million units. That’s not realistic for a small county.”

Definitions of priority populations may need to evolve as test availability changes – “I think early testing really missed the people who were being most impacted...for those people who had to continue to go to work during shelter in place and are now highly impacted...our focus has been on ensuring that testing is available and accessible to those communities.”

OSCTCs are getting increasing pressure to support back-to-work and back-to-school clearance, but capacity-based prioritizations may not support testing these populations – “The other big thing that was causing unnecessary demands was employers requiring a negative test for people to come to work.”

Many facilities and states are taking a loss for COVID-19 testing but continue doing it because they see the benefit in their communities – “We are not refusing anyone because of the lack of ability to pay...at this point in time...we are doing this because this is the right thing to do for our community.” “And so the bottom line is that we need to sit down with those commercial insurers. They need to pony up the money to pay for COVID testing... this mythology about it being free ...We need to make sure that people are using insurance and have it so that we can be reimbursed.”

The National Guard is frequently viewed as a strong partner; however, some communities may be uncomfortable attending a testing event staffed by persons in military uniform – “It broke also that the government is sending Army people in uniform to African American public housing structures to test them. So you can imagine the challenge that arose, right?”

Different states have different requirements around staff licensure which impact costs and type of tests administered. “Another piece is for point-of-care on-site. There are scope of practice laws that vary by region. Can a pharmacist do it? Can a nurse practitioner do it? And so, we have to also look at the regulatory aspects of who can do it and our labor availability which is variable by state and so, sometimes we have to lean towards swab and send versus point-of-care because we are not able to from a regulatory standpoint. ”

“In this unprecedented moment in time, leveraging the power of networks is more vital than ever,” said [Craig Brammer](#) President and CEO of NRHI and Principal Investigator of the study. “What we are hearing from our network is that they are learning a lot about how to implement strategies and best practices on a community-wide basis to respond to the testing requirements of this pandemic. In lieu of a strong national strategy to guide communities, they have built an important knowledge base of what is and what isn’t working.”

The assessment was based on a qualitative analysis of key informant interviews led by a Qualidigm epidemiologist and supported by a qualitative research scientist. “This study was an extension of a rapid assessment (Phase I) qualitative study performed earlier this year.” explained [Tim Elwell](#), PhD, President and CEO of Qualidigm and Lead Advisor of the study. “While our hope was to reveal ‘best-practices’ in preparation of a second wave that is expected in the Fall, our analysis revealed that we still have far to go.”

To access key considerations identified through the Phase II study, go to: [Off-Site COVID-19 Testing Toolkit](#). Details on the Phase I study are available [here](#).

About NRHI

The Network for Regional Healthcare Improvement (NRHI) is a national organization representing nearly 70% of the United States with its Regional Health Improvement Collaboratives (RHICs) and State partner membership. These multi-stakeholder organizations are working in their regions and collaborating across regions to transform the healthcare delivery system and achieve the Triple Aim: improving the patient experience of care, including

quality and satisfaction; improving the health of populations; and reducing the per-capita cost of health care. To learn more, visit nrhi.org.

About Qualidigm

With its corporate headquarters in Wethersfield, Conn. and representation in Maine; New Hampshire; Vermont; and Rhode Island, Qualidigm's mission is to transform the quality, safety, and value of healthcare by leading, collaborating, and aligning improvement efforts. Qualidigm provides quality improvement, project management, evidence-based education and learning sessions, evaluation, and technical assistance services to clinicians, healthcare organizations, and communities. To learn more, visit qualidigm.org.