



The Importance of Partnerships in Pandemics

March 13, 2023



Describe the Nature of Your Partnership

Did the partnership exist prior to the pandemic?

Describe the Nature of Your Partnership

- Minnesota Laboratory System: established 2000
- Hallmark of the system – MLS messaging system
- Based on a personal and working relationships
 - Regional conferences/trainings
 - Laboratory meetings
 - Emergency preparedness (HRSA), several years ago



Describe the Nature of Your Partnership

- Typically more of a one-way relationship:
 - Sending MLS messages
 - Challenge sets
- Trainings with emergency preparedness planning for a flu pandemic – mid-2000's



Describe the Nature of Your Partnership

Partnership during the Covid pandemic

- Established a 2x/week meeting in mid-March 2020, then weekly to provide:
 - Lab focused – public health and clinical labs
 - Situational awareness update on the pandemic
 - Discussion and information about supplies, testing, nursing home testing, etc.
 - Trouble-shooting immediate and constantly changing issues
 - Instruction for what to, and what not to submit to MNPHL
 - Operated independently and at the same time as the TCC group – started April 28, 2020





Describe the Nature of Your Partnership

Describe laboratory testing gap or challenge that your partnership addressed

Testing Timeline: March 2020-March 2021

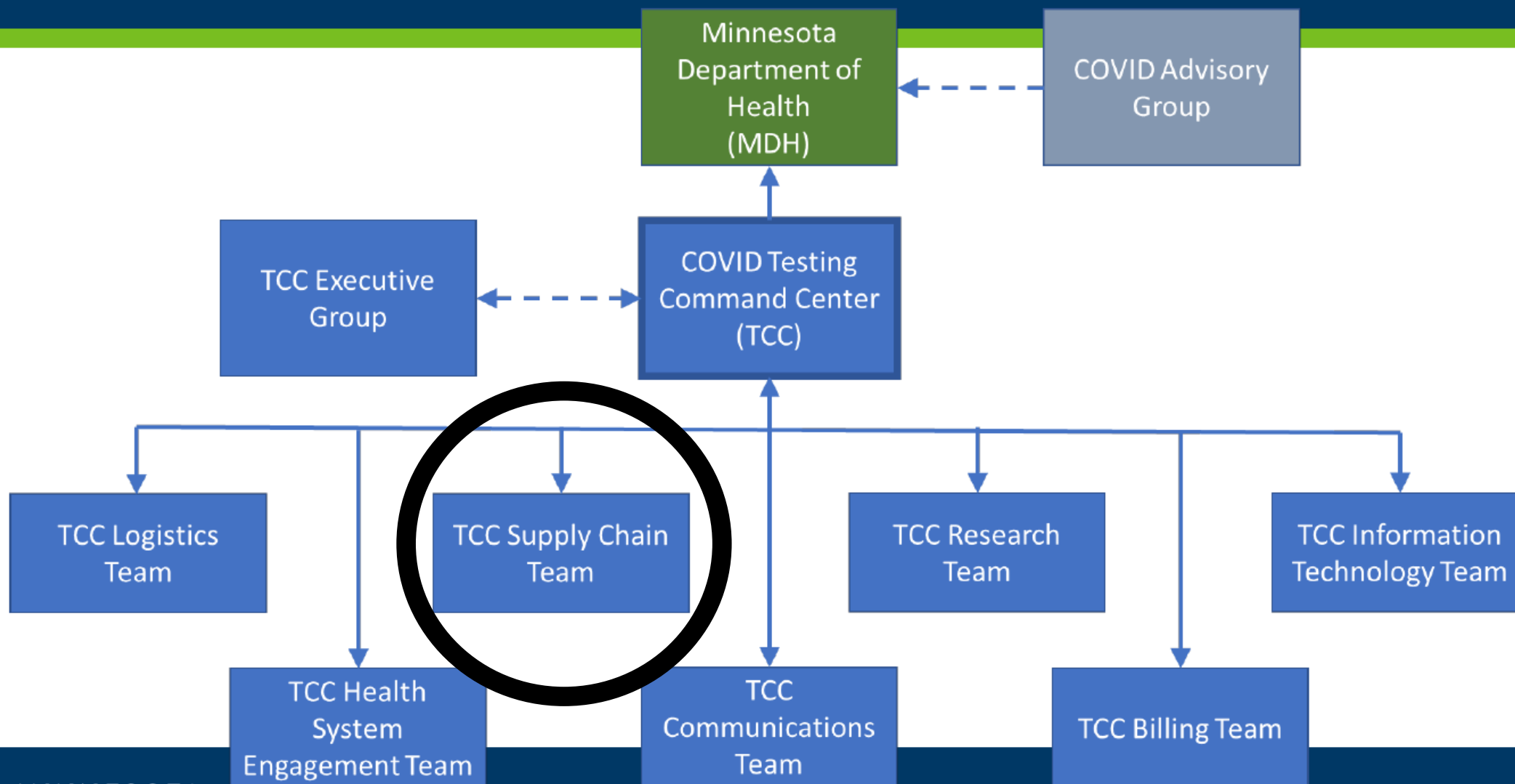
- March 2020, the first cases of COVID-19 started to appear in Minnesota.
- It became apparent that the need for COVID-19 testing was going to become an important aspect of monitoring the disease and protecting the public.
- Minnesota Governor's Testing Task Force was created in order to coordinate and stand-up testing statewide.
 - Interestingly did not include the MLS coordination team at the MDH-PHL.
 - This transitioned into another task force coordinated by the Minnesota Department of Health and representing testing providers statewide.
 - This group, which met regularly addressed various testing types and all the related supply chain issues and impacts on other clinical laboratory testing.
 - A reporting dashboard was developed.
 - A related Minnesota Hospital Association task force developed testing prioritization criteria as demand increased and supply of testing opened up.

State of Minnesota COVID-19 Testing Response

High Level Responsibilities:

- Establish policies for ***prioritization of testing resources***; which groups have highest priority for testing.
- Define ***when to use PCR and/or serology***.
- Work with stakeholders to establish a ***reimbursement structure*** for testing performed utilizing State funds.
- Designate an individual to represent MDH on the COVID **Testing Command Center** and convey policy decisions to the appropriate stakeholders.
- Use clinical and other data from repository/ies to understand ***health equity/disparity issues*** related to COVID testing and disease burden, inform case investigation and follow-up or wrap-around services provided to positive cases, and target public health resources to limit the spread of disease.

Organizational Framework



Role of Testing Command Center (TCC)

Constant need to provide feedback to MDH and Governor

Provide Guidance on:

- Capacity planning
- Collection site planning
- Laboratory capabilities
- Coordination of supply sharing
- Identification of gaps and needs.
- Coordination of testing needs with other health systems

TCC Meeting Cadence and Structure – Early on

- Started April 28, 2020
 - Daily touchpoints for the first several weeks
 - 3x/week thru mid-October, 2x/week until Jan. 2021, 1x/week, bi-weekly March 2022
- Draft Agenda
 - Capacity updates/constraints
 - Supply issues
 - Supply sharing
 - Data updates and requests
 - Other issues
 - Questions

TCC: Testing Capacity - Goal of 20,000 Test/Day

“Moon shot”

- Labs with varying capacity to perform PCR tests
- Sample collection sites around state - create as many opportunities as possible for **symptomatic patients** to get a test.
- Supply chain driving problem-solving and decisions
 - State supply logistics team
- Discussed serologic testing capacity and logistics
- Helped develop **daily dashboard** of COVID testing capacity and refine over time – laboratory input, asking hard questions – *what is the value of the data?*

NOTE: Data displayed on this dashboard come from self-reported survey responses by health systems. It is intended to help with operational decisions and should not be distributed outside of the TCC group as official metrics at this time.

MN TCC Daily COVID-19 Testing Capacity

Last Update: 3/22/2021 11:01:46 AM

Daily General Facility Stats

(Data Reported Today)

Labs reporting today	17
Labs not reporting today	39
Total labs surveyed	56
Diagnostic tests run today *	39,996
Cumulative diagnostic tests run *	7,887,406

Diagnostic Testing

(Most Recent Reporting per Facility)

Labs running diagnostic tests in-house	37
Labs not running diagnostic tests in-house	4
Potential tests with no shortages	56,291
Possible tests with supplies on hand	42,735
% of diagnostic testing capacity limited to high priority samples	25.4%
% of diagnostic testing capacity limited by reagent shortage	13.4%
% of diagnostic testing capacity limited by VTM shortage	
% of diagnostic testing capacity limited by swab shortage	

Diagnostic Sample Collection

(Most Recent Reporting per Facility)

% of diagnostic collection capacity limited by VTM shortage	
% of diagnostic collection capacity limited by swab shortage	

Diagnostic Sample Collection

(Most Recent Reporting per Facility)

Labs running serology tests in-house	20
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Diagnostic Capacity: Capacity / Reported Actual Tests

(Most Recent Reporting per Facility)

CentraCare	100%
St. Gabriels Health	100%
Ridgeview Medical Center	100%
M Health Fairview	97%
MDH-PHL	83%
Childrens	76%
Minneapolis VA Medical Center	75%
Mankato Clinic	71%
North Memorial Medical Center	70%
Rice Memorial Hospital	60%
Madison Healthcare	56%
Lake Region Healthcare	49%
Welia Health	46%
HealthPartners	43%
Mayo	43%
Hennepin Healthcare	36%
Essentia Health (MN)	35%
Sanford	28%
St. Lukes	25%
Stevens Community Medical Center	23%
Alomere Health	22%
Allina	21%
Grady-Barnett	19%

TCC: Continuous Problems for Solving

- Prioritizing testing in various patient populations
- Congregate settings, skilled nursing – how to help with testing and disseminate information
- Weighed in on new rapid testing assays that the State brought in and disseminated:
 - Abbot BinaxNOW antigen testing
 - CUE Health monitoring system
 - etc.
- August 2020 – preparing for testing during the upcoming respiratory season

TCC: August 2020 – Preparing for testing during the upcoming "respiratory season"

Survey of testing providers (Response: n=14)

- Currently running multiplex testing?
- Which tests are included?
 - COVID
 - Influenza A
 - Influenza B
 - Respiratory syncytial virus
- One swab or separate swab collections?
- Limiting factors for running multiplex

Describe the Nature of Your Partnership

Did “getting started” go smoothly or were there challenges?

- **Challenge:** Convincing non-laboratory people that the lab needed to be at the table early and often, when trying to troubleshoot lab testing issues.
- Started with large group of members from various backgrounds and strengths.
- Many other groups (e.g. CEO group) trying to tackle some of the same issues.
- Work expanded and contracted as the response expanded and contracted.
- Eventually got the right mix of laboratory leaders.

Describe the Nature of Your Partnership

- ***Describe any special agreements or arrangements that were required to establish your working relationship?***
 - No special arrangements or official agreements were required
 - A genuine desire to solve the continuous flow of problems knowing all voices were needed to work through the issues



Success Stories

Success Stories – What's successful about your partnership?

How did working together enhance your facility's or organization's ability to respond in the moment?

- Being connected and being part of the decision-making team.
 - MDH and health system laboratory leaders were able to discuss issues and make recommendations in a timely manner.
- Able to bring back decisions and questions from the TCC discussions and share with the CEO group

Success Stories – What's successful about your partnership?

What, if any, are some lasting impacts of the partnership? and/or How has the partnership been leveraged to do other things?

TCC continues to meet as a specific lab community bi-weekly (full-circle and basically to the MLS group)

- MDH-PHL coordinates and facilitates the meetings - **Bret**
- Value in meeting bi-weekly – good discussion and attendance
- Round robin participation
- Lab workforce shortage
- Continuing to plan for Flu/Covid seasons
- Helped to shine a light on the role of the lab - Governor's declaration, news coverage, etc.



Success Stories – What's successful about your partnership?

What, if any, are some lasting impacts of the partnership? and/or How has the partnership been leveraged to do other things?

TCC “Big Win”

- Pre-procedure, pre-surgical testing, asymptomatic testing – group was able to change this policy across health systems.
Power in numbers and sharing by the group.

Success Stories – What's successful about your partnership?

- As the ASCLS national president (2019-2020), Cindy was not aware that any other state had set up a Testing Command Center like we have in Minnesota. The TCC has given laboratory colleagues (friends) an opportunity to work together to solve issues and have a better understanding of the role of Public Health.
- Solidifying the “lab community”
 - Clinical and public health labs: understanding each others' challenges and openly discussing and providing feedback.
 - Don't see the competition between large health facilities as we are all on one team.



Challenges – Lessons Learned

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- The value from working as a statewide team.
- The struggle between clinical labs and public health
 - PH needs/roles were unknown to the clinical lab community
 - Mutual understanding of each others' roles and goals
- “Just in time” supply chain practices hurt us.
- The strength and resiliency of the laboratory community continues “...***we are all in this together.***”

Challenges and Lessons Learned

Describe any challenging aspects of establishing the partnership or working together.

- **What if anything would you do differently knowing what you know now?**
 - Having MDH-PHL at the table earlier in the TCC. Convincing those within the political structure that PHL was key to the testing lab group. PHL as the liaison between clinical lab world and PH/state response.
- **Are there things that could be put into place now that would make working together in future responses run more smoothly?**
 - Steering committee meets quarterly to make sure we are on track. Agenda set every 2 weeks by coordinator (PHL). Roundtable and open discussion, homework, etc.



Thank You!

Cindy Johnson

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Paula Snippes Vagnone

Microbiology Supervisor, Infectious Disease Lab, MDH

Panel Discussion

The panel will have an opportunity to ask each other questions and the moderator will pose a series of questions to the panel before Q&A and opened to the audience