2020 Overarching Jurisdictional SARS-COV-2 Testing Strategy

Jurisdiction:	LA County
Population Size:	10,000,000

1. Describe the overarching testing strategy in your state or jurisdiction.

Los Angeles County (LAC) will meet the goal of testing 2% of the County population, or ~200,000 individuals each month. LAC is currently performing over 350,000 test/month through our clinical providers, public health departments, and community testing sites. Initial efforts during the emergency focused on outbreak investigations and community testing access through drive-through and walk-through sites often located in non-clinical settings (e.g. event venues and malls). In the coming months, we are working with providers countywide to move the majority of community testing into health care settings, while ramping up public health-led surveillance, contact and outbreak operations. This clinically integrated approach will improve the value of testing performed while ensuring close follow-up and family- and community- centered counseling and management post-testing. We are working closely with countywide testing partners to enhance their access to testing capacity and supplies, personnel, personal protective equipment, and training and technical assistance.

In addition to this cross-cutting approach, we have specific strategies for high-risk populations, including those living in congregate settings (e.g. shelters and homeless encampments, justice-involved, skilled nursing and assisted living facilities, etc). In these setting, we deploy teams to test onsite. We are also working to perform targeted outreach to vulnerable populations (e.g. elderly and marginalized communities). As the pandemic progresses, and with advances in point-of care and serologic testing, we will work to incorporate these advances into our testing strategy. Point-of-care testing has seen limited implementation due to low sensitivity and low availability of test kits. We have a significant need for point-of-care and rapid testing approaches in hospitals, outbreak settings, and at entry to congregate settings like correctional facilities. We anticipate significant increases in use of point-of-care test once it is more widely available. The Department of Public Health will continue perform seroprevalences surveillance studies and evaluate the value of serologic test for diagnostic purposes.

Finally, although we have not seen significant adoption in LA County to date, we also expect to see an increases in employer-driven workforce testing and direct to consumer testing - e.g. through newly FDA-approved home-base sampling methodologies and through pharmacies. CVS began testing in LA County today, 5-29-20.

Table #1a: Number of individuals planned to be tested, by month

BY MONTH:	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TOTAL
Diagnostics*	375,000	400,000							775,000
Serology									0
TOTAL	375,000	400,000	0	0	0	0	0	0	

Table #1b: Planned expansion of testing jurisdiction-wide

Name of testing entity	Testing venue (select from drop down)	Performing Lab (if different from testing entity)	Daily diagnostic through- put	Daily serologic through- put	Platforms or devices used (list all)	Specific at-risk populations targeted (list all)
DPH PEH Outbreak Testing	Commercial or private lab	Letsgetchecked	1,000			Persons experiencing homelessness
DHS PEH Surveillance (Sheltered and Unsheltered)	Commercial or private lab	Sonic/Westpac	958			Persons experiencing homelessness
DHS Correctional Health Services (Jails)	Commercial or private lab	Quest	558			Correctional Facility

Name of testing entity	Testing venue (select from drop down)	Performing Lab (if different from testing entity)	Daily diagnostic through- put	Daily serologic through- put	Platforms or devices used (list all)	Specific at-risk populations targeted (list all)
DHS Juvenile Correctional Health	Hospitals or clinical facility	USC Keck	30			Correctional facility
DPH Surveillance and Outbreak testing in non-PEH facilities	Commercial or private lab	Letsgetchecked	1,688			Elderly, disabled, nursing homes, other congregate living settings
Community Testing (e.g. clinics/hospitals, other community testing sites)	Drive-thru testing site	Multiple	10,000			All populations can be tested - including racial and ethnic minorities, healthcare workers
City of LA Testing (not inclusive of community testing)	Drive-thru testing site	Multiple	15,000			All populations can be tested - including racial and ethnic minorities, healthcare workers
CVS Health	Drug store or pharmacy		50			All populations can be tested - including racial and ethnic minorities, healthcare workers

Name of testing entity	Testing venue (select from drop down)	Performing Lab (if different from testing entity)	Daily diagnostic through- put	Daily serologic through- put	Platforms or devices used (list all)	Specific at-risk populations targeted (list all)
LA County Public Health Laboratory	Public health lab		1,500	500		persons experiencing homelessness, other congretated living settings, prisons, nursing homes, healthcare workers and first responders.

2020 Direct Expansion of SARS-COV-2 Testing by Health Departments

2. Describe your public health department's direct impact on testing expansion in your jurisdiction.

The LA County Department of Public Health in partnership with the Department of Health Services will ensure access to testing for County jails, juvenile correctional facilities, and for persons experiencing homelessness who are unsheltered or live in high-risk, congregate settings. The County has active contracts with multiple commercial labs to meet testing needs. We will use these commercial labs to supplement the capacity of our public health laboratories.

We have a comprehensive strategy to prioritize testing for vulnerable and at-risk populations. State guidance on testing in skilled nursing facilities requires the facilities to perform testing on residents and staff. The County will work with these facilities to ensure adequate surveillance and outbreak testing and management. For congregate settings that house persons experiencing homelessness, LA County will support active surveillance testing in a subset of high-risk facilities and encampments, and support outbreak testing in these facilities through CDC funds. DPH does not recommend active surveillance testing in other congregate settings at this time. For individuals living in marginalized communities, LA County will perform targeted outreach and engagement activities to ensure the most vulnerable groups have access to testing and subsequent intervention. LA County will leverage funding from health plans to cover as much testing as possible, preserving CDC funds for testing gaps.

LA County will leverage temporary personnel services agreements (e.g. registries) and contracts to community partners to hire staff to support testing and outreach and engagement activities. LA County will work with the state to obtain necessary personal protective equipment (PPE) for testing providers. Other supplies – test kits and reagants - are provided currently through our contracted commercial labs. Through the use of self-collected specimen collection procedures, we have greatly reduced PPE need, limiting supply chain challenges that were common early in the pandemic.

*****DPH – please add comments on serologic testing (part d) and answer the question of sentinel surveillance for vulnerable populations. On the latter, I don't believe DPH has guidance yet. Per CEO and Dr. Ghaly, we are going to submit an outreach, engagement and testing approach for the most marginalized communities through CDC funding – but I don't believe this will not be a systematic sentinel surveillance activity. Also, please feel free to add to the last paragraph on the answer to question c with regards to reporting to DPH, state, and CDC. Feel free to say that: The County has worked to ensure that commercial labs contracted to perform COVID testing report to the state laboratory reporting system (CalREDIE).

Table #2: Planned expansion of testing driven by public health departments

BY MONTH:	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TOTAL
Number of additional* staff to meet planned testing levels	90	190							280
		FOR DIA	AGNOSTIC TE	STING					
How many additional* testing equipment/devices are needed to meet planned testing levels? (provide an estimated number, and include platform details in narrative above)	16,627	22,115							38,742
Volume of additional swabs needed to meet planned testing levels ⁺⁺	N/A	N/A							0
Volume of additional media (VTM, MTM, saline, etc.) needed to meet planned testing levels**	N/A	N/A							0
Volume of additional reagents needed to meet planned testing levels, by testing unit and platform (i.e. 100K/day - Hologic panther; 100k/day - Thermofisher)	N/A	N/A							
FOR SEROLOGIC TESTING									
Number of additional* equipment and devices to meet planned testing levels	0	0							0

Volume of additional reagents needed to meet planned testing levels, by testing unit and platform (i.e. 100K/day - Hologic panther; 100k/day	BY MONTH:	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TOTAL
- Thermofisher)	to meet planned testing levels, by testing unit and platform (i.e. 100K/day - Hologic panther; 100k/day	0	0							

^{*} Report new monthly additions only, not cumulative levels

⁺⁺ For May and June, only include needs beyond the supplies provided by FEMA. Report new monthly additions only, not cumulative levels.