MEMORANDUM

Date: May 4, 2020

To: The Honorable Chairman and Members  
   Pima County Board of Supervisors

From: C.H. Huckelberry  
   County Administrator

Re: Update Report – COVID-19 in Pima County

I. COVID-19 Case Statistics

Attachment 1 shows the daily count of COVID-19 cases in Arizona and Pima County since March 25, 2020 through May 4, 2020. As of today, the number of COVID-19 cases in Arizona is 8,919, the number of cases in Pima County is 1,346.

While we cannot predict the future, the last six days of cases indicates the change in Pima County on a daily basis is fairly constant from a high of 28 new cases to a low of 20 cases. The number of deaths as a result of COVID-19 complications remains relatively stable with only three over this time period. The data indicates that testing from April 15 to May 4, totals 10,212 in Pima County. The daily count of tests and, more specifically test results, varies from as high as 483 per day to as low as 57 tests per day.

When we statistically review this information, Pima County represents 14.3 percent of Arizona’s population. The data indicates that we represent 15 percent of the State in the area of infections, 25 percent of the deaths, 12 percent of the testing and 20 percent of the hospitalizations.

II. Antibody Testing

As previously stated, the University of Arizona is beginning to provide antibody testing to healthcare workers and first responders. The first phase began on April 30, 2020 and will continue for the next five working days. The goal is to collect 4,500 blood draw samples to determine if individuals have been exposed to COVID-19 and developed antibodies related to the exposure.

The County has been assisting in this effort and has provided two locations for blood draws (Eastside and Northside Public Health Clinics). In addition, the County is a contractor with the University and the American Red Cross and will reimburse the cost of the program incurred by the American Red Cross.

An unforeseen issue that arose with this testing is what happens once a positive result is determined (either the individual has been exposed, had or has COVID-19).
If the individual experiences COVID-19 symptoms, they will be asked not to return to work. To resolve the issue of whether an individual who tested positive is an active carrier of the virus, the protocol approved by the Arizona Department of Health Services has determined a positive, asymptomatic individual wear a mask when working and immediately proceed to have an active viral test administered with the results expedited. If the active virus test is negative, the individual will be allowed to remove the mask when working. Since these individuals are healthcare workers or first responders, we will also ask them to report the positive result to their employer who then will arrange for an active virus test through their occupational medicine provider. If the occupational medicine provider does not possess test kits, they will be provided by the County public health agency.

III. **Active Viral Testing**

The availability of test kits is beginning to improve; however, it is only improving due to our contracting with private providers. The number of test kits we have received from the State Health Department has been minimal.

Deployment of our test kits has been in areas with known outbreaks in skilled nursing facilities, assisted living facilities and other care facilities that are populated by significantly vulnerable individuals. These outbreaks, known as hot spots, need to be quickly contained to prevent the spread to other members of the facility.

In the early period of outbreak, hot spot locations were limited to two facilities. These hot spots have now spread to more than 10 facilities. Hence, the prioritization of available active viral test kits.

To determine if the shortage of COVID-19 viral test kits was only affecting Pima County, I asked the Executive Director of the County Supervisors Association of Arizona to survey all 15 county public health agencies in Arizona to determine if they were experiencing similar issues. The results of this survey are shown in Attachment 2. In summary, the survey indicates the problem associated with availability of test kits plagues almost all County public health agencies in the State.

The Arizona Department of Health Services, unknown to Pima County, announced the beginning of a significantly increased viral testing output, beginning Saturday May 2, 2020 with the hope of having at least 30,000 to 60,000 viral tests administered in Arizona over the next three weekends. The number of viral test results received by Pima County from April 22, 2020 to May 1, 2020, a 10-day period, was 2,062, for an average of 206 per day.

Obviously, the average in the last 10 days is far from several thousand per day. As we understand, the two agencies that will conduct this additional testing are Banner University Medical and Walgreens. As of this date, the two locations are the Banner North Hills Facility on Ina Road and Walgreens at Broadway Boulevard and Houghton Road.
We have no idea how the volume of testing desired will be accomplished at these two facilities. In our conversations with Banner leadership, we understand the North Hills facility has the ability to conduct up to 300 tests in a single day. We do not know how many tests the Walgreens facility is able to conduct. We do not know of any testing quality control measures being imposed by either entity.

Anecdotal evidence received regarding the Walgreens testing has not given a high degree of confidence in the process for administering the test nor the validity of the test.

We also surveyed other counties as to whether they had any advanced notice of this testing program or whether they were prepared to participate. Results of this survey are shown in Attachment 3. Of those counties responding, the answer was no advanced notice, no advanced planning and no ability to facilitate additional testing.

Finally, on May 1, 2020, I distributed a memorandum on testing to the Board of Supervisors (Attachment 4) from Dr. Garcia and Dr. England. This report is helpful in explaining the variety of tests available and their uses.

IV. Employee Wellness Checks

The wellness check program is being expanded in all downtown County buildings, including the Courts. We hope the Court program will be implemented early next week. We have progressed to the point of implementing wellness checks in County buildings and locations where we are checking approximately 2,300 employees daily. In all of these locations, we have only had three elevated temperature screening all from members of the public, two of whom were headed to the Courts.

With rising outside temperatures, we have noticed a slight increase in body temperatures where the first screening is above the threshold of 100.4F, but after waiting a few minutes for a second reading, a person’s body temperature decreases to a normal reading. This is a phenomenon that we will continue to experience throughout the summer, as increased outdoor temperatures will affect temperature screening upon entering a building. In summary, the wellness check program is proceeding well and accomplishing its intended purpose.

V. Arizona Testing Blitz

The Arizona Department of Health Services announced a COVID-19 testing blitz as briefly discussed in a previous section. The results of this blitz are that 588 tests were performed on Saturday. An additional site was added to the list of two sites previously identified, Banner North Hills and Walgreens on the far eastside of Tucson. Pima County provided over 300 viral test kits to the El Rio Community Health Center on Broadway Boulevard who also participated in the testing blitz.
As indicated in the report I provided on May 1, 2020 from Dr. Garcia and Dr. England, to be confident that the infection rate for COVID-19 is under control, the number of returned positive tests should be below 10 percent. I also requested that the Banner University Medical Center – South be a testing site. In addition, we sent letters to our Congressional Delegation requesting the Department of Health and Human Services approve an additional, centrally located Walgreens site in Pima County. We hope these requests are accepted.

VI. Pima County Back-to-Business Task Force

The Back-to-Business Task Force has been initiated with the first meeting of the restaurant/bar group occurring last Thursday afternoon. Significant feedback and discussion occurred with a number of proposed temporary COVID-19 regulatory measures of reopening. All of the measures suggested are now appearing on a list of possible actions to be endorsed as temporary requirements for reopening.

The County also conducted a survey open to all individuals, in both the English and Spanish languages, to obtain feedback on what the public believed was appropriate and/or necessary reopening measures for restaurants and bars. The results of this survey are shown in Attachment 5.

An additional survey will be issued today asking the public to rank their top 10 control measures. These survey results will help inform the restaurant/bar task force member regarding further deliberations and final recommendations on appropriate temporary COVID-19 restaurant and bar control measures for reopening.

The full Back-to-Business Task Force’s organizational structure is shown in Attachment 6.

VII. Critical Supply Chain Issues

In all other updates on COVID-19, we previously reported that the supply chain for personal protective equipment (PPE) and other medical supplies has only been a fraction of the demand. It is essential that the current supply chain bottleneck be resolved, particularly if we are to increase viral testing as this testing requires PPE for healthcare workers administering tests. We have heard on numerous occasions from federal authorities regarding Project Airbridge. As far as we can tell, these supplies are still stuck on the ground somewhere in China.

Our own procurement actions are beginning to see results. From a Health-Procurement side (not including any state or federally supplied items) we have received a limited proportion of items (as of Thursday, Apr 30):
We are expecting several large shipments this week and next, however, that if arrive on time will significantly impact the medical masks, gloves and face shield levels. As I am sure you are aware, it is a very fluid situation and we are demanding updates from suppliers as regularly as possible.

Please note that the isolation gown is the greatest item of need from a demand over supply perspective. We do expect a major breakthrough on this item, however, as World View is tooling up to provide a significant number of gowns to Pima County.

CHH/anc

Attachments

c: Jan Lesher, Chief Deputy County Administrator
Francisco García, MD, MPH, Deputy County Administrator & Chief Medical Officer, Health and Community Services
Dr. Bob England, Director, Health Department
Dr. Theresa Cullen, Appointed Public Health Director, Health Department
# Current COVID-19 Case Information
Arizona and Pima County

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**Cases in Pima County**

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5/4/2020
COVID-19 Viral Testing Kits, Testing Materials and Lab Availability Survey Responses

APACHE COUNTY

Respondent: Preston Raban, Health Director
Contact E-mail: praban@co.apache.az.us

What has been the county’s experience in getting access to viral test kits?
We’ve been able to get that which is sufficient for our needs.

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
Our health care providers and hospital (that are offering the tests) have been able to get the necessary tests. They are granted "X" tests per day, and with that, they have been able to take care of those who are wanted testing.

What has been the county’s experience in getting access to antibody tests?
At this point, the southern end of the county has not been able to get any due to the northern end of the county being such a problematic area.

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
At first, it was a 15-20 day response time... now, we are looking more like the 2-4 day response time based on the ability to get the samples to the commercial labs in the appropriate amount of time.

What has been the county’s experience regarding availability of/access to personal protective equipment?
We have struggled the same as everyone else in the State.

Other Comments:
**COCONINO COUNTY**

**Respondent:** Marie Peoples, Deputy County Manager/Incident Commander  
**Contact E-mail:** mpeoples@coconino.az.gov

**What has been the county's experience in getting access to viral test kits?**  
Access to kits has been difficult at best. We are allowed to order 50 per week from ADHS. We have worked with providers, universities, etc. to encourage them to donate their stock. We have had many specimen collection kits on back order for weeks from our normal clinical distributors.

**What has been the county's experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?**  
See above, we can get 50 per week. Additionally, we only received 24 kits for the Abbott Machine.

**What has been the county's experience in getting access to antibody tests?**  
No luck, but we have not focused on this as regular specimen kits have been the priority.

**What has been the county's experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?**  
Commercial labs had 7-14 delays during the initial weeks of the COVID-19 response, it has improved greatly. The State lab has improved as well, especially by standing up weekend hours. However, not all kits can go to the state, which can be burdensome.

**What has been the county's experience regarding availability of/access to personal protective equipment?**  
Poor. The ADHS formula for distributing PPE was based ONLY on population size. Coconino is only 2% of the population, which meant we were on our own to combat the risk that is associated with all of the travelers, the Grand Canyon taking so long to close, and the "overflow" Coconino hospitals receive from Tribal Communities. The lack of considering risk as a factor during a public health pandemic is mind boggling.

**Other Comments:**
GILA COUNTY

Respondent: Joshua Beck, Public Health Manager
Contact E-mail: jbeck@gilacountyaz.gov

What has been the county’s experience in getting access to viral test kits?
Poor (slow and complicated)

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
We have received test kits, but not nearly enough to match our needs

What has been the county’s experience in getting access to antibody tests?
We do not have access to antibody kits at this time

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
The lab times have been mostly reasonable, and their capacity has not hindered us, testing supplies have.

What has been the county’s experience regarding availability of/access to personal protective equipment?
Very poor experience with PPE availability, and PPE purchasing

Other Comments:
Although the population based formulae have made since, they have left Gila County without nearly enough testing or PPE to address our needs.
**GRAHAM COUNTY**

**Respondent:** Brian Douglas, Director, Graham County Health Dept  
**Contact E-mail:** bdouglas@graham.az.gov

*What has been the county’s experience in getting access to viral test kits?*
Media for PCR is ample. Would like to purchase a rapid PCR test. Antibody rapid test kits are difficult to obtain. Would like to offer testing with Ab rapid kits.

*What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?*
At first, media for PCR testing was hard to find. Eventually, media was available for our needs. Graham County received a private grant to purchase rapid antibody test kits. We have ordered the kits over a month ago, but have not received them.

*What has been the county’s experience in getting access to antibody tests?*
We have funding through a private grant to purchase, but antibody tests aren't available

*What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?*
Commercial labs are turning out results in 24 hours. State lab is 48 hrs. Our primary care physicians and hospital are using commercial labs due to quicker result times.

*What has been the county’s experience regarding availability of/access to personal protective equipment?*
Graham County saved PPE from H1N1. We have not had a PPE shortage issue or have purchased additional PPE at this time.

**Other Comments:**
Working with ADHS through COVID-19 has been good experience for us. The lab, epi dept., and PHEP have all been professional and helpful. It’s amazing what has been accomplished in a couple months.
GREENLEE COUNTY

Respondent: Matt Bolinger, Epidemiologist
Contact E-mail: mbolinger@greenlee.az.gov

What has been the county’s experience in getting access to viral test kits? 
Slowly getting better

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services? 
Slowly getting better

What has been the county’s experience in getting access to antibody tests? 
Difficult to find available test kits

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity? 
Good

What has been the county’s experience regarding availability of/access to personal protective equipment? 
We have not been able to purchase PPE for a few months

Other Comments:
LA PAZ COUNTY

Respondent: Marion Shontz, Health Officer
Contact E-mail: mshontz@lapazcountyaz.org

What has been the county’s experience in getting access to viral test kits?
The State Lab provided them right away; however, the criteria (until recently) was very tight. We had more tests than those who qualified to use them. The private labs (Lab Corp and Sonora Quest) were not as bound to the criteria, but they rolled them out slowly.

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
We have received the amount of swab kits we requested from ADHS. The problem for us wasn’t having them. The problem was using them. As mentioned above, the criteria was very tight. It wasn’t just the criteria, but the process as well. The hospital and doctors offices did not like “jumping through the hoops,” such an ever-changing criteria, getting permission to test (calling us or Banner - who then had to send an e-mail to the State Epi on call) and then having to download the lab forms (because they had to have a specific bar code). Because of all of this, they preferred to use the private labs, where they did not have to have strict interpretation, have to wait for prior approval, or have to access a special website every time they wanted to run a test.

What has been the county’s experience in getting access to antibody tests?
At present we have NO access to antibody tests. Most of these tests are not FDA approved. They can be used under Emergency Use (EU) Declaration, but our Health Department CLIA license does not support EU without FDA approval. Therefore, our medical supplier will not ship to us until they are in possession of FDA approved tests - and then supply vs. demand becomes the next issue. The first mass antibody testing in Arizona is coming out this weekend, supported by U of A, who can do EU testing for research purposes, but it looks like it is mostly Phoenix and Tucson, and not the rural areas. It is hoped that attention will be given to rural areas as well.

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
After the first few weeks, State Lab turnaround was 24 hours - 48 at the most. Private labs were more than 7 days, but the last few weeks have been 24-72 hours.

What has been the county’s experience regarding availability of/access to personal protective equipment?
We have received S&S, and had a limited number (45!) of N95 masks from EMS. The problem with the S & S is “you get what you get." We don’t need overalls. We need gowns. We received limited protective eyewear, but we mostly need gloves and sanitizer. We got ONE box of sanitizer, which didn’t go far, and most of the gloves were size small, which most first responders can’t wear. We have had to dip in to the general fund to purchase our own.

Other Comments:
What has been the county’s experience in getting access to viral test kits?
There has been great difficulty in obtaining the testing kits, including swabs and media.

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
Our county received a small number of test kits from ADHS. Most were provided to long term care facilities. The remaining were retained to test those who are unable receive a test otherwise (example: a home-bound individual who meets the testing criteria).

What has been the county’s experience in getting access to antibody tests?
Our county has not yet received antibody tests.

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
Initially, the time for processing was unreasonably long, with some being as long as 17 days. Turnaround time is improving, but some still take 2-3 days.

What has been the county’s experience regarding availability of/access to personal protective equipment?
Our county has had limited access of personal protective equipment, receiving under 3% of what state received from the feds. Purchasing from suppliers has been close to impossible and what we can order trickles in over weeks.

Other Comments:
NAVAJO COUNTY

Respondent: Janelle Linn, Public Health Nursing Supervisor
Contact E-mail: ava.linn@navajocountyaz.gov

What has been the county’s experience in getting access to viral test kits?
Limited access, only receiving 20-30 per shipment and have only been receiving a shipment every 3-4 weeks.

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
We had a suspect LTC case. ADHS expedited us Abbott test kits and over-night shipped them to us. The process was smooth and expedient. We also appreciate that we were prioritized to receive and Abbott machine.

What has been the county’s experience in getting access to antibody tests?
We've not had any ability to secure antibody tests, to this point.

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
In the beginning there was a 5-7 day lag period but by about 3 weeks in the turn around time is 1-3 days, at least through commercial labs. We haven’t arranged a sample to the state lab since the first couple of weeks after identifying our county’s first case. One issue we had is that when we first started testing, we weren’t told by the state lab that they had a clearing house system. This held our results up, which was frustrating. However, since that time, we've had great communication flow with the state lab and ADHS.

What has been the county’s experience regarding availability of/access to personal protective equipment?
Reasonable. To my knowledge, we’ve not had a facility run completely out of PPE but supplies have gotten low at times. We received a small shipment of SNS PPE supplies. We have a PPE order pending at this time. We will know more once we receive that shipment and can determine the actual turn around time on that order.

Other Comments:
PIMA COUNTY

Respondent: Francisco Garcia, Deputy County Administrator
Contact E-mail: francisco.garcia@pima.gvo

What has been the county’s experience in getting access to viral test kits?
Procurement of viral collection kits has been extremely problematic. We find ourselves competing with the state and clinical partners for these scarce resources.

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
ADHS has supplied only 201 kits to date during this response.

What has been the county’s experience in getting access to antibody tests?
There are so many different vendors in this space that it is hard to evaluate what the best product would be. More importantly what we do with the result is extremely unclear.

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
Across the county lab reports are coming back to ordering providers from 2 to 15 days after collection. More importantly we are starting to see that many lab providers do not seem to transmit the results to the state for action.

What has been the county’s experience regarding availability of/access to personal protective equipment?
Our portion of the NSS was insufficient to meet any meaningful need. We have procured PPE but those supply chains are really overtaxed and again we find ourselves competing against the hospital and others for these supplies.

Other Comments:
PINAL COUNTY

Respondent: Shauna McIsaac, Director Pinal County Health District
Contact E-mail: shauna.mcisaac@pinal.gov

What has been the county’s experience in getting access to viral test kits?
We have received 460 PCR test kits from ADHS, and have used these to test Pinal residents who met the tight criteria for testing set by ADHS. We have not received any additional testing kits from sources other than ADHS. Commercial labs provide testing in Pinal County without the requirement for meeting tight criteria to test, but they do not have sufficient testing capacity to meet the need.

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
In addition to above, last week we received one Abbott PCR testing machine with 24 testing kits from ADHS. ADHS told us that they had been trying to obtain additional test kits for the machine but had been unable to.

What has been the county’s experience in getting access to antibody tests?
Reliable antibody testing has not been available. Although the U of A will begin testing first responders and HCW with their antibody test soon, Pinal County has not been identified to receive any of these tests at this time.

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
2-3 days for tests sent to ASHS lab, 3-7 days for commercial labs

What has been the county’s experience regarding availability of/access to personal protective equipment?
Very challenging to get. We received 75% of our SNS order and have been unable to obtain additional PPE. Our orders were either cancelled or put on hold.

Other Comments:
It has been frustrating to hear from White House briefings that there is plenty of testing capacity and have that not be even close to the experience here. PPE and testing capacity are critical elements in successfully responding to Covid-19 and it is extremely frustrating to not have either available in sufficient quantity.
SANTA CRUZ COUNTY

Respondent: Jeff Terrell, Health and Human Services Director
Contact E-mail: jterrell@santacruzcountyaz.gov

What has been the county’s experience in getting access to viral test kits?
The access has been adequate.

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
Test kits requested by health care providers has been adequate. The distribution from the state to the county has not gone well. Test kits sent to the wrong facility in another county.

What has been the county’s experience in getting access to antibody tests?
We have not tried to obtain antibody test kits at this time. Waiting for guidance from ADHS.

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
The county’s experience has been fine.

What has been the county’s experience regarding availability of/access to personal protective equipment?
Challenging

Other Comments:
N/A
YAVAPAI COUNTY

Respondent: Leslie Horton, Public Health Director
Contact E-mail: Leslie.horton@yavapai.us

What has been the county’s experience in getting access to viral test kits?
Limited, but improving with more healthcare providers having increased access to tests

What has been the county’s experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
Our Public Health Services is not performing COVID testing, but we’ve received about 250 tests from ADHS so far, and have distributed those to agencies who can test and to our County Jail Medical Services

What has been the county’s experience in getting access to antibody tests?
One or two providers are currently providing non-FDA approved antibody tests, with no reporting mechanism. We would like to receive the U of A antibody tests

What has been the county’s experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
This has improved. In March, some labs were taking 4-7 days to return a result. Now most labs are returning results in 24-48 hours

What has been the county’s experience regarding availability of/access to personal protective equipment?
From SNS and private orders, we seem to have enough PPE for the current and projected needs.

Other Comments:
YUMA COUNTY

Respondent: Diana Gomez, Director of Public Health
Contact E-mail: diana.gomez@yumacountyaz.gov

What has been the county's experience in getting access to viral test kits?
It's been very difficult to procure viral testing kits. The primary source of our supply has been the University of Arizona which gave up 1000 test kits.

What has been the county's experience regarding the various procurement sources for acquiring viral test kits? Specifically, with the distribution of test kits from the Arizona Department of Health Services?
The Arizona Department of Health Services has provided us with 200 test kits to date. We anticipate another 200 test kits soon.

What has been the county's experience in getting access to antibody tests?
It has been difficult to procure antibody tests, however yesterday (April 27th) U of A notified me that our county would be part of a study led by U of A in partnership with the Governor's office. They will visit all counties, and use antibody tests created by the U of A to test first responders and health care workers.

What has been the county's experience regarding the time it takes for labs to process tests? With lab availability and/or capacity?
Test times range from 48 hours to 5 days. As testing demand has increased, the supply chain for PPE and testing collection kits has not opened up to keep with the demand.

What has been the county's experience regarding availability of/access to personal protective equipment?
It has been nearly impossible to procure PPE from private vendors. We receive excessive direct marketing from PPE vendors, however, many of those are not legitimate. When we do verify the vendor and place the order, we wait for weeks only to have the order canceled at the last minute. Prices are very inflated and vendors often promise one week delivery and later contact us to notify us that delivery will be delayed for up to 6 weeks or that the items we ordered are no longer available.

Other Comments:
COVID-19 Arizona Test Blitz County Survey Responses

COCHISE COUNTY

Respondent: Carrie Langley, Director Cochise Health & Social Services

Contact E-mail: clangley@cochise.az.gov

Was the county public health department notified of the Arizona Testing Blitz program?
No

Does the county public health department plan to participate in the Arizona Testing Blitz?
No- we do not have supplies and resources to participate

If the county does plan to participate, do you believe the department has adequate supplies to do so?

Other comments:
Our county does not have large commercial organizations. We lack the funding and resources (people) as a community to host broad scale testing. Currently, PCR test kits (Nasal swabs) run about $800.00 for a supply of 100- this is an increase of about $600.00 (pre-COVID). In addition to obtaining supplies and having enough PPE and staff to collect samples, the requirement to send specimens to a private lab requires additional funding and contracts currently not in place with local public health, as we rely on our state lab for communicable conditions, or CDC, or Centers for Disease Detection (a public health laboratory out of San Antonio- which does not offer COVID testing). Our local providers also have the same limitations as noted above, but we are outreaching to inquire if they have any interest in the testing blitz, but are finding obtaining collection kits to be a tremendous limitation.
Respondent: Francisco Garcia, Deputy County Administrator

Contact E-mail: francisco.garcia@pima.gov

Was the county public health department notified of the Arizona Testing Blitz program?  
no

Does the county public health department plan to participate in the Arizona Testing Blitz?  
not at this time

If the county does plan to participate, do you believe the department has adequate supplies to do so?  
we have no testing kits or ppe to provide for this effort.

Other comments:
Respondent: Joshu Beck, Public Health Manager

Contact E-mail: jbeck@gilacountyaz.gov

Was the county public health department notified of the Arizona Testing Blitz program?  
No

Does the county public health department plan to participate in the Arizona Testing Blitz?  
We are looking into it, but it does not appear like our healthcare organizations can meet the criteria set by ADHS

If the county does plan to participate, do you believe the department has adequate supplies to do so?  
We do not have adequate supplies to participate (at the County or hospital level)

Other comments:
**LA PAZ COUNTY**

**Respondent:** Marion Shontz, Health Officer

**Contact E-mail:** mshontz@lapazcountyaz.org

*Was the county public health department notified of the Arizona Testing Blitz program?*
Yes, through a news release

*Does the county public health department plan to participate in the Arizona Testing Blitz?*
This Testing Blitz appears to be centered in Maricopa and Tucson at this time. As a small county with only 2 nurses, who are presently are doing outbreak case finding and contact investigations, it does not seem possible. However, we are VERY interested in coordinating or assisting with Antibody testing when that becomes available within our county.

*If the county does plan to participate, do you believe the department has adequate supplies to do so?*
We have no access to antibody testing at this time. As for N/P swabs, we recently received about 100 vials of media, but no swabs.

*Other comments:*
**Respondent:** Shauna McIsaac, Director Pinal County Health District

**Contact E-mail:** shauna.mcisaac@pinal.gov

*Was the county public health department notified of the Arizona Testing Blitz program?*
We learned about it initially through social media. It was then announced at our Tuesday afternoon Health Officers meeting with ADHS but was not brought up in the state EOC Tuesday morning meeting.

*Does the county public health department plan to participate in the Arizona Testing Blitz?*
No, we do not have sufficient testing capacity.

*If the county does plan to participate, do you believe the department has adequate supplies to do so?*

*Other comments:*
It would be great to get regular updates on PCR and antibody testing capacity in the state at our Health Officer meetings with ADHS. It is not clear at this time if anyone has this information.
Respondent: Jeff Terrell, Health and "Human Services Director

Contact E-mail: jterrell@santacruzcountyaz.gov

Was the county public health department notified of the Arizona Testing Blitz program? We received an email regarding the news release just prior to its release.

Does the county public health department plan to participate in the Arizona Testing Blitz? No, we do not have clinics and are not able to participate.

If the county does plan to participate, do you believe the department has adequate supplies to do so? N/A

Other comments:
MEMORANDUM

Date: May 1, 2020

To: The Honorable Chairman and Members  
Pima County Board of Supervisors

From: C.H. Huckelberry  
County Administrator

Re: COVID-19 Viral Testing in Pima County

COVID-19 viral testing in Pima County continues to be a challenge. Attached please find a report from the Health Department that provides an update and overview on this complex issue and how it is playing out in this community.

I note that overall the availability of testing is improving slowly in this community. This reflects greater laboratory capacity on the part of the major laboratory services providers. However what continues to be in short supply is availability of viral collection kits and PPE both of which are essential and needed if we are to improve test coverage locally. Without an adequate supply of both, we cannot begin to reduce the infectious spread of COVID-19.

Since the beginning of the pandemic the Arizona Department of Health Services COVID-19 data dashboard shows 8,456 tests completed from March 11 through April 29. The peak test number of 362 tests in a single day, but the weekday average typically exceeds 250 tests in a day. Notably our Health Department facilitated 2,108 or 27 percent of tests reported at the end of last week, by providing viral collection kits and/or processing.

Testing capacity has uniformly been cited as a key component in the decision making process for “reopening the economy,” but today there is not a clear federal definition of what adequate community testing levels should be. Federal, state and county resources are invested in testing capacity every day because this information is essential to understand the true extent of COVID-19 infection. Only when sufficient testing is available can we begin to contemplate relaxing the host of mitigation measures in a thoughtful and responsible way.

Attachment

c: Jan Lesher, Chief Deputy County Administrator  
Francisco García, MD, MPH, Deputy County Administrator & Chief Medical Officer,  
Health and Community Services  
Bob England, MD, Director, Health Department
MEMORANDUM

Date: April 30, 2020

To: C.H. Huckelberry County Administrator

Via: Francisco Garcia
Deputy County Administrator

From: Bob England
Interim Director

Re: COVID-19 Viral Testing in Pima County

In December 2019, physicians in Wuhan, China identified a novel acute respiratory disease caused by a new strain of coronavirus. This disease was named coronavirus disease 2019 (COVID-19) and the virus strain was identified as severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The virus spread rapidly and aggressively throughout the world, with over 3,100,000 cases and 216,000 deaths as of April 28, 2020. There is currently no vaccine for this virus and there are no approved therapies or preventative treatments known to cure or avert infection. Treatment is currently limited to symptomatic mitigation and most patients appear to recover after 5-14 days.

Pandemic control measures designed to limit the spread of the disease including infecting tracking and control, social distancing and stay at home orders have been instituted in an attempt to mitigate the surge of infections that would overwhelm the health care infrastructure. Testing methods have been rapidly developed and are a key element in the fight to control COVID-19.

Testing Guidelines

The Centers for Disease Control and Detection have published evolving guidelines recommending specific prioritization of COVID-19 testing. The clinical criteria has been modified based increasing understanding of the actions and spread of the virus. Current priorities of the CDC as of April 28, 2020 are as follows:

High Priority
- Hospitalized patients
- Healthcare facility workers, workers in congregate living settings, and first responders with symptoms
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, with symptoms
- Persons identified through public health cluster and selected contact investigations
Priority

- Persons with symptoms of potential COVID-19 infection, including: fever, cough, shortness of breath, chills, muscle pain, new loss of taste or smell, vomiting or diarrhea and/or sore throat
- Persons without symptoms who are prioritized by health departments or clinicians, for any reason, including but not limited to:
  - Public health monitoring,
  - Sentinel surveillance, or
  - Screening of other asymptomatic individuals according to state and local plans.

Symptoms as discussed in these guidelines include fever and acute respiratory issues of non-productive cough, shortness of breath, or flu-like symptoms in combination with the respiratory issues. These guidelines are in place due to the known characteristics of the virus, the likely health impact of the virus on individuals and communities, and the availability of testing resources. Absent logistical limitations, testing would be more broadly recommended by all public health agencies.

Types of testing

Primary Diagnostics
NAA (nucleic acid amplification) testing is used to diagnose active viral infections, requiring a respiratory sample and specialized laboratory supplies and equipment. NAA is the gold standard for use in the clinical settings, and is generally completed via a process called RT-PCR. A sample is collected by swabbing an area deep in the nose/throat and then placing the swab in a tube containing a special media. The tube is then sent to a lab for processing and analysis. If the virus is present in the sample, this test confirms the patient as COVID-19 infected.

While considered the authoritative testing method, there are limitations. Test results can take 2 to 12 days depending on the location of the lab, and results are reported to the State Electronically sometime thereafter. Test kits consisting of specialized swabs, sterile plastic tubes and transport media are required for each test, and the supply chains still have not recovered sufficiently to make these readily available in the numbers required. Additionally, NAA testing does not identify previous or recovered infections – only current, active infection.

Rapid Point of Care Testing
Abbott has developed a rapid testing device that has received an emergency use authorization (EUA) from the Food and Drug Administration for use during the COVID-19 pandemic response. A variation of the NAA testing above, this self-contained apparatus is able to directly receive and process a sample providing results in as little as 15 minutes. The test operator inserts a specimen from a swab as above into the first of two disposable cartridges where it is mixed and then transferred to the second cartridge. Within 15 minutes a clear readout indicates the presence (positive) or absence (negative) of viral material. All three components used are then discarded.
The speed of this test is its greatest advantage, but it may be sacrificing accuracy to accomplish that timeliness. Anecdotal reports are being returned indicating a high false-negative rate such that some clinicians believe this to best be employed as a quick means to confirm a positive case but not a valid exclusion of infection in the negative results. Additionally, the proprietary cartridge design severely limits the available testing supplies to a single manufacturer and an already highly stressed supply chain.

**Antibody Testing**

To identify previous infection and assumed resistance to subsequent re-infection, clinicians test for the presence of antibodies in their patients’ blood. There are two primary methods currently promoted for the detection of these antibodies – serology and lateral flow immunoassay (LFIA).

Serology relies on isolating a sample of the patient’s serum (the fluid portion of blood) and subjecting it to laboratory process to detect antibodies in that fluid. Depending on the specific style of serology, results can be binary (yes/no) or can identify specific antibody concentrations. Serology requires a blood draw, specialized supplies and laboratory treatment of the samples to complete testing. Generally, serology can have more accurate and valid results than LFIA, depending on the nature of the serology and how well that specific test has been established.

LFIA, as discussed in this writing, uses a drop of whole blood and a diluent that combine and travel over specially treated membrane. The appearance of colored bands in specific areas of the membrane indicate the presence of IgM antibodies (appearing early post infection), IgG antibodies (appearing later after infection), both or neither. Generally, this test requires only the test kit containing a cassette, a lancet, transfer pipette and diluent, and provides a result within 15 minutes. The advantage of this test method is the rapidity of results, limitation of supplies and skills required to administer and result clarity. With many established infections this methodology is highly valid and accurate. COVID-19, however, is such a new virus that the validity of the multitude of LFIA's manufactured to detect it remains uncertain. As of April 28, 2020 three such tests has received FDA approval under an EUA.

A general concern regarding antibody tests is the applicability of the presence of antibodies to immunity to COVID-19 reinfection and what role this information may play in patient care and for health care workers and first responders. In some cases antibody response provides evidence of immunity to reinfection for a lifetime while other viruses may generate antibodies that are only effective for a shorter period. The novel nature of COVID-19 is such that there is currently no way to know the durability and extent of the protection afforded by the antibodies.

**Testing resources in Pima County**

**Primary Diagnostics**

Clinical facilities in Pima County can access COVID-19 testing through their contracted commercial labs including Sonora Quest, LabCorp and others. Those commercial labs, however, have been severely impacted by supply chain weakness and limited availability of the specialized swabs and media required for testing.
To help bridge facilities, particularly smaller venues or those at highest risk for morbidity and mortality (such as long-term care or assisted living facilities), Pima County has established agreements with three additional commercial or research labs and is in the process of adding a fourth. These include the Translational Genomics Research Institute (TGen North) in Flagstaff, Paradigm Labs in Tucson and the Phoenix metro, and the Center for Disease Detection (CDD) in Texas, the contracted provider for the majority of the Pima County Health Department clinical labs. All three of these facilities provide essentially the same service – processing NAA tests. The fourth agency, Accu Reference Medical Lab out of Linden, New Jersey, provides lab analysis but also manages specimen collection, storage and shipment in “pop up” testing sites.

To make use of these resources, Pima County and the partner facilities still need to address the supply chain issue. The Biorepository at the University of Arizona has provided a steady supply of the specialized media and tubes necessary and has procured a supply of functional swabs for specimen collection. To date they have donated over 2,800 collection kits to the testing effort and are working to provide thousands more over the coming weeks, (see attachment). The Health Department has distributed nearly 2,000 of these kits to community health centers, long term care facilities and assisted living sites – in some cases performing the actual specimen collection – and intends to continue supporting these facilities as long as the pandemic persists. These kits can be, and are currently, processed at TGen and Sonora Quest.

Paradigm has provided an initial 5,000 test kits and the Health Department will be distributing these in the immediate term. These kits can only be processed by Paradigm. Through a limited initial allocation, CDD will be providing several hundred kits each week based on the rate at which they are consumed. In all, we estimate that the Health Department can help push up to 6,500 primary diagnostic tests per week once all resources are on board.

**Rapid Point of Care in Office Testing**

The Arizona Department of Health Services (ADHS) has provided Pima County with two Abbott ID Now point of care test devices. As previously indicated, testing supplies for this device are in extremely short supply and at this point only enough for initial set-up, quality control and training have been supplied. ADHS is working with the manufacturer to secure a large and steady supply of the test cartridges but the timeline is as yet uncertain. At this time however, Pima County has only enough cartridges to test fewer than 45 people.

Once the supply shortage is resolved, this will provide an asset to rapidly assess and quarantine infected individuals, a particularly important step in locations serving high-risk populations such as long term care and assisted living facilities.

**Antibody Testing**

Two methods of antibody testing will soon be available in Pima County. The University of Arizona has developed a serology-based assessment that they are planning to deploy across the state. Initial efforts
will be made to provide testing to high-risk groups such as health care workers and public safety, but they plan to also make serology available to other populations as well.

Pima County is in the final stages of contracting with Cellex Labs, a FDA-approved manufacturer of LFIA tests in the U.S. and expects to bring an initial 25,000 test cassettes into the region in the next month. Additional orders will be placed as the supply chain stabilizes and grows more robust, and other FDA approved tests will also be added to the local test plan as they become available.

Facility-Based and Commercial Testing
Health care facilities and commercial labs are engaged in testing for their patients independent of Pima County efforts. While it has been challenging to get an accurate and committed count of testing capacity, we know that more than 8,456 tests have been resulted in Pima County since the onset of the pandemic. As of end of last week, the Pima County Health Department was directly responsible for distributing 2,108 viral collection kits representing 27% of the testing that has occurred in this county since the beginning of the pandemic.

Hospitals, Community Health Centers (CHCs), and other large ambulatory care settings, are also submitting tests on their patients and represent the balance of the testing in this community. Smaller individual practitioner offices and provider groups, clinical behavioral health entities, long-term care facilities and others are all also able to provide testing, most through contracts with established commercial labs. These types of facilities have the least access to test and PPE supplies and likely do not receive the same prioritization medical supply distributors as larger facilities, there have likely been several hundred tests completed at these smaller scale locations.

LabCorp has received FDA approval for at-home NAA specimen collection and Sonora Quest recently announced the availability of antibody testing at their lab sites with physician order. It is reasonable to expect that other commercial labs will make similar announcements in the coming days.

Aggregate Testing Rate
It is difficult to present an accurate estimate of total testing capacity in Pima County. Facilities capable of ordering and processing COVID-19 tests do not have an obligation to report test numbers to the State or the County (only positive test results are reportable). The ADHS COVID-19 data dashboard shows 8,456 NAA tests completed from March 11 through April 29, with a peak test number of 362 and a weekday average near 250.

An indicator of the adequacy of test coverage in a population is percentage of positive results which in Pima County has hovered between 11 and 17%. Experts suggest that a consistently positive rate below 10% is an indicator of adequate testing coverage.

Federal and state directives to increase testing levels have been echoed in recent days with an expectation of 2-5% of the population tested. Governor Ducey released a plan to test up to 60,000 residents over three weekends starting on May 2, partnering with Banner Health and Walgreens to run drive-through
and onsite testing across the state. Two such sites will be operational in Pima County however broader participation in this effort on the part of other ambulatory care partners is due to the lack of available testing and PPE supplies.

**Future Developments**

Testing capacity has uniformly been cited as a key component in the decision making process for “reopening the economy” but there is not a clear federal definition of what an adequate level of testing that would be. Federal and state resources are being dedicated to ramping that capacity in order to understand the true spread and nature of the COVID-19 infection and to inform decision makers on the safety of loosening stay at home orders. Robust contact tracing will open the door for phased relaxation of social distancing while still limiting the magnitude and impact of surges in infection.

Alongside testing capacity is the need to understand the level of protection COVID-19 antibodies provide against reinfection. Until that is better clarified the value of antibody testing remains speculative. If the degree of immunity or resistance is determined to be significant, accurate and valid antibody tests will further the support for returning to work and school. Until the successful development of a vaccine – not expected by even the most optimistic timelines before 2021 – this determination will likely be the most significant finding in controlling the spread of COVID-19.

The Pima County Health Department will continue to provide regular updates to County leadership on the receipt and distribution of test resources and will continue to assess community-testing capacity.

Attachment
ATTACHMENT
MEMORANDUM
Public Health Emergency Preparedness
COVID-19 Response Team

Date: April 28, 2020
From: Louie Valenzuela
EOC Manager
Spencer Graves
Logistics Section Chief

To: C. H. Huckelberry
County Administrator

Re: Follow up to Daily Viral Test Kits Received from Arizona Department of Health Services

In response to your memo, dated April 24, 2020, please see the attached daily tally of viral test kits received by Pima County Health Department from March 13, 2020 to date.

Please note, to date, there has been one allotment of viral test kits from Arizona Department of Health Services. A total of 201, received on Thursday, April 09, 2020. It is also important to note that test kits purchased from Paradigm are currently undergoing validation, and due for distribution tomorrow.

Health Department has disbursed over 2300 test kits, for use in long term care settings, congregate shelters, and through partnerships with Federally Qualified Health Centers for use in ambulatory clinic settings.

Pima County Health Department will continue to track receipt of test kits and provide updates as requested.

<table>
<thead>
<tr>
<th>DATE</th>
<th>Arizona Department of Health Services</th>
<th>Paradigm</th>
<th>Sonora Quest</th>
<th>University of Arizona</th>
<th>Grand Total</th>
<th>Disbursed</th>
</tr>
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<tbody>
<tr>
<td>03/17/20</td>
<td></td>
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<td>168</td>
<td></td>
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<tr>
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<td></td>
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<td>Total</td>
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<td>201</td>
<td>5083</td>
<td>417</td>
<td>8,501</td>
<td>2,308</td>
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Which of the following protective measures must restaurants employ before you are willing to resume dining in (including patio service)? Check as many as apply:

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
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</thead>
<tbody>
<tr>
<td>All staff wearing gloves and masks</td>
<td>56.58%</td>
</tr>
<tr>
<td>Patrons must wear masks while waiting to be seated; waiting areas must be</td>
<td>52.08%</td>
</tr>
<tr>
<td>Wellness checks of patrons at the door – temperature screenings and</td>
<td>32.70%</td>
</tr>
<tr>
<td>Wellness check temperature screenings for all staff before starting the</td>
<td>68.33%</td>
</tr>
<tr>
<td>Six feet distance between all tables and booths</td>
<td>68.02%</td>
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<tr>
<td>Reservations only to avoid long waits and lines outside</td>
<td>40.14%</td>
</tr>
<tr>
<td>Occupancy limitations based on six-feet physical distancing rule</td>
<td>66.11%</td>
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<tr>
<td>Servers limited to specific tables</td>
<td>33.34%</td>
</tr>
<tr>
<td>No seating or service at the bar, if applicable</td>
<td>27.93%</td>
</tr>
<tr>
<td>Or no protective measures necessary</td>
<td>17.07%</td>
</tr>
</tbody>
</table>

Answered 4178
Skipped 0