

Health Centers' Experienced and Anticipated COVID-19 Testing Challenges

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The national network of Community, Migrant, and Homeless Health Centers are key sources of health care across every state and territory, serving over 30 million patients and playing pivotal roles in responding to the COVID-19 pandemic. In particular, health centers have ramped up viral testing for COVID-19, a crucial strategy for inhibiting the virus's spread and "reopening" schools, businesses, and other essential services in communities across the nation.

Nearly every health center (97%) is now reporting they have the ability to provide COVID-19 viral tests, up from 80% on April 6, and the vast majority (81%) have walk up or drive up testing, which has more than doubled since April 6. This unprecedented escalation of testing capacity resulted in 4 million patients tested nationally as of mid-September, with 12% of them testing positive.¹

Federal investments such as the Coronavirus Preparedness and Response Supplemental Appropriations Act 2020, CARES Act, and Paycheck Protection Program and Health Care Enhancement Act have been vital in helping health centers build their testing capacity. However, insufficient supplies, staff shortages, lab processing delays, and other local- or community-specific barriers are impeding many health centers' ability to expand the number of tests they provide.

To better understand health centers' COVID-19 testing challenges, the National Association of Community Health Centers (NACHC) analyzed health center data collected weekly by the federal Bureau of Primary Health Care¹ and conducted a qualitative analysis² of the testing challenges health centers have experienced, how they may have resolved them, and any testing-related challenges they anticipate encountering in the near future. The information presented in this document is a synthesis of NACHC's findings with data from other sources.¹ We found that many health centers face emerging and mounting challenges, particularly as the demand for more COVID-19 testing is increasing while local businesses and schools seek to reopen.

Challenges Experienced

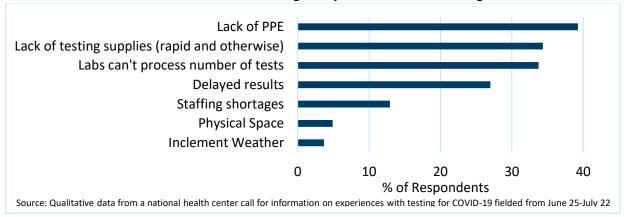
The most commonly reported challenge experienced by health centers was lack of PPE supplies (39%). Moreover, health centers commonly reported lack of testing supplies necessary to conduct tests and inability of labs to process the tests (34% each). The latter has led to delayed turnaround time with results, which is more of an issue with locations experiencing a second surge of Coronavirus, as some of them mentioned having wait times up to three weeks. Health centers also mentioned staffing shortages, lack of physical space, and inclement weather such as extreme heat or rain affecting their ability to test outside as substantial challenges. The BPHC's weekly qualitative themes report has found health centers also incur difficulty with attaining adequate numbers of rapid tests and/or testing machines, with some reporting these being on backorder for them since the pandemic's onset. A few mentioned they have to compete for these supplies with larger institutions, such as hospitals, who often get first access, while others said they received faulty or contaminated supplies, which they were unable to use.¹

¹ Bureau of Primary Health Care, Health Resources and Services Administration, Primary Care Association COVID-19 Survey Qualitive Themes Report summarizing data collected from April 22-September 11, 2020; Comments Analysis COVID Weekly Survey collected from May 22 to September 11, 2020.

² Qualitative data come from a national health center call for information on experiences with testing for COVID-19 fielded from June 25-July 22. This analysis includes a thematic analysis of submissions received from 160 health centers throughout the nation.



Health Centers' Challenges Experienced with Testing



Stories from the Frontlines: Quotes from Health Center Staff on their Testing Experiences

We continue to have challenges procuring tests, especially at regular intervals for consistent testing. In two weekends, we were able to test over 1000 people in a testing blitz and have tested as kits are received. Consistent orders are placed each week yet most go unfulfilled.

- Health Center staff, Washington

Lack of coordination with state health department and clear direction on what level testing CHC's would provide. In the first 60 days of response only hospital and state health department testing were being discussed/coordinated and only patients sick enough for hospital care could access testing. This was despite our private labs like LabCorp having adequate testing supplies for us

- Health Center staff, Ohio

Because of these delays, the results of such COVID-19 testing may not be actionable. Worse, the delays may be contributing to the spread of the virus. It is already difficult for our patients to take time off of work; it becomes doubly challenging when we cannot provide COVID-19 test results for them (and, derivatively, to their employers), especially if patients don't have symptoms or are feeling better - Brian Haile, CEO,

United Neighborhood Health Services, Tennessee

Strategies Taken to Overcome Challenges

Some health centers have found ways to overcome their testing challenges through attaining more PPE and/or testing supplies, while others have connected with external parties, such as their state Primary Care Association (PCA), local health departments, universities, and/or government to attain supplies. PCAs have also worked on health centers' behalf with labs to attain more testing supplies.¹ To have more capacity for testing, some health centers added new operations such as utilizing their parking lot as a testing facility and/or hired more staff or redeployed existing staff to be COVID-test administrators. Last, some labs have provided health centers with more tests and sped up the turnaround time that they provide health centers with testing results.



Health Centers' Strategies Taken to Overcome Testing Barriers



Stories from the Frontlines: Quotes from Health Center Staff on How They Overcame Barriers:

Worked with local department of health to get testing supplies, switched to laundered reusable gowns, looking at purchasing temporary controlled portable containers/temp structures and/or aardvark trucks to house testing staff, hiring additional staff, getting Abbott ID now on loan from department of health.

– Julia DeJoseph, VP & CMO,
Delaware Valley Community Health, Pennsylvania

We have been testing patients for COVID-19 by setting a window of time in the afternoon, designating only one provider to do all testing for that day (to conserve PPE) and having patients tested in the parking lot to minimize exposure.

– Jennifer Morrison,

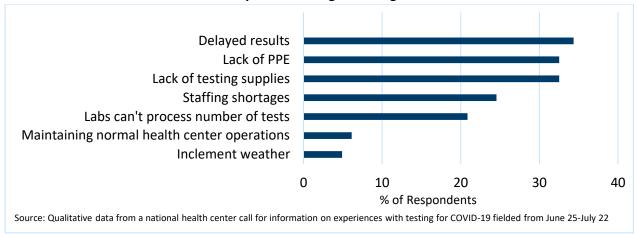
Director of Quality Management,
Will County Health Department, Illinois

Health Centers' Anticipated Testing Challenges

Health centers anticipate experiencing additional challenges as the pandemic heads into the Fall and Winter, with some already experiencing a second surge of patients needing tests as their cities reopened. Those that had a second surge reported even longer turnaround times for results from labs, with some saying they received results up to three weeks after submitting their tests. This is likely because labs are unequipped to handle the large amount of tests coming their way. Additionally, health centers feel that lack of sufficient testing and/or PPE supplies, as well as staff shortages, will only worsen as the need to ramp up testing continues. Many report that the shortage of COVID-19 testing supplies will limit their ability to test for influenza as well as impede their normal health center operations as Winter approaches. Last, weather continues to be an ongoing challenge, as some health centers had to shutter their outdoor operations due to extreme heat in the summer and others will have to do so soon due to impending rain and colder conditions, resulting in less space available to conduct testing.



Health Centers' Anticipated Testing Challenges in the Near Future



Stories from the Frontlines: Quotes from Health Center Staff on Anticipated Challenges

Capacity with added work of testing on system when we have so much pent up medical and dental care needs to get to. Also access challenges also due to pent up need, new patient need and spread of staff over multiple functions. 3) maintaining social distancing criteria in our work environment also limits how to address these demand issues and spread of staff to cover.

Kathrina Westby-Sharman,
 VP of Patient Experience and Operations,
 Healthpoint, Washington

We still cannot get timely turnaround for test results. This leaves people frustrated, unwilling to get tested, or not following full guidelines as the results are taking too long. There is increasing lack of trust in the system given the ever-changing supply/messaging. There is still no reliable POC test that we could use to get people back to work, back to school faster. We are worried that our supply of current testing supplies and PPE will run out.

- Health Center staff, Colorado

Conclusion

Health centers have already tested 3.9 million patients for COVID-19 over the last 6 months — representing approximately 12% of the total patient population who relied on health centers the year prior. Common barriers hamper health centers' ability to expand this testing, including lack of testing and PPE supplies, inability of labs to process large number of tests leading to delayed results, staffing shortages and inclement weather. Moreover, local, state, and national policies and circumstances are rapidly changing, magnifying challenges that limit testing capacity. For example, communities affected by wildfires may be experiencing new PPE shortages, and new clinical guidelines that expand who should receive a test may also increase demand for testing without mediating existing supply shortages or addressing other impediments to ramping up testing.

Health centers are playing an essential public health role as communities work to contain the pandemic, prevent the worsening of health disparities, and hasten the reopening of businesses, schools, and other community services. While Congress took initial steps to provide critical emergency funding as part of the legislative efforts to address this national crisis, much more is needed. Additional emergency funding is required to ensure survival, and long-term, stable investments are essential to stabilize this vital network of primary care providers and to ensure health centers meet operational needs, recruit and retain staff and expand needed services for patients.