



NPAIHB

Indian Leadership for Indian Health

NPAIHB COVID-19 Weekly Update

Please sign in using the chat box:

Enter the tribe or organization you are representing
and names of all people participating with you today

Information for Today's Call

Agenda

- ▶ Welcome & Introduction:
Nick Lewis, Chair of the
Northwest Portland Indian Health
Board
- ▶ Updates on Present Situation
- ▶ Mini Training: Testing and
Surveillance Update
- ▶ Leg and Funding Update
 - ▶ Laura Platero and Sarah Sullivan
- ▶ NPAIHB Calls and Q&A
- ▶ State Updates

Guidelines

- ▶ Please place yourself on mute
unless speaking
- ▶ Sign in, using chat box, with
your tribe/organization and
names of all participants
- ▶ Use the chat box for
questions, for Q&A after
updates and announcements

NPAIHB COVID-19 Weekly Data Update

35 Portland Area I/T/Us have reported to date

- ▶ Includes 30 tribes and tribally-based IHS Service Units (covering 70% of 43 tribes)

NPAIHB/IHS Portland Area Testing Data* as of May 2:

- ▶ Total Tested: 1,495
- ▶ Positive: 145
- ▶ Negative: 1,311

I/T/U PPE Status as of May 4

- ▶ Adequate (3+ months): 5
- ▶ Limited (1-3 months): 8
- ▶ Inadequate (<1 month): 1
- ▶ Critical (<1 week): 0

I/T/U Test Kit Status as of May 4

- ▶ Adequate (3+ months): 1
- ▶ Limited (1-3 months): 8
- ▶ Inadequate (<1 month): 3
- ▶ Critical (<1 week): 1
- ▶ No test kits available: 1

*Data include Abbott ID NOW analyzer results, as well as some results for tribal members not tested at I/T/U clinics



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COVID-19 Cases Reported by Tribes for Each State

- ▶ ID: 19
- ▶ OR: 49
- ▶ WA: 142
- ▶ These numbers include individuals not tested at an I/T/U facility but known to be positive for COVID-19



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AI/AN COVID-19 Deaths Reported to NPAIHB or Indian Health Service

- ▶ 8 deaths of AI/AN people in the Northwest have been reported to the NWTEC Surveillance system or Indian Health Services.
 - ▶ 7 Washington Tribal Members
 - ▶ 1 Oregon Tribal Member
 - ▶ An early SNF death included an AI/AN individual from a member tribe, however it is not reported in our data
 - ▶ Total from surveillance and anecdotal data is 9 at this time.

NPAIHB COVID-19 Surveillance Survey

- ▶ Data collection for Portland Area:
 - ▶ Clinic staffing, staff exposure/illness
 - ▶ PPE and test kit status
 - ▶ Testing results & patient status
- ▶ ALL tribes and I/T/U clinics should report:
 - ▶ Daily reporting required for Abbott ID NOW analyzer sites
 - ▶ Other tribes: daily if possible, weekly at minimum

- ▶ Report Online:

<https://www.surveymonkey.com/r/NPAIHBCovid-19>

or email tphep@npaihb.org
for the fillable/printable report
form or for technical assistance



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Testing for COVID-19

Update

5-5-20

Abbot ID NOW Test Kits

Abbot ID NOW Test Kits

As of May 1st, there have been a total of 148 test kits (24 individual tests per kit) distributed among the 19 sites that received an Abbott machine

Abbot ID NOW Test Kits

Reports about accuracy



THE CORONAVIRUS CRISIS



Study Raises Questions About False Negatives From Quick COVID-19 Test

April 21, 2020 · 6:07 AM ET
Heard on [Morning Edition](#)

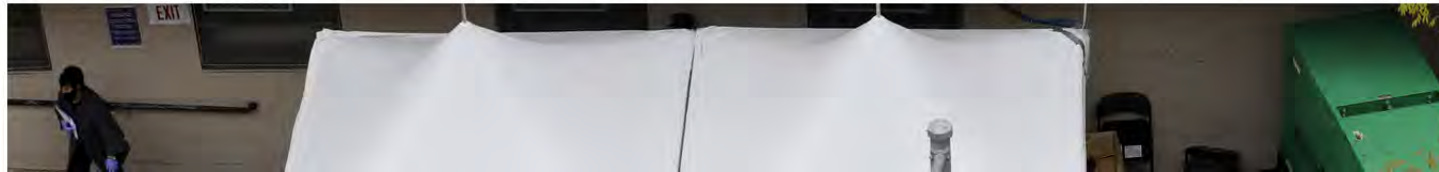


ROB STEIN



4-Minute Listen

+ PLAYLIST



Abbot ID NOW Test Kits

NPR reported that a soon to be published study from the Cleveland Clinic of 239 samples known to have SARS-CoV-2 showed the Abbott ID NOW machines detected the virus in 85.2% of the samples, so a false negative rate of 14.8%. These samples that were run were stored in VTM.

Revised CDC Priority Populations

Priority Level	Population
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
<i>Persons identified by public health officials or clinicians as high priority</i>	Persons with symptoms of possible 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
	<i>Persons without symptoms who come from racial and ethnic minority groups disproportionately affected by adverse COVID-19 outcomes-currently African Americans, Hispanics and Latinos, some American Indian tribes (e.g., Navajo Nation).</i>
	Persons without symptoms who are prioritized by health departments or clinicians, including but not limited to: public health monitoring, sentinel surveillance, presence of underlying medical condition or disability, residency in a congregate housing setting such as a homeless shelter or long term care facility, or screening of other asymptomatic individuals according to state and local plans.

Special populations that should be considered for testing

Consider testing the following additional high priority populations:

- ▶ Any detainee in a tribal jail
- ▶ Any staff member working in a tribal jail
- ▶ Elders (those 60 or older)
- ▶ Any patient with a history of autoimmune disease treated with immune-suppressants, any patient undergoing cancer chemotherapy, and any patient with an inherited or acquired immune deficiency; chronic lung disease (COPD, pulmonary fibrosis, asthma); diabetes
- ▶ Anyone who has recent contact (within 14 days) with a confirmed patient with COVID-19 disease

Testing Purpose

Clinical Evaluation: Test is obtained to help confirm the clinical diagnosis, e.g., COVID-19 vs Influenza

- ▶ PCR/NAAT-May influence treatment or where a patient may go for inpatient care
- ▶ IgM- identifies recent infection (~2-4 weeks) and may indicate someone who could donate plasma

Public Health: Test is obtained for intervention or for population surveillance

- ▶ PCR/NAAT- identify currently infected for isolation and contact tracing
- ▶ IgG- identifies past infection (>4 weeks) and may identify the degree of spread within the population, potential proportion of immunes

Available Tests and Characteristics

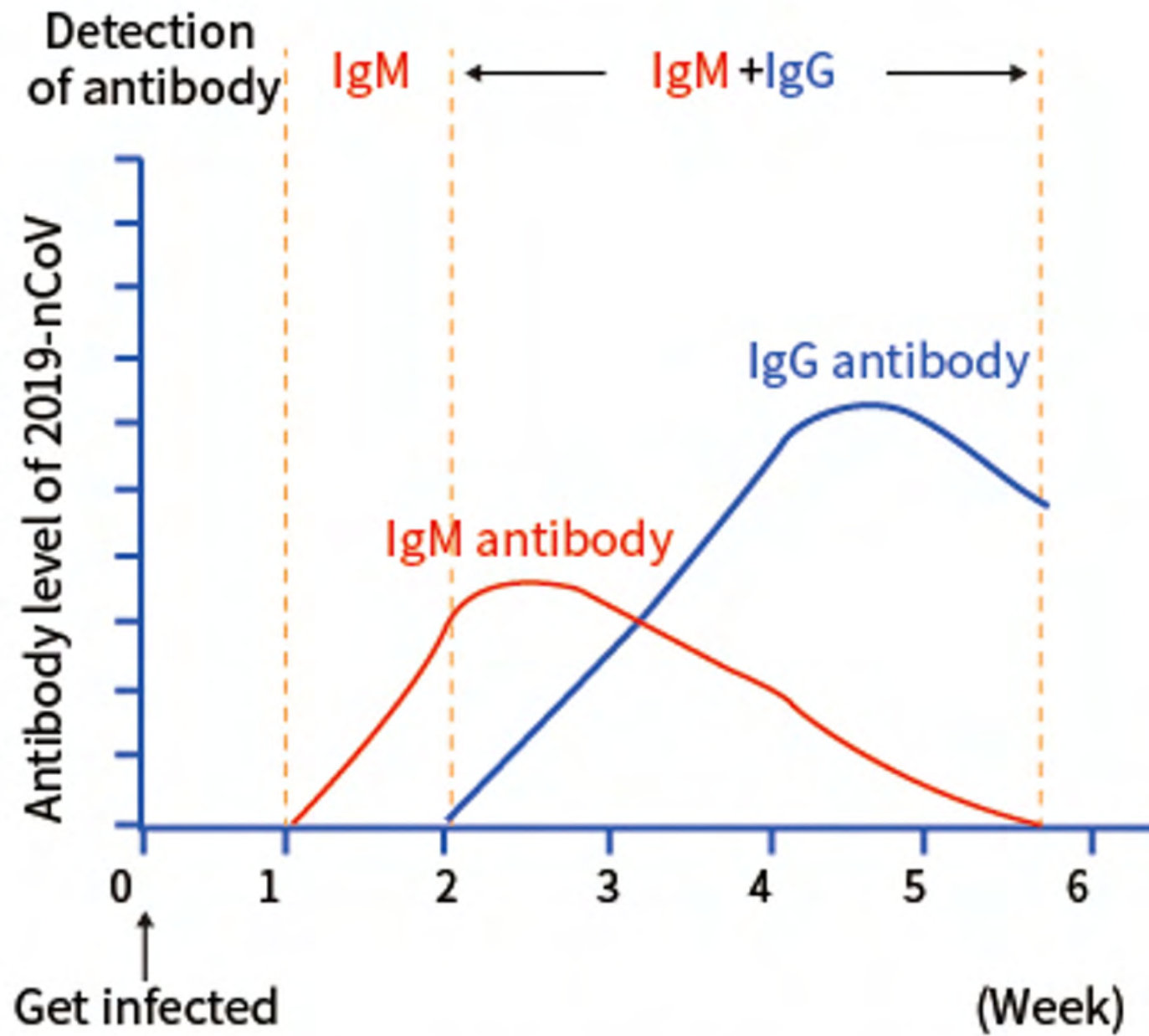
FDA Emergency Use Authorization (EUA)

Viral RNA Detection Tests

- ▶ PCR (multiple platforms)
- ▶ Nucleic Acid Amplification
- ▶ Rapid Point of Care Tests
 - ▶ PCR (Cepheid Gene Xpert)
 - ▶ Nucleic Acid Amplification (Abbott ID Now)

Serology (Antibody Detection Tests) See graph on next slide

- ▶ IgM
- ▶ IgG
- ▶ Total antibody



Adapted from Zaho et al., 2020, medRxiv

What are CDC and IHS planning regarding population surveys for COVID-19?

CDC

- ▶ CDC is collaborating with public health and private partners on a variety of serology surveys of different sizes, locations, populations studied, and purposes.
 - ▶ large-scale geographic surveys,
 - ▶ community level surveys, and
 - ▶ smaller-scale surveys focusing on specific populations

IHS

- ▶ IHS does not have any plans to conduct population-based serology or repeated PCR/NAAT surveys at this time. However, IHS is actively engaged with CDC to coordinate COVID-19 response.

What can we learn from serology surveillance?

▶ Questions CDC wants to answer through Serology Surveillance

- ▶ How much of the U.S. population has been infected with the virus causing COVID-19 (SARS-CoV-2)?
- ▶ How is this changing over time?
- ▶ Are there different characteristics, or [risk factors](#), that are associated with SARS-CoV-2 infection, such as age, location, or underlying health conditions?
- ▶ How many U.S. residents experienced mild or asymptomatic COVID-19 illness?
- ▶ How long can antibodies be found after a COVID-19 infection?

▶ Questions CDC cannot answer through Serology Surveillance

- ▶ How much of the U.S. population is immune to COVID-19 and not able to get infected again?
- ▶ How many antibodies are needed to protect someone from COVID-19?
- ▶ How long will someone with antibodies be protected from COVID-19?
- ▶ Can you be re-infected with COVID-19?
- ▶ Can people with antibodies return to work?

Are there any State plans to include tribes in population-based testing surveys?

- ▶ Oregon is planning a wide-spread representative sample that will oversample certain population groups, including AI/AN
 - ▶ Participants will report information on symptoms and monitor temperature and will be tested if symptoms develop
 - ▶ 10,000 of these individuals will also be selected at random for additional testing
- ▶ Washington and Idaho are both focusing increased outreach and testing for AI/AN communities but are not planning widespread population-based surveys

Details on the Oregon plan are available at: <https://www.ohsu.edu/health/key-oregon-study-covid-19> and <https://www.oregon.gov/oha/erd/pages/covid-19-news.aspx>

Upcoming Training - OR Contact Tracing

- ▶ Training for tribal contact tracers
- ▶ [Oregon Contact Tracing Video](#)



**Oregon Tribes:
Calling All Disease
Detectives: Contact
Tracing Training**
May 8, 11:00 Friday


Contact tracing is essential for preventing further spread of COVID-19, warning contacts of exposure to stop chains of transmission.

Training Goal: To conduct contact tracing according to the established protocol.

- Trace and monitor contacts of infected people
- Support the quarantine of contacts
- Expand staffing resources
- Using the Oregon Health Authority contact tracing web entry


Recommended Pretraining Video
Principles of Contact Tracing
<https://www.youtube.com/watch?v=cf7m32pgsMI>
Click here to Register for Training

 Or scan with a mobile device

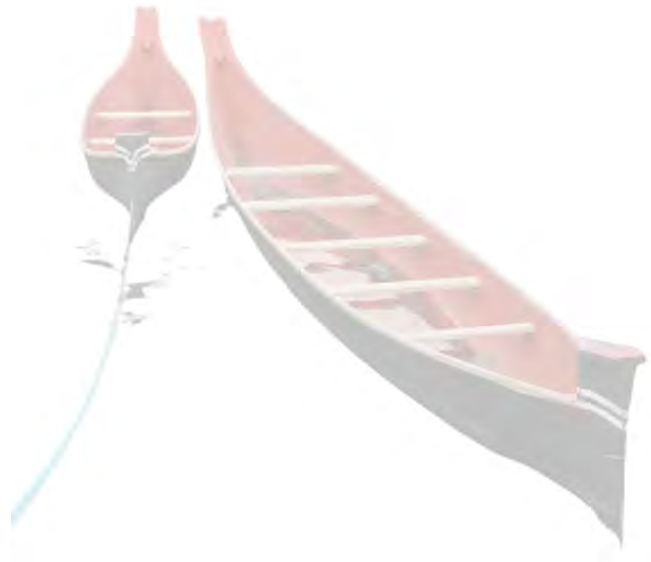
Contact investigation in care facilities, other congregate living settings, and households is a priority

Legislative and Policy Update



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**STAY HOME
STAY SAFE
SAVE LIVES**

Ongoing NPAIHB COVID-19 Calls

- ▶ NPAIHB Tribal COVID-19 Call - Tuesdays at 10am
- ▶ NPAIHB COVID-19 ECHO Calls - Monday and Wednesdays at 12pm

Log in information available at: www.npaihb.org/COVID-19

To Reach Us for Questions

Primary Contact:

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