

CHCF CHIP Summary

Name, Degree: Clemens Hong MD MPH

Professional Title, Organization: Director, Community Programs, LA County Department of Health Services

CHIP Title: Meeting Overwhelming COVID-19 Testing Need in Marginalized Communities in Los Angeles County

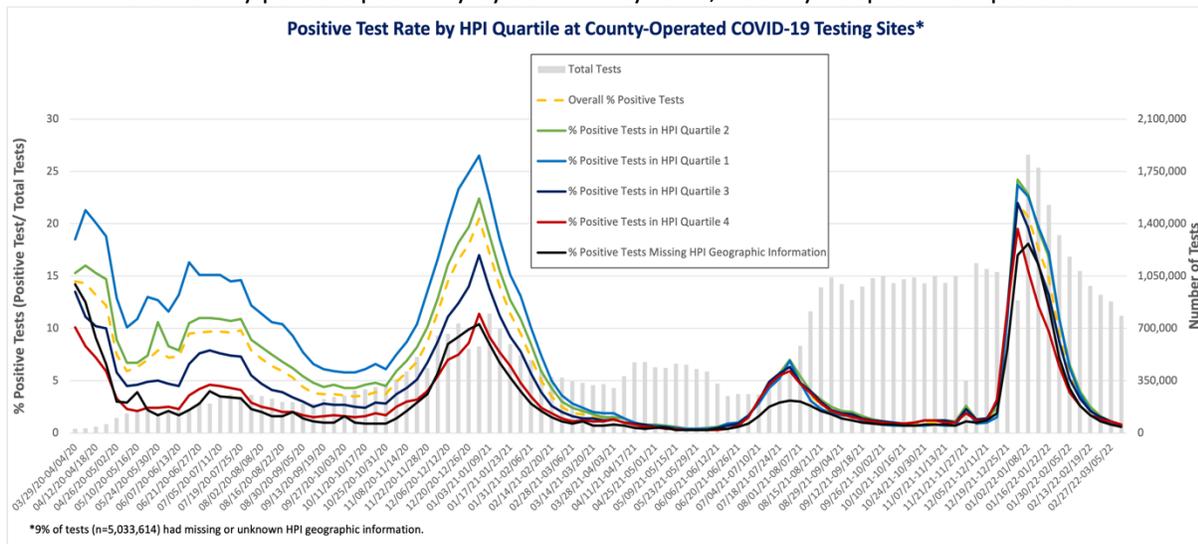
Project Description:

Marginalized communities were disproportionately affected by the COVID-19 pandemic with increased cases, hospitalizations, and deaths. As the County COVID-19 testing lead, I worked to ensure equitable access to COVID-19 testing in marginalized communities across Los Angeles County. We partnered with the State, Cities and private partners to expand countywide testing capacity, used data to allocate COVID-19 community testing resources to the most marginalized and impacted communities, engaged trusted messengers to get accurate information out to these populations, and engaged our expert community-based organizations and churches to perform outreach, navigation, and testing. Through this effort we reduced disparities in COVID-19 testing access between high and low risk communities by Health People Index indicator through the course of the pandemic.

Key Findings and Lessons Learned:

Key Findings

- On the whole, we met COVID-19 testing demand and reduced disparities in testing access, as measured by percent positivity by community-level, Healthy People Index quartile:



- At our peak, we had over 50 County-operated, COVID-testing sites almost exclusively in the most marginalized communities in Los Angeles County, and well over 300 partner testing sites.
- County-supported testing sites provided over 9 million COVID-19 tests in just under 2 years, reaching a monthly capacity of over 350k tests/week and exceeding 1.4m tests/month. County community testing partners provided additional testing for all comers.

Leadership Lessons Learned

The work presented here was a part of a larger coordinated COVID-19 testing initiative and County COVID response. The COVID-19 testing team dealt with massive complexity and urgency. We focused on a few, important guiding principles that we believe were important drivers to our success:

- 1) **Avoid paralysis, make thoughtful, but definitive decisions. Set a clear course, but be ready to change course at any time.** Complexity can lead to paralysis. We needed to make decisions early, figure out what ideas and information to exclude from our analysis, so that we could make decisions. Then chart a course and execute. While implementing the plan, we had to continuously monitor our progress, as well as new ideas and information to determine when we needed to stop, re-analyze the situation with new information in hand, and be willing to change course at any time.
- 2) **Go slow to go fast and far – mind the “tyranny of the urgent”.** While we tried to be decisive (#1), we strived to be thoughtful, strategic and comprehensive in our analysis. We tracked our data, met with experts constantly, and stepped back regularly, look at data and reevaluated. We worked hard to not be reactive to urgency, but to slow things down and be assertive in our decision making.
- 3) **Communicate, communicate, communicate!!**
 - a. First, we tried to remember that nothing was every black and white in the face of so much uncertainty. All along the way, we communicated our plan, our decision-making process and the uncertainty we were managing in our decisions, and the “why” and “why not” behind key decisions.
 - b. We communicated with the public/community and used trusted messengers.
 - i. Importantly, we engage stakeholders in problem solving and trusted and valued community partner expertise – “those closest to the problem are closest to the solution”
 - c. We communicated with the team and key organizational stakeholders, so they were tracking and working with us in a coordinated way.
 - d. We communicate with key partners, including public officials, so they could amplify our messages, and anticipate and change direction with us.

Next Steps:

Hopefully, we will see the pandemic move endemic soon, but we continue to see threats and ongoing uncertainty. Unfortunately, federal funding is winding down, so the convenience and access to testing will be reduced as a result. In this phase, we are focused on moving testing, particularly in the context of increasingly available treatment, back into the health care system while simultaneously exploring ways to make home-antigen tests more widely available to community members. We will provide technical assistance to health care systems, employers and schools during the transition and focus on maintaining testing access in our most marginalized communities for as long as there is funding.