

City of Coral Gables City Commission Meeting
Agenda Item I-1
May 26, 2020
City Commission Chambers
405 Biltmore Way, Coral Gables, FL

City Commission

Mayor Raul Valdes-Fauli

Vice Mayor Vince Lago

Commissioner Pat Keon

Commissioner Michael Mena

Commissioner Jorge Fors

City Staff

City Manager, Peter Iglesias

City Attorney, Miriam Ramos

City Clerk, Billy Urquia

Fire Chief, Marcos De La Rosa

Public Speaker(s)

Agenda Item I-1 [9:13 a.m.]

Report regarding anti-body testing.

Mayor Valdes-Fauli: Okay, Peter, you want to talk about antibody testing? Item I-1.

City Manager Iglesias: Yes, Mayor.

Mayor Valdes-Fauli: You ready for it?

City Manager Iglesias: Mayor, our Emergency Manager, Chief De La Rosa, will present this item. Thank you.

Fire Chief De La Rosa: Good morning, ladies and gentlemen. Can we have our PowerPoint presentation up, please? Okay, so, next slide, please. As I stated, this will be our presentation on community testing up to where we're at right now. We're going to provide an update on where we are with the community testing, as well as provide an outlook to move forward. Next slide. Just as a reminder, when we discuss the issue of talking about tests, that we are discussing two different tests. And I hate to belabor the issue, but it's important that in the context that we're talking which one we're talking about. The City is currently conducting the viral test or the swab test, which determines if you currently have the infection and you're infected, as opposed to the antibody test, which determines if your body has fought off the virus in the past but cannot determine whether you are currently infected or not. Next slide. As far as homebound seniors are concerned, our paramedics continue to conduct the PCR swab test at home. We usually schedule everyone for Tuesdays and Thursdays, and to date, we have done 36 residents have had the test conducted at their home. Next, please. We have scheduled registrants through the month of May by appointment for the on-site testing. I can tell you that our demand progressively goes down. Everyone who has registered is scheduled to be tested. There are no one pending at this point. An interesting phenomenon though is that about 60 percent of our calls recently have been people requesting for the test that are -- do not live in the City, that are outside of the City. Next slide. This is just a reminder of how we have prioritized who gets scheduled for testing. I can tell you that last week and through this week, everyone that has been scheduled for a test fits the priority three. Anyone above the age of 65 has already been tested or has already been tested, so really, we're concentrating on those that are well below the age of 65 with no underlying condition. Next slide. This is a summary of how we've tested. If you've noticed, we haven't had an increase in demand. What we've had is an increase in experience. As we got more proficient in scheduling and conducting the tests with the lab that we use, we've increased the number of people that we were accepting or testing. However, the more folks that we scheduled, the greater our number of no-shows. We have reached about a 30 percent no-show, and as we get into the days when we're

scheduling those that are Priority 3s or have no underlying condition and are younger, our no-show rate is actually greater to 40 percent. So, next slide. We did concentrate on our seniors. If you've noticed, when we took this breakdown of our age group, we had 887 folks that were tested; 556 of those were 60 or above. So, our testing has always concentrated on prioritizing our seniors. Next slide. We have processed through the whole -- since the beginning, 1,565 residents. As I stated earlier, we average anywhere between the 30 to 40 percent no-show or cancellation rate. Through the end of the month, we have test -- we will be testing 1,156, and May 27 will conclude the on-site testing, with a total program cost of \$110,700. Next slide, please. As we move forward, I can tell you that there is -- demand has progressively gone down. We have no one right now pending or waiting to be scheduled. Everyone that has called or has registered online has received a date, and our numbers continue to go down as far as folks requesting the test. So, right now, we're completely caught up and there's no one pending to have a test. A lot of the calls, as I stated earlier, now have moved towards non-residents that we direct to a testing facility that's available where they live. The testing infrastructure, when we close our on-site test as of May 27, the infrastructure will remain in place in the event that there's a resurgence that we can open it. So, our relationship with the lab, how we've proceeded up to this point, all of that will remain in place in case we have to ramp up again because we've seen community resurgence. Our paramedics will continue to do the homebound testing. That does not end. The program is in conjunction with the County, so we're going to continue to do that. And we're going to continue to leave our resident hotline open for any inquiries or needs that we can make that we get them addressed. Next slide. As far as PCR testing or the swab testing, we did locate within the five-mile radius of the city where our residents could obtain that test, both urgent -- MD Now urgent cares that are either in the City or close to the City provide the test, as do the Baptist urgent cares and a private practice in the City, which is Pure Executive Health. They've agreed to test City residents. This information has been posted on our website for our residents to reference and know what number to call if they want to schedule a test. Next one, please. With regards to antibody testing. As I stated earlier, keep in mind that antibody detects the presence of antibodies in the blood, so this is -- it identifies an immune response by your body to the virus. It's an epidemiological tool used for surveillance. It helps us determine how many people in our community or it lets you know personally if your body

has fought off the disease. It is not a diagnostic tool, and I keep stressing that because it's important. If you do the blood test or the finger prick test, that tells you if there's presence of antibodies in your blood stream. It does not tell you if you're currently infected with the disease or if you can pass it on to somebody else. All it tells us is that your body has either fought off the virus or has not been exposed to the virus. That's all the antibody test determines. Next slide, please. It is -- there is no FDA approval for serological tests. All of the serological tests that are available right now have what's called an emergency use from the FDA. That means that these vendors have conducted their own tests or have shown what methodology they used to the FDA, then they've received an EU rating or emergency use authorization. What that tells us is that the tests that are out there right now, their reliability and performance is still under evaluation. It hasn't been validated. And it's an emerging technology with a lot of unknowns, with different types of test. And if you've seen some of the articles that have appeared either in the newspaper or some of the periodicals that are out there, it will show you that there's still some concerns with these tests. Do I believe that this is going to be perfected in the near future? Yes, but as we gain experience and these tests are validated is when we're going to -- when they're going to receive an FDA approval. But as of now, there are no tests that have an FDA approval that we can say this is the test that we should be using or that we can recommend as opposed to, for example, the swab test that we're using. We did an analysis, there is no city currently providing serological testing. There are some cities that have allowed a private practice to utilize a parking lot, for instance, to do the testing, but no city in itself is doing the test. The state is providing an antibody testing at Hard Rock but it's only for healthcare providers and first responders. Again, it's being used as a surveillance to see how many of our healthcare providers have been exposed to the virus itself. Next slide. As we did with the PCR test, we did do an analysis (INAUDIBLE) providing antibody test within five-mile radius of the City. There are two LabCorp locations, there's a Quest location, and then there's the urgent cares, as well as the Physician Healthcare. All of these facilities, including Pure Health, which is the private practice, are conducting serological testing, and this information as well has been posted on our website for our residents to access, if they would like to have the testing. All of these facilities will charge your insurance for it, but you can access it within a five-mile radius of the City. And lastly, the last slide, please. So, in summary, our call

centers will continue to be staffed and address all needs. Our paramedics will continue to do homebound testing. Unless we receive different direction, our on-site test will finalize everybody by May 27. As of now, I think there's like 40 people scheduled for that day, so our demand has definitely gone down. As I stated earlier, our infrastructure for the test will remain in place and we will continue to monitor for resurgence. And sites for both the serological test and the swab tests, where it's available within the proximity of our city has been listed in our websites. So, I'm open for any questions at this point.

Mayor Valdes-Fauli: Thank you, Chief. Any questions?

Vice Mayor Lago: Chief, how are you, sir? Thank you for...

Fire Chief De La Rosa: Good morning.

Vice Mayor Lago: Good morning. Thank you for the presentation. It's very, very thoughtful and very detailed. I think it answers a lot of questions that a lot of us in the Commission and a lot of residents are dealing with every single day in regard to the differences between the COVID and the serological testing. What is your recommendation as we move forward and we see this trickle-down of individuals that are coming, that are requesting of residents are requesting the COVID testing? What do you recommend in regard to antibody? You were able to produce some information, which I think is going to provide a lot of guidance for the Commission in regard to what we see as the next step in regard to whether the City should provide the antibody test. Just I'm a little bit concerned about the significant -- it's about 30 to 40 percent, as you mentioned, error rate in regard to the serological testing that we're reading about in a lot of these periodicals. Could you give your -- could you give me a little bit more background in regards to what do you recommend in regards to whether the City should find -- should we head in the direction of recommending private providers that are located within a five-mile radius or do you think the City should go the route that we did with COVID testing and set up an actual facility -- drive-through facility for the antibody testing if the residents so deem it?

Fire Chief De La Rosa: So, what I would guide this Commission and my recommendations to the City Manager have been that we can provide facilities that are currently providing the serological test, but I have reservations in stating that this is one particular test that we should go with as opposed to this other brand because they all have the emergency use authorization. But you know, we're not experts on determining the effectiveness or the proficiency of each one of these tests. I was expecting this question, myself and Chief Stolzenberg, and we discussed it with our medical director as to what guidance we could provide, if the City was to say we're going to go with, you know, this particular test versus this one. They all have the EU. In fact, there was one article that I was reading that the original tests that were out in the market, at one point, the FDA actually stopped allowing even the EU authorization, came back and almost regrouped and is now issuing out EUAs again because the original test that went out, it flooded the market and they were out there, but then they started to learn a lot of concerns that they had with the accuracy of the test. So, as I stated in my slides, it's an emerging technology. I think within the next couple of months, we're going to see a test that is either validated or starts to show that it's the most proficient at detecting antibodies. But right now, from an emergency management standpoint, I can't recommend one test versus another. For example, I also know that there's a test that is not as quick as the finger prick test that's actually an antigen test, that they run your blood and do that test, but that's a test that has to be performed in a laboratory, so it's not (INAUDIBLE) as easy. So...

Vice Mayor Lago: So, Chief, with that being said, do you think that the next step for the City -- because we're -- the Commission -- and I know that my colleagues are also getting a lot of these phone calls of people who are concerned. And what ends up happening is that they don't meet the criteria. They may meet it in age as a result of them being over 60 -- 65 or older, but they don't have symptoms, they never had any symptoms. So, they're concerned that maybe they had it in the past, are they asymptomatic. So, do you think that maybe the best option for the City would be to compile an official list of companies or medical professionals, like the one that you mentioned before, who are qualified, who have all the proper licenses, who can offer this type of testing in a safe professional manner? And also, we want to make sure that there's no price

gouging because I've also heard of mobile testing facilities that are going to people's homes and charging hundreds of dollars for this testing per person. And that's the last thing we want to see. We wouldn't want to see the Wild Wild West out here. Maybe you -- do you think it's an opportunity for the City instead of setting up like we did with the COVID-19 testing, maybe to compile a list of pre-qualified, prescreened entities, businesses that can provide the adequate testing necessary for our residents?

Fire Chief De La Rosa: Yes. That was our intention with the list that we put on our website. If you look at the list that we put on our website, it's MD Now, it's Baptist, it's the private healthcare provider in the City, and these are medical facilities, as you pointed out, that are reputable, that have a stable relationship, that are not going to be like you mentioned, the fly-by-night or Wild Wild West. We took care in providing those facilities and indicating that those facilities are available.

Vice Mayor Lago: Yeah.

Mayor Valdes-Fauli: Thank you, Chief.

Vice Mayor Lago: And my final point...

Mayor Valdes-Fauli: Can we listen...

Vice Mayor Lago: Okay, and my final point...

Mayor Valdes-Fauli: Mr. Vice Mayor.

Vice Mayor Lago: Go ahead.

Mayor Valdes-Fauli: Can we listen from the City Manager too as to his...

Vice Mayor Lago: Yeah, yeah, of course.

Mayor Valdes-Fauli: Recommendation?

City Manager Iglesias: Yes. And also, Vice Mayor, the -- UM may be ramping up that soon also at the campus.

Mayor Valdes-Fauli: Great.

City Manager Iglesias: So, I think that we have all those facilities around. And in addition, I think the inaccuracy of the test right now is what concerns us.

Vice Mayor Lago: But I do think -- if I may add one last point. This is the last thing I'm going to say about this. I think our staff is doing an exceptional job, along with the firm that we hired to come in. I was on the ground. I went to see it personally. It was seamless; it was smooth. Our team was very professional. I know that all of us have gotten -- been copied on emails how happy the residents were or have been so far. I haven't gotten one negative feedback yet. I really think that we should continue to offer using our firefighters that in-home testing, in which I think the presentation said we did about 36 so far for those who are, again, over a certain age who are, you know, homebound. I think we should continue to offer that, if my colleagues so deem it appropriate. I think that's something that's essential and provides our most needy residents with a form of comfort, especially in these difficult times.

Mayor Valdes-Fauli: I -- Mr. Vice Mayor, I agree with you. I think that now we're testing people that do not fit the first two categories, over 65 or -- and symptoms or symptoms and under 65. And with our no-show rate and with people who do not live in Coral Gables being tested, 40 percent (INAUDIBLE) and we have covered our population. Our residents, they had been tested. And one of the most valuable things we have done is those 36 that we sent homes, and I have received

calls and the firefighters very kindly and very friendly, in a friendly manner, have gone to homes and have tested these people and the expressions of gratefulness have been amazing. I agree with you. We should continue with that, but I think that given the cost and given the utilization of our testing, I think that we should suspend this and not spend another -- other funds until it is required, and then we'll convene a special City Commission meeting, if necessary, to get it started again. I agree with you, Vice Mayor. Any other comments from the Commission?

Commissioner Keon: No, I agree. I don't think we should continue the swab testing until there is a time that we (INAUDIBLE) we open up if there are additional cases or where people become more symptomatic. You can always restart it again. But I don't think that there's any reason to continue it right now. And as to the antibody testing, you know, that is still really a work in progress. And you can put up names of people that are doing it, but I also think you have to make sure that people understand that we don't have any testing today that is reliable testing for antibodies. And we don't have -- the only testing you have is the one where you have to draw the blood, where you can actually test the antibody titer, which means you know what level of antibodies you have, whether you have the immediate antibody or you have long-term antibody. Or what the antibody titer is that it's actually provides some protective mechanism for the body against a new -- catching it again. So, I think a lot of people want the antibody test. I think they believe that they will not be infected, they won't be infected again, you know. They can move around freely and be out in society and in contact with people and whatever else. And we don't have those answers yet. We don't know that yet. We don't know what the long-term immunity that these antibodies actually provide. So, I would not support our doing any antibody testing until we have a very reliable test for them.

Mayor Valdes-Fauli: Thank you. Thank you, Commissioner.