

**Wisconsin State Laboratory of Hygiene
Board of Directors Meeting
March 23, 2021**

**APPROVED MINUTES
December 15, 2020
1:00 P.M. – 3:00 P.M.
Wisconsin State Laboratory of Hygiene
2601 Agriculture Drive
Madison, WI 53718**

MEMBERS PRESENT: Chair Charles Warzecha, Vice-Chair James Morrison, Secretary Dr. James Schauer, Dr. German Gonzalez, Gina Green-Harris, Greg Pils, Gil Kelley, Jeffery Kindrai,

WSLH STAFF PRESENT: Amy Miles, David Webb, Kevin Karbowski, Allen Benson, Lori Edwards, Dr. Errin Rider, Kevin Karbowski, Dr. Al Bateman, Steve Strebel, Kristine Hansbery, Tip Vandall, Allen Benson, Jim Sterk, Dr. Peter Shult, Dr. Alana Sterkel, Cynda DeMontigny and Nathaniel Javid

DNR STAFF PRESENT: Zana Sijan, Steve Geis

GUESTS PRESENT: Lisa Bullard-Cawthorne

Chair Charles Warzecha made a motion to call the meeting to order at 1:00 P.M. Jeffery Kindrai seconded the motion. The meeting commenced at 1:00 P.M.

Item 1. ROLL CALL

Chair Charles Warzecha initiated the roll call of the Board. Nathaniel Javid conducted the roll call of the Board members. All Board Member seats or their designated representatives were present except Barry Irmen, Dr. Richard Moss and Dr. Robert Corliss. There were no attendees on the public telephone line.

Item 2. APPROVAL OF MINUTES

Approve the minutes of the September 15, 2020 Board Meeting as submitted. **Chair Charles Warzecha** entertained a motion to approve the minutes, so moved by **Jeffery Kindrai**. **Charles Warzecha** seconded the motion. The voice vote approving the minutes was unanimous.

Item 3. REORGANIZATION OF AGENDA

There was no request to reorganize the agenda.

Item 4. PUBLIC APPEARANCES

There were no public appearances.

Item 5. BOARD MEMBERS' MATTERS

Jeffery Kindrai noted that he will need to leave the meeting by 2:00 p.m.

Chair Charles Warzecha welcomed the two new Board Members, Ms. Gina Green-Harris and Dr. German Gonzalez.

Chair Charles Warzecha noted from the Wisconsin DHS that COVID-19 vaccines will be arriving in the state shortly in significant numbers. Individuals who are considered high risk will be given priority and we will work through the rest of the population in time. The WSLH is still heavily involved in the response process.

Item 6. INTRODUCTION OF NEW BOARD MEMBERS, MS. GINA GREEN-HARRIS & DR. GERMAN GONZALEZ

Dr. James Schauer introduced Ms. Gina Green-Harris and Dr. German Gonzalez to the Board who are serving as Public Members. Ms. Green-Harris thanked the Board for this opportunity and is excited to serve. She is currently employed with the University of Wisconsin-Madison and serves in three roles as Director for the Center for Community Engagement and Health Partnerships, Director and PI of LifeCourse Initiative for Healthy Families, Director of WI Alzheimer's Institute Regional Milwaukee Office, and is a current PhD student in the ICTR Program at UW. Ms. Green-Harris's entire career has been working for health equity and inclusion using an asset based community development model. Dr. Gonzalez is a physician by training and is a public health practitioner. He is the Great Lakes Intertribal Epidemiologist Center Director currently in Lac Du Flambeau, WI. He is working in emerging infections, public health informatics, and bioterrorism. He is very excited to be part of the Board. The Board went around and introduced themselves to the new members.

Item 7. COVID-19 TESTING & RESPONSE

■ Dr. Peter Shult, WSLH Communicable Disease Division

Dr. Shult presented on COVID-19 Testing and response at the WSLH. Dr. Shult gave some background on SARS-CoV-2 PCR testing at the WSLH, which officially began on March 2nd. This required an all-of-division response to meet the exploding demand. Issues with the supply chain threatened to shut down testing early on but strategy for testing diversification (six different extraction platforms were validated in two weeks) which allowed us to source multiple supply lines. The lab never shut down and other mission critical work was continued. Dr. Shult reviewed the steps in lab testing for emerging pathogens including the development of the test

by the CDC, then the CDC rolls out the test to public health labs (i.e. the WSLH and the Milwaukee City Lab), large clinical labs bring on testing (Wisconsin labs and national reference labs), and commercial manufacturers get approved tests so small and medium-sized labs can test. Dr. Shult next presented on how the WSLH expanded their capability and capacity through equipment and reagents (and reviewed the different platforms available at the WSLH), along with staffing and space. Dr. Shult noted the importance of the Wisconsin Clinical Laboratory Network, which allows for great collaboration. This started as a virology network in 1995, and a tuberculosis network was added along with a LRN sentinel lab network which deals with emergency response and threats along with bioterrorism. The WCLN functions as a partnership between clinical labs, the WSLH, and the CDC. These activities include emergency response, training and education, facilitating communication, and public health surveillance. Dr. Shult noted how Wisconsin's lab testing capacity has increased over time along with how the COVID-19 lab participation rate has increased over time. The current daily testing capacity is 59,695 with 133 labs currently performing testing and 17 labs planning to test. Dr. Shult explained the activities in the WCLN during the pandemic at the WSLH including developing a detailed webpage, validation panels, COVID-19 webinars, weekly lab messages, an email listserv for community discussion providing technical consultation, guidance document development, collection kit distribution and lab survey development. Dr. Shult noted that the clinical labs brought up testing for COVID-19, discussed issues over the listserv, reported data to local public health, completed capacity surveys, submitted specimens to the WSLH for additional testing, and trading test supplies.

Dr. Shult next presented the challenges with maintaining PCR capacity for a continuous supply chain and logistics uses including swabs, transport media, extraction reagents, N95 masks, gloves, and plastic pipet tips. Exchanges with clinical labs has kept all labs running. Dr. Shult presented to the Board the percentage positive of SARS-CoV-2 by PCR with testing increase in Wisconsin along with some of the key differences between COVID-19 and influenza. Dr. Shult noted that we should still take influenza very seriously as there is significant morbidity and mortality with recent severe seasonal flu epidemics. We also should keep in mind the clinical and epidemiological overlap with COVID-19 and how this can present myriad diagnostic challenges. There is also the ongoing threat of novel flu emergence and pandemics along with a host of other respiratory pathogens. Interestingly, influenza has been virtually absent this season.

Dr. Shult noted that we brought on serology at the WSLH and how with the Survey of the Health of Wisconsin (SHOW), we can test samples, and inform of specific outbreaks. Dr. Shult noted the applications of whole genome sequencing including tracking strains, estimating the reproductive number, estimating the prevalence of infection, answering questions about specific cases including tracking mutations (making sure the PCR targets stay the same, and seeing if mutations have functional differences).

Lastly, Dr. Shult noted some challenges moving ahead with COVID-19 testing and response which includes managing our workforce and workflows, ongoing supply chain disruptions and shortages, continued surveillance for other threats, managing antigen testing and home testing, returning to sound and rational laboratory testing principles and practices and the return of the CDC as our compass.

Item 8. IMPACT OF THE COVID-19 PANDEMIC ON OPIOIDS AND DRUG USE

- **Amy Miles, WSLH Forensic Toxicology**
- **Lisa Bullard-Cawthorne, WI DHS**
- **Lori Edwards, WSLH Forensic Toxicology**

Amy Miles introduced the presenters for this topic at the Board meeting and provided some background on our partnerships and drug testing updates. We have a partnership with how OFR provides metrics and we also provide some interpretation. The WSLH has been asked to assist in WI State Crime lab work. We will be taking on some of their caseload in January (this includes non-traffic cases, which the WSLH already does). This will be for about six months. Ms. Bullard-Cawthorne presented on the Wisconsin Overdose Fatality Review (OFR) Program. OFR is a locally-based, multi-disciplinary process for understanding the risk factors and circumstances leading to fatal overdoses and identifying opportunities to prevent future overdoses. The goals of the OFR are to better understand the nature of overdose fatalities through comprehensive information sharing, to develop innovative and proactive responses, and to strategically focus limited enforcement and intervention activities on identifiable risks. The WI OFR program is made up of 15 teams, representing 18 counties including urban and rural populations, there are county-based teams and one dual-county and one tri-county. The Milwaukee county team collaborates with three local health departments to review additional overdose deaths in the county. Ms. Bullard-Cawthorne noted the number of Wisconsin's OFR partners including the WSLH's Forensic Toxicology Laboratory. Ms. Bullard-Cawthorne presented some facts and figures on aggregate OFR data to the Board. Ms. Bullard-Cawthorne also noted state and local-level OFR recommendations. These recommendations will be tracked in a shared database so teams can relay state-level recommendations. A mechanism is needed to send state-level recommendations to a body that can evaluate feasibility and advocate for implementation. The DHS and DOJ will identify and create a state-level OFR council for this purpose, staffed by Training & Technical Assistance Providers. Ms. Bullard-Cawthorne next presented graphs on the increase in suspected opioid overdose ambulance runs during COVID-19 compared to 2018 and 2019. In addition, Ms. Bullard-Cawthorne presented a graph on the number of overdose deaths for opioids versus benzodiazepine and psycho-stimulants. Ms. Bullard-Cawthorne concluded her presentation by supplying resources for further information about overdose fatality reviews in Wisconsin.

Lori Edwards, WSLH Forensic Toxicology, gave some background on the Overdose Fatality Review and that WSLH Forensic Toxicology has been involved with overdose fatality review for two years beginning with Sauk County in 2018. These groups of people have been instrumental in making recommendations and identifying gaps in services. We have been able to transition to a virtual platform in COVID with a high amount of comfort. Ms. Edwards reviewed some of the benefits of collaboration with OFR and the Forensic Toxicology section of the WSLH. WSLH Toxicology can provide increased awareness of WSLH, interpretation of toxicology results, knowledge of therapeutic ranges, effects of poly-substance detection, drug interaction, and new and unfamiliar substances. Ms. Edwards concluded her presentation by noting some of the goals and outcomes of this collaboration is an increase in naloxone training, implementation of NaloxBox (overdose mapping application), early intervention in schools, working with the WI Department of Corrections, oral fluid screening and the hiring of the National ODFR Team Consultant.

Item 9. COVID-19 TESTING FOR CORONERS & MEDICAL EXAMINERS

■ Dr. Alana Sterkel, Assistant Director, WSLH Communicable Disease Division

Dr. Sterkel provided the COVID-19 update from the Communicable Disease Division perspective at the WSLH. Dr. Sterkel presented a graph on the new confirmed COVID-19 cases by date confirmed along with a seven day average. Dr. Sterkel also discussed collection kit distribution by partnering with local manufacturers and the WVDL to make collection kits when none could be purchased. We also worked with DHS to scale up distribution. Dr. Sterkel reviewed antigen testing guidance and noted testing advancements, since we started at 50 tests per day and now run 1,000 tests per day. Dr. Sterkel noted the support that we provide to coroners and medical examiners including collection supplies, shipping supplies, courier services, and coming up with creative distribution when supplies were limited. Dr. Sterkel noted educational resources provided including 14 webinars on COVID-19, information on acceptable specimen types, how to snap a swab instructions and videos, how to package and ship a specimen, and guidance for specific coroners and medical examiners. We also helped develop state guidance for coroners and medical examiners by working with Division of Health and Human Services. Dr. Sterkel noted the in-lab services that we provide – these details are noted on our website with many educational resources. Dr. Sterkel next reviewed the different testing options available at the lab during pre-pandemic, early pandemic, and current pandemic times.

In summary, the WSLH is a valuable resource for Wisconsin's COVID-19 pandemic response through testing, leadership, and technical expertise. Diversification in test strategies has allowed us to continue to meet the needs of our clients by maintaining a 48 hour turn-around time and never stopping testing due to supply shortages. External partnerships have strengthened Wisconsin's response to the pandemic through strong communication with DHS and coroners and medical examiners have better access to testing than ever before.

Item 10. UW MADISON & UW SYSTEMS COVID-19 TESTING & WISCONSIN VETERINARY DIAGNOSTIC LABORATORY

■ Dr. Al Bateman, Assistant Director, WSLH Communicable Disease Division

Dr. Bateman noted that in early June, UW-Madison campus requested WSLH support. The WSLH does statewide, high-priority testing including high risk and outbreaks. Dr. Bateman explained the idea and proposal for the partnership with the WI Veterinary Diagnostic Laboratory which is part of the UW-Madison. The WVDL is an established high-throughput diagnostic lab with a good quality management system. We needed CAP/CLIA regulatory issues to be covered by WSLH and needed SARS-CoV-2 human diagnostic expertise. The proposal was accepted so we moved quickly in standing up the WVDL-WSLH COVID-19 Laboratory (WWCL). We had to decide which test(s) and specimen types to run, equipment, supplies and reagents, staffing, obtaining the CLIA certificates to test, and validating the tests and building IT infrastructure for reporting and building quality management systems. Dr.

Bateman noted that we met every milestone in the proposal, and presented data on test volume with a daily test count. Dr. Bateman next went over various testing improvements including a lab-developed test allowing for higher throughput, less cost, and an unsupervised self-collection of specimens, including a specimen quality check. In all, we pulled it off due to fantastic partnerships with UHS, Temte group, and the WVDL. High throughput can be maintained chiefly through supplies and personnel. Dr. Bateman noted that these efforts have raised the profile of the WSLH and the WVDL. Dr. Bateman lastly noted the work of UW System in the process. Because of the connection to UW System we could easily work the CDC in developing the antigen test.

In the interest of time, Chair Charles Warzecha consulted with the Board and Secretary Schauer and it was decided that Mr. Karbowski would give a brief update on the Financial Report, but the remaining agenda items of the Human Resources Report and Director's Report items will not be presented and can be referred to in the Board Packet. The Update on Space and the Soils Lab will be postponed until a later meeting.

Item 11. FINANCIAL REPORT

■ Kevin Karbowski, Chief Financial Officer, Wisconsin State Laboratory of Hygiene

Mr. Karbowski noted that our total support and revenue is \$2,211,067 over budget. This is largely related to the work we are doing as the result of our COVID-19 response. As far as expenses, we are also \$2,195,000 over budget, which is largely due to our COVID-19 response as well. In all, our net operating income is \$15,976 over budget.

Mr. Karbowski noted that our available working capital has decreased by \$1,179,689 from June 30, 2020 to October 31, 2020. This is because our contingency fund has increased by \$440,103. This is due to a sharp increase in activity. When our contingency funding increases, our available working capital decreases. We have also made some planned capital purchases this year.

Lastly, Mr. Karbowski went over the contracts report and had the Board refer to the packet for more information. We had approximately \$2,800,000 in additional contracts since September 2020.

Dr. Schauer noted that in the interest of time, we will have the Board refer to the packet for the additional items and address further questions at the next meeting.

Chair Charles Warzecha made a motion to adjourn the meeting at 3:00 P.M. **James Morrison** accepted the motion and **Greg Pils** seconded the motion. The motion passed unanimously and the meeting was adjourned.

Respectfully submitted by:

A handwritten signature in black ink, appearing to read "James J. Schauer". The signature is written in a cursive style with some loops and flourishes.

James J. Schauer, PhD, P.E., M.B.A.
Secretary, Wisconsin State Laboratory of Hygiene Board of Directors