

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 10/27/2020



Inter-agency Staff on the Webinar

- Jana Ferguson, Assistant Commissioner, DPH
- Ron O'Connor, Office of Local and Regional Health
- Dr. Katie Brown, Bureau of Infectious Disease and Laboratory Sciences
- Pejman Talebian, Bureau of Infectious Disease and Laboratory Sciences
- Michael Flanagan, Department of Labor Standards
- Mary Dozois, Department of Labor Standards
- Adam Kinney, Department of Labor Standards
- Anne Gilligan, Department of Elementary and Secondary Education
- Gerben Scherpbier, Executive Office of Energy and Environmental Affairs
- Cheryl Sbarra, Massachusetts Association of Health Boards

Announcements:

No call on Election Day next Tuesday. Regular Friday one will be available.

Thanksgiving: Information released today and can be found online. General precautions, lower risk celebrations, higher risk celebrations, activities to avoid, other important considerations. Continue with the standards, wear your mask, wash your hands, etc. Encourage ventilation when indoors. Lower risk celebrations—short visits vs. long visits, consider virtual celebrations, prepare traditional family recipes for family and neighbors and provide contact-free delivery. Higher risk celebrations—minimize contact with other people for 14 days before and after the celebration or get tested within 72 hours of the celebration. Avoid sharing food and drinks, shaking hands and hugging, singing, dancing, shouting, in-person gatherings will always be a risk. Also, consider community levels of COVID-19. Where are you celebrating? Where are the other guests coming from? All guests are encouraged to get the flu vaccine. How can you help? Get this information out to the public, promote these guidelines. Maybe post on social media, city/town websites. www.mass.gov/Thanksgiving2020

Immunization Update: PrepMod and COVID-19 vaccine planning. PrepMod—taking longer than expected, system going fully live hopefully by the end of this week, if not it will be by Monday/Tuesday of next week. Commonwealth Medicine will be releasing more information about the trainings as soon as they're available. COVID-19 vaccine planning document submitted to CDC—you can see this on www.mass.gov/covidvaccine. If you have questions/comments reach out to covid-19-vaccine-plan-ma@mass.gov. Role of local public health will begin primarily in Phase 3/Phase 4, MAYBE before. More to come on this.

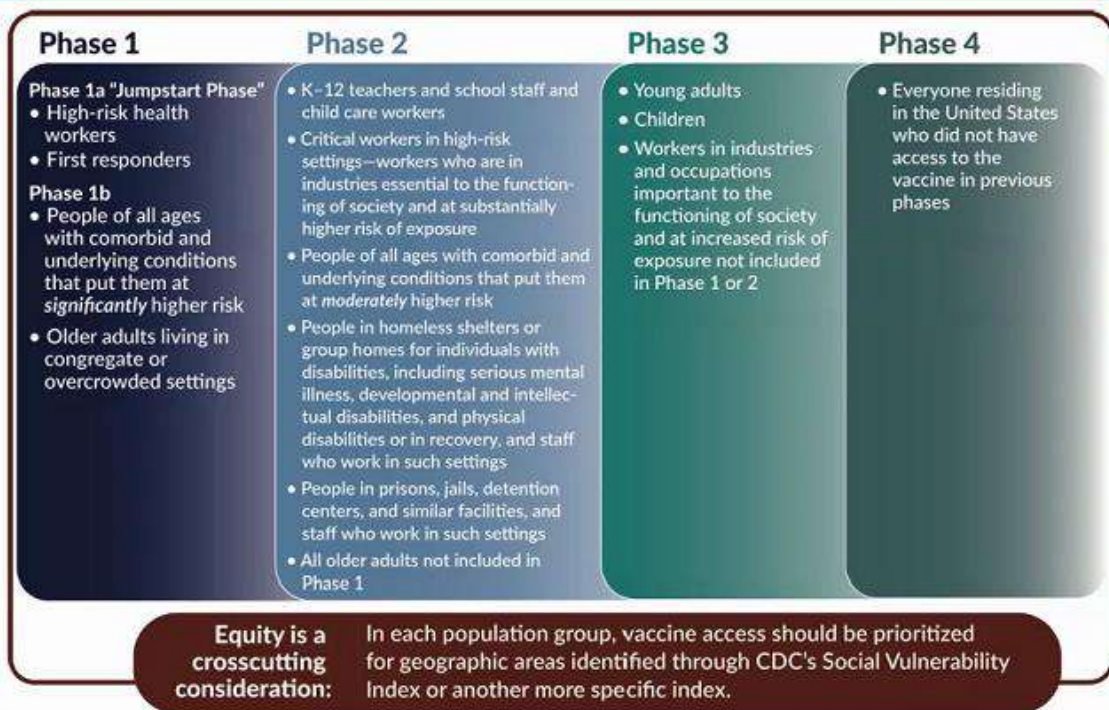
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Vaccine Planning

Viewing Darryen Anderson's...



Source: Framework for the Equitable Allocation of COVID-19 Vaccine. National Academies Press, 2020.

DESE: Phase 1 BinaxNOW Rapid Point of Care COVID-19, testing for K-12 schools. Memo available at www.doe.mass.edu/covid19/on-desktop.html. Was sent to school leadership from Commission last Friday. Approximately 100 schools and districts have expressed interest in participating in the pilot. Details to follow re: participation in the pilot.

Dr. Brown: COVID clusters and Red Yellow Green calculations. Been looking at cluster data for quite a while now, but making sure it's as complete as possible is difficult. We do have some data right now that can provide a good sense of what's happening in Massachusetts. Cluster information might be included in the weekly dashboard that's posted on Thursdays. DPH has been using National Healthcare Safety Network Data from CDC to collect information about LTCFs as it is more complete, but we are using MAVEN too. MAVEN data is being referenced to create the "Exposure Setting Types" table that breaks down different sectors/environments.

A cluster in a LTCF is defined as: two or more confirmed cases in a facility that has not reported a confirmed case in the prior 4 weeks. A cluster is deemed closed when a facility has gone 4 weeks without reporting a confirmed case among staff or residents.

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A cluster in all other exposures is defined as: two or more confirmed Massachusetts cases with a common exposure. The date assigned to each confirmed case's event is that of the first positive lab date. Cluster date, which determines the week in which it is present in the graph, is determined by the date of the positive lab of the first associated case. The date assigned to each contact is that of the date they were linked to the cluster. A cluster is deemed closed once two incubation periods (28 days) have passed from the last confirmed case. Reason why its 28 days is because it's two incubation periods, standard in epidemiology.

Largest contributor is the household setting, clusters are 2 or more people who share a residence and are confirmed cases within 14 days of one another.

Clusters for 4 week period: First column is exposure setting, next 2 columns are clusters that started in previous reporting period but are continuing to have new cases associated with them. Seeing clusters in many different types of settings.

COVID Clusters Reported to MDPH by Exposure Setting Type Four week period: 9/13/2020-10/24/2020

Exposure Setting	Ongoing			New			Total		
	Clusters	Confirmed Cases	Contacts	Clusters	Confirmed Cases	Contacts	Clusters	Confirmed Cases	Contacts
24/7 Congregate Settings	8	18	7	9	41	9	17	59	16
Child Care	27	8	82	28	70	253	55	78	335
Colleges & Universities	15	14	16	8	38	18	23	52	34
Corrections	7	175	4	1	2	0	8	177	4
Hospitals	11	46	21	9	63	266	20	109	287
Household	1147	598		2707	6830		3854	7428	
Industrial Settings	25	32	36	9	33	20	34	65	56
K-12 Schools	8	15	71	18	62	176	26	77	247
Long Term Care Facilities	82	243	---	59	568	---	141	811	---
Offices	2	1	0	2	8	11	4	9	11
Organized Athletics/Camps	7	2	65	21	91	266	28	93	331
Other	2	1	0	7	32	45	9	33	45
Other Food Establishments	8	2	0	0	0	0	8	2	0
Other Healthcare	9	2	15	5	11	37	14	13	52
Other Workplaces	16	2	1	0	0	0	16	2	1
Places of Worship	9	0	55	6	77	50	15	77	105
Recreation/Cultural	4	0	3	5	17	52	9	17	55
Restaurants & Food Courts	10	2	4	19	70	80	29	72	84
Retail & Services	14	2	10	6	30	4	20	32	14
Senior Living	14	8	3	14	95	18	28	103	21
Shelters	0	0	0	1	3	0	1	3	0
Social Gatherings	22	12	46	11	67	50	33	79	96
Travel & Lodging	3	0	0	0	0	0	3	0	0
TOTAL	1450	1183	439	2945	8208	1355	4395	9391	1794

New Clusters: Clusters with the first case identified during the four week period above.

Ongoing Clusters: Clusters with the first case identified prior to the four week period above that has not met criteria to be closed. Cases included in ongoing clusters are those whose first positive lab result is within the four-week time period.

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Total clusters: Over the entire course of the pandemic.

Exposure Setting	Total Clusters	Total Confirmed Cases	Total Contacts
24/7 Congregate Settings	452	2215	897
Child Care	212	369	1179
Colleges & Universities	33	265	74
Corrections	22	1059	131
Hospitals	79	1631	954
Industrial Settings	74	350	152
Household	17,500	42,948	
K-12 Schools	57	252	371
Long Term Care Facilities	565	26,812	--
Offices	19	52	34
Organized Athletics & Camps	49	165	533
Other	14	108	162
Other Food Establishments	50	656	46
Other Healthcare	62	230	138
Other Workplaces	32	219	215
Places of Worship	23	227	118
Recreation/Cultural	10	60	75
Restaurants & Food Courts	72	197	221
Retail & Services	68	405	199
Senior Living	236	3413	5511
Shelters	13	534	40
Social Gatherings	56	324	271
Travel & Lodging	7	29	40
TOTAL	19,705	82,520	11,361

COVID Clusters Reported to MDPH Viewing Catherine Brown's ... Setting Type, 3/1/2020-10/24/2020



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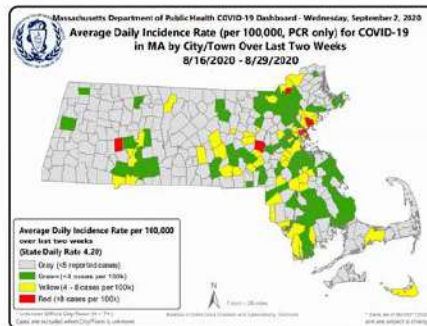


Golden rod color are the LTCFs. Although contribution of LTCFs clusters to overall cluster numbers are less overtime, it's still significant.

Calculations to predict Red, Yellow, Green (RYG) designations: resource was developed to help you calculate your own town's RYG metric. You have access to all the data you need to calculate your own daily incidence rate. DPH pulls data Wednesday mornings, so in order to calculate what your number will look like you should pull these numbers then as well. Way to find your data is to go through MAVEN, and then the specimen date of first positive test result. MAVEN now has a reference sheet that includes the thresholds for the number of cases each town would need to go to the next level. You can find this in the October 13th presentation.

Average daily incidence rate = (Cases on Day1/population + Cases on Day 2/population....+Cases on Day14/population)/14 x 100,000.

The 14 days over which the cases are drawn is indicated in the footnotes on the dashboard; the most recent 14 day period was 8/16/2020 - 8/29/2020.



Approximating the Status Map

- Daily incidence rate calculated for 2 week reporting period (ending on previous Saturday)
 - (# new cases/jurisdiction population estimate)*100,000
 - Averaged over 14 day timeframe (including zeroes)
 - Rounded to the nearest tenth decimal point
- Multiple sources of variability:
 - Timing
 - Data pulled first thing Wednesday morning
 - Case numbers constantly changing due to revoking, deduplication, reassignment of jurisdiction
 - Date used to identify cases
 - Map calculations based on collection date of first positive PCR specimen
 - May not equal event date - most reports extract based on event date
 - Confirmed and Probable report now uses first positive specimen date
 - Population estimates
 - DPH calculates rates per 100,000 population using denominators estimated by the University of Massachusetts Donahue Institute using a modified Hamilton-Perry model (Strate S, et al. Small Area Population Estimates for 2011 through 2020, report, Oct 2016.)

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MAVEN Online Help

The image shows two screenshots from the MAVEN Online Help system. The left screenshot displays a navigation menu with the following items: COVID-19 Materials/Training, Case Follow-Up Tools, Community Tracing Collaborative (CTC), Clusters/Outbreaks (marked with a 'NEW' tag), Guidance Documents & Resources, Higher Education (marked with a 'NEW' tag), MAVEN Tipsheets & General Instructions, Memos and Orders, and Webinars & Trainings (status map information located here). The right screenshot shows a list of webinar recordings under the heading "Webinars & Trainings". A red box highlights the top two entries: "October 13 - Status Map Presentation, Booklet, COVID-19 LBOH Webinar Presentation" and "October 13 - MAVEN CTC Update, Status Map Presentation, K12 Case Investigation Review, Testing Scenarios Presentation". A blue arrow points from the right towards the second entry in the highlighted box.

Questions from emails:

Q: How does a school district address a situation where a student refuses to wear a mask for non-medical reasons?

A: This is a local issue, and needs to be looked at on a case-by-case basis. Lots of legal issues that come up here. The general school of thought is if the student is refusing to wear a mask for medical reasons, then clearly the school district can look at other ways to provide an education to that student, this would be pursuant to the ADA, providing a reasonable accommodation to the student who has a medical issue. If a student does not have a medical condition, and the parents are supporting the student to not wear a mask for whatever reason, this is a different situation. There are no constitutional rights attached to this decision, and this could mean that the health department could take hold of and create a public health nuisance, but it depends on the specific case. Make sure to speak to town/city attorney, and many school districts have their own attorneys so work with them too.

Q: My school nurse is asking if there are any restrictions on non-organized sports during recess. The kids are playing football and there is contact involved.

A: This is a two-agency question, where EEA needs to weigh in, because they have put out a significant amount of guidance re: safety and activities. A school would need to look at the restrictions put out by EEA, but it does fall onto the school for what they decide should be done.

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Q: Are students who select remote learning for the entire school year subject to the vaccine mandate?

A: Yes, all students, K-12, no matter whether they are doing fully in person, hybrid, or remote are required to have the vaccine by 12/31/2020.

Q: Is organized street hockey or deck hockey subject to the recent order pausing of ice hockey?

A: No, not subject to the recent pausing. Pausing is only for ice rinks.

Q: Will you be issuing guidance specific to winter sports like skiing and snowboarding? There are issues specific to skiing that are not addressed in current sports guidance, such as provisions for distancing and limiting participation on ski lifts.

A: Yes, they will be addressed and are being finalized.

Q: Do grocery stores fall under the retail store standards and are only allowed to have 50% of their capacity? Should they still be monitoring this as they were a few months ago?

A: Yes, do fall under retail standards. No longer grocery store specific standard. Each business must monitor customer exists and entrance to the [greater of the following](#), 50% of permitted occupancy as documented in its occupancy permit on records with the municipal building department or where no permitted capacity limitation is on record, may allow up to 10 ppl / 1k sq ft.

Q: Can or should youth teams from lower risk communities play teams from higher risk communities?

A: No “should” answer here. We are not prohibiting this at this time. High risk communities, some might have an asterisk and their risk status doesn’t change, or some might be newly red because of a small population in their community, not necessarily a good indicator, but we don’t think we are looking at prohibiting high risk communities from going to lower risk communities.

Q: How will the negative antigen test result be viewed by the school administration? Will this be sufficient to allow a student back into school?

A: Broad question without enough context to answer perfectly, but I guess what I would say is that if the situation is a symptomatic student not in school, or has stayed home from school, then the recommendation is that they need to be tested and the recommendation to going back to school is a PCR test not antigen. Information will be shared about schools being able to use antigen tests in a school setting under certain circumstances, all of the details about what happens about a positive or negative will be coming to you soon.

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Q: Can a church (Places of Worship) with a food permit resume its regular church breakfast?

A: In POW standards, says [no food allowed](#).

Questions from attendees in chat box answered out loud during Webinar:

Q: Close contact definition again?

A: A person who has been within 6 ft, for a total of at least 15 min to someone with COVID-19 in their infectious period. 15 min does not need to happen at one time. Can happen in smaller increments cumulative of 24 hours.

Q: Singing allowed in places of worship?

A: (*I couldn't find this in the [standards](#)*) Singing by the congregation or a choir is allowed in Step 2 communities, but they still need to wear their mask and be socially distant. There can be one person singing without a mask, but they need to be properly distanced from everyone around.

Q: Do rapid PCR and antigen tests exist?

A: Yes, they both exist.

Q: Receiving inquires about low cost or free testing sites for the winter?

A: Stop the Spread sites are no cost for MA Residents. Information about where they are on mass.gov website. <https://www.mass.gov/info-details/stop-the-spread>

Questions from attendees in chat box not answered out loud:

Dufresne Bonnie - 2:55 PM

Q: What is the definition of the working area behind a bar? -

-Michael Flanagan - 3:05 PM

A: Active working area would include any area where drink contents are stored, drink pouring, drink mixing, bottle opening, fruit cutting or assembly, glass cleaning, or any other production related activities occur. Essentially only serving and removal of used dishes/glassware can occur within 6 feet if no barrier is in place.

John Hedden - 3:15 PM

Q: Can the person actively working behind plexi-glass barrier at the bar serve food and drink through the 8" opening on the bottom of the plexi-glass? Thank you.-

-Michael Flanagan - 3:16 PM

A: Yes, that is the purpose of the opening. Note, if there is a barrier then an active bar work area may be closer than 6 feet.-

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Amy Alati - 3:19 PM

Q: Will these webinars be recorded and made available specifically for LBOH who miss these events? Thank you.

-Jana Ferguson - 3:23 PM

A: Not at this time, but perhaps at some point in the future.

Rita Casper - 3:09 PM

Q: Q from Rita Casper, Andover Public schools - Student travels to higher risk state, under age 10, how do we verify the student is safe to return to school. No test results due to age-

-Jana Ferguson - 3:35 PM

A: Children under the age of 10 should "do what their grown-ups do." If the grown-ups quarantine, the child should quarantine. If the grown-ups test out, then the child should be considered to have tested out and meets the travel quarantine requirements.

Ruth Clay - 3:11 PM

Q: On the state dashboard: why is the number of positive tests in the last 14 days so much higher than case count in last 14 days (73 and 37 for Wakefield).

-Catherine Brown - 3:40 PM

A: Ruth - there is a lot of duplicate testing so the number of positive tests will always be higher than the number of new cases.

Thomas Carbone - 3:06 PM

Q: Tom Carbone, Andover, Does Dr. Brown have any data about disease transmission involving youth sports teams? I am aware of the hockey article in the MMWR, but wonder if there is anything else out there?-

-Catherine Brown - 3:41 PM

A: We have seen some transmission in other sports settings - more indoor than outdoor and it may be increasing. But nothing else has come close to hockey yet

Marina Lent - 3:34 PM

Q: we are calculating our RYG from our own case lists, for the entire island of Martha's Vineyard. We are very closely integrated, and by-town RYG, when our smallest town is ca.300, is not helpful-

-Catherine Brown - 3:42 PM

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A: Hi Marina-this is a sensible approach for MV and makes sense to me

Jamie Terry - 3:21 PM

Q: Please update on Minute Clinics plan to conduct COVID testing INDOORS at CVS locations.

Thanks-

-Jana Ferguson - 3:42 PM

A: Hi Jamie, I have been unable to substantiate the statement that all CVS minute clinics have been told to offer indoor testing. Most of them are doing through a drive through. However, if your CVS doesn't have one, they may be offering them inside.

Marina Lent - 3:31 PM

Q: will your presentation be available after this meeting? I am actively working with schools and our regional planning commission on generating regular data reports centered on metrics-

-Catherine Brown - 3:44 PM

A: We are still finalizing this most recent data analysis but will send out a version of the slides in the next few days

Vaira Harik - 3:23 PM

Q: Can Dr Brown's cluster setting list be presented in order, from most to least, number of cases? It appears that they are in alphabetical order now. -

-Catherine Brown - 3:46 PM

A: We will look at this - thanks for the suggestion

Jill Conselino - 3:39 PM

Q: also need to be home while waiting for the siblings test result?

-Catherine Brown - 3:49 PM

A: If the sibling is asymptomatic has not been diagnosed with COVID, the siblings do not need to quarantine. Close contacts of asymptomatic close contacts are not restricted in their activity

Bruce Cohen - 3:41 PM

Q: Can Dr. Brown's slides be posted? Do you need to be registered for MAVEN to access MAVEN training slides?-

-Catherine Brown - 3:50 PM

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A: The MAVEN help section is available to non-MAVEN users

Natasha Waden - 3:41 PM

Q: Is there any guidance for how many people can gather indoors for a public meeting, such as a school committee meeting? -

-Michael Flanagan - 3:51 PM

A: Municipal legislative bodies are exempt from the gatherings order. However, it would be in the interest of the members to follow the order, as well as model good behavior.

Rita Casper - 3:49 PM

Q: Thanks Jana - re the question asked about students returning from travel - can we ask the parents to provide documentation of their test results to verify the child, under 10 yrs, can be cleared to return to school-

-Jana Ferguson - 3:53 PM

A: The Travel Order requires that someone who has indicated that they are eligible to 'test out' of the quarantine provide documentation to prove that if they are asked by the LBOH or DPH to provide it.

Cathleen Liberty - 3:45 PM

Q: I received a complaint about wrestling. There is a facility that does wrestling without face coverings. I didn't see anything about it in the youth sports. Please advise.-

-Gerben Scherpbier - 3:54 PM

A: Hi Cathleen, as wrestling is a contact sport, this would only be allowed in the cohort model (10 or fewer members for the full season). Two individuals in the same cohort are not required to wear face coverings while wrestling, however this guidance may change with the updated winter sports guidance when it is released. No interaction is allowed between members of different cohorts.

Joanne Belanger - 3:49 PM

Q: Jana - deck hockey too??? you are now going to get more comments like the igloo thing LOL

-Jana Ferguson - 3:56 PM

A: I'm not very hip to new fangled things. I used to be cool, but got stuck somewhere in the 80s

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Sandra Martin - 3:55 PM

Q: of grab and go/self serve coolers with prepackaged sandwiches and water. Can these items be self-serve? If yes, can they be consumed inside at tables? Or do ALL items in a restaurant have to be handed to the patrons by staff - no open grab and go shelves.

-Michael Flanagan - 3:59 PM

A: Items in a restaurant must be served. Only retail settings where the drink will be consumed off-site can have self-service beverage stations.

AnneMarie Fleming - 3:57 PM

Q: DSL: do businesses (including town halls) need to continue the sign-in logs that we used in re-opening to track visitors?

-Michael Flanagan - 3:59 PM

A: Yes, as detailed in each standard.

Jamie Terry - 3:52 PM

Q: Hey Jana, Thanks. Does the Local BOH have the authority to deny the facility from testing in an INSIDE retail setting?-

-Jana Ferguson - 4:00 PM

A: Of course the local BOH has full authority in the municipality. You might consider the minute clinic space to be a place for health care. I know Uxbridge was looking creatively at some options to segregate spaces.

Judy Noonan - 3:59 PM

Q: Will the BintaxNow rapid test be antigen or PCR? Thank you!

-Catherine Brown - 4:00 PM

A: BinaxNOW is an antigen test