

# Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 11/20/2020



## Inter-agency Staff on the Webinar

- Jana Ferguson, Assistant Commissioner, DPH
- Ron O'Connor, Office of Local and Regional Health, DPH
- Dr. Catherine Brown, Bureau of Infectious Disease and Laboratory Sciences, DPH
- Helene Bettencourt and Anne Gilligan, Department of Elementary and Secondary Education
- Michael Flanagan, Mary Dozois, and Adam Kinney, Department of Labor Standards
- Gerben Scherpier, Executive Office of Energy and Environmental Affairs
- Cheryl Sbarra, Massachusetts Association of Health Boards
- Chief Jeff Farnsworth, Massachusetts Chiefs of Police Association

### **Announcements:**

*No call day after Thanksgiving. Also, next week's metrics that come out as part of the weekly dashboard (people may call it the color town map) on Thursdays will not be released until Friday because of Thanksgiving holiday.*

*Holiday Gatherings:* New graphics out pertaining to holiday gatherings at [mass.gov/holidays](https://mass.gov/holidays). Can be helpful for social media or to put flyers up around different public areas where people might be gathering to pick up holiday supplies.

*Updates to lower-risk states:* New Hampshire and Maine will be removed from the lower-risk states at 12:01 am on Saturday, November 21<sup>st</sup>. Travel Order applies to people coming to and from NH and Maine. Vermont not currently on the list, we use the data presented on [covidexitstrategy.org](https://covidexitstrategy.org) (way to monitor whether a state will be added to the list, we look at 2 weeks of data).

*Updated quarantine guidance:* Governor's update—Dr. Brown acknowledges that this update was put out without notice to LBOH, you are our key stakeholders and we believe you should know in advance, but these things are sometimes out of our control. Conversations nationally about whether or not there should be 14 day quarantine period for COVID-19. Average incubation period is 5 days, and can continue up until day 14, but data have accumulated to show that the proportion of people who are exposed who develop disease after day 9 is vanishingly small. Although it happens, it really is such a tiny fraction. The idea here is that we are following the data which suggests that 14 days is unnecessarily conservative and burdensome, and moving towards evidence based. Quarantine guidance has changed, you can still follow the 14 day quarantine period, however there is now also an option to get a PCR test on day 8 or later of your quarantine period and as long as you have not developed symptoms,

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and the PCR test comes back negative, you can stop quarantining after 10 days and return to normal activities. This shortened quarantine period has raised concerns with people, and the added benefit here is that you are getting a test late in your quarantine period and this should be enough to tell if you are infected. The combination of the 10 days plus the negative test provides additional confidence that once they enter quarantine, they won't transmit it. For those who leave quarantine after 10 days, they are asked to monitor their symptoms for remaining 4 days, and if they develop symptoms contact your provider or go to a test site. This is to capture the ~1% of people who might still develop the illness. Another driver for making this change is about the health equity issue associated with this. People with lower or minimum wage jobs do not receive sick time, and this causes other public health impacts to their lives. We have seen issues with people running risks or not being able to pay their rent/mortgage, get food, pay for meds. 14 days to 10 days might not seem like a big change, but it is, and right now we still have relatively good testing available in MA. People who want to test out at day 8 should be able to have access. Also, with shorter quarantine period, we hope people adhere better to quarantine, we all know situations where people have not followed the guidance and we hope that this will have the additional benefit of improving adherence. Was going to provide a slide about this showing the data/evidence, but will work on it over the weekend instead.

**Q:** if you have symptoms early in quarantine, and then they're gone by day 8, and you have a negative PCR, can you exit quarantine early?

**A:** If you had symptoms early in your quarantine period (you should have been tested at this point, and you are positive, then you go to 10 day isolation period) and if your symptoms go away and you test negative on day 8, you can use shortened quarantine.

**Q:** Should people identified as close contacts test at beginning of quarantine and also on day 8?

**A:** If people are planning to use their shortened quarantine, it makes more sense to be tested on day 8. Remember that the PCR test is very sensitive, and if you develop symptoms on day 2-3 you should get tested, but let's say you don't get tested, and then you test on day 8, if you had symptoms on days 2-3 you should test positive.

**Q:** How will CTC be handling this new change in quarantine guidance because they don't receive the test results? Are they going to be monitoring things in the same way? Are we expecting very active monitoring with this?

**A:** This is very new, so we are working around the new protocols with CTC. Some of them do have access to data in MAVEN so they could do this verification. This might not happen in a robust way right now because of case overload, but we will be updating this in the future.

*Cheryl Sbarra:* A new [Cease and Desist Order](#) is available on the website. If you look at this order you will see the third checkbox is for those who have violated their quarantine orders. If

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you want this in a Word doc, I will send it out. There are also written orders that should be sent prior to the cease and desist and templates should be on the [website](#).

*DLS:* Clarification, tents at restaurants and holiday event questions. Lots of people were on webinar with ABCC on Wednesday, and miscommunication occurred about tent sides being up/down at restaurants. We have clarified this with ABCC, sides of the tents are allowed to be lowered but the following need to be addressed: 1) if the weather turns cold, if restaurant continues to use tents and then begin to use heaters, you must reach out to local fire authority because this is extremely unsafe. 2) if the sides of the tent are down, this becomes an indoor space. If the restaurant decides to host a performance then they would have to follow the [indoor space requirements](#). If you have an event that does not fit nicely into one of the sector specific standards, there is now a mechanism where you can have the event reviewed and confirmed or denied. Some of these types of events have already been reviewed at the local level, and you do not have to resubmit it. If you would like to submit a proposal plan for an outdoor activity not provided for in sector-specific guidance, go to

[www.mass.gov/forms/proposals-to-plan-for-an-outdoor-activity-not-provided-for-in-sector-specific-guidance](http://www.mass.gov/forms/proposals-to-plan-for-an-outdoor-activity-not-provided-for-in-sector-specific-guidance)

**Q:** Holiday light display tours? Would they be able to apply for review?

**A:** Yes, this would qualify as an event that can be submitted and reviewed.

**Q:** For this submission process, do you want to see all the ones that LBOH have not reviewed / approved? Do LBOHs have to go through DLS to review and approve plans?

**A:** If at a local level people are comfortable with reviewing and confirming/denying an event, then you can continue to do this. This is just another avenue to review things, if you don't have the bandwidth.

*CTC:* People have been raising the issue about what appears to be significant delays from what the expectations were about how quickly they are getting to cases and following up. We are experiencing a surge statewide, and this affects all systems. There are efforts being made to ramp up quickly to address the surge and continue to support this work across the Commonwealth. The CTC has been prioritizing cases first-some first serve, and now they are prioritizing cases based on test dates and first exposure date. This has caused a backlog. Originally, the goal was 24-48 hours, and this is no longer happening because of the surge. All contacts and cases upon entering the system receive an initial text message with CTC phone # to call and information about isolation and quarantine. Also building an isolation and quarantine online support page to give directions to individuals while they wait to reach someone on the phone. CTC is working to diligently call every single person in the system at least once. For specific information about specific cases, reach out to your Local Health Liaison. Have added 300 new staff in the last 2 weeks, new training on Sunday for an additional 350 people. Training will also be available to LBOH staff if they would like. Trainings might be held on 11/30 or 12/7, still need to review the curriculum.

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### **Questions from emails:**

**Q:** Can DPH comment on the availability for wastewater testing at the local level?

**A:** As people are aware, we have a Biobot contract and they are performing tests which is posted publicly on the [MWRA](#) system, not in every community but there are specific communities where data points are being collected. It has been sharply increasing in the wastewater testing, which is no surprise because of the surge. There are two contractors available deployed by the monitoring team and they can support local groups at various levels. They can do building/neighborhood/city level, all under consideration for service. Command Center currently reviewing all of these alternatives, it is possible that there might be some local wastewater testing, but not right now unless you contract at your local level with an independent contractor.

**Q:** How accurate are at-home COVID-19 tests? How are LBOH supposed to do contact tracing? We will not have any idea if someone tests positive. People will not be getting isolation or quarantine instructions, how is this a good thing?

**A:** Dr. Brown: Not just one at home COVID-19 test, there are multiple kinds—testing at home, send to lab or a new one approved that is completely at home, take sample and test at home. The ones most currently available are sent out to lab and the lab is supposed to report through normal mechanism and this is how LBOH would find out (theoretically). If you test positive, people need to call their provider and then the provider calls the State to report the case. At some point, we are not going to count every single case of COVID-19. It is not sustainable; I can see us doing something more like surveillance like influenza. In the long run, this is going to be okay, in the short term this is going to be a lot. We are working with CTC and Mass.gov to put up one-stop shop website that will help people understand how to do quarantine and isolation when you have a positive test. This is the next step of COVID-19 that we will need to cope with. I am interested in hearing other suggestions about things that you think might be helpful to address the issues that come up in regard to this.

**Q:** Current status of the CTC? Are they accepting new cases?

**A:** Mentioned in updates in “Announcements”

**Q:** We are continuing to see a significant lag time in cases appearing on MAVEN. Will this improve going forward?

**A:** We address this on almost every call, the new turnaround time data continue to show that the average time from the specimen being taken and the time it shows up in MAVEN is 2 days, there certainly are times that take longer, for example Quest labs since they are doing national work. As soon as the data is sent from the lab to MAVEN, it shows up to everyone. It is from the labs end that takes lagging not MAVEN.

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**Q:** We received questions from the public about how the state calculated percent positivity rate for the state and locally. The concerns some individuals have is that they believe repeat tests from higher education are artificially depressing the positive test rate for the general public. Is there a way to tease out how many tests are associated with colleges/universities to see how that impacts overall test positivity?

**A:** Percent positive rate can be calculated in different ways. The [daily dashboard](#) actually tells you that we show the statewide average (all testing) and then the college and university testing, and then there's the statewide minus the college and university testing. You can see how this testing impacts the overall test positivity rate. I would direct you to daily dashboard that shows this. If you are interested in doing this at the local level, you need to look at your own data and do a manual separation of the cases associated with colleges and universities vs not, but at the state level are definitely showing it in 3 different ways.

**Q:** Will DESE testing timing guidance for contacts (4-5 days) be switched to match the new state quarantine timing (8 days)?

**A:** The Department is in the process of updating all guidance to be consistent and align with DPH guidance. Will not be anymore conflict between guidance.

**Q:** Can you confirm that Black Friday midnight openings will be allowed this year?

**A:** Retail is not required to follow mandatory closing hours. They would be allowed to open at midnight, however they must follow social distancing/mask wearing and they need to establish the means to ensure there are no crowding/should-to-shoulder scenes on Black Friday. While they can be open, it needs to be modified.

**Q:** Cleaning in a "big box store"? Do they need to clean the entire store since they have no idea where the individual was in the store, is there a localized area that they can clean? The guidelines say "site" and not department.

**A:** They are required to clean the site, but this does not mean they have to close the entire store to clean. If they can reasonably isolate where the person was (for example the bakery, break room) then they need to close those areas and do a thorough clean.

### **Questions from attendees in Q&A box:**

**Q:** LPH staff being asked by local official for information about cases in the town. Local officials need to trust BOH and BOH staff.

**A:** C SBarra: written about this in documents. This goes back to what is the reason someone is asking for this information, is it to protect public health? Does it further the goal of public health? It's a balancing test between privacy rights and what you need to know to control

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COVID-19. Is releasing this information really going to help public health?

Quelling a public official's anxiety is not going to help this pandemic.

**Q:** Who is responsible for school bus enforcement? (assigning seats on the bus i.e.)

**A:** Re: transportation, each district has a person in a role as a Transportation Coordinator. Also, the Transportation Coordinator oversees the buses of a district who own their own buses, and other districts who do not own their own buses, they contract out and the person from the bus company will work with the Transportation Coordinator within the school district.

**Q:** When a staff or teacher is not positive but are out of school as a close contact, is it okay to disclose that they are close contacts?

**A:** DESE is not collecting information about close contacts, this could be a public health question in re: to information.

**Q:** Can schools require to be stricter, and require that staff and students to be in quarantine for 14 days?

**A:** This is a local decision that should be made in consultation with LBOH. BOH do have the legal authority to enact stricter regulations, but this is a science based regulation and I would consult city/town attorney or school district attorney before making this decision because you need to have a rationale for this. Since this is science based, I am unsure what the rationale would be, but this is something you would need to consult your legal counsel on.

### **Questions from attendees in Q&A box not answered outloud:**

Hillary Greenberg - 9:06 AM

**Q:** If you are a homeowner in a higher risk state and you travel there and quarantine while there, do you need to quarantine when you return back to MA?

-Jana Ferguson - 9:09 AM

**A:** Yes

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Laura Gray - 9:11 AM

**Q:** If you are a caretaker of elderly parents that live in NH do you need to follow the quarantine guidelines?-

-Jana Ferguson - 9:12 AM

**A:** Please review the list of critical life activities and the limitations on those on mass.gov related to the travel order

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David Tapscott - 9:12 AM



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**Q:** Does this modification of quarantine apply to the travel order also?

-Jana Ferguson - 9:12 AM

**A:** There has always been the option of testing out of the travel order; that timeframe is less restrictive and will not be changing.

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Kristin Black - 9:12 AM

**Q:** Will the Travel Order also be updated from 14 days quarantine to the new test out option for close contacts?-

-Jana Ferguson - 9:13 AM

**A:** There has always been the option of testing out of the travel order; that timeframe is less restrictive and will not be changing.

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Merrily Evdokimoff - 9:17 AM

**Q:** Is it possible to share some of the research that supports this shorter quarantine? It might help with those who are questioning it.

-Mike Coughlin - 9:17 AM

**A:** This question has been answered verbally.

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Sharon Cameron - 9:11 AM

**Q:** If you had symptoms early in Q but they are gone by day 8, and you get neg PCR, can you end Q on day 10? Or is it no symptoms at all during entire Q period?

-Mike Coughlin - 9:18 AM

**A:** This question has been answered verbally.

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Justin Tavano - 9:12 AM

**Q:** If testing out of quarantine is based on a test specimen taken on day 8, why can't quarantine end as soon as negative result is received? -

-Mike Coughlin - 9:20 AM

**A:** This question has been answered verbally.

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Lisa Kamenides - 9:16 AM

**Q:** Are we now recommending those in Quarantine get tested on day 8 now instead of day 4-5?-

-Mike Coughlin - 9:20 AM

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A: This question has been answered verbally.

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Nicole Chauncey - 9:17 AM

**Q:** How will CTC be handling this new change in quarantine guidance? My understanding is that they do not receive test results.

-Mike Coughlin - 9:21 AM

**A:** This question has been answered verbally.

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Christine Dooling - 9:19 AM

**Q:** Should we still recommend that contacts test between days 4-6 as well?

-Mike Coughlin - 9:21 AM

**A:** This question has been answered verbally.

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Jackie Aguilar - 9:20 AM

**Q:** A lot of people travel daily for work to MA from NH, with the change of NH being high risk now, what is the recommendation now?

-Jana Ferguson - 9:23 AM

**A:** Please review the list of exempted life activities and the limitations to those on the mass.gov travel order site.

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Delshaune Flipp - 9:21 AM

**Q:** I have recently been getting a lot of questions from employees that are picking up their kids from college out of state. what is the procedure for them to come back to work for the Town employee and the student-

-Jana Ferguson - 9:24 AM

**A:** If someone travels out of state to pick up a student, gets their child and returns straight home, they don't have the quarantine (the student would need to meet the requirements of the travel order). If the parents stay overnight, they have to comply.

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Sarah Dupont - 9:31 AM

**Q:** What happens if someone only provides a landline phone number? They would not receive that text message

-Jana Ferguson - 9:42 AM

**A:** Kicked back numbers and noted and they are listed to call directly.



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-Jana Ferguson - 9:43 AM

A: are noted\*

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Beverly Hirschhorn - 9:34 AM

**Q:** Does the DESE protocol now conform to the new protocol for quarantine?

-Mike Coughlin - 9:45 AM

A: This question has been answered verbally.

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Tracy Mayo - 9:33 AM

**Q:** can schools be more strict on the quarantine and stay at 14 days or do they follow the 10 days-

-Mike Coughlin - 9:45 AM

A: This question has been answered verbally.

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Cathryn Hampson - 9:23 AM

**Q:** Can school districts choose to continue with the 14 day quarantine as part of their protocols if they choose to do so? -

-Mike Coughlin - 9:45 AM

A: This question has been answered verbally.

**Additional questions please email:** [Michael.j.coughlin@mass.gov](mailto:Michael.j.coughlin@mass.gov)

