

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 12/1/2020



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
 - Bruce Cedar, CMG Associates
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Announcements:

Congrats to Ron O'Connor for a well deserved award!

DLS—Holiday Shopping and COVID-19 Safety Standards for Retail: Standards themselves have not changed. Today's email from Ron is just a summary of the information. Sent out to Mayors/Town Managers, Retailers, and LBOH. Information includes calculating occupancy, distancing (directional flows/signage), the requirements around face coverings, food courts, and what to do with a COVID-19 positive employee.

DESE—Updated [protocol document](#) to align with DPH quarantine protocols: The English version is there and translations are in process ASAP.

CMG Associates: Offered individual programming for health agents who wanted to connect about stressors and getting connected with a counselor for continued care. We are continuing to provide these services, so please take advantage. Provided around 8 hours of training to date with each program having had between 20-30 people signed up. New things—coaching opportunities both individuals and groups. Also, new webinar series for December, January, February. December topics—Active Listening; The ABCs of Sustainable Time Management; Managing Stress. January topics—Email Communication at Work; Conflict with Customers about COVID, Masks, and More; Self-care & Self-Compassion; Understanding Communication Styles; Simple Ways to Collaborate and Get Results. February topics—Shutting Down and Boundaries for Our Work; Leading with Gratitude; Navigating Uncertainty; Working and Managing Remotely; The Balanced Professional. Coaching Programs: for *Individual Leadership*

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 12/1/2020



there are 2-3 slots available. Designed for a current leader or someone that is being groomed for leadership (should be nominated by a manager). Topics include Leadership; Leveraging Natural Strengths and Management Style; Effective Planning, Delegation, and Follow Through; Leading Others with More Self-Assurance; Ability to Make Decisions with More Clarity and Efficiency. 6 individual coaching sessions will be provided. *Group coaching*: Coaching group would be made up of 5-6 individuals. Designed for program leaders with supervisory responsibilities. Topics—Leadership Styles and Their Impact; Developing Others to Provide Effective Feedback; Stop Avoiding the Hard Conversations; Employee Engagement and Creating the Team; Navigating Conflict at Work; Emotional Intelligence at Work. Group would meet twice a month.

Q: Who are these open to?

A: Local health professionals.

Questions from emails:

Q: If an individual who is a first responder travels to another state which is defined as high risk and then must quarantine for 14 days after returning to Massachusetts, are they permitted to work as a first responder or must they quarantine?

A: “Essential employee” designation is specifically targeted at job responsibilities only. If you go on a trip voluntarily, you can go to work that aligns with first responder responsibilities, but when you get home you are not allowed to go to the mall and go Christmas shopping, you need to quarantine at home even if you can still go to work.

Q: We have a student that tested positive at school last week that completes her 10 day isolation today and should be cleared to return to school tomorrow. However, due to other family members being sick at home as well with COVID-19, the CTC has advised them to not send her in due to the possibility of her bringing in the virus on her clothes and belongings? Do you have any additional guidance on this? When would this student be cleared to return to school?

A: The idea that surfaces such as clothes can transmit infection continues to be questioned. CDC/DPH say that it can technically happen, but it is not the primary source of transmission. The respiratory droplets are what really matters. Once the student completes the 10 day isolation they are allowed to go back to school. Dr. Brown followed up with CTC about this case because the advice was incorrect, and it was considered a “newbie” mistake because it is not routine guidance that DPH/CTC are providing.

Q: Do pop-up businesses like holiday tree or wreath vendors etc. and in spring maple sugar houses have to abide by the retail standards, and if so, which?

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 12/1/2020



A: Yes, like any other retail business. Must follow all of them, the face covering, occupancy, social distancing, signage as any other retailer would.

Q: Are dental assistants considered healthcare workers for purposes of quarantine guidelines?

A: Yes. If they are exposed not on a vacation, then they would be allowed to work/continue working as long as they remain asymptomatic and wear masks and would only need to follow quarantine guidance outside of their job.

Q: I am a school nurse and a parent called me to discuss travel requirements for their child who is under 10 years old. Since a child who is under 10 does not need to be tested, can we require the parent to share their results? The parent informed me he did not have to reveal his own test results due to HIPAA. How do we ensure the safety of our community? What is the guidance from the state?

A: Speak to LBOH about this. The Travel Order requires that anyone who receives a negative test does not need to quarantine, but if the LBOH asks the parent for this information the parent is required to provide it. The child under 10 does not need to be tested.

Q: Does the DPH have any additional guidance or thoughts on basketball? The DESE guidance from October states that physical education (PE) should be limited with no close contact activities. Currently, our school district is not allowing any PE, but they are getting pushed hard by sports obsessed individuals. The MIIA guidelines allows basketball with modifications. The EOEEA guidance allows level 1, 2, & 3. With the recent Holiday gatherings that have occurred, some of this guidance should probably be revised. It would be helpful if all three of these organizations were on the same page when it comes to the health and safety of the population.

A: The guidance does allow for basketball although DESE guidance does not allow it for PE. These are different contexts. PE is really a locally controlled decision since all of the physical plans do not look the same and the facilities are not the same. What could be implemented through PE safely in one building may not be allowable in another district. School districts should review PE guidance then look at their facilities to see what would be allowable safely in terms of social distancing and ability for the building to support indoor activities.

Q: Because of the overwhelming number of COVID-19 cases some states are choosing to focus contact tracing only on clusters. What does DPH think about this?

A: The CTC has been scaling up remarkably over the last 3 weeks or so to assist with cases. We encourage LBOHs who are struggling to consider using them as a resource or seeing if there are Academic Public Health Volunteers who might be available to you. Information we get from cases is valuable in trying to understand and continue to track where transmission is happening and what are the drivers in the state.

Q: What is DPH's plan for messaging about vaccines? What is the most effective strategy for addressing vaccine skepticism?

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 12/1/2020



A: Building vaccine plan right now, and we are not prepared to roll out the plan for messaging about vaccines. There is no one-perfect-plan for vaccination strategy. It is important to reframe this from vaccine skepticism to vaccine confidence. Stay tuned for more information.

Q: I am concerned that access to Stop the Spread sites may become more difficult and I heard today that the turnaround time at the commercial labs is >1 week now. What is the plan to improve testing access?

A: Information we are hearing about the number of people trying to get tested through the Stop the Spread sites, such as time in line, challenges to get appointments, and these things are true and we are seeing that. There are also other locations in MA some are municipally supported using CARES Act money similar to the Stop the Spread. Also, there was a huge influx of people wanting to get tested for Thanksgiving, and we may see a similar demand for Christmas. High volume sites like in Revere process large volume of people very quickly, every day. Maybe doing a regional approach with access to Stop the Spread? These are all considerations for how to continue to provide testing. Turnaround time, as more people get tested nationally, the sheer volumes of tests being received are causing delays. The plan to improve testing access is really to evaluate the distribution of Stop the Spread sites and encouraging municipalities to open their own Stop the Spread site. Also, cluster investigations can be supported by mobile testing sites as used for schools. If you have insurance and are a close contact or have been identified with COVID-19 for the most part insurance is covering this. There are many locations that provide this service. Website has all the testing locations on it. We do know that these locations will charge you if you haven't been identified with COVID-19 and you may have to pay out of pocket. Average turnaround time on DPH Dashboard still says 2 days, but we acknowledge anecdotal information that commercial lab testing is delayed.

Q: Would you clarify "contact tracing" within a soccer team on today's call? Since soccer is a moderate risk sport it calls for contact tracing with an exposure during a game and/or practice. In a multi town team, different health departments were given different guidance in terms of quarantining the whole team or just notifying the players of the exposure on 11/23. The inconsistency has caused a lot of concern.

A: Difference in guidance could be caused by the information given from the contacts during the investigation. In general, what we would advise in all circumstances with the exception of hockey, is to assess any given situation on its own merits to figure out if the whole team has been exposed or not. In a practice where people are running individual drills, there is a low chance that people were close contacts, but if it was a game and a bus ride then this may be a situation where you may need to quarantine the whole team.

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 12/1/2020



Questions answered aloud from Q&A chat box:

Q: One of our businesses has requested clarification: do the guidelines allow them to require a doctor's note from employees if they take sick time. Can they require a COVID test?

A: Testing for return to work is not DLS related. Testing is discouraged actually for people to return to work. There is mandatory sick time in MA under the AG's office, and we don't know the requirements for granting sick time in terms of doctor's notes. We will follow up with the person who asked this question.

Q: DPH quarantine guidance about testing on day 8. Any document or info about why testing on day 8 is okay?

A: There is some scientific research and publications that document this. Dr. Brown will create a slide about this. Also, CDC will be making some changes and they have some rationale in their documentation.

Q: Are DPW employees first responders related to the quarantine order, specifically DPW who plow snow?

A: DPW workers not considered first responders. They may provide essential work particularly about snow, but at this time they are not considered first responders. First responders are police, fire, EMS, and healthcare workers.

Q: If a daycare child has a parent out of state and a visitation agreement to see the other parent outside of state are they required to quarantine after each court ordered visit?

A: Childcare visitation is exempt in Travel Order.

Q: Beginning on November 29, 2020, the DPH COVID-19 Dashboard is based on data in MAVEN from 11:59pm prior to the day listed. Does this mean the two week period for this week is 11/18-12/2?

A: The two week period shouldn't change. The 2-week period is still from Sunday to the Saturday, the 11/15-11/28.

Q: CTC to support LBOH in case identification and contact tracing. What other resources are available to support LBOH staff with this work

A: CTC up 600 staff from last 3 weeks. Another class in training that started yesterday and then another next week. About 350 starting this week. Huge scale up to assist with surge. We have seen already the change in data even with first two sets of classes onboarding. I think you should be able to see significant improvements, such as reduced time to get to a case. APHVC also should be used to assist with LBOH activities, doesn't have to be case investigation. Also, MRCs.

Q: Hockey, intention of EEA to allow full-contact hockey?

A: Full contact hockey is allowed at this time under the guidance.

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 12/1/2020



Q: Sports teams, organizers and facilities are asking for guidance in how to ensure the Travel Order is followed. COVID-19 Tests have unique identifiers and might be protected under HIPPA, therefore the coaches, organizers and facilities are not comfortable. Facilities were wondering how to ensure that the Travel Order is being followed by athletes.

A: If the minor/participant/student wants to share that info I don't think HIPAA would be violated. The other option is the Travel Order form, it says it's not required for people under the age of 18 but it can actually be used for sports participation for minors.

Q: If a person works in MA but lives in NH, has been commuting and now will be living in MA and no longer commuting from NH, do they need to quarantine once they move to MA?

A: Will need to check.

Q: BinaxNOW study in MA for symptomatic or asymptomatic or both?

A: Both, but the test performed better on symptomatic individuals but was still acceptable for asymptomatic individuals.

Questions from Q&A chat box not answered aloud:

Robin Williams - 3:14 PM

Q: What is your email Dr. Cedar?-

-Mike Coughlin - 3:20 PM

A: BCedar@cmgassociates.com

Meggan Eldredge - 3:28 PM

Q: I am confused by the answer to the first responder question in the chat. Jana-you say no to the question "first responders can work during their travel quarantine?" but then say they may work during their travel quarantine. Can you please clarify?-

-Jana Ferguson - 3:43 PM

A: First responders cannot work during travel quarantine if they traveled for leisure. If they are exposed as a close contact, then they are allowed to work during their quarantine provided they are asymptomatic and wear face coverings. -

-Jana Ferguson - 3:45 PM

A: If, for some reason, a first responder travels for work, they may be allowed to work during the travel quarantine and still be in compliance with the travel order when they return.

Norfolk County-8 Coalition

MDPH/LBOH WEBINAR 12/1/2020



Jon Lifvergren - 3:46 PM

Q: Is there any plan to set up a Stop The Spread site in Berkshire County. As of now, the closest is one hour away in Holyoke or Springfield.-

-Jana Ferguson - 4:00 PM

A: The Command Center has been working with Berkshire Medical Center to expand their testing program. This is being done in addition to Stop the Spread sites that are available to all residents.

Jennifer Sullivan - 4:08 PM

Q: Are water / sewer departments that are mandated to run with certain individual licenses by the state exempt from following the quarantine order if close contact even though they aren't a health worker?-

-Mike Coughlin - 4:00 PM

A: No, they are not exempt.

Additional questions please email: Michael.j.coughlin@mass.gov