MDPH/LBOH Webinar 2/12/2021



Inter-agency Staff on the Webinar

- Jana Ferguson, Assistant Commissioner, DPH
- Ron O'Connor, Office of Local and Regional Health, DPH
- Dr. Catherine Brown, Glynnis LaRosa, and Laurie A. Courtney, Bureau of Infectious Disease and Laboratory Sciences, DPH
- Donna Quinn and Mary Clark, Office of Preparedness and Emergency Management, DPH
- Michael Flanagan and Adam Kinney, Department of Labor Standards
- Helene Bettencourt, Anne Gilligan, and Anne Marie Stronach, Department of Elementary and Secondary Education
- · Cheryl Sbarra, Massachusetts Association of Health Boards
- · Jeff Farnsworth, Executive Office of Public Safety and Security
- · Chief Edward Dunne, Massachusetts Chiefs of Police Association

Announcements:

Public Health Excellence Grant Program for Shared Services: \$10 million in the FY2021 budget for grants to implement the recommendations of the Special Commission on Local and Regional Public Health (Blueprint for Public Health Excellence report, June 2019). Competitive grants program to increase the number and scope of public health districts and shared services agreements in order to strengthen the service delivery capabilities of the local public health system. Notice of intent will be posted today on the Office of Local and Regional Health website and COMMBUYS. Funding for up to 30 groups and municipalities to:

- -expand shared services arrangements to include more municipalities
- -expand shared services arrangements to provide a more comprehensive set of public health services and sustainable business model
 - -support new cross-jurisdictional sharing arrangements

Grant award in the range of \$150k - \$300 k. Application form and process will be simple (email application; not using COMMBUYS for application process). Tentative Timeline:

- -Notice of Intent—February 12th, 2021
- -RFR released—February 22nd, 2021
- -Bidders conference—TBD
- -Letters of intent due—March 8th, 2021
- -Responses due—March 29th 2021,
- -Grants awarded—late April, 2021

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Updated DESE Transportation Guidance: Updated as of Feb. 11th 2021 with a



focus on physical distancing requirements. Revisions based on data demonstrating significant air exchanges on moving buses with open windows (21-43 air exchanges per hour) as well as the continued proven effectiveness of masking. Differentiates between elementary schools and middle/high schools based on continued evidence that younger students are less likely to become infected and may be less likely to transmit COVID-19. Districts may adopt the updated standards only when the required mitigation measures outlined in the rest of the guidance document (wearing masks, opening windows, etc.) are followed. In all cases, maximum distance between students should be maintained during boarding and transportation.

<u>Elementary schools</u>: capacity limitations and physical distancing requirements for students on buses are lifted.

<u>Middle and high schools</u>: capacity limitations and physical distancing requirements for students on buses are lifted, except for middle and high schools in districts with high community prevalence, capacity limitations, and physical distancing requirements on buses are amended to allow 2 students per bus bench.

Q: What metrics are being use for high prevalence rates?

A: Metrics for communities promulgated by DPH. The red communities.

Q: Any change required when a community moves to red?

A: If you have concerns about the high prevalence of your community, work similarly with the LBOH and then contact us if you have a concern about changing. We believe that it's worth looking at multiple factors when we look at the high prevalence rate. We are told that the metrics are to not be tied to one specific thing. LBOH do not need to review seating plans. Schools and districts are encouraged to contact DESE if they would like to discuss individual considerations related to the transportation guidance:

Anne Marie Stronach, Senior Advisor to the Commissioner: anne.marie.stronach@mass.gov, 781-873-9514

Q: Does this affect contact tracing? Since individuals will be sitting near each other less than 6 ft.

A: Similar to the distance between desks guidance in schools, this does not change what contract tracing looks like. If there is a case the same definitions apply and contact tracing should proceed as usual.

CTC: Has great capacity at the moment, reaching out to individuals the same day. We've been able to add additional staffing for support calls. When we get on the phone with people, we do get vaccine questions, and we refer those individuals to mass.gov. If they want to speak to someone, we send them to 2-1-1.

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COVID-19 Vaccine Clinical Questions:

Q: Dead air space?

A: Both syringes and needles do have dead air space, and a little bit of solution can be caught and won't be expelled when administering a dose. We don't have information about which syringes/needles have more dead air than others. Also, vaccine unit said if you are having particular problems with a certain brand, please let them know and they will let McKesson and CDC know.

Q: What if we get less doses than expect?

A: This can happen, especially if the pressure in the vial is not standard. If you have lower doses than expected, vaccine unit says to please label them as "wasted"

Q: Which cancers are considered co-morbidities, and does being in remission count?

A: Right now, cancer is an acceptable co-morbidity. The question about remission is something that should be discussed with their provider. If the provider says they are at increased risk, then that's that.

Q: What do you do with a younger First Responder, such as a 17 year old, and they have a reaction to the vaccine after the clinic has been closed and submitted. How should this be documented?

A: As a vaccinator, it is the expectation that you will report the adverse reactions to VAERS. <u>VAERS.hhs.gov</u>. If something happens that's unexpected, it's better to be safe than sorry and report it anyway.

Q: Should people be vaccinated if they already had COVID-19?

A: Go to <u>CDC clinical considerations webpage</u>, it specifies there that yes, if you have had COVID-19, you should still get vaccinated.

Q: The health care provider does not have an answer for how to tend to a patient with complex clinical conditions, what should they do?

A: There is not a lot of data about complex patients and vaccines. We suggest that the healthcare provider consult with someone. Also you can contact the CDC (<u>covid question hotline</u>).

Check out the <u>CDC clinical considerations page</u>. The have information about vaccine complications and how to deal with them.

Also, DPH is hosting a series of open Q&A sessions (meant to be follow ups to the trainings that are posted): Feb. 22^{nd} , $2021\ 1:00\ pm - 2:00\ pm$, March 8^{th} , $2021\ 1:00\ pm - 2:00\ pm$, March 22^{nd} , $2021\ 1:00\ pm - 2:00\ pm$. Trainings and supplemental resources should be reviewed before the Q&A session.

Q: What types of trainings are available?

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A: Clinic training for Pfizer and Moderna and about broad guidelines about the vaccine. Great baseline trainings. Also, storage and handling training that the vaccine unit were in the process of creating. Currently transitioning to BU PHX as the training module host.

CDC guidance about double masking and post-vaccine quarantine (at least 2 weeks after their 2nd dose): New guidance released this week.

Q: Are we going to adopt this in Massachusetts?

A: Still having conversations about how to move forward with this, and it's fair to say that the more layers a mask has, and the better it fits, the more effective it continues to be. Massachusetts is probably going to adopt the quarantine guidance, currently in talks, but this came out recently. Hoping for answers as early as next week.

Vaccine clinic update: Still facing a significant shortage from the federal government every week. Sometimes there is more Pfizer, sometimes more Moderna. Sometimes there are specific allotments that go to a particular group (housing groups, pharmacy program). There was some communication yesterday about hospitals and the current constraints on supply. Unfortunately, people misunderstood this. People think that hospitals are no longer a major player in the vaccine roll out, but this is not the case. They are still receiving a bulk of the vaccine that comes in but they are not a long term solution.

Vaccinating Homebound persons with COVID-19 vaccine: CDC guidance on vaccinating homebound persons with COVID-19 vaccine: www.cdc.gov/vaccines/covid-19/clinical-considerations/homebound-persons.html It can also be found from the CDC clinical considerations webpage: www.cdc.gov/vaccines/homebound-persons.html It can also be found from the CDC clinical considerations webpage: www.cdc.gov/vaccines/hcp/admin/storage/toolkit/index.html

Contact information:

<u>Immunization Division Main Number</u>—for questions about immunization recommendations, disease reporting, etc. Phone 617 989 6800 (24/7 MDPH Epi line)

<u>MIIS help desk</u>—email questions to <u>miishelpdesk@state.ma.us</u> Website:

 $\underline{\text{https://www.mass.gov/service-details/massachusetts-immunization-information-system-miis}}$

 $\underline{\mathsf{MDPH}}\ \mathsf{vaccine}\ \mathsf{unit} - \mathsf{email}\ \mathsf{questions}\ \mathsf{to}\ \underline{\mathsf{DPH-vaccine-management@massmail.state.ma.us}}$

Website: www.mass.gov/service-details/vaccine-management

<u>COVID email box</u>: <u>covid-19-vaccine-plan-ma@mass.gov</u>

Questions from Q&A answered out loud:

Q: Is there time to actually work on the Shared Services arrangement?

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A: This is in the budget, and a great opportunity, and we are hoping people can take advantage of this. Another request is for DPH to establish a uniform reporting process/system. This is intended to simplify some of the work for LBOH so they can collect more information.

Q: Vaccine delivery given that Monday is President's Day?

A: Groups that are open on Monday will most likely receive vaccine (hospitals, for example)

Q: Timing between other vaccines and whether or not It's okay if you've received a non-COVId-19 vaccine within 14 days of the first dose?

A: Not a lot of data about. If there is a reason that either vaccine needs to be given sooner, go ahead and get vaccinated.

Q: 2-1-1 and questions about caregivers

A: 2-1-1 still assisting seniors who are not able to use the internet to schedule appointments. Ability to get translators available. Have heard anecdotally that 211 has been telling people to just go to clinic sites without an appointment. Also heard about 2-1-1 telling people to go to a restricted clinic (i.e. second doses for first responders). When you hear about these, please send us the information, like that person's name and we can track it down from the 2-1-1 side. Caregivers are for individuals taking care of seniors over the age of 75 going to mass vax sites. Some municipalities and agencies have reached out about whether or not this is okay for local sites. You can absolutely do that, up to you.

Questions from Q&A not answered out loud:

douglas telling - 9:15 AM

Q: Please read the contact information. those on the phone can't read it.-

-Ron O'Connor - 9:19 AM

A: Everyone will receive the slides and supporting documents/links this afternoon.

Jordan Bruso - 9:16 AM

Q: We have a Mall Manager asking whether massage chairs and vending rides were allowed to be opened back up yet? And are food courts allowed to add dining/seating back? Thank you.-

-Michael Flanagan - 9:31 AM

A: No, those are not allowed to be open at this time. A food court may provide food for take away or delivery only.

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15084603751 Garside - 9:32 AM

Q: Do we have to worry about Moderna vaccine delivery coming on Monday, Presidents Day when we are not open?-

-Jana Ferguson - 9:35 AM

A: No, for the most part shipments to communities receiving vaccine will not come on Monday. There are some exceptions to facilities that expect to be open, such as hospitals.

Thomas Carbone - 9:17 AM

Q: Can we be provided with the science behind why the bus guidance is changing? If we are being asked to support this, we need to understand the background.-

-Ron O'Connor - 9:43 AM

A: The guidance that we will send after the webinar provides citations to the science.

Karen waitekus - 9:40 AM

Q: If we report a reaction on PrepMod? Do we also report it on VERS?-

-Jana Ferguson - 9:43 AM

A: Yes

Trevor Bruso - 9:44 AM

Q: Is DPH telling Pharmacies NOT to partner with Local Boards of Health to hold local vaccine clinics? If so why?-

-Jana Ferguson - 9:44 AM

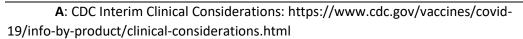
A: No

christine paulik - 9:40 AM

Q: One of the questions is about "did you have another vaccine within the past 14 days" Some providers are telling their patients it is ok to get Covid-19 vaccine. Is this true?-

-Katie Reilly - 9:57 AM

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Jeanne Galloway - 10:02 AM

Q: is the Springfield mass vaccination site included in the caregiver vaccine program?-

-Mike Coughlin - 10:03 AM

A: yes