## MDPH/LBOH Webinar 9/14/2021



## Inter-agency Staff on the Webinar

- · Jana Ferguson, Assistant Commissioner, DPH
- Sam Wong, Erica Piedade, Michael Coughlin, and Rachael Cain, Office of Local and Regional Health, DPH
- Dr. Catherine Brown, Arianne Henry, Glynnis LaRosa, and Laurie Courtney, Bureau of Infectious Disease and Laboratory Sciences, DPH
- · Donna Quinn, Office of Preparedness and Emergency Management, DPH
- Antonia Blinn, Academic Public Health Corps, DPH
- · Eleni Kacher, Executive Office of Health and Human Services, EHS
- · Dawn Sibor, Massachusetts Health Officers Association
- Anne Gilligan and Anne Marie Stronach, Department of Elementary and Secondary Education
- · Cheryl Sbarra, Massachusetts Association of Health Boards
- Dr. John Welch, Community Tracing Collaborative
- · Jeff Farnsworth, Executive Office of Public Safety and Security

### **Academic Public Health Volunteer Corps Updates**

Antonia Blinn, Arianne Henry

- Subscribe to the APHC Newsletter—Infographics are available and communities are encouraged to borrow, customize, and use them. Content is from the CDC, Mass.gov, and other cited sources.
- APHVC Services Provided: Health communication, community outreach, contact tracing, translation services, data analysis & presentations, Epi support, initiatives to address health equity, policy & protocols, mobilizing and supporting partnerships, non-COVID public health activities including efforts around flu/COVID-19 vaccine clinics, and pother PH topics
- Preliminary Results from Community Survey
  - O Where do you get information about vaccines?
    - Top answers include (in order): Healthcare providers; News sources;
       Scientific literature; social media, online articles, internet; Government agencies; Friends and family; Public health resources/professionals; MA DPH
  - What additional info do you need to help decide whether to get the vaccine?
    - Answers included concerns about efficacy and safety; partisan agendas; general lack of info regarding the effects of vaccines; logistics
- <u>Color</u>: a digital health solution that enables local health departments to deliver flu,
   COVID-19 and other vaccinations
  - Benefits of Color include: going paperless; user-friendly registration (link sent out ahead of time for registration); back-end benefits such as automatic

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transmission of data to MIIS and integration with

Commonwealth Medicine for billing and reimbursement; dashboard that tracks statistics at the patient and aggregate levels; use for a variety of vaccines

154 sites in total to date (COVID-only or COVID/Flu)

### **Opioid Toolkit**

Dawn Sibor, MHOA

- MHOA and BUSPH/PHX hosting a free webinar on Thursday, Sept 23<sup>rd</sup> 12-1PM
  - One stop reference guide, based on 10 essential public health services
  - o (3) Subject matter experts (Aubrey Ciol, Andy Robinson, Nick Gooler)
  - o Interactive module in the works will be available on the MHOA site
  - Questions: Dawn Sibor, dsibor@mhoa.com

### **Mobile Vax:**

Eleni Kacher, EHS

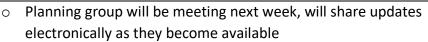
- Funding opportunity opened up to local boards of health to provide vaccinations in hard-to-reach communities
- Staff reimbursement (\$60/hr for a team of 5) and translator coverage available
- Requirements include: bill insurance first; be registered with MIIS; be able to store data securely and provide data to MDPH
- Contact eleni.kacher@mass.gov
- Q: How do we define "mobile"? A: A mobile site is located somewhere that is NOT the LBOH home base. Community locations such as libraries, senior homes, etc are appropriate. Emphasis is on hard to reach communities.
- Q: Can this be used for flu clinics? A: At this time, only for COVID vaccines. Will check back about Flu+COVID clinics.
- Q: Does a grantee have to deploy outside of their community? A: No, deploying regionally is an option but not a requirement.

### **COVID-19 Vaccine Booster Planning**

Jana Ferguson, DPH

- Some information from LBOH survey:
  - 15 regional collaboratives are looking to operate vaccine clinics (148 communities), estimated capacity 32,000 vaccines/week
  - 123 additional local public health depts will be vaccinating on their own, estimated at 23,000 doses/week
  - o 60 communities planning to offer booster, 11 will not be offering booster, some uncertain communities—please reach out if resources are needed!

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### **Other Updates**

John Welch, CTC

 CTC has staffed back up and sending a single text message and single outreach call, given current staffing levels and volume. Backlog from August has been cleared. Large number of cases came through yesterday because there was a MAVEN update over the weekend. Specific questions can go to local health liaison.

Next Meeting: Tuesday, Sept 21st at 3:00

### Questions from Q&A answered out loud:

Jana Ferguson

- Outdoor festivals: Not expecting any changes to COVID protocol; No restrictions on festivals; Recommend signage for masks and protection methods for large crowds; Similar approach to sports events
- National Guard for booster doses: utilized in long-term care settings in the past winter and are considered "potential resources"; no current plans to deploy for boosters Information for capacity and planning are still underway
- Planning boosters for home-bound vaccinations: not a requirement, DPH working with mobile vendors and previous in home vaccination providers (data on who utilized these services previously)
- No updates on the mask mandate at this time
- Can EDS be used to admin booster shots? If your EDS set-up works for booster, go for it.
   Do what works best for you in your community
- Clusters (10 or more) could have access to mobile testing. BinaxNOW available for cluster investigation.

### Questions from Q&A not answered out loud:

- To subscribe to the APHC newsletter:
   https://academicpublichealthvolunteercorps.us10.list manage.com/subscribe?u=408c1914b8904d98abf6c2dc7&id=97b812f31f
- ColorHelp@mass.gov or Arianne Henry (774) 217-1944.

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- Email aphycfieldops@mass.gov to request assistance with your Color vaccine clinic/technical assistance needs and so much more! Thanks for everything you are doing!
- The EEA sports guidance expired. DPH is recommending use of normal contact tracing and definitions of close contact for sports activities and is not recommending blanket quarantines (unless the specific circumstances require it). We are watching sports clusters closely and are seeing hocky continue to be a concern but are not suggesting blanket quarantines at this time.
- QUESTION: If we could get any information regarding support for homeless/ precariously housed who require isolation? The one hotel is full
  - ANSWER: Nancy thank you for letting us know that this is an issue. We also identified the problem today and have been told that EHS expects to have additional capacity by the end of the week.
- QUESTION: an we address youth sports. Specifically, ages 12 and under. Over a year ago MEOEEA issued guidelines for exposure, quarantining, etc. Have those expired? If so, can municipalities utilize contact tracing that PHNs, contact tracers, conduct for all other types of non-sport exposures, (home, travel, sector) etc. and not do blanket quadrating of entire teams, both teams, coaches, etc. if we do proper contact tracing. If on effort is to keep kids in school and blanket quarantining seems contrary to blanket quarantine. Especially when we don't blanket quarantine in schools related to school exposures. In particular with the unvaccinated under 12 y.o. Thank you
  - ANSWER: yes, that EEA sports guidance expired. DPH is recommending use of normal contact tracing and definitions of close contact for sports activities and is not recommending blanket quarantines (unless the specific circumstances require it). We are watching sports clusters closely and are seeing hocky continue to be a concern but are not suggesting blanket quarantines at this time.
- QUESTION: How do we contact trace a student in our town that lives in another town?
  - ANSWER: Please work with the LBOH in the other town to conduct that contact tracing.
- QUESTION: Are close contacts in EEC after school programs defined as 0-6 ft or 0-3 ft?
   And can they be included in test and stay programs if exposure occurred here?
  - ANSWER: EEC programs are still using the 6 feet distance and right now, Test and Stay is only for exposures that occur in school. Not in EEC programs

Please send me an email jana.ferguson@mass.gov if you answered "unsure" and we can help answer questions or see what else you might need in order to be able to finalize your decisions.

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- QUESTION: We've had a few vaccine recipients reach out stating they
  lost their vaccination cards. Since PrepMod has been phased out, how should we be
  referring these individuals to access their vaccination records?
  - ANSWER: the information is available on this web site: <a href="https://www.mass.gov/info-details/covid-19-vaccine-frequently-asked-questions-vaccine-providers">https://www.mass.gov/info-details/covid-19-vaccine-frequently-asked-questions-vaccine-providers</a>
- QUESTION: A DESE question about close contacts: What would the path be for Protocol B for close contacts who have in school/school activity exposures that don't fall clearly into the exemptions from testing and quarantine that are listed in the DESE docs.
   Thinking about students who are exposed at school in club settings, PE, sports, etc.
   Would activities such as band, choir, and PE count as "classroom" activities?
  - ANSWER: My understanding is that exposures in all school activities (including sports, PE and band) are permitted to do Test and Stay
  - Somerville is requiring vaccinations for all students participating in any extracurricular activities.
  - Physical Education, band and choir that take place during the school day are classroom activities.
- QUESTION: If someone is a close contact at school and is participating in test and stay, can they attend after school sports, or other clubs not school affiliated?
  - ANSWER: at this time, the Test and Stay program is only to allow students the ability to continue school-based activities and they are required to quarantine outside of school