

Inter-agency Staff on the Webinar

- Sam Wong, Erica Piedade, Michael Coughlin, and Rachael Cain, Office of Local and Regional Health, DPH
- Dr. Catherine Brown, Laurie Courtney, Scott Troppy, and Hillary Johnson, Bureau of Infectious Disease and Laboratory Sciences, DPH
- Helene Bettencourt, Anne Gilligan, Lauren Woo, and Anne Marie Stronach, Department of Elementary and Secondary Education
- Jeremiah Hay, Executive Office of Health and Human Services
- Dawn Sibor, Massachusetts Health Officers Association
- Cheryl Sbarra, Massachusetts Association of Health Boards
- Dr. John Welch, Community Tracing Collaborative
- Chief Edward Dunne, Massachusetts Chiefs of Police Association
- Jeff Farnsworth, Executive Office of Public Safety and Security

Announcements:

K-12 close contacts in schools: Schools are a more controlled environment, and because of this DPH, DESE, and EHS have worked together on a specific set of <u>K-12 close contact protocols</u>. The definition has not changed from last year, and it is in alignment with CDC's close contact definition. Close contacts exposed to a positive case within schools are eligible for Test & Stay, a daily antigen testing program where they can remain in school, provided they test negative daily. The Test & Stay is 7 days, and testing is required on school days. Testing is only required on non-school days if the student is participating in a school-sponsored extracurricular/sports event. Over-identification of Test & Stay participants has led to confusion, distribution delays, supply concerns, and difficulties with test administration. Not all close contacts are eligible for Test & Stay. The following groups should not enter the Test & Stay protocol: out-of-school-contacts—these individuals should enter into quarantine per existing protocol; close contacts exposed within 3-6 ft (but not 0-3 ft) of a positive case—these individuals, if they remain asymptomatic, can remain in school without testing; students who have not consented—if they are in-school close contacts within 0-3 ft, they should enter into quarantine per existing protocol.

Q: By "in-school", do you mean regular Monday-Friday activities?

A: Yes, "in-school" is school sponsored.

Q: Non-school related activities related to Test & Stay. Is it only applied to school-based exposures?

A: Yes.



Q: Do schools need to report cases to DESE this year?

A: Yes. <u>https://www.doe.mass.edu/covid19/positive-cases/</u>. Webinar recording:

https://youtu.be/4g-ubVannKg

Additional contact information:

Rapid Response Help Center (Anne Marie Stronach): 781-338-3500;

Anne.Marie.Stronach@mass.gov

Follow-up for positive cases and their close contacts: Weekly case investigation webinar, Tuesdays at 11 am-12:15 pm—you don't have to be a MAVEN user to join the call. Webinar topics include: updates in guidance, MAVEN functionality review/demos, how to conduct case investigations and contact tracing in different settings, answers to questions during each session from the Epi team of subject matter experts. Target audience is for school nurses, health agents, contact tracers, and public health staff doing this work. If you are not a MAVEN user but want to join the email list, email <u>isishelp@mass.gov</u> New two-part introductory case investigation and contact tracing training scheduled for 11 am Tuesday, October 5th, and October 12th. Stay tuned!

<u>Reviewing definitions for isolation and quarantine</u>: Local Public Health Institute (LPHI) has a <u>module on Isolation and Quarantine and a module on Surveillance.</u>

Isolation vs. Quarantine

ISOLATION

- For <u>symptomatic</u> people. and/or
- For Confirmed COVID-19 Cases.
- Prevents cases from infecting others
- LASTS UNTIL THE PERSON IS NO LONGER CONTAGIOUS
 - Use CDC Discontinuation of Isolation Guidance

QUARANTINE

- For <u>asymptomatic</u> people who have had an exposure (close contacts of confirmed cases)
- Prevents people from infecting others in the event they develop symptoms
- LASTS FOR 14 DAYS FROM LAST EXPOSURE. (If you don't develop illness, you are then released.)
 There are options for reduced strict quarantine (< 14 days).

CONTACTS

Infectious

CASES

Collection Date of Test

Calculating infectious period:

Infectious

Determining Infectious Period – for Case Obtain exact symptom onset date to determine Infectious Period. Symptom onset date should be day of first noticed symptom Often sore throat, cough, aches/myalgias or fevers. Symptom Onset = Day 0 · Consider from two calendar days prior to onset until the last time they Infectious Period Start Date = 2 had contact with others (entered isolation) days prior to onset (or test collection) · Use a Calendar and ask what the case did each day, counting back 2 Infectious Period END date = when days from the onset of the first symptom. patient is released from isolation May only need to inquire up to Remember – if symptoms persist at Day 10, isolation should continue. the date they entered isolation (last contact with others) Day Day 10 11 Day Day Day Day Infectious Period Not Symptom Onset Date or Not



<u>Close contact: updated definition summer 2021:</u> The mass.gov definition of close contact has been updated to exclude outdoor exposures. It is defined as a) someone who was within 6ft of an infectious person while indoors for a cumulative total of 15 minutes or more over 24-hour period. Close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with an infectious COVID-19 case or b) having direct contact with infectious secretions of a COVID-19 case (e.g. being coughed on) while not wearing recommended PPE (e.g. gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection).

<u>Outdoor exposures</u>: Reminder that outdoor exposures are not considered close contacts requiring quarantine in MA at this time. That said, use judgement. Exposure to respiratory droplets is still considered a close contact. Examples where close contact might apply: kissing, sharing drinks, etc. Also think about bookending outdoor contact with indoor time (rides, inside the building before and after an outdoor event, etc.) For settings like camps, pools, sports etc. was the exposure outdoors or indoors? Let that determine your guidance regarding identifying close contacts for quarantine. Outdoor exposure does not always mean NO exposures, but it doesn't meet our definition of close contact requiring quarantine at this time. <u>When are you fully vaccinated?</u>



When exemptions apply for isolation or quarantine?

	COVID - Recovered*	Fully Vaccinated*
Identified as a Contact	 <90 Days since symptom onset or lab date = NO Quarantine ≥90 Days since symptom onset or lab date = YES Quarantine 	 NO quarantine required (No test needed unless symptoms develop.)
New Positive Lab Result	 <90 Days since symptom onset or lab date = NO new Isolation ≥90 Days since symptom onset or lab date = YES Isolate 	• YES, a positive lab is a case and would need to isolate accordingly /their contacts should quarantine.

*This table applies to community cases in non-healthcare and non-congregate settings.

NOTE: Make sure you have the correct <u>Quarantine Guidance Document</u>. (An old version did only give vaccinated people 90 days exemption from quarantine, but there is currently no time limit after vaccination.)



Quarantine guidance reminders:

- There is been no major change to the State Quarantine Guidance this Fall (aside from the additional wording to help clarify for fully vaccinated individuals with symptoms).
 - The three strict quarantine options still apply for community cases.
 - 7 Days
 - 10 Days
 - 14 Days (Required if any symptoms are experienced during the 14 days of quarantine, EVEN if they have a negative COVID-19 test.

	OPTIONS	CRITERIA	ACTIVE MONITORING
o major change to the ne Guidance this Fall additional wording to	7 Days of Strict Quarantine Test Required	The individual conducts active monitoring through The individual conducts active monitoring through The individual has not experienced any symptome The individual has not experienced any symptome authors and est tent	
fully vaccinated h symptoms). rict quarantine options	10 Days of Strict Quarantine No Test		
r community cases.	14 Days of Strict Quarantine	Belease on Day 15 after last expensive IF: • The individual has experienced ANX symptoms during the quarantice period EVEN if they have a segative COVID-19 test, OR • The individual indicates they are unvelling or unable to conduct active meetionics.	No additional active monitoring required
Required if any symptoms rienced during the 14 days ntine, EVEN if they have a COVID-19 test.	settings quaran	S NEW? DESE has their own protocol this fall, and our normal early release tine guidance which requires consister omatic does not apply to kids in schoo	from ntly being

Keeping quarantine guidance straight: Are we discussing a contact in the community? Or are we referencing the K-12 school setting? If it is a contact in the community, apply normal State quarantine guidance. This includes childcare/daycare settings (they do not have their own protocol this year). Exposed people can opt out for reduced strict quarantine guidance ONLY if they remain asymptomatic the entire 14 days. If the contact attends K-12, apply the DESE COVID-19 protocols to determine the appropriate quarantine schedule. Calculating quarantine period:

Calculating Quarantine Period





Resources, tip sheets, tool sheets, recorded presentations:

www.maventrainingsite.com/maven-help/toc.html

· Lots of tools and resources are available online on our MAVEN Help page.



- You do not have to be logged into MAVEN to utilize these tools. They are located online and can be accessed at this address :
- http://www.maventrainingsite.com/maven-help/toc.html
- Interview tools, Infectious Period Tip Sheets, Quarantine Calculation Tools, Previous Trainings, Webinars, etc.

MDPH Epi Program: 617-983-6800 MDPH MAVEN Help Desk: <u>isishelp@mass.gov</u> MDPH ISIS Help Desk: 617-983-6801 MDPH ISIS Fax: 617-983-6813 DESE Rapid Response Help Center: (781) 338-3500 CTC Help Desk: 857-305-2828 CTC Local Health Help <u>ctclocalhealthhelp@covid19.pih.org</u>

MAVEN request process related to Public Health Excellence (PHE) Grants: Please send any MAVEN-related requests through the primary point portion for the grant. If you would like to designate an alternate point person, please let the MAVEN team know. Types of requests may include: updating existing user accounts to include additional towns; adding new users to MAVEN. Please provide MAVEN team with written documentation on town letterhead from all towns requesting/approving changes to MAVEN. Include the following details: names and contact information (city/town/organizational named email addresses—no personal email) of individuals who will need added or updated MAVEN access. Please send all documentation and questions regarding MAVEN access to maventraining@mass.gov. The grant point person should email that address. Approved users will receive additional guidance on how to register via email. Steps include: MAVEN training which involves a self-paced training and proficiency test. Staff requesting MAVEN user accounts need to be conducting active case investigation and follow-up for your town or city. Approved users will receive an email from the Virtual Gateway with login details. These requests can take up to two weeks to process. Once you receive access, please remember to log into MAVEN weekly. The team audits accounts every 30 days and deactivates inactive accounts. Once accounts are deactivated, you need to go through the process again.

COVID-19 vaccine booster dose updates: ACIP unanimously approved Pfizer boosters six months after vaccination for 65+ and anyone at risk for severe illness. 16 and older not at high risk is not recommended. Typically, FDA accepts ACIPs recommendations, but not always. Interesting to see what happens.



Revised Opioid Toolkit Training Update: Webinar has been postponed.

Realizing there was a lack of lead time for registering and considering the timing, Thursday, September 23rd, it was been postponed. Registered individuals have received notification and will be the first contacted with the announcement of the new date. If you have questions about the Opioid Toolkit or the webinar, please email Dawn Sibor at dsibor@mhoa.com

Funding opportunities:

Mass in Motion RFR: Bureau of Community Health and Prevention issued an RFR for the Mass in Motion Municipal Wellness & Leadership Initiative. The RFR posed on September 13th on COMMBUYS and applications are due Monday, December 13, 2021.

Reopening of Epi COVID-19 Case Investigation and Contact Tracing Grant: Bureau of Infectious Disease and Laboratory Sciences reopened the grant program to build capacity in LBOH, ideally through a shared services framework, to be able to fully assume COVID-19 case and cluster investigation, contact tracing, isolation and guarantine support, and associated public health reporting responsibilities starting Q2 of FY2022. These resources are expected to be available through June 30th, 2023, with any extensions dependent on federal carry forward funds availability.

USDA Rural Health Care Emergency Grants: Designed to help broaden access to COVID-19 testing and vaccines, rural health care services, and food assistance through food banks and food distribution facilities. Multiple grants available.

NEHA and FDA: New Retail Flexible Funding Model (RFFM) Grant Program. Due November 15th, 2021. The program will provide funding to state, local, tribal, and territorial (SLTT) retail food regulatory agencies as they advance conformance with the Voluntary National Retail Food Regulatory Program Standards or Retail Program Standards. FDA will utilize NEHA's strengths to assist SLTT retail food programs in their efforts to reduce the occurrence of foodborne illness risk factors and implement and attain confirmation with the Retail Program Standards. NACCHO: RFR for Implementing Overdose Prevention Strategies at the Local Level. Due October 21, 2021. With support from the CDC, NACCHO is pleased to announce a funding opportunity to 10 local health departments in high burden counties or cities to implement activities that address their community's challenges related to drug overdose through an interdisciplinary, comprehensive, and cohesive public health approach.

Questions answered out loud from the Q&A Chat:

Chat questions not posted because of functionality issues.