



OBSERVER REPORT

Board of Health: 1/19/21 LWVM Observer - Thomas Krueger

Members in Attendance via Zoom - BOH : Andrew Petty, Todd Belf-Becker, Sec. Andrea Flaxer, Michelle Gottlieb, Helaine Hazlett

Meeting Posted 48 hrs in advance

Meeting held in a Handicapped Accessible Location - not applicable

Public allow to Participate in the Meeting - yes via Zoom.

COVID UPDATE:

Andrew presented the case report from 1/15/21, noting it is in a different format. The report 1/15/21 showed total MHD case 863, 89 active, and 31 deaths (to date.) Death reports will be reviewed to see if there are any additions. The report presents the numbers per 0-19, 20-29, 30-39, etc. The 0-19 age group is the largest and has been so for the past 2-3 weeks. The 20-29 age group is also high, likely due to social gatherings. The spread otherwise across the groups is more even. With these new cases, MHD now has an average daily incidence of 59.7/100,000 cases and the percent positive tests in the past 14 days is 5.23%, putting MHD in the RED zone. In the current report are more graphics showing the case rate, percent positive case rate, total cases, and total tests taken as a function of time. In the notes for the report is the comment that social gatherings both in homes and work place are contributing to the increases. Also, in the notes, is a reminder about wearing masks for all those over 5 in any public location, indoors or outdoors, as well as for carpools with non-household members. The increase in cases and hospitalizations if unchecked pose a risk to the healthcare system. Included in the report is the MA Department of Public Health dashboard of hospitalizations, ICU patients, and average age of

patients. The accompanying graphics show available and occupied hospital and ICU beds by region. (The results are stark with near full capacity for the Northeast region which include MHD.). In addition, the report reminds all about staying home 10pm- 5am, going out for only essential needs, refrain from social gathering outside of the household, complying with governor's order, etc. At the end of the report is a graphic about the phased vaccine distribution in MA as well as numerous web links for questions about vaccinations. (This information is available in detail on marblehead.org, "Information Alert/Coronavirus Disease 2019 (COVID019)) (The department has been having help with the graphics from a data scientist from University of Washington, Seattle, Children's Hospital, who has been doing this for other communities. The process is much more automated now.)

Andrew went on to remind again that the 3 things all can do are to mask, social distance, wash hands, socialize with the people you live with, etc. He said that once a household member is infected, it seems to spread to all the others in the household; it doesn't seem possible to isolate the index case. He also emphasized that in the workplace, employers need to talk to their employees, especially about breaks where masks may come off.

One board member opined that in the summer when the numbers were low, people had expanded their "pod", e.g., play dates for kids. But, these pods were not as closed as people went to work. With these new numbers, all will have to be more conscious of their contacts. Another board member also pleaded with the public to "do the right thing" as vaccination will be a very long process.

Andrew acknowledged the mental health stresses this is causing, and reminded all there is help: on mass.gov, 211, referral lines, 221 website, etc.

Regarding the new UK COVID variant, on 1/16 MA DPH announced the first known case in MA. The individual who contracted this was from the Boston area, in their 20s, had traveled to England, and had tested negative before traveling. A COVID sample from the individual was sent to a lab, confirming the same genetic sequence. To date, there have been 85 cases in 14 states identified so far. The best prevention is the same: masking, social distancing, etc.

Regarding vaccination programs - last week over 5 days, a regional clinic for the towns of Swampscott, Salem, Denver, Beverly and Marblehead vaccinated 700

first responders, all of whom will return in 28 days for the second dose. Andrew has received numerous phone calls about vaccinations, who, where and when's. The Who will be along the DPH guidelines of a phased roll out. The Where includes clinics, hospitals, pharmacies, ambulance companies, private offices, etc. The vaccines will be at no cost at any of the locations. The When depends on a number of factors, including having the vaccines. A tentative timeline included first responder starting at the end of December, with LTC facilities, etc. following through January and February. Phase 2 and 3 then will follow. When one is vaccinated, one should get a card stating this and to return to the same site 28 days later. As far as anyone who wishes to volunteer with this effort, the process is to contact the MEDICAL RESERVE CORP (MRC); there volunteers are fully vetted including a CORI process. (The contact number/website will be on the department website.)

Questions concerning COVID: 1) Will a parent of medical fragile child be a candidate for phase 1 vaccination? Only if the state agrees. 2) with confirmation of variant of COVID, do the guidelines change? No, the same guidelines are true for exposure (within 6 feet, contact for 15 minutes over 24 hours, etc.). 3) if MHD gets more funding would MHD do more COVID testing? If the funds come, then it will be discussed. MHD would not have a "Stop the Spread" site as there is one in Salem and it is easy to travel there.

REOPENING COMMITTEE

The committee continues to meet weekly on Mondays, and Dr. Bucky will be sending out minutes of the meeting to the BOH for Tuesday meetings. The hybrid model seems to be working overall. Reopening after the vacation went well. Wednesdays continue to be a day off. Six feet continues to the spacing. There has been some concern cohort A may be getting less instruction than B because of Monday holidays, but this will all even out. The major concern has been about the students once out of school: they remove their masks when they are in carpools and playing informal sports.

Pool Testing: The type of pool testing that would be funded for 6 weeks by DESE would be as follows: a nasal swab of 10-25 children would be pooled and test via PCR; if the pool is positive, all of that pool is to quarantine and each is to return for an individual antigen test. If the antigen test is positive, then, a PCR test is

done. The results of PCR often take 72 hours and up to days to return. This entire process would require a lot of data management and entry into the MAVEN system. (The procedure could take 375 minutes of time for 25 children; note there are 6 schools in MHD.) In addition, the process requires specific training which if started now would further delay implementation. Currently MHD does not have the capacity or funds for this program and needs to hear from other communities. Salem is doing pool testing with saliva specimens (different test from above) and finding a number of cases. In MHD because of the demographic more people are getting tested independently. One community member commented that some data show that 48% of cases are pre-symptomatic, so the individual is not even aware, and that pool testing catching cases early might have a large impact.

The meeting was adjourned with the next meeting: 1/26/71 at 7pm via Zoom teleconferencing