



TOWN OF MARBLEHEAD

Board of Health

Todd Belf Becker, Chair
Helaine R. Hazlett
Michelle Gottlieb

(781) 631-0212

7 Widger Road

Marblehead, MA 01945

Andrew Petty, Director

MARBLEHEAD CASE REPORTING

Case Count

The Marblehead Health Department will make weekly updates on Friday, of confirmed cases, July 30, 2021.

Confirmed cases (recent guidance categorizes all confirmed or presumptive positive cases as positive): **1370**

(July 16, count was 1350) (July 23, count was 1359)

Active cases: 12

Confirmed deaths: **31**

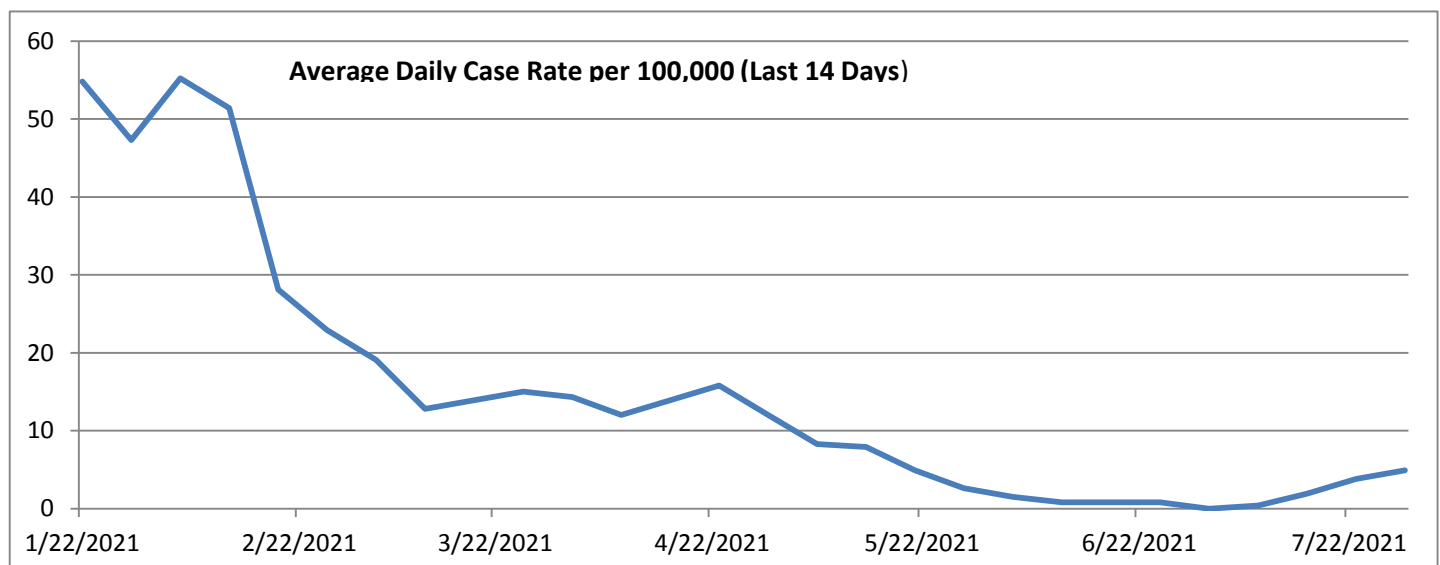
6 0 1 2 2 1 0 0
0-19 years 20-29 years 30-39 years 40-49 years 50-59 years 60-69 years 70-79 years 80+
Total Cases by Age Group from 7/16/2021-7/30/2021 (12)

Average Daily Incidence Rate per 100,000 (Last 14 Days)	Relative Change in Case Count	Total Tests	Total Tests (Last 14 Days)	Percent Positivity (Last 14 Days)	Change in Percent Positivity
4.9	Higher	62,653	1075	1.49%	Higher

We are currently a **Grey** Community per the Massachusetts Average Daily Incidence Rate per 100,000 Color Calculation

Marblehead Residents Vaccinated for COVID-19 as of July 30, 2021

First Dose (One Dose Away) **1,893**
Second Dose **14,256**





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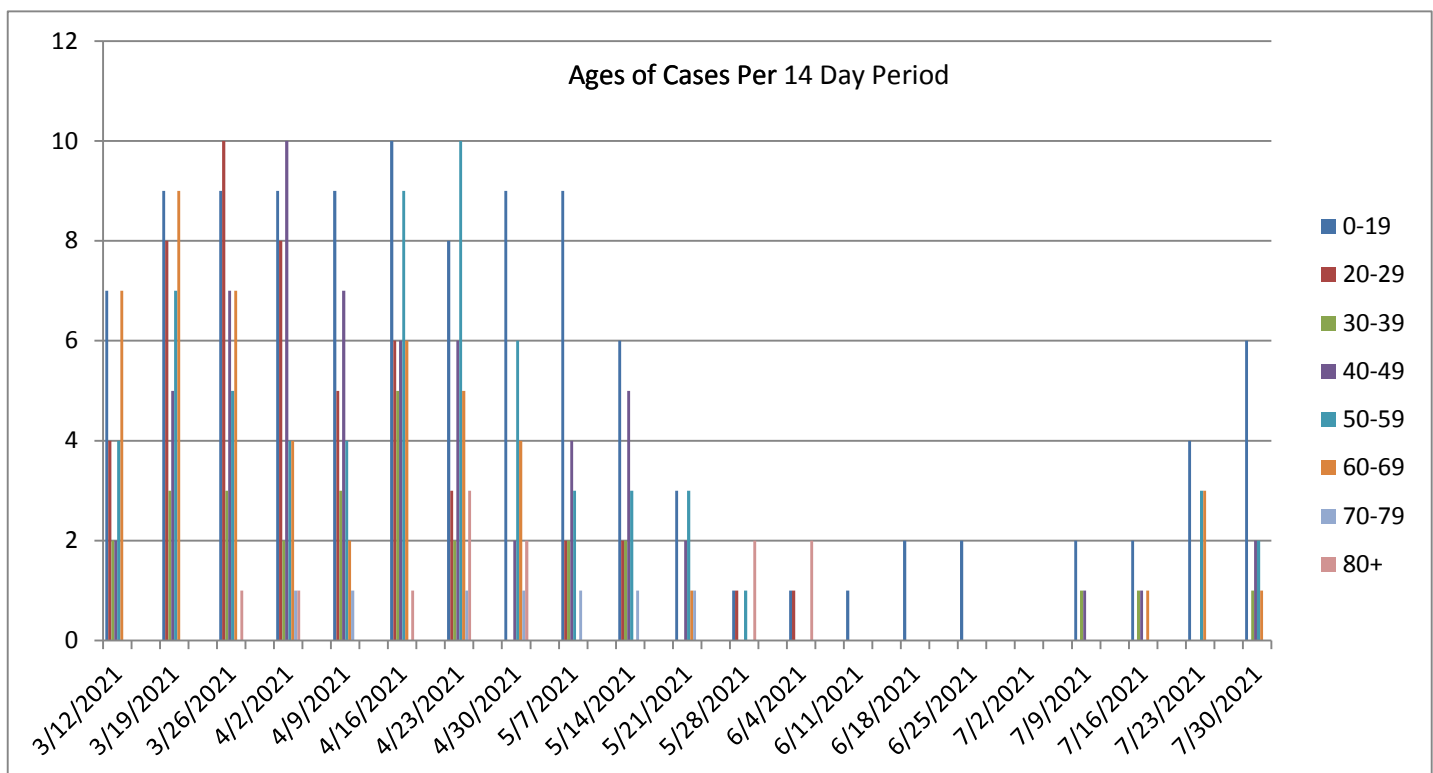
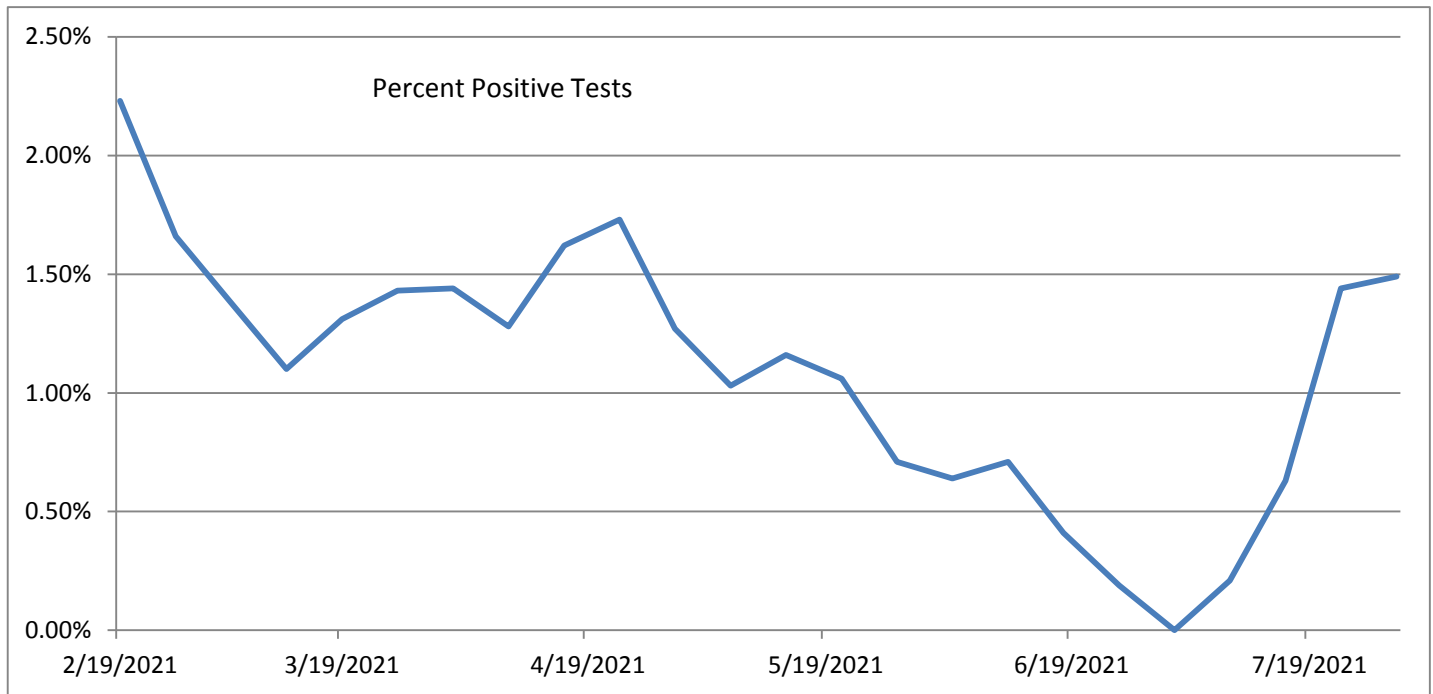
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Face Coverings:

Effective May 29: The Commonwealth's face-covering order will be rescinded. The Department of Public Health will issue a new face-covering advisory consistent with the Centers for Disease Control and Prevention's updated guidance.

Face-Covering Advisory for Unvaccinated Residents

The Department of Public Health will issue a public health advisory effective May 29 that advises all unvaccinated residents to continue to wear face-coverings in indoor settings and when they can't socially distance.

[Department of Public Health \(DPH\) Advisory Regarding Face Coverings and Cloth Masks](#)

Face-Covering Requirements in Certain Locations

Effective May 29, 2021, updated June 3, 2021 face coverings will continue to be required for both vaccinated and unvaccinated individuals at all times in the following locations, subject to the exemptions listed below:

1. **On Public and Private Transportation**, including on the MBTA, commuter rail, buses, ferries, and airplanes, and while in rideshares (Uber and Lyft), taxis, and livery vehicles, as required by the [Centers for Disease Control January 29, 2021 Order](#). Face coverings are also required at all times in transportation hubs, including train stations, bus stops, and airports. The requirement applies to riders and workers.
2. **Inside Childcare Programs** licensed or authorized by the Department of Early Education and Care (EEC) and as otherwise required by EEC or the Department of Public Health (DPH). This requirement applies to students, teachers, and staff.
3. **In Health Care Facilities and Provider Offices**, defined as healthcare facilities or providers licensed or operated by the Commonwealth including nursing homes, rest homes, emergency medical services, hospitals, doctor's office, urgent care settings, community health centers, vaccination sites, behavioral health clinics, and Bureau of Substance and Addiction Services (BSAS) facilities. This requirement applies to patients and staff.
4. **In Congregate Care Settings**, defined as congregate care facilities or programs operated, licensed, certified, regulated, or funded by the Commonwealth including: assisted living facilities, group homes, houses of correction, Department of Correction prisons, jails, residential treatment programs, and facilities operated, licensed, certified, regulated, authorized, or funded by the Department of Early Education and Care (EEC), the Department of Children and Families (DCF), the Department of Youth Services (DYS), the Department of Mental Health (DMH), the Department of Public Health (DPH), the Department of Developmental Services (DDS), the Department of Veterans' Services (DVS), the Massachusetts Commission for the Blind (MCB), the Executive Office of Elder Affairs (EOEA) and the Massachusetts Rehabilitation Commission (MRC). Additionally, the face coverings requirement applies to emergency shelter programs, including individual and family homeless shelters, domestic violence and sexual assault shelters, veterans' shelters, and shelters funded by the Department of Housing and Community Development (DHCD). The face coverings requirement also applies in approved private special education schools, which offer residential services and are approved by the Department of Elementary and Secondary Education (DESE). This requirement applies to clients and staff.
5. **In Health Care and Rehabilitative Day Services and Programs**, defined as programs or services operated, licensed, certified, regulated, or funded by the Commonwealth and authorized under the aegis of the Executive Office of Health & Human Services or one of its agencies. These programs and services include: adult day health, day habilitation, Program of All-Inclusive Care for the Elderly (PACE), psychosocial rehabilitation club houses, brain injury centers and clubhouses, day treatment, partial hospitalization and intensive outpatient programs, recovery support centers and center-based day support programs. This requirement applies to staff and consumers.



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6. **Home care workers**, including Personal Care Attendants (PCA), Home Health Aides, and Home Care Workers provide patient-facing care. The face coverings requirement only applies to the worker.

The following persons are exempt from the face coverings requirement:

- Children 5 years of age and younger.
- Persons for whom a face mask or covering creates a health risk or is not safe because of any of the following conditions or circumstances:
 - the face mask or covering affects the person's ability to breathe safely;
 - the person has a mental health or other medical diagnosis that advises against wearing a face mask or covering;
 - the person has a disability that prevents them from wearing a face mask or covering; or
 - the person depends on supplemental oxygen to breathe.

CDC COVID-19 Guidance

If you've been fully vaccinated:

- You can resume activities that you did prior to the pandemic.
- To reduce the risk of being infected with the Delta variant and possibly spreading it to others, wear a mask indoors in public if you are in an area of [substantial or high transmission](#).
- You might choose to wear a mask regardless of the level of transmission if you have a weakened immune system or if, because of your age or an underlying medical condition, you are at [increased risk for severe disease](#), or if a member of your household has a weakened immune system, is at increased risk for severe disease, or is unvaccinated.
- If you [travel in the United States](#), you do not need to get tested before or after travel or self-quarantine after travel.
- You need to pay close attention to [the situation at your international destination](#) before traveling outside the United States.
 - You do NOT need to get tested **before** leaving the United States unless your destination requires it.
 - You still need to [show a negative test result](#) or documentation of recovery from COVID-19 **before** boarding an international flight to the United States.
 - You should still get tested 3-5 days **after** international travel.
 - You do NOT need to self-quarantine **after** arriving in the United States.
- If you've been around someone who has COVID-19, you should get tested 3-5 days after your exposure, even if you don't have symptoms. You should also wear a mask indoors in public for 14 days following exposure or until your test result is negative. You should isolate for 10 days if your test result is positive.

COVID-19 vaccination remains the most effective means to achieve control of the pandemic. In the United States, COVID-19 cases and deaths have markedly declined since their peak in early January 2021, due in part to increased vaccination coverage (1). However, during June 19–July 23, 2021, COVID-19 cases increased approximately 300% nationally, followed by increases in hospitalizations and deaths, driven by the highly transmissible B.1.617.2 (Delta) variant* of SARS-CoV-2, the virus that causes COVID-19. Available data indicate that the vaccines authorized in the United States (Pfizer-BioNTech, Moderna, and Janssen [Johnson & Johnson]) offer high levels of protection against severe illness and death from infection with the Delta variant and other currently circulating variants of the virus (2). Despite widespread availability, vaccine uptake has slowed nationally with wide variation in coverage by state (range = 33.9%–67.2%) and by county (range = 8.8%–89.0%).[†] Unvaccinated persons, as well as persons with certain immunocompromising conditions (3), remain at substantial risk for infection, severe illness, and death, especially in areas where the level of SARS-CoV-2 community transmission is high. The Delta variant is more than two times as transmissible as the original strains circulating at the start of the pandemic and is causing large, rapid increases in infections, which could compromise the capacity of some local and regional health care systems to provide medical care for the communities they serve. Until vaccination coverage is high and community transmission is low, public health practitioners, as well as schools, businesses, and institutions (organizations) need to regularly assess the need for prevention strategies to avoid stressing health care capacity and imperiling adequate care for both COVID-19 and other non-COVID-19 conditions. CDC recommends five critical factors be considered to inform local



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decision-making: 1) level of SARS-CoV-2 community transmission; 2) health system capacity; 3) COVID-19 vaccination coverage; 4) capacity for early detection of increases in COVID-19 cases; and 5) populations at increased risk for severe outcomes from COVID-19. Among strategies to prevent COVID-19, CDC recommends all unvaccinated persons wear masks in public indoor settings. Based on emerging evidence on the Delta variant (2), CDC also recommends that fully vaccinated persons wear masks in public indoor settings in areas of substantial or high transmission. Fully vaccinated persons might consider wearing a mask in public indoor settings, regardless of transmission level, if they or someone in their household is immunocompromised or is at increased risk for severe disease, or if someone in their household is unvaccinated (including children aged <12 years who are currently ineligible for vaccination).

The principal mode by which persons are infected with SARS-CoV-2 is through exposure to respiratory fluids carrying infectious virus.⁸ The risk for SARS-CoV-2 transmission in outdoor settings is low (4,5). CDC recommends that public health practitioners and organizations prioritize prevention strategies for indoor settings. No one strategy is sufficient to prevent transmission, and multiple interventions should be used concurrently to reduce the spread of disease (6). Proven effective strategies against SARS-CoV-2 transmission, beyond vaccination, include using masks consistently and correctly (7,8), maximizing ventilation both through dilution (9,10) and filtration (11) of air, and maintaining physical distance and avoiding crowds (12,13). Basic public health measures such as staying home when sick, handwashing, and regular cleaning of high-touch surfaces should also be encouraged.

K-12, Early Education and Summer Camp Guidance

Clarifying COVID-19 Guidance:

On Saturday, June 19, Commissioner Riley sent a message to schools and districts clarifying the [COVID-19 guidance](#) that DESE released on May 27. The June 19 message states that:

- **For the remainder of the school year:** Masking indoors and maintaining other health and safety guidance as issued by DESE is required.
- **For summer programs:** Masking indoors and maintaining other health and safety guidance is not required but is encouraged. The DESE summer guidance is in alignment with state guidance encouraging unvaccinated individuals to continue to mask. [The DPH mask advisory](#) advises unvaccinated residents to continue wearing masks in indoor settings and when they can't socially distance.
- **For the fall:** At this time, all health and safety guidance including masking and physical distancing will be lifted. The Department of Elementary and Secondary Education will collaborate with the Department of Public Health (DPH) to issue any additional health and safety recommendations over the summer should they become necessary.

The Administration will release updated guidance for summer camps, effective May 29, which will include no longer requiring masks for outdoor activities.

How to properly wear a mask or face-covering

When you wear a cloth mask, it should:

- Cover your nose and mouth,
- Fit snugly but comfortably against the side of the face,
- Be secured with ties or ear loops,
- Include multiple layers of fabric,
- Allow for breathing without restriction, and



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- Be able to be laundered and machine dried without damage or change to shape.

When putting on and taking off a mask, do not touch the front of it, you should only handle the ties or ear straps, and make sure you wash the cloth mask regularly. Wash your hands or use hand sanitizer after touching the mask.

Cloth masks should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

The **FEMA COVID-19 Funeral Assistance** program allows for **funeral assistance for any COVID-19 related death after January 20, 2020**. The program will assist with expenses up to \$9,000 per funeral, up to a maximum of \$35,000 if applicants are applying for assistance related to more than one death.

Here are some key points about the program:

- **FEMA's call center can be reached Monday – Friday 9 a.m. to 9 p.m. Eastern Time, toll free at 1-844-684-6333, and through TTY at 1-800-462-7585.** The call center can take calls in multiple languages.
- There is currently no deadline to apply for this benefit.
- To be eligible for FEMA's funeral assistance benefit, you must meet these conditions:
 - The death must have occurred in the United States, including the U.S. territories, and the District of Columbia.
 - The death certificate must indicate the death was attributed to COVID-19.
 - The applicant must be a U.S. citizen, non-citizen national, or qualified alien who incurred funeral expenses after January 20, 2020.
 - There is no requirement for the deceased person to have been a U.S. citizen, non-citizen national, or qualified alien.
 - The program is open to all who qualify, regardless of their income.

RESOURCE: We've created a webpage with more information about the program, links to FEMA guidance, fact sheets in multiple languages, and information about obtaining or amending a death certificate in Massachusetts:

<https://www.mass.gov/info-details/covid-19-funeral-assistance>.

Effective Monday, March 22, the Massachusetts Travel Order was replaced with a Travel Advisory:

Travel Advisory

- As of Monday, March 22, all visitors entering Massachusetts, including returning residents, are advised to quarantine for 10 days upon their arrival.
- Travelers are exempt from this advisory if they have a negative COVID-19 test result that has been administered up to 72 hours prior to their arrival in Massachusetts. If not obtained before entry to Massachusetts, a test may be obtained after arrival, as long as travelers quarantine until a negative test result has been received.
- Anyone who is returning to Massachusetts after an absence of fewer than 24 hours is exempt from this advisory.
- Workers who enter Massachusetts to perform critical infrastructure functions (as [specified by](#) the Federal Cybersecurity and Infrastructure Security Agency) are exempt from this advisory while they are commuting to or from or while at work.



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- Travelers who are fully vaccinated (i.e. who have received two doses of either the Moderna or Pfizer COVID-19 vaccines OR who have received a single dose of the Johnson & Johnson vaccine, 14 days or more ago) and who do not have symptoms are exempt from this advisory.
- Travelers are encouraged to consult and follow the [CDC's guidelines and requirements for travel](#).

Effective May 29

Effective May 29, all industries were permitted to open. With the exception of remaining face-covering requirements for public and private transportation systems and facilities housing vulnerable populations, all industry restrictions will be lifted, and capacity will increase to 100% for all industries. The gathering limit will be rescinded.

All industries will be encouraged to follow CDC guidance for cleaning and hygiene protocols.

On May 18, 2020, the Administration [published the reopening phases](#), which called for ending restrictions when vaccines became widely available. Today, there are over 975 locations for Massachusetts residents to access vaccines without delay.

State of Emergency Order

Governor Baker has ended the [State of Emergency](#) as of June 15, and the Administration will work with legislative and municipal partners during this period in order to manage an orderly transition from emergency measures adopted by executive order and special legislation during the period of the State of Emergency.

Weekly Case report will come out on Friday morning after 9am