TOWN OF MARBLEHEAD
Board of Health

Todd Belfbecker D.M.D., Chair
Helaine R. Hazlett
Joanne Miller

(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, November 12, 2021.

Confirmed cases (recent guidance categorizes all confirmed or presumptive positive cases as positive): **1684**

(October 29, count was 1641) (November 5, count was 1667)

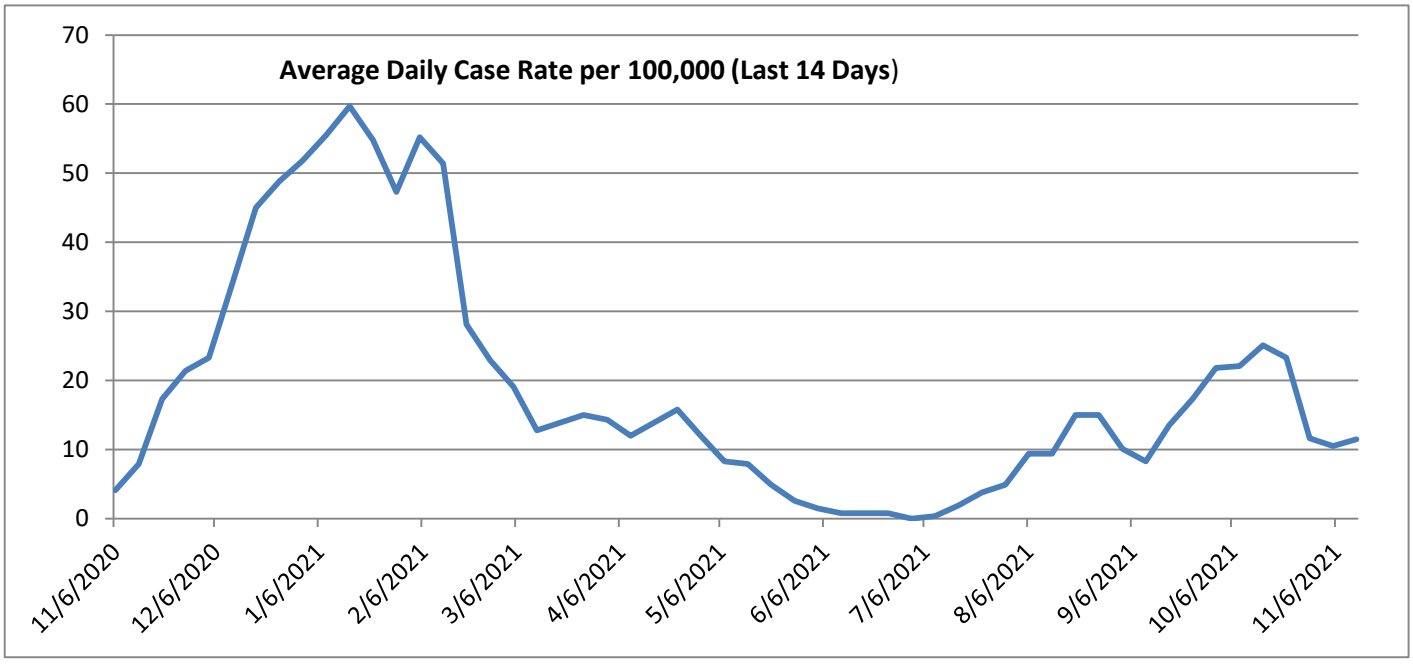
Active cases: **25**

Confirmed deaths: **31**

2	**2**	**8**	**5**	**8**	**19**	**4**	**3**	**2**
0-11 years	12-19 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 10/29/2021-11/12/2021 (43)

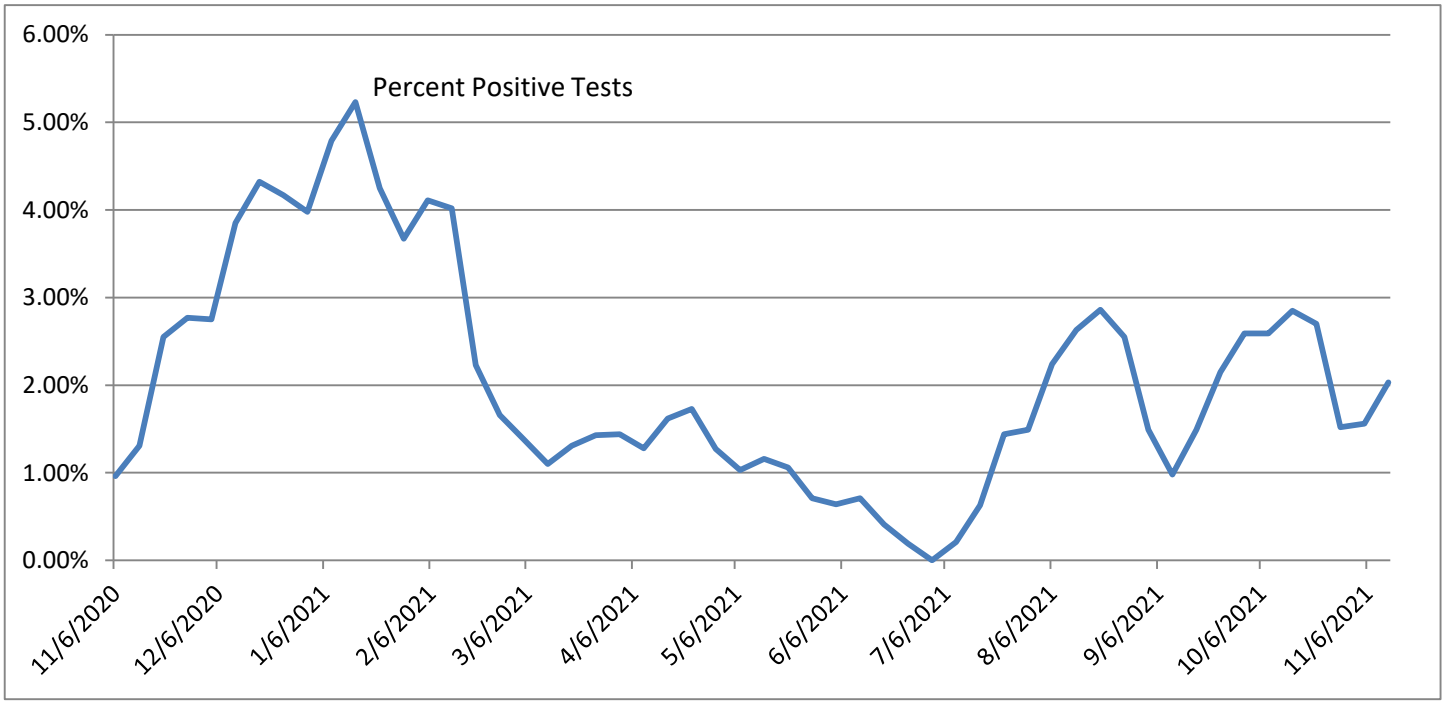
Average Daily Incidence Rate per 100,000 (Last 14 Days)	Relative Change in Case Count	Total Tests	Total Tests (Last 14 Days)	**Percent Positivity (Last 14 Days)**	Change in Percent Positivity
11.5	Higher	79,784	2,067	2.03%	Higher

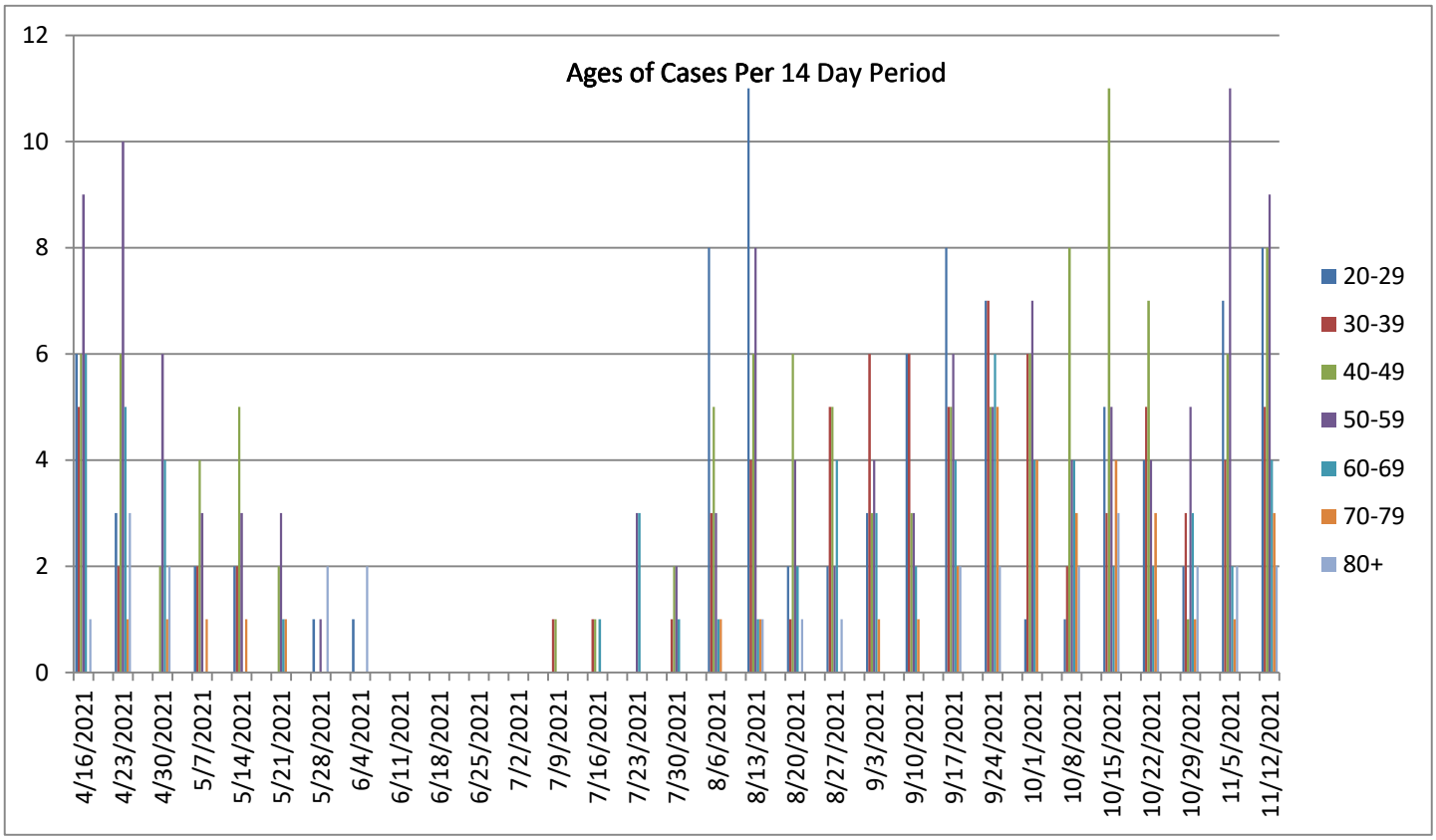


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Marblehead Residents Vaccinated for COVID-19 as of November 12, 2021

Age Group	Fully vaccinated individuals per capita	Partially vaccinated individuals per capita
12-15 Years	92%	7%
16-19 Years	>95%	5%
20-29 Years	89%	10%
30-49 Years	94%	6%
50-64 Years	92%	7%
65-74 Years	91%	9%
75+ Years	>95%	6%

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Effective May 29: The Commonwealth's face-covering order will be rescinded.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

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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.
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.
- You should still watch out for symptoms of CVOID-19, especially if you've been around someone who is sick. If you have symptoms of COVID-19, you should get tested and stay home and away from others. If you test is positive, isolate at home for 10 days.

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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 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.§ 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, Updated DESE COVID-19 Guidance

October 26, 2021

At the special meeting of the Board of Elementary and Secondary Education (Board) on August 24, 2021, the Board voted to declare "exigent circumstances" pursuant to the Student Learning Time (SLT) regulations, 603 CMR 27.08 (1), and authorized the Commissioner of Elementary and Secondary Education to require masks for public school students (age 5 and above) and staff in all grades through at least October 1, 2021. The mask requirement remains an important measure to keep students safe in school at this time, 1 and on September 27, 2021, the Commissioner extended the mask requirement through at least November 1, 2021.

This school year, the Department of Elementary and Secondary Education (DESE) required all districts and schools to provide in-person learning to students. Since the start of the year, approximately 920,000 public school students have been learning in schools with minimal disruptions. In addition to masking, this progress has been possible thanks to school communities working together to participate in the state's COVID-19 testing program, combined with high vaccination rates among eligible populations.

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Over 2,200 schools have opted into DESE's surveillance and symptomatic testing program to support the continuity of safe, in-person learning for our children. As part of this program, DESE has instituted a groundbreaking Test and Stay program for individuals identified as close contacts in school, in which they are able to remain in school provided they engage in daily testing for seven days. Across the state, this innovation has saved more than 48,000 days of student learning this school year.

Massachusetts is also a national leader in vaccination rates for adults and currently eligible children. The Commonwealth's high vaccination rates and low transmission rates are other important factors supporting in-person learning. In addition, with the expected announcement of the vaccine becoming available for children ages 5-11 in the coming weeks, an extension of the mask requirement would allow time for the elementary school population to receive the vaccine.

Consistent with the authority provided by the Board, and after consulting with medical experts and state health officials, the Commissioner is extending the mask requirement through at least January 15, 2022. The Department will continue to work with medical experts and state health officials to evaluate the mask requirement beyond January 15.

The Department, in collaboration with medical experts and state health officials, will also continue to review and consider additional metrics related to the state mask requirement based on our ongoing review of public health data. Currently, if a school building demonstrates a vaccination rate of 80 percent or more of all students and staff in the school through an attestation form submitted to DESE, then vaccinated individuals in that school would no longer be subject to the state mask requirement. Whether or not a school or district avails themselves of the 80 percent vaccination off ramp is a local decision to be made by school and district leaders in consultation with local health officials. In alignment with statewide guidance, unvaccinated students and staff would be required to continue wearing masks. Additional information about the Vaccination Rate Threshold is available here.

1 The mask requirement is an exercise of the Board's responsibility to ensure students attend classes in a safe environment. G.L. c. 69, § 1B. It is also an exercise of the Board's authority to set policies relative to children's education, including ensuring that students receive the required amount of structured learning time through inperson instruction. G.L. c. 69, §§ 1, 1B, 1G; G.L. c. 71, §§ 1 & 4A; 603 CMR 27.08

The following mask requirements will remain in effect:2

- Public school students (age 5 and above) and staff in all grades are required to wear masks indoors in schools, except as noted below. Masks are not required when outdoors. All visitors are also expected to wear a mask in school buildings.
- Masks should cover an individual's nose and mouth. For more information about appropriate mask use, please see: https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-facecovering.pdf.
- It is strongly recommended that students younger than age 5 also wear a mask in school.
- Students and staff who cannot wear a mask for medical reasons and students who cannot wear a mask for behavioral reasons are exempted from the requirement. Face shields may be an option for students with medical or behavioral needs who are unable to wear masks or face coverings. Transparent masks may be the best option for both teachers and students in classes for deaf and hard of hearing students.
- The mask requirement applies when students and staff are indoors at school, except when eating or drinking or during mask breaks.
- Mask breaks may occur throughout the day. If feasible, breaks should occur when the windows are open or students are outdoors. As a reminder, meals and outdoor recess provide built-in mask breaks for students and staff.
- Masks may also be removed indoors when necessary to participate in elective classes, such as the use of wind instruments in band. When traditional masks cannot be worn, districts should consider additional mitigations, such as the use of instrument masks (masks with a slit or hole cut for the mouthpiece) or bell covers, along with physical distancing or outdoor classes as feasible.
- Masks are required for any sports-related activity for student-athletes and coaches when indoors, in alignment with guidance provided by the Massachusetts Interscholastic Athletic Association (MIAA).
- Masks should be provided by the student/family, but disposable masks should be made available by the school for students who need them.
- By federal public health order, all students and staff are required to wear a mask on school buses.
- Whether and when a student should be disciplined for failure to wear a mask is a local decision, guided by the district's student discipline policy and the particular facts. Districts should consult with their legal counsel to address these

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matters. Districts should provide written notice to students and families about expectations and potential consequences and are encouraged to use a progressive discipline approach. The mask requirement includes an exemption for students who cannot wear a mask due to medical conditions or behavioral needs. Further, some students with disabilities may need additional supports to wear masks and may need to be accommodated. Districts are encouraged to consider and implement alternatives before resorting to disciplinary exclusion. Keeping students connected with school is especially important this year, as students return to school after a challenging school year.

2 This requirement applies to all public schools, including charter schools, vocational technical schools, and educational collaboratives. It also applies to approved private special education schools.

Please note: DESE and DPH will continue to consult with medical advisors and may update the masking requirements above as we learn more about COVID-19's effects on hospitalizations in Massachusetts and on children.

COVID-19 Testing

Districts and schools are highly encouraged to maintain or establish a robust plan for COVId-19 testing in schools, including both diagnostics testing and screening (pooled) testing for students and staff. DESE and the Executive office of Health and Human Services will continue to offer these services at no cost to districts.

Contract Tracing and Quarantine Protocols
DESE

https://www.doe.mass.edu/covid19/on-desktop/protocols/protocols.pdf

Frequently Asked Questions

https://www.doe.mass.edu/covid19/faq/default.html

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
- 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.

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.

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