

**Board of Health
Meeting Minutes
Remote Participation Conference Call
January 10, 2022**

Present:

Anita Raj, Chair
Susan Schwartz, Vice Chair
Bea Brunkhorst
Ann Kiessling
Maureen Richichi

Staff Present:

Heidi Porter, Director of Health and
Human Services
Katharine Dagle, Assistant Health Director
Margaret Root, Recording Secretary

Others Present (based on Zoom ID):

Dan Carroll, Bedford resident
Karen Dunn, Finance Committee
Steve Hagan, Bedford resident
Kelly Horton, Bedford resident
Michaela McCormack, Bedford resident
Laura Nash, Health Department Contractor
Kevin Pollefoort, Bedford resident
Sandro Quiros, Energy Plus Nutrition
Leela Ramachandran, Health Department Contractor
Mike Rosenberg, Bedford Citizen
Additional Unidentified Bedford residents

Sarah Doody, Bedford resident
Katie Guerino, Bedford resident
Rebecca Hagopian, Bedford resident
Robert Kalantari, Bedford resident
Sarah McGinley, Bedford resident
Alison O’Connell, Bedford resident
Emily Prince, Bedford resident
Christine Rabinowitz, Bedford resident
Meredith Wasko, Bedford resident

The meeting was called to order at 7:02 PM. Ms. Raj chaired. Ms. Schwartz moved to open the meeting. Dr. Brunkhorst seconded the motion. A roll call vote of 5-0-0 opened the meeting.

Ms. Raj made a statement: “Pursuant to a bill signed into law by Governor Baker on June 16, 2021, continuing suspension of certain provisions of the Open Meeting Law through April 1, 2022, this meeting of the Bedford Board of Health will be conducted via remote participation. Persons who would like to listen or view this meeting while in progress may do so by Zoom or by phone. This meeting will also be recorded and the recording will be available on the Board of Health website alongside the minutes. All votes taken by this body shall be by roll call vote.”

Public Comment

Ms. Raj opened the meeting to any public comments.

Mr. Robert Kalantari, 8 Donovan Drive, commented that he is a member of the Zoning Board of Appeals and public comments are treated differently during those meetings. Instead of a public comment period, public comment is allowed during the meeting and comments are debated and discussed during the meeting. Mr. Kalantari added that with the BOH public comments, there is no action or active discussion. He asked for clarification on how public comments are treated by BOH members.

Mr. Kalantari also requested that the BOH include data and information being put out publicly to help residents understand what the information means. He gave the example of Japan stopping

their vaccine mandate for the younger children due to myocardial side effects. Mr. Kalantari also cited hospitalization rates between vaccinated and unvaccinated people and asked if the differences were meaningful.

Ms. Raj commented that the BOH members do take public comments into consideration. BOH members also do research, share research with each other, and try to include the research on the BOH website.

Ms. Michaela McCormack, 55 Evergreen Avenue, asked the BOH to do whatever it can to support the schools or advocate on behalf of the schools as the State hasn't allowed remote schooling. She added that the health care system is becoming overwhelmed and it is very difficult to get quick results from a COVID-19 test. Bedford's Dashboard no longer reflects the school's current caseload as pool testing results are delayed. Ms. McCormack commented that families with young children not eligible for the vaccine or other vulnerable members of the population can take all the recommended precautions and still be in danger of contracting the virus.

Ms. McCormack added that she was informed her school-age daughter had been exposed last week in class. The current crisis caused a delay in the information; there was no further guidance from the school, no ability to test-and-stay, and no obligation to quarantine. Her child was allowed to continue going to school with the hopes that no one else in her class was infected and spreading the virus. Ms. McCormack commented that the teachers and staff are doing all they can, but need more support.

Ms. McCormack also commented on the new isolation and quarantine rules as they would allow an infected student to return on day 6 as normal without a test. She asked the BOH to communicate with the School Committee to see what help is needed and where prevention policies can be improved. She also asked for the BOH to advocate on behalf of the School District to the State to allow remote learning when needed. Ms. McCormack commented that a week or two of remote learning with their own teachers was better than having inexperienced or unqualified substitute teachers covering classes. She finished by commenting that students should be in school, but not at all costs.

As there were no further public comments, Ms. Raj thanked the commenters and closed the public comment portion of the meeting.

BOH Minutes - Review and Vote

The BOH reviewed their meeting minutes from December 6th and December 20th, 2021. Minor edits were offered. Ms. Richichi moved to approve the minutes as amended; Dr. Brunkhorst seconded the motion. A roll call vote of 5-0-0 approved the meeting minutes from December 6th and December 20th, 2021.

Ratification of Food Establishment Permits

Ms. Dagle reported that Energy Plus Nutrition, 185 Great Road, had completed the plan review process and was granted a permit on January 5th. Ms. Dagle performed a pre-operational inspection on December 17th, 2021, a re-inspection on December 29th, 2021, and a final re-inspection on January 4th. The establishment is considered medium risk as it has Time/Temperature Controlled for Safety foods and will be inspected twice a year. The establishment is currently permitted for Food Safety with up to 100 seats.

Mr. Sandro Quiros, one of the owners of Energy Plus Nutrition, introduced his family business as one to provide a healthy lifestyle. They serve a variety of smoothies, waffles, and acai bowls with protein, multivitamins and no sugar.

Ms. Raj asked how Mr. Quiros decided on locating in Bedford. Mr. Quiros replied that the sister locations are located in Tewksbury and Methuen. One of his partners suggested Bedford. Mr. Quiros commented on how nice Bedford and the people are, which helped him decide to establish a new store in Town. He added how friendly and supportive people have been to help promote the business.

Ms. Richichi asked about the business hours. Mr. Quiros replied that Monday through Friday, the establishment is open 9 am to 5 pm, and Saturdays and Sundays they are open 10 am to 4 pm.

Dr. Brunkhorst asked if the establishment included an option for take-out. Mr. Quiros replied that most of the business is take-out, but there are tables and chairs in the establishment, as well as a TV and games. He gave an example of some kids drinking smoothies and doing their homework at one of the tables. Dr. Brunkhorst commented that it was a good idea for the establishment to have a robust take-out option given COVID-19.

Ms. Schwartz asked if the cold weather has had an effect on what people choose to order, especially smoothies. Mr. Quiros replied that the most popular items are the smoothies, waffles, and acai bowls.

The BOH members welcomed Mr. Quiros to Bedford. Mr. Quiros thanked the BOH for their support.

Ms. Richichi made the motion: "I move that the Board of Health ratify issuance of a Food Establishment Permit for Energy Plus Nutrition, located at 185 Great Road in Bedford." Ms. Schwartz seconded the motion. A roll call vote of 5-0-0 ratified the Food Establishment Permit.

Ms. Dagle reported that Panera Bread will attend the February BOH meeting instead of tonight's meeting.

FY23 Health Budget - Vote on Final Budget

Ms. Raj and Ms. Porter represented the Health Budget at the Finance Committee meeting last week. Dr. Brunkhorst commented on the good job Ms. Raj and Ms. Porter did. Ms. Richichi commented that the Finance Committee asked good questions and Ms. Porter did a good job answering them and showing the important work the Health Department does. Dr. Brunkhorst added that the Finance Committee asked about the needs of the Department and seemed very supportive and appreciative of the Health Department.

Ms. Porter reviewed the final budget for the Department.

Ms. Raj confirmed that the budget was flat-funded for all the line items except for salary. Ms. Porter confirmed that the salary line item had increased and the final budget included the \$10,000 increase for the Community Health Nurse salary mentioned at the previous BOH meeting.

Dr. Kiessling asked if the budget includes funds for the rapid tests Bedford was looking into. Ms. Porter replied that those costs would be covered by grant money.

Ms. Raj commented that Ms. Porter's presentation to the Finance Committee included information on grant money, as well as interns and volunteers.

Ms. Schwartz asked about the hazardous waste and mosquito control budgets that Ms. Porter prepares for the Select Board and if wording needs to be changed since there is now a distinction between the BOH and Health Department. Ms. Porter replied that she would need to do that through the Select Board.

Dr. Kiessling asked about the start and end dates of the fiscal year. Ms. Porter replied that the 2023 fiscal year begins July 1st, 2022, and ends June 30th, 2023.

Dr. Brunkhorst made the motion to accept the final BOH budget for fiscal year 2023 of \$399,101. Dr. Kiessling seconded the motion. A roll call vote of 5-0-0 approved the budget.

Reports - Staff and BOH Liaisons

Ms. Dagle reported that the State had updated the isolation and quarantine guidance last week. If a person tests positive, regardless of vaccination status, the person must stay home for five days and then continue to wear a mask around others for another five days. If a person is a vaccinated, close contact, that person needs to wear a mask around others for 10 days but quarantining is not required. If a person is an unvaccinated, close contact, that person needs to stay home for five days and then wear a mask around others for another five days. If possible, close contacts should get tested on day five or later.

Ms. Dagle reported that this month she has received 10 complaints that are in the process of being investigated. The complaints were related to nuisance, housing, mask mandate, and food establishments.

Ms. Dagle completed a septic decommissioning inspection at a property that recently connected to Town sewer.

Ms. Dagle attended two Institutional Biosafety Committee meetings, one of which was for a new company, Obsidian Therapeutics at 40 Wiggins Avenue. The company moved to Bedford from Cambridge and the building was renovated before they moved into the space. The company is considered a biosafety level two establishment and operations are expected to begin sometime this month.

Ms. Dagle reported that she met with other Bedford departments to discuss concerns regarding Bedford's hotels and motels.

Ms. Dagle reported that she worked with other Town staff to order test kits for Bedford.

Ms. Dagle submitted the Barn Book to the State after completing the animal inspections. The inspections are required by the MA Department of Agricultural Resources Division of Animal Health. Ms. Dagle completed 17 inspections. The Barn Book pages are filled as she performs each inspection before returning it to the State.

Ms. Dagle reported that she received at least 65 notifications from businesses regarding COVID-19 cases among employees.

Ms. Dagle reported that the Tobacco Inspector completed two re-inspections in Bedford. At this time, all tobacco retailers are in compliance. The re-inspections were for establishments that were still carrying prohibited flavored tobacco products. The Inspector will continue to perform regular inspections.

Ms. Dagle met with Huckins Farm management to discuss plans for a manure compost site. The Barn Manager recently received a grant to begin composting. Of the two possible sites, Ms. Dagle made a recommendation to the Conservation Commission for a site the furthest away from abutting dwellings to help avoid possible nuisance complaints in the future.

Dr. Brunkhorst asked about the windrow method of composting. Ms. Dagle replied that it involves long rows of compost, making sure the piles reach a certain temperature and are turned over every certain number of days. The piles are also treated differently depending on summer versus winter. Dr. Kiessling added that it is a rapid composting method.

Ms. Richichi asked where the compost would be used. Ms. Dagle replied that the compost would be used on the farm.

Ms. Dagle reported that the outreach articles published the past month included COVID-19 prevention reminders for holiday gatherings and information regarding the updated quarantine and isolation guidance from MA DPH.

Dr. Brunkhorst asked about Obsidian Therapeutics and if the biosafety consultant Ms. Rebecca Caruso had been able to meet with the company. Ms. Dagle replied that Ms. Caruso wasn't able to attend the IBC meeting for the company, but she will contact them in the spring to schedule their inspection. Ms. Dagle added that Ms. Caruso did look at the company's application.

Dr. Brunkhorst asked if Ms. Dagle had any interaction with the schools this past week regarding the updated quarantine and isolation guidelines. Ms. Dagle replied that she personally hasn't interacted with the schools. Ms. Dagle has been communicating with the daycares as new guidance has been released by the Department of Early Education and Care (EEC). There has been some confusion regarding masking per the State guidance to wear a mask after the first five days as some children in this age group can't be masked. Ms. Dagle added that the EEC guidance has children who can't wear a mask to stay home the first five days, and then test the child on days five, six, seven, and eight. As long as the tests are negative, and any symptoms have improved, the child can return to daycare/preschool.

Ms. Richichi asked who was supposed to test the children, the parents or the preschool. Ms. Dagle replied that the guidance doesn't specify, but she assumes the parents would do the test unless the preschools have tests available. It would be up to the daycare or preschool. Some discussion did include the difficulty in finding a test, and unfortunately if tests can't be found, the child would have to stay home the full 10 days. Ms. Dagle added that many daycares have chosen to keep following the old guidance and have the children stay home for the full 10 days.

Dr. Kiessling asked about the process of decommissioning a septic system. Ms. Dagle replied that after a property has been hooked up to the Town sewer, she visits the property, verifies the septic tank has been pumped out, watches the tank be crushed to the point where it can't hold liquids, and then watches the hole getting filled in. She then signs the paperwork for the property owner.

Dr. Kiessling asked how many septic systems have been decommissioned. Ms. Dagle replied that she does about five per year.

Dr. Kiessling asked what nuisance had to be investigated. Ms. Dagle replied she couldn't recall the specifics, but it wasn't serious.

Ms. Schwartz asked if there was a specific communication plan regarding the new quarantine and isolation guidance. Ms. Dagle replied the best source for information is the BOH/Health Department website. Ms. Dagle added that she plans to come up with a flowchart to make the changes easier to understand. Ms. Schwartz commented on the confusion around the new guidance and the need for clear information to help the residents who may have questions. Ms. Dagle added that the mass.gov website also has information on the new guidance, and there is a link to it from the BOH website. Ms. Richichi commented that a flowchart would make the guidance easier to understand instead of residents having to navigate multiple links.

Ms. Raj commented that she and Ms. Schwartz were considering ways to organize some of the information, perhaps by what to do if a person thinks they have COVID-19 or were a close contact, what to do if a person tests positive for the virus, and what to do to avoid getting the virus. Ms. Schwartz commented that is frequently asked what to do if they tested positive. Ms. Porter commented that the mitigation and prevention measures haven't changed significantly, just the timing.

Ms. Porter commented that the Health Department will be working with the Academic Public Health Corps (APHC) to develop outreach materials, including graphics. The process should start in the next week or so. The APHC developed some of the initial graphics at the beginning of the pandemic. Ms. Porter added that the APHC is a group of public health students that besides the outreach, may also be able to help with contact tracing.

Ms. Porter reported that she has been in contact with the schools and the school nurses have been inundated with cases. With the Contact Tracing Collaborative ending, health departments were encouraged to work with the positive cases so that they could inform their own close contacts. Bedford is transitioning to that model, which would allow for department employees and contact tracers to help the more vulnerable populations, including children and adults over 60. The contracted nurses will also reach out to each case in Bedford as they are reported to provide support and determine if other services are needed. Ms. Laura Nash and Ms. Leela Ramachandran, previous summer interns, are now contract contact tracers, who will be receiving training starting tomorrow to help the schools with all of the cases they are experiencing.

Ms. Porter reported that Bedford, with storage help from Melrose-Wakefield Hospital, was able to offer 200 Pfizer booster shots, as well as 200 Moderna shots, to people who live and work in Bedford. A clinic was held just before this meeting and another will be held on Thursday that will include anyone age 12 or older. Ms. Porter commented that the access to these clinics is important

due to the difficulty people are having finding appointments elsewhere. Ms. Porter expressed gratitude to the nurses, CERT volunteers, and the school pediatrician, Dr. Geller.

Ms. Porter added that additional booster clinics could be scheduled if needed, especially if boosters are needed for the five- to 11-year-old age group.

Dr. Brunkhorst asked if the booster shots were recorded in MIIS. Ms. Porter replied that there was an announcement today regarding a vaccine smart card that can be accessed on a smartphone. She added that the booster shot should be included in MIIS, but noted that her booster did not show up on the smart card. It may be due to record reporting by the vaccine administrator.

Dr. Brunkhorst asked if the vaccine smart card information would be posted. Ms. Porter replied that it will be added to both the Dashboard and the website. She wanted to test it first and noted that a person must be very precise with matching their name and phone number with the information used when receiving the vaccine.

Ms. Porter attended the Violence Prevention Coalition meeting where the School Superintendent gave a presentation on RULER, a social emotional learning program the middle school teachers are being trained on before introducing the program to the students. It teaches about using emotions wisely to succeed. Ms. Porter is thinking of ways the program could be used with the general public, not just with students, possibly with community positivity, violence prevention and de-escalation.

Dr. Kiessling asked what RULER stood for. Ms. Richichi replied that the program is out of the Yale Center for Emotional Intelligence. R is recognizing, U is understanding, L is labeling, E is expressing, and R is regulating. Ms. Schwartz commented that the program was presented to the School Committee a few weeks ago.

Ms. Porter has been working with Hanscom Air Force Base (AFB) on case numbers and plans to have a meeting with Hanscom AFB and the State on communicable disease follow-up. While Hanscom AFB is its own entity located in Lincoln, communicable diseases are attributed to Bedford instead. The public health office on Hanscom does not link with MAVEN, so Ms. Porter is hoping to take over the cases incorrectly attributed to Bedford. One difficulty though is that the employees in the public health office change as posts change every few years. Ms. Porter hopes the meetings over the next few weeks will help the situation.

Ms. Porter, as mentioned above, met with the Finance Committee to present the Health Department budget for the next fiscal year. The Committee asked a lot of good questions. Ms. Porter was able to present information on the need for testing and the proposal for purchase of home test kits.

Ms. Porter reported that orders for home test kits were placed with the three vendors on the State contract since it wasn't known which vendor would be able to fulfill the orders due to supply shortage. Ms. Porter expects a portion of the order to arrive by tomorrow through iHealth. Ms. Dagle had worked with other town administration members to get all the paperwork in order and to place the orders early enough that Bedford was one of the first towns to receive the home test kits. Ms. Porter is currently discussing with town staff the best way to distribute the test kits. Based on discussions, the test kits would first go to low-income residents, seniors, child care

facilities, and school age kids. Distribution will most likely be through a drive-through program and staff and volunteers are being gathered for such an event.

Dr. Kiessling asked about using the mailing list for the Council on Aging (COA). Ms. Porter replied it would take time to get the tests to people on that list and it would be much quicker to have the tests picked up.

Dr. Kiessling asked about those unwilling or unable to pick up tests. Ms. Porter replied that there are resources available to get the tests to those residents. A drive-through would allow the majority of the test kits to be distributed and then the few residents who need to have the kits delivered can be taken care of.

Dr. Kiessling asked about determining the residents who should receive the test kits. Ms. Porter replied that the COA has provided their contact list. There is also a list of residents in the low-income housing, as well as residents who have been helped by the social workers. Generally, the distribution plan is to announce the arrival of the test kits to the community, including how many and the focus groups to receive the kits. As test kits come in, they will be distributed. A drive-through format is familiar to many residents and could be held in a larger parking lot, possibly at Middlesex Community College.

Dr. Kiessling asked about the possibility of working with another community, like Carlisle, to offer PCR testing to residents. Ms. Porter replied that with a partnership, both payment and participation are needed. Carlisle is currently using their firefighters to staff their testing site and are planning on ending the program soon. Two other towns, Lincoln, and Lexington are doing something similar. Ms. Raj commented that the Carlisle testing is only offered for 30 minutes each afternoon at 4 pm. Dr. Kiessling added that the funding comes from CARES Act funds. Ms. Porter continued that Carlisle hasn't expressed any interest in partnering. When partnering does occur, it is more likely to occur through a vendor, which comes with a high cost. For example, one vendor has testing at \$80 per test and has a minimum requirement of about 1000 tests. With difficulty of continuity of operations with staff shortages, there aren't enough staff to run a testing clinic. The cost of home tests is much lower, making it more cost effective to offer those tests.

Dr. Kiessling asked about PCR tests being required in some cases. Ms. Porter replied that in some cases, a PCR test is required, but a home test can be used to get out of isolation. The PCR tests being offered at Stop the Spread sites are paid for by the State, while testing offered by towns are paid for by grants, ARPA funds, or town funds. Lexington and Belmont share a Community Nurse and have an established relationship so they offered testing through a vendor over two days. Ms. Porter added that focusing on the home test kits would be more beneficial than paying for a PCR vendor.

Dr. Kiessling asked if the schools could use the home test kits. Ms. Porter replied that the schools use similar kits through their own program.

Dr. Kiessling asked if the schools are still doing the pool testing. Ms. Porter replied that the schools were still doing the pool testing. The schools are also testing symptomatic students and continuing with the test-and-stay program.

Ms. Richichi commented that sometimes the Cambridge Innovation Center (CIC) Health staff aren't able to go to the school on testing days, leaving the pool testing up to the school nurses. With case numbers increasing, that results in a lot of extra work for the nurses.

Ms. Richichi commented that a set of directions may be needed with the test kits to help the user determine when to test, like at the onset of symptoms, or day five after being exposed to a close contact.

Dr. Kiessling expressed confusion over Ms. McCormack's comments and what the testing situation was in the schools. Ms. Richichi commented that with all the cases, the results were delayed, or possibly some pool testing was missed. Ms. Porter added that vaccinated students aren't tested as part of the test-and-stay program. Vaccinated students can still attend school without being tested.

Ms. McCormack was able to clarify her comments from earlier in the meeting. She received an email this afternoon from the school nurse informing her that there was a case in the class with possible exposure last Wednesday and Thursday. The email continued by stating there wasn't an order to quarantine and to monitor her child for symptoms. The email didn't include an offer of the test-and-stay program and no further instructions.

Ms. Porter commented that enhanced messaging should start coming out regarding differences in the test-and-stay program for vaccinated versus unvaccinated students.

Dr. Kiessling asked Ms. McCormack for the ages of her children. Ms. McCormack replied that she had a child in Davis School and another pre-school aged. She added that she has signed up for the pool testing program.

Ms. McCormack commented that she doesn't know if the positive case in class was determined by the pool testing or by a parent reporting the case. If it was through the pool testing, there was a large delay in reporting the results.

Dr. Kiessling asked if Ms. McCormack had home tests available, would she use them. Ms. McCormack replied that she does have home tests, but she worries as she has heard they may not be as effective detecting asymptomatic cases or testing before it would show up. Dr. Kiessling commented that the rapid tests are sensitive enough to read positive if the person is contagious. Ms. Porter added that there has to be enough time after close contact to build up enough of the virus in one's system to be able to effectively test. Testing on day five is recommended.

Ms. McCormack commented that the students have been together in the class last week and this week and may have unknowingly become infected from the contact in their class last week. With the students still going to school, the virus may have been unknowingly spreading to others in the class before the notification was sent out this afternoon.

Dr. Kiessling asked if the class would participate in pool testing this week. Ms. McCormack replied that pool testing is on Wednesdays at Davis School, but the pool testing results from last week have returned and the cases haven't been updated on the Dashboard.

Dr. Kiessling asked if there was anything the BOH could do to smooth out testing problems at the schools. Ms. Porter replied that the Health Department is doing what it can to support the school nurses, including more help with contact tracing. Ms. Porter met with the School Superintendent, Town Manager, and the Head School Nurse last week to discuss the surge in cases. She expects the school nurses to be in “crisis mode” for the next few weeks until case numbers decrease. More detailed messaging could be helpful to parents to keep them informed in cases of close contact.

Ms. Nash reported that as a contact tracer, she started by learning MAVEN. Initially, Ms. Nash worked with Hanscom AFB to determine if cases on MAVEN being attributed to Bedford were actually in Bedford and not Hanscom employees. There was difficulty in contacting the public health office on Hanscom, so the process has been slow.

After Ms. Porter reached out to Ms. Nash and Ms. Ramachandran, both have started to transition to helping the school nurses with their contact tracing. They met with Ms. Nancy Thorsen and Ms. Tracy Fernald, the school nurses at the High School and Middle School, for training.

Ms. Nash reported that she ran some data through statistical analysis for Ms. Porter. Ms. Nash looked at towns in the County with mask mandates and the positivity rate per 100,000 people and compared it to the positivity rate of the towns in the County without a mask mandate. For December, Ms. Nash did find a meaningful difference between the two groups with 13 fewer cases among the mask mandate towns compared to the non-mask mandate towns.

Dr. Kiessling asked how the school nurse was informed of the positive new cases she received today. Ms. Nash replied that many were reported by the parents. The school nurses then need to do a case investigation to check close contacts to see if any are exhibiting any symptoms. Ms. Porter added that parents are reporting the results of home test kits to the schools. The school nurses then reach out to the parents to counsel them. Ms. Richichi added that the school nurses are also contacting parents of sick children to have them picked up, or to counsel parents on when a student may return. This is all on top of the other responsibilities during the day, such as medications.

Ms. Schwartz asked if Ms. Nash would also reach out to the parents. Ms. Nash replied that there is a shared spreadsheet indicating who has been contacted and who needs follow-up and she expects to inform parents of the guidance and counsel the students on staying home if they still feel ill.

Dr. Kiessling asked if there were classes available online. Ms. Nash replied that class assignments are available through Google Classroom to do while at home. Dr. Kiessling asked if the schoolwork was available to all grades. Ms. Nash replied that she doesn’t know if it is available at the elementary school level, but the Middle School and High School have assignments posted online.

Ms. Ramachandran reported that she will also be working with the school nurses on contact tracing. When she first started working with Bedford, Ms. Ramachandran was working with the VA as some employees who were tested at the VA hospital had their cases accredited to Bedford on MAVEN. These cases had to be transferred to the town the employee resided in.

Ms. Ramachandran has also been looking into the school student vaccination rates since the fall. Partially vaccinated is when a student has received one dose of Moderna or Pfizer and fully vaccinated is when a student has received both doses of Moderna or Pfizer or a single dose of the Johnson & Johnson vaccine, or have received their booster shots. As of this morning, the High School has 4% partially vaccinated and 85% fully vaccinated. The Middle School has about 7% partially vaccinated and 75% fully vaccinated. Before students younger than 12 were eligible to be vaccinated, the seventh and eighth grader vaccination rates were separated out. These two grades have 3% partially vaccinated and 82% fully vaccinated. At Davis and Lane, 7% of students are partially vaccinated and 63% fully vaccinated.

Ms. Ramachandran noted that similar issues Ms. Porter mentioned earlier regarding exact name matching between MIIS and the vaccine card also occurred with the student information. However, she doesn't expect this to cause a significant difference in vaccination rates as she has reached out to parents to determine vaccination status.

Ms. Ramachandran reported that she has also been tracking what other issues arise once people test positive. There was some difficulty in contacting people or getting people to return her calls. One main consequence is the loss of school or work. With the loss of school, many students become worried that they are falling behind. People also worry about infecting other family members and the virus affecting other aspects of life such as surgery or delays in medical care. There were also instances of food insecurity, which was alleviated with the social workers and Food Bank contributions.

Dr. Brunkhorst suggested that when Ms. Nash looks at the mask mandate data, vaccination rates could be taken into account or compared. Ms. Porter replied that the collection of vaccination data was started, but hasn't been completed as it is time consuming. Ms. Porter is also working on collecting the data over time to compare positivity between towns before mask mandates were put into place.

Ms. Porter reported that according to the School Superintendent, about 60% of students and staff at Davis School and Lane School are participating in the pool testing program. The Middle School has 40% of the students and staff participating, while only 15% are participating in the pool testing program at the High School. Dr. Brunkhorst commented that one difficulty for the High School is that testing occurs before school starts.

Dr. Kiessling asked about the downside of participating in the pool testing program. Ms. Richichi commented that the program is opt-in instead of opt-out and studies have shown higher participation when a program is opt-out. Some parents may not sign up since they don't want to know if their child is an asymptomatic case as that means the child has to stay home, which could cause difficulties at home. Ms. Richichi added that the School Superintendent mentions signing up in each of his letters. Ms. Raj suggested that Ms. Nash and Ms. Ramachandran could see if they learn any reasons for hesitancy in participating in pool testing.

Dr. Kiessling commented on the delay in receiving the pool testing results made by Ms. McCormack as a reason not to participate. Ms. Richichi commented that the delay is a recent development due to the backlog in the labs. Earlier in the school year, schools were receiving the pool testing results sometimes as soon as the day of the testing.

Dr. Brunkhorst asked about putting out messaging encouraging participation in pool testing. Dr. Kiessling wanted to see what was involved to sign up for pool testing to see how easy or difficult it was. Ms. Richichi replied that the information was on the school website.

Ms. Porter added that the testing company, CIC, included a lot of information regarding the testing program. The Superintendent email each week encourages pool testing and how it is important to the continuity of school operations. The outreach given by the Health Department on the importance of testing includes the pool testing program and encourages participation.

Ms. Richichi gave a liaison report for Healthy Bedford. At a meeting this morning, the committee is starting to look at intergenerational spaces in Town and the discussion included a lot of good ideas and resources to look at before the next meeting in a month.

Dr. Kiessling asked about representation of the younger people for the intergenerational space. Ms. Richichi replied that currently there is no younger person as discussion is currently focused on possibilities. A youth representative would be a good idea in the future once plans are further along.

Ms. Richichi also has a meeting tomorrow with Ms. Sarah Scoville, the School Committee Chairperson, regarding school start times.

Ms. Schwartz reported that she has Youth and Family Services and COA meetings later this week.

COVID-19 Response: Data Evaluation, Mitigation Review, Mask Mandate Review and Potential Vote and BOH Discussion

Ms. Porter reported that there have been almost 300 cases between December 19th and January 1st. These are only the PCR test results reported through MAVEN and do not include home test results, so Ms. Porter expects the actual number to be higher. Unfortunately, there were two deaths at the long-term care facility at the VA.

Ms. Porter commented on the large number of positive cases of VA employees, which she and Ms. Ramachandran have been working through, causing the case numbers to fluctuate.

Ms. Porter reported that of the 294 cases, 141 were breakthrough and 14 houses had two or more cases. As of last week, the schools had 105 active cases.

Ms. Porter plans on re-releasing the prevention outreach with the messaging to not rely on any one preventative measure and instead to do as many as possible.

Ms. Richichi asked if there had been a response from the Select Board or School Committee regarding the BOH recommendation for a vaccine mandate. Ms. Porter replied that the Select Board will be discussing it this evening. Ms. Raj replied that the topic will be discussed soon at a School Committee meeting. Ms. Raj added that she didn't expect quick results due to collective bargaining agreements.

Ms. Raj commented that at this point, Bedford is not even close to the mask mandate off-ramp.

Dr. Kiessling presented some slides of information. She stated that she wanted to remind parents that based on the small percentage of deaths, the virus isn't a threat to very young children. She acknowledged that infected children can spread the virus to others. The main age group at risk from the virus are people 65 and older. Dr. Kiessling added that for people under 50, the virus isn't as deadly as originally thought.

Dr. Kiessling showed some CDC information over the past two years. When vaccinations began, the case numbers started to level off, which has been seen historically with other viruses. However, the virus continued so case numbers are similar to what they were two years ago. Dr. Kiessling added that in MA 60 to 70% have either had the virus or have been vaccinated, which is close to herd immunity.

Dr. Kiessling also showed some DPH data showing the peak of case numbers is three times the peak of cases this time last year. Positive tests have also increased by a similar factor from 6 to 8% last January to 23% this January. Hospitalizations have also increased back to the same numbers as last January. The main difference between this year and last is the deaths, which have decreased 30 to 50%. Dr. Brunkhorst commented that the decrease in death can be attributed to knowing how to help patients, vaccinations, and mitigation measures.

Dr. Kiessling presented a graph showing cases in vaccinated people from the DPH. Between Christmas and New Year, there were 45,029 new cases among vaccinated people, accounting for 60% of new cases for that time period. Of the cases among vaccinated people, only 370 required hospitalization, or 0.8% of vaccinated cases. Dr. Kiessling commented that this illustrates the effect of vaccinations keeping healthy people out of the hospital. Of those 370 cases among vaccinated hospitalized people, 24% died. Dr. Kiessling commented that people with a serious health issue should not rely solely on being vaccinated and surrounding themselves with vaccinated people to prevent catching the virus. Testing should be included in their preventative measures.

Dr. Kiessling continued that over the same period from Christmas to New Year, there were a total of 72,968 cases reported and of those, 27,939 cases were unvaccinated. Of those cases, around 11,000 were hospitalized, and 1.1% of those hospitalized, vaccinated cases died.

Ms. Richichi commented that the MA DPH is changing the way cases are reported to clarify the number of cases who were hospitalized due to COVID-19 and the number of cases hospitalized for another reason who were tested and were positive for COVID-19. She is interested to see how that changes the data.

Dr. Kiessling commented that vaccination hasn't stopped the spread of the disease. It has decreased the severity of the illness among relatively healthy people, but it hasn't stopped the seriousness of the disease among people with other serious health concerns, including obesity.

Dr. Kiessling showed an updated version of the graph of several Middlesex County towns near Bedford showing positivity rates per 100,000 people over time. Almost all the towns now have a mask mandate, except for Burlington, but the topic is up for discussion at their BOH meeting tomorrow night. Dr. Kiessling commented that the spread of the disease is related to population density with more cases among more densely populated towns.

Dr. Kiessling commented that only being vaccinated will not protect against a future infection. She expects the same will be seen for children. Dr. Kiessling commented that given a comment by Mr. Kalantari during the public comment period about Japan dropping the vaccine mandate for younger children due to cases of heart inflammation, there should be a similar consideration here, especially given the low rate of death among this age group.

Dr. Kiessling continued that COVID-19 should start to be thought of like the flu since the vaccine helps keep relatively healthy people from being hospitalized, similar to the flu shot. Messaging should shift to include that the severity of the virus is likely to be higher for those with chronic lung conditions, organ transplants, and obesity. Dr. Kiessling continued that those people should make sure those around them are tested.

Dr. Brunkhorst commented that messaging should still include the importance of vaccination. Dr. Kiessling commented that MA has a high vaccination rate and is concerned that people think that once they are vaccinated that they can gather and return to their previous activities. Dr. Kiessling added that many cases are spread in households.

Ms. Richichi commented that the messaging should include encouragement for people to continue to mitigate their own risk, including upgrading their mask and not gathering, or at least consider carefully the type of gathering and who would be at the gathering. The messaging should also include how people mitigating their own risk can help others. Ms. Richichi commented that ICU occupancy in area hospitals is high and hospitals are starting to get overwhelmed. By slowing the spread, it will help the hospital situation.

Ms. Raj acknowledged Dr. Kiessling's comments and agreed with Ms. Richichi's point on slowing the transmission of the virus to help the hospitals and healthcare system from being overwhelmed.

Ms. Schwartz reiterated a point raised by Ms. Ramachandran regarding the other effects people experience after testing positive, such as loss of time at work or school, food insecurity, and fear of transmitting the virus to others. Messaging should be on how people can protect themselves and the people around them.

Dr. Kiessling commented that the other effects after contracting the virus are from fear. Dr. Brunkhorst disagreed and commented that slowing transmission will keep hospitals from having to expand into parking lots. Dr. Brunkhorst acknowledged that probably everyone will get the virus at some point, but mitigation efforts to slow the transmission rate down, helping lower the stress on all aspects of the community.

At 9:21 PM, Dr. Brunkhorst moved to adjourn the meeting of January 10th, 2022. Ms. Richichi seconded the motion. The motion was approved by a roll call vote of 5-0-0.

Documents and Exhibits Used During this Meeting

Director of Health and Human Services Report

Assistant Health Director Report

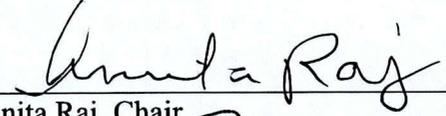
Energy Plus Nutrition Food Permit Summary and BOH Motion

Panera Food Permit Summary and BOH Motion

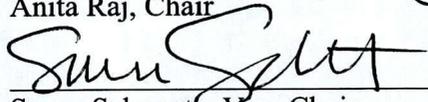
FY23 Board of Health Final Budget

Cumulative Case Counts July to Present
Community Profile Report
COVID-19 Data Summary Provided by Dr. Kiessling
Graph of Positive Tests per 100,000 People Provided by Dr. Kiessling

The next scheduled meetings of the Board of Health are January 24th, February 7th, February 28th, March 7th, March 21st, April 11th, April 25th, May 9th, May 23rd, June 13th, and June 27th.



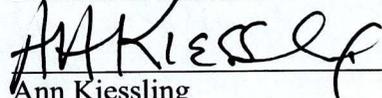
Anita Raj, Chair



Susan Schwartz, Vice Chair



Beatrice Brunkhorst



Ann Kiessling



Maureen Richichi