

**Board of Health
Meeting Minutes
Remote Participation Conference Call
February 7, 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):

Mario Belanie, Hanscom Air Force Base
Danielle DiGangi, Bedford resident
Jennifer DiPasquale, Bedford resident
Katie Guerino, Bedford resident
Kelly Horton, Bedford resident
Jane Karpovsky, 27 Railroad Avenue
Bob Lopes, Panera Bread
Alison O'Connell, Bedford resident
Leslie Savoy, Bedford resident
Mark Sullivan, Bedford resident
Teresa Wright, Bedford resident

Gabriella Cresta, Bedford resident
David DiGangi, Bedford resident
Sarah Doody, Bedford resident
Steve Hagan, Bedford resident
Robert Kalantari, 8 Donovan Drive
Brenda Kenahan, Bedford resident
Erick Montenegro, Panera Bread
Mike Rosenberg, Bedford Citizen
Joshua Spirn, Bedford resident
Meredith Wasko, Bedford resident
Additional Unidentified Bedford residents

The meeting was called to order at 7:02 PM. Ms. Raj chaired. Dr. Brunkhorst moved to open the meeting. Ms. Richichi 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 there is a lot more data available now compared to a year ago and it doesn't support the use of masks. Mr. Kalantari requested the BOH members who continue to support the mask mandate to explain their rationale and thought process. Based on personal experience, Mr. Kalantari commented that he knows how to wear masks in different situations, and while they may protect against larger particles, they are not appropriate now, especially for children. Mr. Kalantari would like the BOH members to back their positions with data. He added that masks only protect the wearer and don't filter exhales, allowing the virus to be transmitted. Mr. Kalantari ended his comments with his opinion that the mask mandate should be let go, similar to what some other states have begun to do.

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 January 10th and January 24th, 2022. Ms. Schwartz moved to approve the January 10th minutes as amended and the January 24th minutes as presented; Ms. Richichi seconded the motion. A roll call vote of 5-0-0 approved the meeting minutes from January 10th and January 24th, 2022.

Ratification of Food Establishment Permits

Ms. Dagle reported that Panera Bread, 213 Burlington Road, had been permitted in this location previously, but is under new management now. The plan review process was completed as was a pre-operational inspection on November 9th, 2021 and a final inspection on November 12, 2021. A Food Establishment Permit was granted on November 12th, 2021 for food service up to 100 seats and for catering. Panera is considered a medium risk establishment with Time/Temperature Controlled for Safety foods and will be inspected twice a year.

The District Manager, Mr. Bob Lopes, and the General Manager, Mr. Erick Montenegro, both attended tonight's BOH meeting.

Mr. Lopes commented that previously, the Panera at this location was Corporate. In 2015, PR Restaurants bought all the Corporately owned branches, except for the one in Bedford. Panera sold the Bedford branch about six months ago to PR Restaurants. Mr. Lopes added that the owners are local, with one living in Lexington.

Dr. Kiessling asked if the menu or catering options had changed. Mr. Lopes replied that menu items change seasonally and new items are occasionally added as well. Operationally, the restaurant hasn't changed.

Dr. Brunkhorst asked if anything in the kitchen had changed. Mr. Lopes replied that the kitchen is cleaner. As a franchisee, they have an in-house inspector that inspects the establishment four times per year. Mr. Lopes added that there is also an outside company contracted to inspect the establishment three times per year. As a franchisee, they have to maintain a higher level of standards to remain open.

Ms. Schwartz asked about construction inside when ownership changed. Mr. Lopes replied that all changes were cosmetic including paint, signage, lighting, and fabrics in the booths. Ms. Dagle added that there were no changes in the kitchen layout.

Ms. Schwartz asked if people were utilizing the seating inside the establishment since that location was used for catering a lot. Mr. Lopes replied that people are using the seating area and that the establishment has wi-fi for patrons to use.

Ms. Richichi made the motion: "I move that the Board of Health ratify issuance of a Food Establishment Permit for Panera Bread, located at 213 Burlington Road in Bedford." Ms. Schwartz seconded the motion. A roll call vote of 5-0-0 ratified the Food Establishment Permit for Panera.

Reports - Staff and BOH Liaisons

Ms. Dagle reported that she had received nine complaints that are in the process of being investigated. The complaints are related to housing, mask mandate, and food.

Ms. Dagle reported that there were nine routine food establishment inspections and five re-inspections completed in December.

Ms. Dagle participated in both rounds of interviews for a new Public Health Nurse. A new Public Health Nurse has been hired.

Ms. Dagle also participated in the COVID-19 vaccination clinics that were hosted by the Health Department.

Ms. Dagle and other Town staff distributed COVID-19 test kits. Outreach materials were prepared to distribute with the test kits on the best times to test and how to get reliable results. The outreach was also posted on the Town website.

Ms. Dagle attended the Town At-Risk meeting, as well as the annual Property Managers meeting, which was hosted by the Police Department. The Police Department invited various Town departments who often interact with property managers in Bedford to meet with the property managers of the apartment complexes. Ms. Dagle commented that the meeting is a good way to meet, make sure everyone has the same information, and discuss which departments can provide the different services available in Bedford.

Ms. Dagle reported that she has received a new Keeping of Animals permit application for a property owner looking to have three goats. Ms. Dagle reviewed the application and inspected the property. She hopes the property owner will be able to attend the March BOH meeting.

Ms. Dagle reported that food establishment permits are due for renewal as they expire at the end of the month. During the renewal season, the Health Department tries to offer an educational program to the food establishments to make sure they are all up to date on the newest information. Ms. Dagle commented that this year, the Department contracted with the food establishment inspector to have a food safety training program for the medium and high risk food establishments. Each of these establishments must have a person-in-charge complete the free, on-line training before the food establishment permit can be renewed. The training includes nine chapters of basic food safety knowledge with a summary quiz at the end of each chapter and a final exam to receive their certification.

Dr. Kiessling asked how long the training would take. Ms. Dagle replied that the training takes about an hour to two hours. People have the chance to take the quizzes as often as they need until they pass. The training is also at the person's own pace, so they can sign out and sign back in later to complete the training. Ms. Porter added that the people taking the training should already have the knowledge from other certifications, so the training is more of a review.

Ms. Schwartz asked if this training was part of the grant Ms. Dagle reported last month about. Ms. Dagle replied that it is not part of the grant, but if awarded, the grant would assist with such training in the future.

Ms. Schwartz asked if Ms. Dagle is informed when someone completes the training. Ms. Dagle replied that once someone completes the training and gets their certification, the record shows on the vendor's system. The vendor will then send Ms. Dagle a list of those establishments that have completed the training, as well as those that are still working on completing the training and those who haven't started the training yet.

Dr. Kiessling asked if this was a new requirement. Ms. Dagle replied that it is an educational requirement for the permit renewal this year.

Dr. Kiessling asked if other towns have a similar requirement. Ms. Dagle replied that most towns have some sort of educational program. In 2019, Bedford had a similar requirement, but it was for in-person training, which is difficult due to COVID-19.

Ms. Raj added that the person-in-charge is a high level employee who should already know the information in the educational food safety training. Ms. Dagle added that the person-in-charge is usually the Food Safety Manager for the establishment.

Ms. Schwartz asked to confirm that the food establishment permit wouldn't be renewed until the training was completed. Ms. Dagle replied that was correct.

Dr. Kiessling asked how it was decided to make the training a requirement. Ms. Dagle replied that the Health Department decided on the requirement. It is similar to past requirements where the persons-in-charge had to attend in-person training in order to receive their permit. The training ensures that everyone has the same baseline knowledge and provides a free educational opportunity. Ms. Porter added that in the past, training used a top 10 list of common violations. This on-line training gives a broader re-training of knowledge, which should help with inspections throughout the year.

Dr. Kiessling asked who the vendor was that offered the training. Ms. Dagle replied that the company is called Mojin Solutions.

Ms. Schwartz commented that offering on-line training seems consistent with past offerings. Ms. Dagle replied that the establishments have seemed pleased with the on-line option as it can be difficult for a person-in-charge to leave the restaurant or for an employee to be sent to in-person training. The on-line training allows the establishment to work around their schedules.

Ms. Dagle commented that similar educational programs have been required for pool permits. Similarly, the top five violations have been discussed in the past with pool permit holders in a training session before permits were renewed.

Dr. Kiessling asked if the educational training had to be completed by the end of the month. Ms. Dagle replied that the training did have to be completed by then as food establishment permits were expiring at the end of the month. The renewal applications were due by February 11th. Food establishments had to inform the Health Department of which person-in-charge from each establishment was going to complete the training. Ms. Dagle added that not all establishments have completed this step yet.

Dr. Brunkhorst asked if any businesses in Town had to close due to COVID-19 cases. Ms. Dagle replied that there were a large number of employee COVID-19 cases reported by businesses in January. However, she doesn't know of any business that closed due to that. Ms. Dagle added that she doesn't think any of the food establishments had to close due to COVID-19. Ms. Porter added that a business may have closed due to lack of staff, but there were no closures on orders of the Health Department.

Ms. Porter reported that the department participated in Town vaccine clinics offering both COVID-19 and flu vaccine. The last clinic was held on January 31st. The appointments weren't filled, so the demand has decreased for now. Weston is offering Moderna Mondays and Pfizer Fridays and has allowed Bedford residents to participate in their vaccine program if desired.

Ms. Porter attended de-escalation training that was coordinated by Youth and Family Services social workers. The training was offered to all Town staff and Ms. Porter is working on offering the training to Town residents. The training included resources and strategies to de-escalate elevated situations.

Ms. Porter met with the School Superintendent and Lead School Nurse to review the home test kit distribution program being offered by the schools. The pool testing program will also be maintained.

Ms. Porter also attended the meeting with apartment complex managers that Ms. Dagle mentioned. Apartment complexes interact with Town departments on multiple levels as many have pools, tenants can contact the Health Department with concerns regarding living conditions, and some residents may need social services.

Ms. Porter attended the District Mental Health Team meeting with other Town and school staff members. Mental health issues and concerns were discussed, as well as ways to provide better support to both the youth and general population regarding mental health.

Ms. Porter attended a meeting with the Select Board and Finance Committee regarding the Town's budget.

Ms. Porter also attended a meeting of the East Middlesex Mosquito Control Commission. The discussion focused mostly on budgets, and staffing. Between six and eight seasonal workers will be needed over the summer to treat catch basins.

Ms. Porter reported that Town COVID-19 test kit distribution has switched to test kits being made available in some Town buildings including the Health Department, Council on Aging, Town Manager's Office and library. Ms. Porter commented that the library seemed the most popular place to pick up kits as staff had to send additional kits there today.

Ms. Porter commented that the Health Department is ready to respond if needed when the vaccine is approved for the six month to five years old group.

Ms. Porter reported that the new Public Health Nurse, Ms. Julie Genova, started working today. She is a former school nurse of the Fenn School in Concord, so she has a lot of experience working with youth and families. She is also familiar with DESE guidance and can act as a liaison between

the Health Department and schools. Ms. Porter added that she and Ms. Genova are looking at which programs to focus on in the future, including blood pressure monitoring with the COA, some educational programming with the Recreation Department, and sun and tick bite prevention.

Dr. Brunkhorst asked about Ms. Genova taking over COVID-19 case work. Ms. Porter replied that the contractors are still in place while Ms. Genova is transitioning into her role. It will take some time to get Ms. Genova access to MAVEN, but in the meantime, staff will train Ms. Genova on its use and on using it for contact tracing. The contracted nurses will then be phased out, but still available should the Department need them in the future. Ms. Nash and Ms. Ramachandran will remain as they provide follow-up and supportive outreach with COVID-19 cases. Ms. Genova will take over the initial contact with any new cases.

Ms. Raj asked about a resident who had environmental contamination on their property. Ms. Porter replied that a resident contacted the Department regarding environmental contamination on their property caused by someone else. The resident was provided support regarding their situation.

Dr. Kiessling asked about the flu vaccination clinics. Ms. Porter replied that not as many people have gotten their flu vaccinations through Bedford as in the past. Whenever there was a COVID-19 clinic, the flu vaccine was also offered as it was alright for people to receive both at the same time. Ms. Porter expects the flu clinic to be offered through the Health Department office, and pop-up vaccine clinics could also be held around Town. There is still time to receive the flu vaccine and be protected this season.

Dr. Kiessling followed up by asking if Ms. Porter had any numbers regarding flu vaccinations. Ms. Porter replied that she estimates that $\frac{2}{3}$ of the usual vaccinations have been given. During the year with the highest number of flu vaccinations, the Health Department gave 1,300 shots, or about 10% of Bedford's population. Residents could be choosing to get their flu vaccine elsewhere like from their primary care physician or a pharmacy.

Dr. Kiessling asked about the revolving fund. Ms. Porter replied that while the Town can't ask for reimbursement of State-provided vaccines, they can ask for reimbursement of any administration costs. The revolving fund is used to cover clinical costs of vaccine administration.

Dr. Kiessling asked how many apartment complexes were in Bedford. Ms. Porter replied that there are four in Bedford, including Bedford Village, Heritage at Bedford Springs, Taylor Pond, and Avalon. All are managed by different companies.

Ms. Schwartz asked about the open communications position available through the Shared Services grant. Ms. Porter replied the grant communities wanted to hire a coordinator first, and there have been interviews for that position. Next, the grant communities wanted to fill the Public Health Nurse positions that were open. After that, the communication position would be filled.

Dr. Brunkhorst asked about the APHC and if it was related to the Shared Services grant. Ms. Porter replied that the Academic Public Health Corps was a group started near the beginning of the pandemic of public health students who volunteered to support local health departments and is not related to the grant. The APHC developed a lot of the infographics used which allowed for consistent messaging across the region. Ms. Porter was hoping to work with the group while the communications position for the Shared Services grant was still open, but she hasn't had a response

from them yet. Ms. Porter added that working with the group would be useful beyond COVID-19 as Bedford offers various educational programming and outreach on a variety of topics.

Ms. Schwartz commented that while articles and bullet points can be useful, other people find infographics easier to understand. Ms. Porter commented that often there is an infographic at the top of outreach to catch readers' eyes with more detailed information below. Since not all residents use social media, print versions are also created for the paper and newsletters.

Dr. Brunkhorst asked Ms. Porter if there was anything of note from the COVID-19 intra-agency phone call with MA DPH. Ms. Porter replied that the calls are shifting back towards basic public health discussions. There were some announcements for grant opportunities, and internships. Ms. Porter added the calls would be where announcements were made regarding vaccines for the youngest group of children, or if there were any vaccine complications. The take home test program was discussed during a call. Ms. Porter expects the calls, which started during the pandemic, to continue to some extent in the future. The calls are an opportunity for everyone to hear the same information from the same source and to ask questions regarding the information.

Ms. Richichi reported that she met with Ms. Sarah Scoville, the School Committee Head, regarding school start times and expectations moving forward. Ms. Scoville will be meeting with the School Superintendent to discuss the idea. It is not expected to occur until after COVID-19 pandemic passes. Discussion on the process will probably start sometime this spring.

Dr. Kiessling asked if the school start times were an agenda item. Ms. Richichi replied that the topic is on the agenda and that the School Committee is committed to look at the issue. They also looked at other schools that participate in sports with Bedford.

Ms. Richichi added that she and Ms. Scoville discussed challenges that would have to be overcome. Ms. Richichi has done some research on other school districts who have changed their school start times and the processes they used.

Ms. Schwartz reported that the COA Board will be meeting tomorrow and she is planning on attending. There is a new BLT driver and there has been an increase in ridership. Ms. Schwartz added that either Minuteman or Meals on Wheels are looking for more drivers for their service.

Ms. Schwartz also attended the Youth and Family Services meeting. Mr. Chris Bang presented an update on all the services being offered.

Ms. Richichi reported on two meetings with the Healthy Bedford group, one discussing the intergenerational areas. Ms. Amy Hamilton from the Recreation Department also attended and it was a productive brainstorming meeting. The second meeting discussed the Safe Routes to school projects in the Spring, as well as some bike projects.

Ms. Porter added that Healthy Bedford is still looking for funding to connect the Narrow Gauge trail that goes to Billerica with the Lane School. Currently there is only a rough trail. There are some more grant opportunities for funding.

Dr. Kiessling asked about the length of trail needed to connect Lane School to the Narrow Gauge trail. Ms. Porter replied the length of trail isn't the issue, but the elevation change. The trail would

need switchbacks for accessibility. An area with a bench is also proposed. Ms. Porter added that the price of the project keeps increasing over the years, affecting the grant application process.

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

Ms. Porter reported that there are still elevated numbers, but not as high as two weeks ago. Case numbers are decreasing across the State. For the month of January there were 983 cases in Bedford. There were also seven hospitalizations in January.

Ms. Porter reported that for the two week period of January 16th to January 29th, there were 246 cases. Of those, 111 were known breakthrough cases, and 20 were cases in children younger than five. Thirty households had two or more cases. There are currently 24 cases in the School District.

For the current off-ramp, the CDC transmission level is still 'high'. For the seven day period of January 25th to January 31st, Middlesex County had 7,236 cases and a case count of 1,611 is needed to go from 'high' to 'substantial'.

Ms. Porter also included information on the number of hospitalizations at the beginning of each month for the State since August. There has been a decrease in hospitalizations from 2,372 at the beginning of January to 1,583 at the beginning of February. Dr. Kiessling commented that there are 50% more hospitalizations at the beginning of this year compared to last year.

Ms. Porter also shared the mask mandate data evaluation done by Ms. Nash. Ms. Nash determined the statistical significance from month to month since August when Bedford's mask mandate was put into place. A comparison was made between Middlesex County towns with and without mask mandates. There was a statistically significant decrease in cases among towns with mask mandates compared to those without mask mandates for September, October, November, and December. The daily rates of cases were less among the towns with mask mandates, with the degree of less varying month to month. There was no statistical difference between the two groups in January with the Omicron surge. Ms. Porter noted that she kept the towns in the same groups, either with or without a mask mandate, throughout the entire analysis, even though a number of towns enacted a mask mandate going into January.

Dr. Kiessling asked if Ms. Nash started with a baseline in July when no one had mask mandates yet. Ms. Porter replied that the baseline is essentially the August data since the mask mandates didn't go into effect until the end of August. Bedford was one of the first to enact a mask mandate.

Dr. Kiessling asked if the towns with mask mandates had lower case counts than the group of towns without a mask mandate. Ms. Porter replied that the mask mandate group of towns had a slightly lower case count in August than the non-mask mandate group of towns. The difference between the two groups increased with time with the biggest difference occurring in November and December. Ms. Porter agreed going back to July would give a more concise baseline.

Dr. Kiessling asked about the fewer cases in December and what percentage that difference represented. Ms. Porter replied that the towns with a mask mandate had 14 fewer cases per 100,000 people than the towns without mask mandates. However, she didn't have the raw data to calculate a percentage.

Dr. Kiessling asked about the lack of difference in January between the groups. Ms. Porter replied that there was no statistical difference between the two groups in January when case numbers were really high.

Dr. Kiessling showed an updated version of the seven towns near Bedford comparing the 14 day average of positive tests per 100,000 people over time. The average for Middlesex county is about 99 positive tests per 100,000. Bedford and Carlisle are above that average, Billerica is about average, and the rest of the towns are below average. The data for all of the towns is trending downwards.

Dr. Brunkhorst thanked Ms. Porter for forwarding a new article from the CDC on the effectiveness of mask wearing in indoor public settings. Dr. Brunkhorst suggested including the article on the website as a source of information as requested during the public comment period. The article concluded that effectiveness of the mask increases depending on the type of mask, with cloth masks being the least effective, surgical masks being more effective, and KN95 being the most effective.

Dr. Brunkhorst commented that she had sent some information which could possibly be added to the website as resources including information on the lack of effect of the vaccine on fertility and the effects of long COVID-19. Dr. Kiessling commented that one good thing with long COVID-19 is that it doesn't seem to cause Guillain-Barre.

Dr. Kiessling asked about the percentage of people with long COVID-19. Dr. Brunkhorst replied that the long COVID-19 report looked at a cohort of 200 people with long COVID-19 and compared them to a control group of 400 healthy people. The report focused on possible therapies for treatment of long COVID-19, not the number of people. Dr. Brunkhorst added that she believes the NIH is doing a large long-term study on long COVID-19, which would include percentages.

Ms. Richichi thanked Ms. Porter for forwarding the information from the MA Medical Society. The letter thanked all the public health employees at all levels of government.

Dr. Kiessling also shared a graph of the number of people who have died in Bedford and their ages. As of June 2020, it was clear the elderly were most at-risk from this disease. Bedford has had 61 people who have died. Of those, 45 died over the course of two months in 2020 and their average age was 84. Since July 2020, only 16 people have died and their average age was 73. The youngest person in Bedford who died was 59. Dr. Kiessling added that most of these deaths were residents at the VA or in long-term care facilities. Dr. Kiessling wanted to emphasize that COVID-19 is a serious disease for older people, not the younger people.

Dr. Kiessling commented that messaging should include ways for the elderly to protect themselves from contracting the virus.

Dr. Kiessling asked what percentage of residents over 75 were vaccinated. Ms. Richichi replied that the age group has a vaccination rate of 81 to 82%.

Dr. Kiessling commented that being vaccinated isn't enough to protect people. For the week of January 22nd, there were 63,000 positive tests in MA, and of those, 44% were fully vaccinated.

That same week, there were 478 COVID-19 deaths, of which 61% were fully vaccinated. The average age of those who died was 77.

Ms. Richichi commented that one unknown is how many of those cases had received their booster shots. Dr. Kiessling commented that the boosters are most effective during the first couple of months after receiving them.

Dr. Brunkhorst commented that people were five times less likely to be hospitalized if they had received their booster shots. Dr. Kiessling agreed that the vaccine and booster shots keep people out of the hospital, but if they do end up being hospitalized, and they are elderly, there is a death rate of 61%. The elderly population needs to be protected as they are very vulnerable.

Ms. Schwartz commented that there are a number of preventative measures that have been included in messaging that still apply such as getting vaccinated and boosted, testing, wearing masks, and good ventilation. Dr. Brunkhorst added that the home test kits should be used as part of the whole preventative toolbox.

Ms. Richichi commented that with the elderly being more vulnerable, they could still experience problems associated with isolation.

Ms. Richichi asked if Dr. Kiessling had seen anything regarding using antiviral medication on elderly patients. Dr. Kiessling replied that a visiting infectious disease nurse from Europe visited her lab and thought the reason for so many more deaths in the US was the low use of steroid treatments. Europe also allows for other treatments that the FDA doesn't allow.

Ms. Richichi commented that figuring out the best treatment for the elderly would greatly help decrease deaths. While the elderly tend to have comorbidities, antiviral treatments aren't as readily available as they should be after receiving approval. Dr. Brunkhorst commented that the protease inhibitor developed by Pfizer is very promising, but it isn't available yet. Hopefully it will make a difference once it is readily available. The inhibitor won't be as affected by changes to the strain between the different COVID-19 variants.

Dr. Kiessling asked if the other BOH members read the Hopkins report on the damage caused by the lockdowns, similar to a report written after the flu pandemic in the early 1900s. The Hopkins report concluded that lockdowns did little.

Ms. Raj asked what the lockdowns were defined as, since the degree varied from country to country. Dr. Kiessling replied that lockdowns were defined as any government-imposed restriction, including masks.

Ms. Richichi commented that the report illustrates how much is still not known about the COVID-19 virus and treatments. Actions taken will be studied and discussed for a long time. Ms. Richichi added that while what has happened with regards to lockdown can't be changed, what can be done is to look at what can be done now and how to move forward. Hopefully there will be lessons from this pandemic on what can be done better.

Ms. Schwartz commented that after reviewing the data, discussion should focus on the mask mandate, as was promised last meeting. Ms. Raj added that discussion on the mask mandate off-ramp was also promised.

Ms. Raj allowed a resident to comment on the discussion. Mr. Mario Belanie, an active Coast Guard member living on Hanscom Air Force Base, commented that his children frequently use Bedford facilities. Mr. Belanie added that he and other parents are concerned with children wearing masks while doing physical activity and with their social development. He also commented that masks aren't protecting children as much since children touch their faces often and the masks become dirty.

Ms. Raj thanked Mr. Belanie for his comments. Ms. Raj commented that mask-wearing during the school hours is under the purview of the School Committee and DESE.

Ms. Raj allowed for another resident to comment on the discussion. Ms. Karpovsky, 27 Railroad Avenue, is also an owner of a fitness establishment at 65 Wiggins Avenue. She commented that the mask mandate is still affecting her business, as well as other businesses in Town, as residents are continuing to choose to go to other towns without mask mandates.

Ms. Raj thanked Ms. Karpovsky for her comment.

Ms. Raj commented that the period between meetings allowed BOH members to do some research regarding the mask mandate off-ramp, allowing for discussion during tonight's meeting on the mask mandate and possible off-ramp changes. Middlesex County has been considered 'high' transmission by the CDC for quite some time and it could be a long time before that status changes. Ms. Raj proposed that each BOH member comment on their ideas for the mask mandate off-ramp.

Ms. Richichi commented that everyone is tired of COVID-19 and the disruptions to daily lives. It is hard to predict when the emergency phase of the pandemic will end, but Bedford is in a different place than it was in August when the mask mandate was passed. Ms. Richichi added that a lot more is known about Omicron. Vaccines and boosters help keep people out of hospitals. While the Omicron surge may not be over, there are positive signs that we are on the downward slope side of the surge with the peak occurring in mid-January. Ms. Richichi commented that experts expect a few more rough weeks with hospitalizations and deaths, and there are still unknowns about the Omicron-BA.2 variant.

Ms. Richichi added that Middlesex County numbers are improving and MA wastewater COVID-19 levels are decreasing, down 90% from the levels at the peak of the Omicron surge. Ms. Richichi is still concerned about the burden on the hospitals with high ICU capacities, hospitals reducing or suspending elective surgical procedures, and staff experiencing burnout and shortages.

Ms. Richichi commented that there has also been improvement with the mitigation strategies with more children being eligible to receive the vaccine. Overall, Bedford's vaccination rate is 83.5%, using the Town population numbers. With regards to booster shots, 41% of those eligible in Middlesex County have received them. There has been increased access to testing, with antibody tests becoming more affordable, and school testing programs now offer at-home testing. While there are some treatments for the virus, there is a lack of availability. Recommendations have

increased for people to use higher quality masks. Social distancing, ventilation, and avoiding indoor gatherings are still being encouraged.

Ms. Richichi commented that case counts and positivity rates are not as indicative of status as before Omicron. She suggested considering an off-ramp that has three requirements. Ms. Richichi would like to look at Middlesex County hospitalizations data over a sustained period, perhaps hospitalizations of a certain number per 100,000 for two or three consecutive weeks. Secondly, there should be a vaccination rate of eligible residents equal to or above 80%. Bedford may have already reached this rate. Ms. Porter commented that Bedford has a 78% vaccination rate according to the State. Ms. Richichi continued with the third requirement of no other variant of concern that could evade immune protection on the horizon.

Dr. Kiessling commented that according to blood bank surveys, the CDC believes about 90% of the population has antibodies. With that, vaccination rate goals may not be needed. Vaccinations are keeping healthy people out of the hospital. Dr. Kiessling added that for over a year, data shows children aren't as vulnerable to COVID-19, and they mainly experience cold-like symptoms before getting better. She added that there is a lack of data supporting masking of children under five and the Hopkins report she mentioned earlier says children weren't as affected by the virus and could have returned to school as normal, similar to European children. Dr. Kiessling concluded by recommending either rescinding the mask mandate entirely, or reducing it to a mask advisory.

Dr. Kiessling commented that MA DPH data show most people, 99% of new infections, become infected through their household, not by attending large indoor gatherings. Dr. Brunkhorst commented that the initial family member had to become infected somewhere. Dr. Kiessling replied that initial infections come from other households since there haven't been infections from visiting retail stores, restaurants, or attending large gatherings. Dr. Brunkhorst commented that New York City may have more information as they have a vaccine mandate to visit restaurants.

Dr. Kiessling commented that there have been no outbreaks recorded at restaurants. Ms. Porter replied there may not have been outbreaks, but that doesn't mean that transmission didn't occur.

Ms. Raj asked Dr. Kiessling if one of her recommendations would be to exclude children under the age of five from the mask mandate. Dr. Kiessling replied that she thinks WHO guidelines would be followed, which doesn't recommend masking for children under 10 unless in crowded conditions. Dr. Kiessling added that she thinks the pandemic is over, there is a lot of data, it is better understood who needs protection, and the mask mandate should be rescinded. If the mask mandate becomes a mask advisory, there should be guidance for the elderly.

Ms. Porter commented that options are provided for the elderly through the COA activities, which promote remote participation for social activities. This does assume the elderly population has computers and the ability and desire to engage in remote activities. Some residents are choosing to stay at home and interact remotely, as seen by lower BLT ridership and fewer people visiting the COA. Ms. Porter commented that there is not as high attendance to Town-sponsored activities as there was in the past. Ms. Schwartz commented that the comfort level hasn't risen yet, but with the decline in the Omicron surge, hopefully residents' comfort level increases and they will be more willing to attend in-person activities.

Dr. Kiessling commented that another way to look at the mask mandate is for BOH members to comment on why they want the mask mandate to continue. Ms. Schwartz commented that the other BOH members should be given the opportunity to discuss their ideas for the off-ramp before the discussion topic is changed.

Dr. Brunkhorst commented that she also looked at hospitalization rates in MA. On the CDC website, some algorithms are used to predict future levels. The average of the algorithms estimated around March, hospitalization rates would be returning to what they were back in November. Dr. Brunkhorst expressed concern over the hospitalization rates and how hospitals are postponing elective surgeries.

Dr. Brunkhorst also looked at other mask mandates and their off-ramps. Many have a date that can be revisited if needed, a certain vaccination rate reached, or case numbers similar to Bedford. She was unable to find any mandates that mention hospitalization rates.

Dr. Brunkhorst liked the three ideas Ms. Richichi suggested, though the variant of concern may need some more work. Dr. Brunkhorst doesn't think the hospitalization rates will be back down to the November rates for another month, so she would like to see the data for the rest of the month.

Ms. Schwartz also liked a hospitalization rate off-ramp, perhaps using 10 per 100,000 at the State level. Assuming a population of 6.9 million, that would be 690 people hospitalized. Ms. Schwartz suggested that the hospitalization be a seven day average. Ms. Schwartz agreed with Ms. Richichi on using hospitalization rates over a set time period and added that her suggestions may or may not be appropriate. Ms. Schwartz added that she is fine with using either Middlesex County or State data. As for vaccination rate, depending on which calculation is used, Bedford is already around 80%, so it may not be needed as part of the mask mandate off-ramp.

Ms. Schwartz commented that she also looked at what other communities and states have been doing regarding their mask mandate. Connecticut and New Jersey are looking to drop their school mask mandates. While the BOH enacted its indoor mask mandate before DESE, Ms. Schwartz suggested another part of the off-ramp could align with DESE removing their mask mandate for the schools.

Ms. Raj asked if DESE dropped their mask mandate for the schools, did Ms. Schwartz mean the BOH mask mandate be dropped for everyone or just school-aged children. Ms. Schwartz replied that she would drop the entire mask mandate and instead have a mask advisory. The school is a microcosm of the community with a wide range of ages from the students to older staff and teachers.

Dr. Kiessling asked if the BOH members believed masks would stop transmission. Dr. Brunkhorst replied that masks are just one part of the protective measures. According to a study she saw, masks can reduce transmission by 50%, though it may have been different with Omicron. Dr. Kiessling commented that there was no difference between the mask mandate and non-mask mandate towns in Middlesex County last month. She added that she thinks the masks only reduced transmission by 1% to 2%.

Ms. Richichi commented that masks reduce community transmission. Dr. Kiessling asked how much masks would reduce transmission. Ms. Richichi replied that it depends on which study you

look at. The MMRA collected all of the studies and compared them. Ms. Schwartz added that she doesn't believe they do nothing. KN95 masks can be 60% to 70% effective against Omicron, surgical masks less so, and cloth masks less than that, according to a study.

Dr. Kiessling repeated how the statistical analysis done between Middlesex County towns with and without mask mandates showed no difference for January. Ms. Richichi commented that she thinks the community overall was concerned about Omicron and people wore masks more often, regardless of mask mandate status. The lack of statistical difference last month could be explained by people's behavior.

Dr. Kiessling commented that that shows that mask mandates aren't needed since people adjust their behavior. Ms. Richichi replied that mask mandates are still needed since she has seen both instances of almost everyone wearing a mask inside and her being one of the few wearing a mask inside. There are a lot of variables unaccounted for so we don't know for sure why there wasn't a statistical difference in the data last month. Ms. Porter added that in January, the communities that enacted a mask mandate were not changed over to that category when doing the January calculations. The data may show a difference if those towns that enacted a mask mandate were included in the mask mandate group instead of the no mask mandate group.

Dr. Kiessling commented that it is time to change the mask mandate to a mask advisory or to at least exempt some businesses. Ms. Schwartz replied that she is willing to look at a different off-ramp for the mask mandate based on hospitalizations, or following DESE. She added that people now have the tools to keep themselves safe from vaccines and testing, to increased ventilation and the other recommendations.

Ms. Raj asked if there was enough consensus to vote on the issue, or do BOH members want to consider the issue at the next meeting.

Dr. Kiessling asked about the list of businesses Ms. Dagle provided in order to discuss the possibility of some of them being exempt from the mask mandate. Concerns have been raised about children participating in athletic activities and people visiting gyms, and Dr. Kiessling also had concerns about people in manufacturing jobs.

Ms. Schwartz would also like to hear other BOH members' opinions regarding following DESE guidance.

Dr. Brunkhorst asked Ms. Porter if she knew how DESE came to their decisions. Ms. Porter replied that DESE consults scientists and epidemiologists. Dr. Kiessling commented that there is also a group of scientists and doctors concerned over the masking of children that also contribute to the discussion. Dr. Brunkhorst commented that the current DESE mask mandate is set to expire on February 28th. Ms. Schwartz reminded the BOH members that the 28th is also the date of the next meeting.

Ms. Richichi commented that aligning with the DESE mask mandate would be easier as residents wouldn't have to remember where there are or aren't mask mandates. However, the BOH doesn't know when DESE will make their decision regarding mask mandates. She added that some of the states dropping their school mask mandates aren't doing so until March 7th.

Dr. Kiessling commented that some towns in MA have dropped their mask mandates already. Ms. Richichi replied that some have, but Lexington has a date of March 15th and Concord hasn't met their off-ramp yet. Many communities' off-ramps are similar to Bedford's and rely on case counts.

Dr. Kiessling asked about exempting some businesses from the mask mandate. Ms. Richichi asked about the criteria for exemption. Dr. Kiessling replied that establishments with no public exposure should be exempt.

Dr. Kiessling expressed surprise at the number of athletic types of establishments. Ms. Richichi asked for clarification of youth sports establishments. Ms. Dagle replied that facilities with youth sports are included in that category. The athletic establishments include gyms, yoga studios, Barre studio, Edge Sport Center, martial arts, and Babe Ruth baseball league.

Dr. Kiessling asked since most of those establishments are for youth, could those establishments be exempt from the mask mandate. Ms. Porter replied that she isn't confident only youth use those facilities. Ms. Dagle replied that the majority of the establishments have a mixture of ages visiting them. Ms. Porter added the gyms may have people over the age of 60 attending them. Ms. Dagle added that there are senior hockey leagues.

Dr. Kiessling asked if the BOH members would be interested in exempting those types of establishments from the mask mandate. Ms. Richichi asked if the qualification is that no elderly visit these establishments. Dr. Kiessling replied that these businesses should decide for themselves. A mask advisory would include encouraging anyone over the age of 70 to wear a KN95 mask.

Ms. Raj commented that there are plenty of families with grandparents and the younger people can contract the virus and infect their elderly relatives. Ms. Richichi commented that if the biggest risk for transmission is in the household, then the greatest risk for elderly are in intergenerational homes.

Dr. Kiessling commented that the mask mandate regulates routine activities. Ms. Raj commented on Dr. Kiessling's comment regarding workers in manufacturing positions being exempt as well. Dr. Kiessling replied that she imagines it would be difficult to do such a job under mask mandate conditions, so the decision should be left up to the business.

Ms. Dagle reminded BOH members that the list isn't inclusive of everyone and is only those businesses that she knows of in Bedford.

Ms. Porter commented that there are plenty of grandparents who help take children to activities and visit the various athletic establishments. Dr. Kiessling commented that those people can decide for themselves. She added that contact tracing hasn't shown outbreaks at gyms, but rather household transmission is the source for many infections.

Ms. Raj asked again if there was consensus enough to vote on any of the issues tonight, including a specific off-ramp.

Dr. Kiessling commented that she would agree to aligning with DESE's mask mandate. Ms. Richichi commented that the numbers are heading in the right direction and would be prepared to

have an off-ramp that would allow for a couple more weeks for the data to continue to trend downward, perhaps ending by the end of the month. Ms. Richichi added that if the off-ramp is aligned with DESE, the school mask mandate could be extended to the end of March, which may not be appropriate for the community.

Dr. Kiessling asked if an off-ramp of case counts returning to what they were at the beginning of December would be considered. Dr. Brunkhorst commented that the beginning of November case counts would be better as they were before the surge. Dr. Kiessling replied that at the beginning of November, there were 27 cases over the course of a week and suggested a case count of 30 per week. Ms. Richichi commented that Dr. Kiessling had earlier commented on case counts not being indicative of the infection rate with so many people doing at-home tests. This was why hospitalization rates were being considered instead.

Ms. Schwartz suggested that the current off-ramp be kept, but that an 'or' condition is added, such as 'or DESE rescinds its mask mandate.' This way if DESE changes their mask mandate before the next BOH meeting, the BOH mask mandate would be aligned, and if they don't, the mask mandate would be the same as today. Ms. Schwartz added that another 'or' condition could be added regarding hospitalizations. This way there could be various off-ramps for the mask mandate.

Dr. Kiessling asked about using the hospitalization data from the beginning of November where Bedford had one hospitalization. Ms. Porter commented that the Bedford hospitalization isn't accurate data as it is anecdotal. Dr. Brunkhorst added that county data is more accurate. Ms. Porter commented that hospitals report the data to the State, which then can report the data by county.

Dr. Kiessling asked where the Bedford hospitalization data came from. Ms. Porter replied that the Bedford hospitalization is from interviews of cases. It isn't reported to Bedford through MAVEN. Hospitals report cases to the State and the State can break the data down by county. Dr. Kiessling added that the hospital data also gets reported to the CDC.

Ms. Schwartz mentioned again the 10 per 100,000 hospitalization rate. Ms. Porter wanted to make sure the data was reported that way. Dr. Brunkhorst found data reported as the rate of new admissions per 100,000 people over the last seven days and is available by county. The rate Dr. Brunkhorst saw on Friday was 15.39 new admissions per 100,000 people. Dr. Kiessling commented that the data from November can be found in the State's archive, but expects it to be around 8 new admissions per 100,000 based on the shape of the curve.

Ms. Richichi commented that she has been looking at the trends in the data. As of February 2nd, new hospital admissions were down 33%. Ms. Richichi added that she is beginning to feel comfortable ending the mask mandate at the end of the month or early March as these downward trends continue. Ms. Richichi commented that the BOH could pick a day to end the mask mandate, or align with DESE, or whichever comes first as a possible off-ramp. This way, the BOH doesn't get caught up with all of the numbers.

Dr. Kiessling made a motion to rescind the mask mandate as of February 28th as long as the numbers keep coming down and/or in agreement with DESE if they change before that date. Dr. Brunkhorst commented that she doesn't want the mask mandate rescinded. Instead, she wants it

to be turned into an advisory. Ms. Raj, Ms. Richichi, and Dr. Kiessling also expressed wanting a strong mask recommendation.

Ms. Schwartz asked about the February 28th date and if it should be later in March. Dr. Kiessling replied that Ms. Richichi had stated she was comfortable for an end date at the end of the month or early next month. Ms. Richichi replied that one uncertainty is how the number of deaths seem to fluctuate. As long as hospitalizations continue to decrease, ending it at the end of the month would be fine. Ms. Richichi added that she doesn't expect DESE to end their mask mandate before the end of school vacation. She expects the BOH mask mandate ending to align as she expects DESE to end their mask mandate at the end of the month or early next month, similar to other states in the Northeast.

Ms. Schwartz commented that the next BOH meeting is the 28th. She asked if DESE decides to drop their mask mandate on March 7th, similar to New Jersey, would the BOH also drop the mask mandate to match that date, or at the meeting on the 28th, and seeing a continuation of a decline in hospitalizations, would the BOH rescind the mask mandate on the 28th or would the BOH look at the data again on the 28th. Ms. Richichi commented that it would be nice to have a plan by the end of tonight's meeting. The three weeks until the next meeting would be enough time to see more data trends. Ms. Richichi wanted to keep the 28th as the date to rescind the mask mandate, with the caveat of hospitalization trends changing.

Dr. Kiessling then made her motion to "As long as the hospitalization rate in Middlesex County continues to trend down, the Bedford mask mandate will be repealed on February 28th." Dr. Brunkhorst commented that hospitalizations should reach November rates.

Dr. Kiessling asked if a number should be included for hospitalization rates. Ms. Richichi replied she was unsure of which number to use.

Dr. Kiessling asked what the current hospitalization rate was. Ms. Richichi replied that on February 1st, the rate of new admission was 10.79 per 100 beds and there were 269 new admissions over the past seven days. The rate of new admissions per 100,000 was 16.69 over the past seven days.

Ms. Schwartz commented that she would still like to come up with a number for hospitalization rates for the off-ramp. Dr. Kiessling suggested that the hospitalization rate of 10 per 100,000 be used.

Dr. Kiessling amended her motion again to reflect the rate of hospitalizations: "As long as there are 10 per 100,000 or less hospitalizations in Middlesex County, the Bedford mask mandate will be repealed on February 28th."

Ms. Schwartz asked if the hospitalization rate mentioned is total hospitalizations or new admissions. Dr. Kiessling replied that the rate is reported as new admissions per 100,000. Ms. Schwartz commented that "or Bedford aligns with DESE" should be included.

Dr. Kiessling asked when DESE was going to review their mask mandate. Ms. Richichi replied that DESE would review it sometime before the 28th. Ms. Porter replied that DESE would most likely announce their decision shortly before or on the 28th.

Dr. Brunkhorst was concerned over the use of 10 new admissions per 100,000. Ms. Porter asked how it is known if that rate is protective. Dr. Kiessling replied that the data is supportive of the current rate being protective enough to rescind the mask mandate. Dr. Brunkhorst was still unsure of the proposed rate.

Dr. Kiessling made the motion: "I move Bedford Board of Health rescind its mask mandate that was put in place in August, and modified a couple of times after that, on February 28th if hospitalizations in Middlesex County have decreased to 10 per 100,000, or that the mask mandate be rescinded earlier than that if DESE rescinds their mask mandate for the schools."

Ms. Schwartz asked about the mandate being rescinded later if DESE didn't rescind their mask mandate by the 28th. Dr. Kiessling replied that if DESE doesn't rescind their mask mandate by the 28th or if the hospitalization rate isn't reached, the mask mandate will remain in effect.

Ms. Richichi asked about making the date a little after the 28th to allow for businesses to be notified of the change. She doesn't want people to think the mask mandate is rescinded on the 28th since the BOH would be looking at the hospitalization data to determine if the mask mandate can be rescinded.

Ms. Richichi asked how much time would be needed to notify everyone of the change. Ms. Porter replied that it is easier to rescind than to enact and suggested March 2nd or 3rd as an appropriate date. Ms. Richichi commented that this would also allow businesses to decide if they would like to have their own mask mandate.

Ms. Schwartz wanted to confirm that the hospitalization rate on the 28th is what will be looked at for determining if the mask mandate is rescinded. Dr. Kiessling confirmed that was the case. The situation can always be discussed at the meeting on the 28th.

Ms. Schwartz asked Ms. Porter, as the BOH public health expert, her opinion on these two conditions for the mask mandate off-ramp. Ms. Porter replied that to some degree, aligning with DESE makes sense, but DESE is looking at a very specific population. The fact that not all of Bedford's population is vaccinated or eligible to be vaccinated is always a consideration. Ms. Porter understands that the BOH wants an opportunity to pull back the mandate, but the BOH has an opportunity every two weeks. Ms. Porter suggested the BOH wait until the 28th to look at the data and make a determination at that point. The decision keeps getting pushed to the next meeting because the data keeps changing. The current trend is encouraging. However, Ms. Porter commented that she is unprepared to have a full opinion on the hospitalization rate since it was suggested tonight.

Ms. Richichi suggested that the BOH say they will make a decision regarding the mask mandate at the BOH meeting on February 28th. This would allow for the rest of the month's data to be collected. Ms. Raj commented that she was comfortable with that suggestion to make sure the downward trend continues. Dr. Kiessling commented that if the trend line is extended, it would reach the proposed hospitalization rate at the end of the month.

Dr. Kiessling commented that the change should be made tonight and if something changes between now and the 28th, a new mask mandate could be made on the 28th. Ms. Schwartz

commented that she wasn't comfortable with that idea. She would rather allow people time to consider the proposed hospitalization rate, or consider the two different parts of the off-ramp separately, or wait until the 28th. Ms. Schwartz added that tonight's conversation has been good and interactive, but she wants everyone to feel comfortable.

Ms. Richichi commented that if the numbers continue their trend at their current rate, she would be comfortable voting to rescind the mask mandate at the meeting on the 28th. She would like to see the data between now and then and have time to evaluate the proposed hospitalization rate for the off-ramp.

Ms. Porter reminded the BOH that there is a motion on the floor to address. Dr. Kiessling commented the motion wasn't seconded. With no second of the motion, the motion failed.

Ms. Schwartz summarized that there are two possible off-ramp conditions to consider. The plan is for the BOH to meet on the 28th prepared to discuss and vote on those conditions.

Dr. Kiessling asked if a motion should be made to address only the DESE aspect of the off-ramp. Ms. Schwartz commented that if there is time to consider the proposed hospitalization rate, there should also be time to consider the alignment with DESE and their mask mandate. Ms. Schwartz would like the BOH to be prepared to vote on the 28th.

Ms. Porter asked the BOH about a situation where DESE rescinds their mask mandate, but the hospitalization rates haven't consistently decreased. Ms. Richichi replied that one condition is linked to DESE and the other is linked to hospitalization rates. On the 28th, Ms. Richichi commented that she might be prepared to vote to rescind the mask mandate, focusing mainly on the hospitalization rates.

Ms. Raj commented that she believes the BOH will have a firm decision on the 28th and that it will be implemented after giving the Health Department enough time to prepare. Ms. Schwartz commented that the BOH will continue to look at the data and acknowledged the possibility the data may not support rescinding the mask mandate at that time.

Ms. Raj commented that this is the closest the BOH has come to rescinding the mask mandate and she would like to see a strong mask recommendation in its place.

Ms. Porter commented that if any member of the public had a comment that didn't get addressed to please email the Health Department and their comments would reach the BOH.

At 9:41 PM, Ms. Richichi moved to adjourn the meeting of February 7th, 2022. Dr. Brunkhorst 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

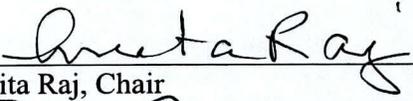
Panera Food Permit Summary and BOH Motion

Cumulative Case Counts November to Present

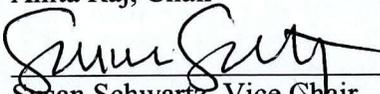
Statistical Analysis of Data Comparing Mask Mandate to Non Mask Mandate Towns

List of Bedford Businesses by Type
Graph of Positive Tests per 100,000 People Provided by Dr. Kiessling
Graph of Bedford Deaths by Age Provided by Dr. Kiessling

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



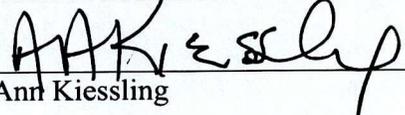
Anita Raj, Chair



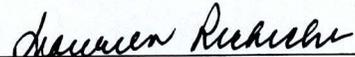
Susan Schwartz, Vice Chair



Beatrice Brunkhorst



Ann Kiessling



Maureen Richichi