## ADVISORY COUNCIL ON PUBLIC HEALTH

### Board Meeting Date:
April 27, 2020

### Location:
Webex Meeting

### Members in Attendance:
- Anthony L. Schlaff, MD, MPH, Chair
- David Hemenway, PhD
- Pat Maher, APRN, MA MS
- Peter Moyer, MD MPH
- Gretchen Stoddard, DrPH, MPH

### Agenda Items

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### Call to Order
5:01 pm

#### 1. Welcome

#### 2. Action Items

- **Dr. Jett provided updates on the Select Board:**
  - Select Board has put forth guidance on wearing a mask to support Board of Health actions.
  - COVID Task Force discussed using bullhorn throughout town to spread message for wearing a mask. It was voted down. They did not feel this would be effective for younger population and discussed using more messaging, signage.
    - Dr. Moyer stressed the need to communicate that we are wearing masks to protect others, especially among younger people.
    - Dr. Schlaff mentioned gatherings in property among young people. Police are responding, but cannot enforce. He questioned if the Health Dept. could handle enforcement. Dr. Jett would like to continue to use education and signage, not enforcement at this time.
    - The council discussed better ways to spread message in the community. Dr. Jett believed messages have only reached 1% of the 60,000 residents. Dr. Schlaff suggested adding message to existing traffic signal signs around town.
    - Pat Maher said she saw the “Wear a Mask” sign around town in stores. She mentioned sharing the data on age groups with highest infection rates to emphasize the importance of wearing masks.
• Dr. Jett reported there are no new internal communications. This was a standing agenda item.

• Dr. Jett shared data on cases (slides from April 24th):
  o As of 4/27, the US was over 1 million cases and ~56,000 deaths, 55,000 cases in MA and roughly 2900 deaths
  o As of Friday, 4/24, around 19,000 cases in a day, 900 deaths
  o In order to reopen, there should be no new cases within 14 days.
  o National Coronavirus Response and Reopening document provides guidance for reopening from American Enterprise Institute (released 3/28)
  o Data shows majority of cases in colder regions, lower infection rate in hotter areas. However, surveillance in Africa has shown an increase in infection. Dr. Jett has noticed lower rate in places with higher humidity.
  o **Brookline**: 259 cases, 33 suspect cases, 18 deaths, majority of deaths in Care One. They are accepting new patients from hospital, COVID patients. Infection control and MGH Infection control has been to visit and make sure they are following proper protocols. Over 50% have COVID, 87 in house, 11 in hospital, 13 staff (as of 4/24). Health Dept. and State are working together to monitor the nursing homes, assisted living facilities.
    - Dr. Jett mentioned the need of the Health Department to have staff to help monitor nursing home facilities.
    - Data based on age in Brookline: 3rd highest (30-39), highest two (70-79) and (80-89)
    - No exponential growth, linear. On 4/19 there were 113 cases, in 14 days doubled the amount of cases, but have not peaked.
    - Race/ethnicity demographic data in Brookline: 12% Asian, 8% Black/African American, 4% Latin/Hispanic, 10% Other, and 68% White (84% of total cases, does not include all demographic information from nursing homes)
    - Health Dept.: 384 calls since beginning to track, probably more
    - EOC: 494 calls, 242 emails
    - Reduced number meeting for COVID Task Force and Health Department (3x/week)
| 3. Other Business | • **Community Needs.** Working to fulfill community needs with the help of Brookline Mutual Aid and other organizations.  
• **Hazardous Waste – Sharps.** Health Department requested outdoor sharps container kiosks at Health Department, Police Department and DPW to reduce hazardous waste going to DPW through trash waste and reduce hazardous conditions for workers.  
• **Workload in Health Department.** Several emails sent to Dr. Jett daily and he is working on fielding emails and responding. Discussion of public health students working with Health administration to answer assist with answering emails.  
• **Contact Tracing.** Discussion of the labor-intensive contact tracing and the state program for contact tracing with assistance from Public Health students. Fifteen people providing contact tracing for Brookline. Environmental staff and school nurses working on contact tracing.  
• **Town Government reopen.** Starting to think about reopening town government, projecting reopen 30 days from now (5/24-28), around Memorial Day, if cases have peaked and decrease in cases over 14 days. Things to consider: testing for workers, proper PPE, having a good handle on isolation and quarantine. Town needs to be able to provide temperature checks for people coming into building, proper social distancing, and PPE for employees.  
• **Testing in Brookline.** Physician One testing: 155 people tested ($50/pp, $200/test for uninsured), swab testing. Dr. Jett is working with MGH on serology testing, but they are only looking to test ~30 police and fire fighters.  
• **Science vs. Economy.** Large number of people need to be tested for safer reopening. Dr. Schlaff thinks reopening by summer is optimistic without vaccine, antiviral. Dr. Jett believes more people will take risks to reopen with people losing jobs, wanting to return to work, protesting to reopen.  
• **Discussion of community surveillance.** Collecting data in August (baseline) before reopening schools. Serology testing for school aged children and parents. Retesting in October, using data it to trace any reemerging cases.  
• **Contact Tracing App.** Dr. Jett and staff met to discuss the use of an app for contact tracing, working with a group from DC. Data only shared when the user becomes positive and would have to scrub data of confidential information. Not ready to go live.  
• **Next week’s discussion:** Data collection around the new public ways for essential services. |
| Meeting Adjourned | 5:58 pm |