

**Meeting Notes from a Meeting of the Peabody Board of Health,
Held remotely via Zoom Video Conference, Wednesday, April 1, 2020
Participating in the Virtual Meeting: Chairman Bernard Horowitz, Dr. Leigh Ann Mansberger, Thomas J. Durkin III, Health Department Director Sharon Cameron, Public Health Nurse Chassea Robinson, and Recording Secretary Lisa Greene.**

Subject: Meeting to be called to order and explanation of change in meeting format

Discussion: Chairman Bernard Horowitz called the meeting to order at 4:07 and Director of Health Department Sharon Cameron advised that this online meeting was being recorded. Mr. Horowitz introduced himself and checked by asking if each Board and staff member was present and if each could hear and be heard. All could, so Mr. Horowitz proceeded to explain that this open meeting of the Peabody Board of Health was being held remotely in accordance with Governor Baker's executive order of March 12, 2020 due to the current state of emergency in the Commonwealth due to the COVID-19 Virus. In order to mitigate the transmission of the COVID-19 virus we have been advised and directed by the Commonwealth to suspend public gatherings and as such, the Governor's order suspends the requirement of the open meeting law to have all meetings in locations that are physically accessible to the public. Further, all members or public bodies are allowed and encouraged to participate remotely. The order allows public bodies to meet entirely remotely so long as reasonable public access is afforded so that the public can follow along with the deliberations of the meeting. Ensuring public access does not mean ensuring public participation, unless such participation is required by law. This meeting will not feature public comment, however, if the Mayor, City Solicitor, or another elected official is in attendance, I may call upon that person for comment. This meeting of the Peabody Board of Health is convening via video conference via Zoom, as advertised on the City of Peabody website, identifying how the public may join. Please note that this videoconference is being recorded, and that some attendees are participating by video conference. Please be aware that other people can see you during this video conference, and that you should not screen share your computer screen as anything that you broadcast may be captured by the recording. Supporting materials that were made available to the Board are available on the city website, unless otherwise noted. The public is encouraged to follow along using the posted agenda which has been posted on the screen. He then turned to the first item on the agenda, approval of the minutes. He explained that he would then introduce each party as they speak. He reminded everyone to mute their speakers, and remember to speak clearly in a way that will allow for accurate minutes.

Ms. Cameron asked to make a small clarification, explaining that not all of the document being referenced today are yet on the website, as she does not have the access to post those herself, so she will get them posted soon. Mr. Horowitz replied that when necessary they would read documents referenced or show them on the screen for people to follow along.

Subject: Approval of minutes

Discussion: Mr. Horowitz asked for approval of minutes from March 20, 2020. Mr. Durkin made motion to approve, stating that he had read them and appreciated the attention to detail. All Approved. Mr. Horowitz called for approval of the meeting minutes from the March 24, 2020 meeting. Ms. Cameron explained that those minutes are not yet available. Mr. Durkin asked for clarification on the date of the Emergency meeting held to discuss special orders. Ms. Cameron replied that this was March 20th. Mr. Durkin asked to be reminded what had occurred on March 24th meeting. Ms. Cameron explained that that had been a brief meeting to update on things and to update on the Governor's directives.

Subject: Update on Response Actions

Discussion: Mr. Horowitz asked Ms. Cameron to provide a brief update on the City's response actions. Ms. Cameron then shared some data on the number and details on those afflicted, telling that the data is current as of today, there are currently 45 cases in the City of Peabody, the first slide shows the breakdown by gender as compared to the state. The next slide shows the breakdown by age. She went on to say that the next picture shows

the numbers of cases from when we had our first case on March 20, to March 26th when we had 14 confirmed cases in Peabody, and told that yesterday we had 35 confirmed cases and today we have 45 confirmed cases, so what we are seeing is what we are seeing nationally, and statewide, an increase in the number of cases identified both as a result of increased testing and of increased community spread of the virus.

Mr. Horowitz asked if modelling would show what Peabody might experience. Ms. Cameron replied that they do not have the ability to do that at the local level, and added that the state has not provided us with any tools to do so. She asked Chassea Robinson if she had anything to add to that response. Ms. Robinson replied that she had nothing to add.

Ms. Cameron summarized some of their response actions over the past week or two, stating that their main focus is on tracking of cases/disease surveillance. She told that in addition to Chassea they have engaged a number of other nurses in their response. We now have our school nurse leader and many of our school nurses engaged in tracking cases. We currently have six nurses actively tracking cases, all have been trained in the state electronic surveillance system called MAVEN. They have three additional nurses who will be receiving MAVEN training next week who will join in on that effort. She added that when they share the information about the number of cases in the community, it is really important that people understand that these cases are tracked by a public health nurse who interviews the patient and gains an understanding of who else may have had contact with that person, to determine if they are ill and need to be isolated or quarantined. An important point to make is that these numbers really represent the baseline of what we know has been identified in our community. Baseline because these are those cases that were confirmed with a lab test and reported to the MAVEN system. As this pandemic is progressing, there will be more cases that are clinically diagnosed, based upon symptoms and travel history, but no lab tests, and those cases hopefully may get reported into the MAVEN system as a suspect or probable case, but many will not. She then asked Ms. Robinson to describe in more detail surveillance. Ms. Robinson told that they are getting cases reported on a daily basis, and that when they get a case report, they see a lab report, a name, and an address, sometimes a phone number, so they start their investigation with that information. She told that they usually call and say that they are calling from the local health department, and that a report was received that they were confirmed for a particular disease, that it's a reportable disease. They tell that they are calling for a few reasons, to see how the person is feeling, to see if we can determine how they may have been exposed to the virus, and lastly to determine if there is a risk to anyone else. The nurses also ask about what support is needed to isolate or quarantine at home. Some people we are reaching at home, some are hospitalized; if a person is not well enough to speak with us, we will speak with their doctor or nurse, and if they are not available, we at the very least are speaking with infection control department to get any information. We go through a clinical interview asking about what symptoms they have experienced, if they have had a chest x-ray, if they have experienced any clinical complications, document if they have been hospitalized, then on to travel history, outside state, outside of the country, any contact with people who might have had similar illness, then onto asking about anyone they may have been in contact with since their symptoms began, from their household, their place of employment, they ask everything, going day by day from the time their symptoms began, and get a list of names, addresses, phone numbers and sometimes e-mails. Then it is our duty to reach out to all of those people and to explain, without telling any names, that they have been exposed to the virus, and telling them that they need to be quarantined for 14 days from their last day of exposure. With those who need to be quarantined, before getting off the phone we talk about in the event of contracting the virus, what it means to be isolated at home for their period of infectiousness, for a minimum of seven days, but for as long as they have symptoms, plus an additional 72 hours after symptoms resolve. We ask about what their needs are and if necessary will make arrangements for them to get what they need to stay in isolation/quarantine, such as food and medications. When doing education on quarantine and isolation, we try to make them feel supported and make sure that they have a plan in place in the event of developing or worsening of symptoms, that they have a doctor they can call. She added that the state has provided some good written materials listing the rules and guidelines for quarantine and the rules for isolation, which gives people something in writing that they can refer to.

Mr. Horowitz asked in the cases where they are doing contact tracking, if the person lives in another community, do we make that call or does the nurse from the other community make the call. Ms. Robinson replied that all health departments use the same MAVEN reporting system, which has a great feature where when she enters a person in the system and if the person lives in another community the system automatically shares that information with the public health nurse in that community. She will get an e-mail telling that someone has shared a case with her so that

she will be aware of a case in her community. In some cases Peabody residents may work in other towns or have attended events there so this informs them. Mr. Horowitz asked about compliance, we don't do any compliance monitoring, for instance don't drive by the home and monitor to make sure they don't go out, and Ms. Robinson replied that in public health we do our best to use the least restrictive measures, and everyone we have talked to thus far has been compliant. We receive calls from concerned neighbors who may have heard that a case has been identified in the neighborhood, asking who it is and we never reveal names but simply explain about the tracking system and tell them that if they had been in contact with an infected person they would be getting a call directly from the Health Dept.

Ms. Cameron added that on the confidentiality issue, they are bound by HIPPA and confidentiality laws and cannot disclose addresses or information on people, except by a directive of the state department of public health, who has directed all public health departments to share the addresses only of all confirmed cases with our public safety first responders so that they have the information that they need to protect themselves if they have to respond to a call at that residence. They have set up a mechanism where she is sharing those addresses with the police and ambulance dispatchers, and fire department is dispatched under the ambulance dispatch so they are sharing that information but otherwise they are not sharing that information.

Mr. Horowitz asked if first responders could go to be tested if they think they might have been exposed. Ms. Cameron replied that the tests are designed for people who are symptomatic, and are not accurate for those who have no symptoms. Ms. Robinson agreed with how Ms. Cameron characterized it, and told that if a first responder has unprotected exposure to someone with the virus, we are recommending quarantine, and if they develop any symptoms to go get tested. Ms. Cameron added that dispatch protocols have all been modified for dealing with the virus, for instance, the regular protocol is for police, fire and ambulance to be dispatched to all calls, and any may enter the home and assist in the response, but because of the virus, these protocols may call for first responders not to be dispatched to routine calls or they may be staying outside of the homes unless there is an immediate life threatening situation like someone needs immediate life saving CPR. So generally it is only the ambulance staff who enter and respond, and they are wearing all of the appropriate PPE on all calls.

Ms. Cameron updated on other response actions they are taking as well such as guidance to employers on different scenarios: for instance, my employee's spouse works in a worksite where somebody tested positive, does my employee have to be quarantined. We are having a lot of calls so we will be training the school nurses to respond to those calls. She told that they have three teams of school nurses, some doing surveillance, some providing support to those calling with questions, and the third group is our research and connection team, reviewing the guidance which is changing on a daily basis, helping us to develop content for social media and the website, and to find ways to stay connected to the school communities that they serve, because it can be helpful and comforting for students to see their school nurse and watch her doing videos on how to stay healthy while you stay home and that sort of thing. She added that the inspectors are also actively involved in the response actions, providing a lot of guidance to food establishments, none are open for dining but many are still providing takeout. Inspectors are calling each of our hundreds of permitted food establishments to discuss protocols for safety for their staff and to be sure that they have plans in place. They are also receiving calls from businesses wanting to understand if they are an essential business and if so how to remain open safely, so they are providing a lot of guidance on that. She told that another thing they have done is to work with NSCAP and the medical reserve corp. to engage medical and non-medical volunteers, and they are using the non-medical volunteers to staff a health and social service access line, to help residents find those other supports they need, for instance, to remain quarantined or to meet social distancing guidelines, how to apply for unemployment, how to access food resources, and to do this they are using NSCAP's existing phone infrastructure system. She added that NSCAP is a great partner for this as they provide a great number of services themselves, and have resources on their website, which has been restructured to make information more accessible, and we are giving them the content to populate that website on a daily basis. We are working on finding resources to implement a community-based mutual first aid system similar to some done by surrounding communities, which is essentially like a google spreadsheet and people would self-identify that they have a need, and others would go on and see the need and reply that they can help with it; for instance one person can't get out to go shopping and another looks on the list and says I am going to the market and I can do your shopping. She explained that the city would not monitor nor would they be matching people with each other, but rather just setting up the spreadsheet to allow people to help teach other. There has been a lot of concern about people's adherence to social distancing

guidelines. As you know the Governor's directive states that there should not be any mass gatherings, but locally we are advising people to remain home in their own household groups, obviously except if you have to go grocery shopping or for people who are essential workers and need to report to work. They have been getting a lot of calls about kids gathering in the playgrounds and in response under the Mayor's directive, playgrounds have now been cordoned off with caution tape, and they have removed access to basketball hoops, so we are really trying to reinforce the message that social distancing is critically important.

Ms. Cameron reported that the state has released some emergency funding to local Boards of Health to help with the initial response, and told that about \$40,000 will be coming to Peabody, and most of that will go to support the extra staff to help in case tracking, to enhance our public health nursing staff for these tasks. Some funds will also go towards tools to help in that like extra phone lines and other smaller items, like thermometers for people to monitor their health at home, but most will be for public health nurse staffing costs.

Ms. Cameron also told that it is important to note that almost every department in the City has been really engaged in the pandemic response. The Mayor holds weekly meeting for all department heads, but even beyond that she has been in communication with most department heads on an almost daily basis, everyone is really stepping up to support other departments. For instance, the parks department has been monitoring gatherings in the parks, the public services department has been restructuring to make sure that staff do not share vehicles, the library is providing information on social service supports, the Council on Aging and the school department have partnered with Haven from Hunger and No Child Goes Hungry program to make sure that all residents can access healthy food, both the Council and the School Department are allowing people to drive by and pick up food at different sites, the veterans agent is actively working with veterans who are sheltering. A lot is going on every department and the city is fully engaged in the pandemic response.

Ms. Cameron concluded saying that that is an overview of what is happening locally, and asked to touch on some changes on the state level. She told that in regard to the Governor's directive on mass gatherings, he has clarified which are essential businesses that are allowed remain open, and the step that we took to order personal care services to close locally were all subsequently covered by the revised state orders. The biggest thing that happened outside of those things, there is now a recommendation that anyone travelling into Massachusetts from any international or domestic location should be self-quarantining for fourteen days upon entry into the state of Massachusetts, adding that it is not an enforcement issue but that is the guidance which we are sharing with people. She asked if there were any questions or any additional actions we should be doing. Mr. Horowitz thanked Ms. Cameron and said it's been a busy time, and hopes it doesn't continue for long, but said it looks like it will keep on for some time still. He asked if she would be able to bring in additional school nurses to help if she needed to. Ms. Cameron replied that she feels that we are well situated, that we have engaged all of them in the response, 12 school nurses, and another part time nurse who worked with us on vaccination clinics in the past, and the school nurse leader all working with the Public Health Nurse in the response. Mr. Horowitz asked if other communities are in a similar position with their response efforts. Ms. Cameron replied that we are all engaged in the same type of activities, but that we have been able to bring in additional nursing resources faster than others because of our structure, but everybody is really moving in the same direction, in terms of understanding that the most critical need right now is for additional public health nurses. Mr. Horowitz asked about the systems we have in place, if she believes that we are doing everything we can right now, are the systems we have in place satisfactory, or does she see any need to get more strict, or are we doing everything we can right now. Ms. Cameron replied that the main next step that could be considered would be to actually order a shelter in place order, which only one of the surrounding communities, Swampscott, has done. She told that she doesn't think that from a practical point of view it would change things that much, and thinks that it sends a stronger message, but at this time there has been no decision from the Mayor to move in that direction.

Mr. Horowitz thanked Ms. Cameron and asked if the Board members had any other questions or comments. Mr. Durkin replied that he does not, but said that this is quite an undertaking. Mr. Horowitz said that then they would move on to the next item on the agenda, an update from the Commonwealth of Mass, and added that something from the Governor came out yesterday, saying in general that only essential businesses could remain open but everyone else should work remotely. Ms. Cameron replied that that is correct, and that her department has been answering calls from businesses and their employees on that subject, some concerned that maybe their business stayed open when it shouldn't have. She told that they have a cease and desist order ready to use in case they need it, but so far

when they have called and explained the categories under essential services, and that they do not qualify, business owner have complied, but added that they may need to issue such orders at some point.

Mr. Horowitz reviewed the surveillance report and told that the Board wanted to continue to know what is going on in the city as far as other communicable diseases, and said nothing seems to be out of the ordinary. He noted that flu cases were at 108 year to date since January, but saw that it has been 416 since last year, and asked Ms. Robinson if that is normal for this time of year. She replied that it has been a bad year for flu, but added that cases have really dropped off, but offered that it may be that clinicians may not be testing for the flu as much now. Mr. Horowitz asked, with the program that she ran, it seemed that she did so much with flu clinics and such, yet we seem to have more cases. Ms. Robinson replied that this was the general trend throughout the country, that it was a really bad flu season. Mr. Horowitz asked if there were still flu shots available, and Ms. Robinson replied that additional doses are available in the refrigerator at the office, but said that her work now is offsite, and said that she has not had a request for a flu vaccine since February, so not a lot of demand. Mr. Horowitz added that social distancing may be helping with that as well.

Mr. Horowitz asked Ms. Cameron is they could now turn to item number five, the proposed moratorium on evictions. Ms. Cameron pulled the document with the proposed language onto the screen. Mr. Horowitz asked if the things shown on the screen are being recorded as well. She replied yes. Mr. Horowitz read the proposed moratorium establishing a moratorium on evictions, “WHEREAS, the Governor of the Commonwealth of Massachusetts has declared a State of Emergency on March 10, 2020 due to the virus that caused the Coronavirus 2019 (“COVID-19”) pandemic; WHEREAS, the Mayor of the City of Peabody has determined that the threat of COVID-19 poses a present, real and imminent danger to public health, safety, and general welfare of the people of Peabody and as such declared a State of Emergency in the City of Peabody on March 17, 2020; WHEREAS, the Board of Health of the City of Peabody has determined that the threat of COVID-19 poses a present, real and imminent danger to public health, safety, and general welfare of the people of Peabody and as such declared a State of Emergency in the City of Peabody on March 20, 2020; WHEREAS, COVID-19 is easily transmitted, especially in group settings, and it is essential that the spread of the virus be slowed to protect the ability of public and private health care providers to handle the influx of new patients and safeguard public health and safety; WHEREAS, the Governor of the Commonwealth of Massachusetts and the Mayor of Peabody have requested that residents stay home to prevent the spread of COVID-19, and the Governor has requested that the Department of Public Health issue a stay at home advisory; WHEREAS, evictions would make it impossible for Peabody residents to stay at home by rendering them homeless and would therefore further increase the risk to public health and safety posed by COVID-19; WHEREAS, the eviction of commercial tenants could decrease essential services necessary to meet the demands of this pandemic and would further reduce the ability of these businesses to generate revenue, further destabilizing the community; The Mayor and the Board of Health, pursuant to 310 CMR 11.05, 105 CMR 300.200 and all other authorizing statutes and regulations, acting by and through its agent authorized under MGL c. 111, §30, hereby order: 1. Notwithstanding MGL c. 186, MGL c. 239 or any general or special law to the contrary, no landlord and/or owner shall enforce an eviction upon a resident of Peabody, residential or commercial, during this public health crisis. 2. No landlord and/or owner shall access or seek to access a tenant’s dwelling space for purposes such as general inspections, displaying units to potential future tenants and other non-critical activities. A landlord may only access a tenant’s dwelling space to make repairs requested by the tenant, repairs required as a matter of law, or to respond to a life-threatening emergency. A tenant may refuse access of entry for non-critical purposes or when adequate social distancing arrangements (at a minimum of six feet) have not been made. 3. This Emergency Order shall remain in effect until notice is given, pursuant to the Board of Health's judgment, that the public health emergency no longer exists. 4. If any provision of this Order or the application thereof to any person or entity or circumstance is determined to be invalid by a court of competent jurisdiction, such judgment shall not affect or impair the validity of the other provisions of this Order or the application thereof to other persons, entities and circumstances.” He added that Sharon Cameron would sign as the acting agent of the Board of Health, and Mayor Bettencourt.

Mr. Horowitz asked to discuss the item in there that refers to the eviction of commercial residents, at the bottom of the first page. He read the reference that said, “ could decrease essential services necessary to meet the demands of this pandemic” but pondered that since there are so many businesses that are not essential, he wondered if those

evictions really would destabilize the community. He asked the other members how they feel about the commercial aspect, telling that he is on board with residential but not sure about commercial.

Ms. Cameron explained that this proposed ordinance was put forward by North Shore Community Action Programs, and said that she believes that they have one of their staff on the line, and asked if it would be ok for her to speak on this. Mr. Horowitz replied that she could. Ms. Cameron asked if Lori Fonseca of NSCAP was on the line. No response was given. Ms. Cameron asked if anyone from NSCAP was on the line. No one replied, and Ms. Cameron stated that apparently no one from NSCAP was on the call. Mr. Horowitz pondered that perhaps if they could limit it to essential businesses, and said that he didn't see that a non-essential business that was not paying their rent, perhaps could have been going on for some time before this, so he was not on board with that.. He added that he was willing to modify it to say that essential commercial residents, because if a random resident should be behind on rent, why should a landlord suffer. Mr. Durkin replied that he would be ok with amending that line to say businesses that are deemed essential according to the Governor's order. Dr. Mansberger added that she would also be fine with that change. Ms. Cameron said that she is comfortable with that as well. Mr. Horowitz added that should there be a change in the Governor's order, or something in the City of Peabody, we can come back and revisit this. He then pondered if perhaps with any eviction, one would have to have a moving company come out in some cases, but added that he would like to make the change as it should not be so broad. He added that he likes Mr. Durkin's wording, "WHEREAS, the eviction of commercial residents deemed essential in the Governor's order could decrease essential services." He asked to add that phrase, and all agreed. He then said we need to look at the second page item that references to this subject, and said we need to revise to say, "no landlord and/or owner shall enforce an eviction upon a resident of Peabody, residential or commercial as deemed essential in the Governor's order, during this public health crisis." He asked if the Mayor has approved the current language and if he would have to be consulted about this change, adding that a vote today of the Board to approve this would be dependent upon the Mayor's approval. Ms. Cameron replied that the Mayor had reviewed the first draft of this and said that he was on board and added that she would of course run this changed language by him for approval.

Ms. Cameron reported that an elected official was on the line with this meeting, and asked if they could see if he has any comment on this. Mr. Horowitz invited that the elected official speak on this subject, reminding to state his name and ward. Councilor Pete McGinn, Ward 2 Councilor, stated that he believes that the changes suggested are reasonable, adding that he was not on the call specifically in regard to that item but just to observe the meeting overall, and said that he has no additional comments. Mr. Horowitz thanked Councilor McGinn. Mr. Durkin stated that he doesn't think this change is contrary to what it read anyway, because it said essential in the original language, so this just goes toward the issue of essential services. Dr. Mansberger agrees and said that she is fine with the revised language as well. Mr. Horowitz then put forth an official motion to approve the emergency order establishing a moratorium on eviction enforcement with the change from commercial to essential commercial businesses, subject to the Mayor's approval. Dr. Mansberger so moved, and Mr. Durkin seconded that, with Mr. Horowitz stating his approval makes it unanimous.

He then told that they seem to have addressed all of the items on the agenda, and asked Ms. Cameron if there were any other emergency items that they should discuss. Ms. Cameron replied that while not emergency items, she had thought of two additional items that she had wanted to mention. She told that North Shore Community Health Center had approached the City at the onset of the pandemic asking to use Peabody High School's Student Health Center to be used as a well clinic, because they are trying to separate sick patients from well patients, as they wanted to reserve their Foster Street location for sick patients, but have subsequently moved to a model where they are providing mostly telehealth, and are consolidating their onsite clinical services into one place, which is at their Salem location, so the Peabody High location will not be used for those services. She told that services to Peabody residents will continue, through the use of telehealth services and in person appointments in Salem when needed. In an effort to offset the change in services, they have expanded their hours and added Sunday hours and are really trying to make themselves as accessible as possible, adding that she is in support of their move in that direction and believes that it was the appropriate one to make. She also told that, as they had received a comprehensive school health services grant to expand behavioral health services to all of our schools, those services are continuing even though school is not in session, again through a telehealth system where the counseling services are being provided remotely for all of the students who were already receiving services. Lastly, she told the City is planning for and preparing for the possibility that some of the homeless in our city may become sick and there may be a need for

those folks to be in isolation or in quarantine, and our Fire Chief, Chief Daly, is the lead on that initiative in terms of dealing with the homeless, and is working with MEMA and with our neighboring communities to put together a plan making sure that we are providing appropriate support and care in the event that any of our homeless individuals are identified as positive.

Mr. Horowitz suggested meeting remotely the following week, Tuesday at 4:30 would work for him, and all agreed that that time would work. He thanked everyone and adjourned.

Next Meeting: , April 7, 2020 at 4:30 p.m. Meeting Adjourned: 5:26 p.m.