TOWN OF BEDFORD

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Bedford Public Schools
Update on COVID-19

May 20, 2020

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The Bedford COVID-19 Task Force met May 20, 2020 to review the latest guidance from the Department of Public Health (DPH), the office of Governor Charlie Baker, and Town Legal Counsel.

The COVID-19 Task Force is comprised of the following Town officials:

Sarah Stanton, Town Manager
Jon Sills, Superintendent of Schools
Heidi Porter, Director of Health and Human Services
Robert Bongiorno, Police Chief
David Grunes, Fire Chief
Taissir Alani, Facilities Director

Current Case Report

As of today, May 20, 2020, there have been a total of one eighty-five (185) positive cases of COVID-19 reported to the Town of Bedford Board of Health by the Massachusetts Department of Public Health (MA DPH) and thirty-seven (37) deaths of Bedford residents attributed to COVID-19. The total case number includes residents of the Town of Bedford, including but not limited to those in: single-family homes, apartments, the VA campus, Hanscom Air Force Base, special needs group homes and any and all other larger assisted living/care facilities in Bedford as reported to us by the MA DPH.

As you may be aware, long term care facilities serving the elderly and congregate care facilities, house susceptible populations with underlying conditions who are particularly vulnerable to COVID-19. Increased testing occurs at these facilities and results in more positive cases being identified. As such, cities and towns with these facilities, like Bedford, experience elevated positive case counts and, unfortunately, deaths due to the vulnerability to COVID-19 of the populations within those facilities.

Fifty (50) of the total Bedford cases have already recovered and have come off of isolation and there may other Bedford residents who would be considered persons under investigation in that they are symptomatic, have undergone testing but have not yet received results. There are other individuals impacted by COVID-19 in the

community that have not sought medical attention, and/or have not been tested and are isolating at home regardless. Those individuals do not appear on the surveillance reports the Town receives from the MA DPH.

The Board of Health continues to do the appropriate follow-up and outreach to those residents and close contacts known to us and the VA is conducting follow-up and contact tracing of the Veteran's under their care. Many of the identified close contacts of some of the Bedford cases never exhibited symptoms, have completed their required quarantine period and have been released from quarantine by the Board of Health.

Please note, in part to alleviate the community concern, the VA does do a daily report of their numbers, which includes inpatients, outpatients and staff, many of whom do not call Bedford home. The information can be found here: https://www.accesstocare.va.gov/Healthcare/COVID19NationalSummary

Important Updates

Phase I Reopening

On Monday, the Baker-Polito Administration released a data-driven approach to reopening the economy used a framework that considered the public health risk and the economic benefit of reopening each of the closed sectors of our economy. The framework outlined 4 Phases for reopening and included guidelines for Phase 1 Reopening. Since receipt of these guidelines, Town Staff have been reaching out to permitees and permit applicants in those impacted industries to ensure compliance and answer any questions. Businesses/entities allowed to resume operation on May 18th include Construction, Manufacturing and Houses of Worship.

On May 25th the following entities will be permitted to resume operation: laboratories and life science facilities, offices (25% capacity only), retail (curb-side only), car washes (exterior and self-service only, hair salons and barber shops by appointment only, pet grooming by appointment (with curbside drop-off and pick-up) and athletic courts (non-contact sports with no shared equipment). All operating businesses must comply with general mandatory workplace safety standards, as well as sector-specific workplace standards and protocols and/or applicable guidelines.

Who's at risk for COVID-19?

Based on currently available information and clinical expertise, **older adults and people of any age who have serious underlying medical conditions** appear to be at higher risk for severe illness from COVID-19.

Based on what we know now, those at high-risk for severe illness from COVID-19 are:

- People 65 years and older
- People who live in a nursing home or long-term care facility
- People of all ages with underlying medical conditions, particularly if not well controlled, including:
    - People with chronic lung disease or moderate to severe asthma
    - People who have serious heart conditions
    - People who are immunocompromised. Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
    - People with severe obesity (body mass index [BMI] of 40 or higher)
    - People with diabetes
    - People with chronic kidney disease undergoing dialysis
    - People with liver disease

If you're in one of these vulnerable populations, regardless of allowable access to public areas and essential services, it is strongly advised that you:

- Stay home, if possible;
- Wash your hands often;
- Keep space between yourself and others (stay 6 feet away, which is about two arm lengths); and,
- Wear a mask when you cannot safely socially distance.

PCR testing indicated for all symptomatic individuals and close contacts

At this time, all symptomatic individuals in Massachusetts, even those with mild symptoms, and anyone who is a close contact of a COVID-19 positive individual should be tested for COVID-19 by PCR or other molecular test from a nasopharyngeal, nasal, or oral swab or a sputum sample. Serologic (antibody) testing is not appropriate for this use.

Symptoms of COVID-19 include:

- Fever, chills or shaking chills
- Signs of a lower respiratory illness (e.g., cough, shortness of breath, lowered oxygen saturation)
- Fatigue, sore throat, headache, body aches/myalgia, or new loss of sense of taste or smell
- Other less common symptoms can include gastrointestinal symptoms (e.g. nausea, vomiting, diarrhea), rash, and inflammatory conditions such as "COVID toes"
- In elderly, chronically ill, or debilitated individuals such as residents of a long-term care facility, symptoms of COVID-19 may be subtle such as alterations in mental status or in blood glucose control

Contact your health care provider if you exhibit any of the above mentioned symptoms and to discuss the need for testing. Close contacts of confirmed cases are the people most likely to become infected themselves. Close contacts, regardless of symptoms associated with COVID-19, should be tested as soon as possible after they are notified of their exposure to COVID-19.

You can use the following link, provided by the MA Department of Public Health, to find a convenient testing site https://www.mass.gov/info-details/covid-19-testing#testing-sites.

Serology (Antibody) Testing

Commercially manufactured antibody tests are available through many healthcare providers and commercial laboratories and check for SARS-CoV-2 (COVID-19) antibodies. Although governmental regulatory agencies are currently collaborating to assess the performance of commercial antibody tests, the majority of tests currently available have not received Food and Drug Administration Emergency Use Authorization.

Antibody tests may demonstrate whether an individual was previously infected with SARS-CoV-2 and antibody testing is important to help understand how many people in a population have been exposed to the virus. However, antibody tests are not indicated for diagnostic purposes. There is a large amount of uncertainty about the quality of any individual serologic test type and a lot is still unknown about the timing of COVID antibody development or duration. In order to be appropriately interpreted, more data are needed on the performance characteristics of these tests, the immune response to COVID-19, the timing and duration of antibody response, and how antibodies correlate to protective immunity.

Please be advised, if you acquire an antibody test, it is recommended that your healthcare provider also collect a nasopharyngeal, nasal or oral swab or sputum sample for a molecular diagnostic (PCR) test for COVID-19 at the same time. If you test positive for antibodies you will be assumed to be positive for COVID-19, unless you have negative PCR test, and will be required to enter into isolation as advised by the Board of Health.