

TO: Louis A. DePasquale, City Manager

FROM: Claude A. Jacob, Chief Public Health Officer, Cambridge Public Health Department

DATE: March 12, 2020

SUBJECT: Response to Policy Order #2, adopted 3/2/20

Excerpt of Order: That the City Manager be and hereby is requested to consult with the Executive Director of the Public Health Department and other relevant City personnel to determine what measures the City must take to prevent an outbreak of the coronavirus, what measures must be initiated to minimize the risk to our community if the pandemic spreads to Massachusetts, and to report back to the City Council on this matter no later

than the March 16, 2020 meeting of the City Council.

OVERVIEW

The City Manager and his staff, Mayor Siddiqui and multiple city departments are preparing for potential community spread of Coronavirus Disease 2019 (COVID-19) in Cambridge.

COVID-19 is a respiratory illness characterized by fever, cough, and shortness of breath. According to the CDC, reported illnesses have ranged from very mild (including some with no reported symptoms) to severe, including illness resulting in death. While information so far suggests that most COVID-19 illnesses are mild, a report out of China suggests serious illness occurs in about 16% of cases.

The most susceptible populations are older people (age 60+) and people of all ages with severe underlying health conditions, such as heart disease, lung disease and diabetes. These groups seem to be at higher risk of developing serious complications from COVID-19.

The novel coronavirus (SARS CoV-2), first reported in China in late December, has spread to 125 countries, as of March 11. In early March, new coronavirus began spreading more rapidly outside China than within. As of the morning of March 12, there were over 1,200 positive cases (presumptive and confirmed) in the U.S., according to the *New York Times* database, which we believe is the most up-to-date, reliable source for U.S. case counts.

More cases of COVID-19 are likely to be identified in Massachusetts and other states in the coming days. According to the Centers for Disease Control and Prevention (CDC), it is likely that sustained person-to-person spread will continue to occur in the U.S., and that at some point, widespread transmission of COVID-19 in the United States will occur.

On February 28, the Massachusetts State Public Health Laboratory received approval to begin testing Massachusetts patients for COVID-19, in accordance with guidance from the CDC. As testing ramps up in the Commonwealth, it is expected that the number of presumptive positive cases will continue to rise.

As of March 11, there were 95 positive cases (89 presumptive positive; 6 CDC confirmed) of COVID-19 among Massachusetts residents. Of these cases, 77 were linked to a company meeting of Biogen





in Boston late February. For the latest data, see the <u>Massachusetts Department of Public Health</u> dashboard.

Significant Events

- On March 11, the World Health Organization characterized COVID-19 as a pandemic.
- On March 10, Governor Baker declared a state of emergency in Massachusetts and released enhanced guidance for the executive branch of state government. This guidance includes cancellation of work-related foreign or domestic travel, discouraging personal international travel, and cancellation of large-scale government meetings and conferences. This impacts approximately 42,000 state employees.

PLANNING FOR COMMUNITY SPREAD

The Cambridge Public Health Department (CPHD) is paying close attention to the situation locally, nationally, and internationally. Staff are participating in conference calls with the CDC and the Massachusetts Department of Public Health, and receiving regular email updates from both agencies.

The Cambridge Public Health Department is following the CDC's *Community Mitigation Guidelines to Prevent Pandemic Influenza--United States, 2017*, which provides a decision-making matrix for U.S. health departments on using nonpharmaceutical interventions (non-vaccine preventive actions) to slow the spread of viruses, including the new coronavirus.

According to this guidance, the goals of implementing nonpharmaceutical interventions (NPIs) early in a significant communicable disease outbreak include:

- Slowing the acceleration of the number of cases in a community.
- Reducing the peak number of cases during the outbreak and related health care demands on hospitals and infrastructure
- Decreasing overall cases and health effects.

When a communicable disease outbreak begins, state and local public health authorities need to:

- Decide on an appropriate set of NPIs for implementation.
- Reinforce to the community the importance of personal protective measures (e.g., voluntary home isolation of infected individuals, staying home when ill, frequent handwashing, and covering coughs and sneezes).
- Reinforce environmental cleaning measures (e.g., routine cleaning and disinfecting of frequently touched surfaces), which are recommended at all times for prevention of respiratory illnesses.
- Reinforce personal protective measures reserved for major outbreaks, such as:
 - Voluntary home quarantine of exposed household members (e.g., staying home when a household member is ill).
 - Use of face masks by ill persons.

A more difficult decision is how and when to implement community-level NPIs that might be warranted but are more disruptive, such as:

- Temporary school closures and dismissals.
- Social distancing in workplaces and the community.
- Cancellation of mass gatherings.
- Cancellation of smaller workplace and community gatherings.

CAMBRIDGE RESPONSE AND ACTIONS

City officials including the City Manager and his staff, Mayor Siddiqui,

..public health, fire, police, emergency communications, schools, and other city departments have been working with hospital, ambulance, and other community partners, as well as state and federal agencies, to prepare for and respond to potential community spread of COVID-19 in Cambridge.

Local Actions, as of March 12:

Quarantine of Potentially Exposed Individuals / Isolation of Infected Individuals

CPHD public health nurses have considerable experience and expertise in monitoring individuals exposed to or infected with communicable disease and tracing contacts.

From Feb. 2 through March 3, the public health nursing team, in partnership with the state health department, monitored or followed up with CDC-identified Cambridge residents people who had recently traveled to mainland China. CPHD's public health nursing team has been monitoring identified individuals seven days a week.

On March 4, the Centers for Disease Control and Prevention (CDC) updated its guidance and recommended procedures for travelers returning from "high risk" or "Level 3" countries: Travelers returning from China or Iran (level 3) must self-quarantine ("stay home") for 14 days upon return to the U.S. and be monitored by their local health department.

From Feb. 2 through March 11, CPHD public health nurses monitored or followed up with a total of 47 Cambridge residents who (a) had recently traveled from mainland China or Iran, or were connected to the Biogen meeting in Boston.

The Cambridge Public Health Department is currently (as of March 11) monitoring 17 Cambridge residents, the great majority of whom are connected to the Biogen meeting in Boston.

Note: The number of people being monitored by CPHD nurses fluctuates on a daily basis as (a) monitored individuals complete their 14-day self-quarantine period and (b) the state health department identifies new individuals for local health department monitoring.

Preparedness Meetings: Local and State

The Cambridge Public Health Department is communicating on a daily basis with the City Manager's Office and the Cambridge Public Schools (CPS), and is in regular communication with many other city departments and city staff. In addition, CPHD and other partners have been in communication with Harvard and MIT about their COVID-19 preparedness plans.

Recent Preparedness Meetings

• On March 4, Cambridge Public Health Department's Chief Public Health Officer Claude Jacob met with Governor Baker, Health and Human Services Secretary Marylou Sudders, Massachusetts Department of Public Health Commissioner Monica Bharel, and other local health department leaders. The meeting focused on local health department preparedness and outreach, and preceded a press conference in which all participated.

- On March 5, representatives from the city's fire, police, health, and emergency communications departments; Mount Auburn Hospital, Cambridge Health Alliance, Harvard, MIT, and two ambulance companies met to discuss COVID-19 updates and strategies.
- On March 6, the City Manager DePasquale and Mayor Siddiqui held a briefing meeting with designated departments heads for an update about the City's COVID-19 response efforts. The City Manager's office is developing a communications plan to provide weekly updates to the City Council and City employees to share timely information regarding this situation as it continues to evolve. The City Manager's Office will also develop a coordinated communication strategy with CPHD to provide information to the broader community. The Cambridge Public Schools, in coordination with CPHD, has been communicating with the school community on issues and concerns directly related to the schools.
- On March 7, the City Manager held a briefing meeting with designated departments heads for an update about the City's COVID-19 response efforts. The discussion focused on the ongoing case investigation pertaining to the Biogen meeting in Boston and the coordination with state authorities.
- On March 10, the City Manager facilitated a huddle with the CPS leadership, including the School Superintendent, Deputy Superintendent, and Chief Operating Officer, to discuss potential scenarios and plans to support students, teachers, and parents in the event of school cancellations and the curtailing of activities that could impact the school community.

Upcoming Meetings

- On March 12, the City Manager and Mayor is participating in a Greater Boston region emergency preparedness meeting regarding COVID-19. This is an opportunity to hear from a panel of experts in public health and epidemiology, and to discuss regional partnerships for handling this epidemic.
- On March 12, there will be a meeting of all city department heads with the City Manager to further discuss city preparedness and outreach.
- On March 12, there will be a meeting of public health and safety stakeholders on preparedness and outreach, a follow up to the meeting held on March 5.

CPHD Information Sharing, Guidance, and Technical Assistance

The Cambridge Public Health Department is sharing information as it becomes available, with Cambridge first responders, law enforcement, public schools, human services, and other city departments.

The health department is also offering guidance and support to community partners. CPHD has responded to numerous requests from local businesses, nonprofits, and other groups on preparing for community spread of COVID-19.

Specific actions and communications include:

- **Sharing Daily Information with the Public:** On February 27, CPHD launched a COVID-19 webpage. On March 7, the department began providing daily "Situation Reports" to the public, which are posted at the top of the web page. The page is also a repository of all health department communications to the public.
 - http://cambridgepublichealth.org/services/diseases-conditions/coronavirus.php

- **Responding to Community Concerns:** On March 11, CPHD posted on its COVID-19 webpage:
 - A general COVID-19 email address (<u>covid19inquiries@challiance.org</u>) where residents and employers can make inquiries regarding COVID-19 that will be triaged in a timely manner by CPHD staff.
 - A COVID-19 phone information line for queries and requests from residents and employers: 617-665-3648. The line is monitored daily by the department.
 - CPHD public health nurses will continue to provide guidance to individuals on how to safely and effectively self-quarantine or self-isolate. Residents seeking guidance should email: covid19inquiries@challiance.org.
- **Daily/Weekly Guidance to the Public School Community:** CPHD and the Superintendent's Office are providing guidance and weekly updates to the CPS community.
- Sharing Information and Guidance with Specific Groups:
 - City Employers: On March 5, CPHD wrote and disseminated a letter to city employers updating them on current CDC guidance regarding travelers returning from "high-level" or "Level 3" countries. This update included guidance on everyday health practices, routine environmental cleaning, and procedures for employees, clients, or students who are sick. The letter has been distributed to local business associations. The letter is posted on CPHD's website.
 - Best Practices for Cleaning and Disinfecting: On March 11, CPHD's Director of Environmental Health and School Nurse Manager visited Cambridge Public Schools and the Department of Public Works to discuss surface cleaning with custodians and other staff.
 - Long-Term Care and Assisted Living Facilities: On March 12, CPHD and the Department of Human Service Programs' Council on Aging co-authored and disseminated a letter providing guidance to managers of Cambridge long-term care and assisted living facilities. CPHD will maintain frequent contact with the Department of Human Service Programs, long-term care facilities, and senior housing complex to help these organizations ensure the safety of their clients, residents, and tenants.
 - Ongoing Communication Planning: CPHD and the City Manager's Office will be developing an Internal COVID-19 Communications Plan. This includes updates on CPHD activities and messaging, providing flyers regarding hand washing for posting in city buildings, and other communiqués as needed.

Upcoming

- The City Manager and Mayor will establish an ad hoc advisory working group that will
 assist with the city's planning and response efforts. This advisory will be comprised of
 subject matter experts, residents, healthcare providers and city staff to support the ongoing
 work of the Cambridge Public Health Department. The call for volunteers will be issued by
 March 13
- CPHD continues to coordinate, working with the City Manager, with representatives of local, state and federal agencies and organizations, including the State and Federal Government Offices, as well as with experts from Harvard University, Mass Department of Public Health, Consortium of Boston Teaching Hospitals, Massachusetts Hospital Association, and Massachusetts Emergency Management Agency.
- CPHD will release guidance on best practices for **cleaning and disinfecting** workplaces during the week of March 9–13.

- CPHD and city partners, in consultation with state officials, will be offering guidance and recommendations for **cancellation of large events** that are scheduled to take place over the next six months.
- CPHD staff are also working on increasing the **use of social media** to inform residents and area businesses as this situation remains fairly fluid.

ONGOING CONCERNS

As this situation continues to rapidly evolve, CPHD has identified some near-term concerns and is reaching out to state partners for support. Significant concerns, as of March 12, include:

- Undertesting of Massachusetts residents, including Cambridge residents, who may have become infected with COVID-19 from unknown sources. Local health departments were notified on March 11 that the state health department is actively working to address this situation and additional testing sites should come online soon.
- Lack of personal protective equipment, including face masks, hand sanitizer, alcohol-based wipes, and other supplies. The state is currently working to address this issue.
- Risk to older adults (over age 60+) and people with underlying health conditions and how best to prepare these groups for community spread of COVID-19.
- Risk to members of the above two groups who live in congregate settings, such as long-term care and assisted living facilities, and how best to prepare management, families, and residents.
- Concern that while some Cambridge residents and families may be receiving good
 information from many sources, other residents may be receiving limited information or
 may not understand the information they are receiving due to language barriers or healthrelated cognitive issues.