



CITY OF SOMERVILLE, MASSACHUSETTS CLERK OF COMMITTEES

March 24, 2020

REPORT OF THE PUBLIC HEALTH AND PUBLIC SAFETY COMMITTEE

Attendee Name	Title	Status	Arrived
Lance L. Davis	Chair	Present	
Jesse Clingan	Vice Chair	Present	
Matthew McLaughlin	Ward One City Councilor	Present	
Jefferson Thomas ("J.T.") Scott	Ward Two City Councilor	Present	
Ben Ewen-Campen	Ward Three City Councilor	Present	
Mark Niedergang	Ward Five City Councilor	Present	
Katjana Ballantyne	Ward Seven City Councilor	Present	
Stephanie Hirsch	City Councilor At Large	Present	
Mary Jo Rossetti	City Councilor at Large	Present	
William A. White Jr.	City Councilor At Large	Present	
Wilfred N. Mbah	City Councilor at Large	Present	

The meeting was held via GoToWebinar, and was called to order by Chair Davis at 6:10pm and adjourned at 8:47pm.

Others present: Mayor Curtatone; Annie Connor - Mayor's Office; Khushbu Webber - Mayor's Office; Doug Kress - HHS; Mary Cassesso - Cambridge Health Alliance; Christian Lanphere - Cambridge Health Alliance; Mauricio Santillana - Harvard University Machine Intelligence Lab; Samuel Scarpino - Northeastern University Emergent Epidemics Lab

The Chair introduced the new meeting format and thanked everyone for their patience. He added that the Committee intends to meet weekly for the duration of the crisis. He encouraged residents to utilize <https://www.somervillema.gov/coronavirus> and to reach out to their Councilors if they have questions.

Approval of the January 29, 2020 Minutes

RESULT:	ACCEPTED
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Approval of the February 11, 2020 Minutes

RESULT:	ACCEPTED
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209635: Conveying a request from the Cambridge Health Alliance to appear before the Committee on Public Health and Public Safety to discuss the Healthy Somerville Initiatives and the conversion of the Somerville Hospital's emergency room to urgent care.

Chair Davis introduced Ms. Cassesso, the President of the Cambridge Health Association (CHA) Foundation and Chief Community Officer, and Mr. Lanphere, Director of Safety and Emergency Management at CHA, which manages Somerville Hospital. The Chair asked if, as part of the discussion, the representatives would discuss CHA's response to the COVID-19 crisis. Mr. Lanphere shared that, as a teaching hospital, CHA staff meets regularly with a consortium of area hospitals and the communication and coordination is open and constant. The Chief of Infectious Disease, along with Mr. Lanphere, have been leading efforts to prepare since January. The Senior Leadership Team has identified two crises: the pandemic, and the lack of personal protective equipment (PPE). This community has been incredible with donations. The testing kits remain a challenge. The system is becoming an ICU level system, though some medical units remain for everyday needs. There is exploration of alternate care sites to prepare for the next surge, as well as transition of staff from other specialties to work under the intensivists. In an attempt to reduce waste of PPE on individuals who may not be infected, there is an outdoor tent setup to test patients (who have qualified for testing) in their vehicles, to minimize contact. Approximately 450 tests have been completed in the week since the process began.

Mayor Curtatone noted that there are discussions about getting direction from DPH and MEMA about what could be catalogued and mobilized. Mr. Lanphere added that a concern that needs to be addressed is finding a place for the homeless to go to quarantine or isolate them as needed. They are looking for alternate care sites for individuals who do not require hospitalization but cannot go home. There are also efforts to expand testing on site. Councilor Scott asked for clarification around what individuals should do at home before seeking testing and Mr. Lanphere shared that any life threatening issues or anyone already immunocompromised should come to the emergency department. Other people should manage mild symptoms at home if they are able and be sure to keep themselves hydrated and isolated. Councilor Scott asked further about ventilators, and CHA proactively rented some, as well as cancelling elective surgeries to keep them available. The critical care staff to manage people on those ventilators is also a necessary component, and CHA has tried to secure enough ventilators to complement the staff to manage them (the target recommendation is one nurse to two patients; some hospitals in New York currently have one nurse to ten patients).

Councilor Ballantyne wondered if a humidifier would be useful, and the general answer is no, as this is a droplet-transmitted disease and moisture would help keep the virus alive. Mr. Lanphere clarified that most household cleaning products, even soap and water, will kill this virus. And maintaining social distancing is the best course of action, along with cleaning high-touch surfaces and washing hands.

Ms. Cassesso shared as well that after an extensive community process with an advisory task force, and expansion of care in several locations, the decision was made to convert Somerville Hospital's emergency room to urgent care. The plan is to open urgent care on April 30 and there has been an emphasis on signage to ensure that patients are directed to alternate facilities once the Hospital is no longer 24 hours.

RESULT:	WORK COMPLETED
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209798: That the Director of Health and Human Services appear before this Council with an update on measures to reduce the spread of the coronavirus and to support anyone who may become infected.

Mayor Curtatone thanked everyone for participating in this historic event and shared an update about how the municipality is addressing this crisis. He thanked the City Council and School Committee for helping support the City's operations. He cautioned that things will get worse before they get

better, but resources are available through 311 and the City's website. He has been sharing information with and learning from many other municipalities and experts. We must take this seriously and advocate for a greater regional approach. There will be extreme disruptions, and everyone must be prepared to do their part.

Mayor Curtatone introduced Dr. Scarpino, the director of the Emergent Epidemics Lab at Northeastern University, who has 10+ years of experience translating research into public health decision support and data science tools and Dr. Santillana, the director of the Machine Intelligence Lab at Harvard University, who has expertise in mapping epidemic outbreaks in multiple locations worldwide by leveraging information from big data sets. Dr. Santillana has advised the CDC, Africa CDC, and the White House on the development of population-wide disease forecasting tools.

Dr. Santillana shared a presentation with details about flattening the curve and noted that we are entering a new phase of the pandemic, moving away from containment and focusing on mitigation. He detailed comparative situations in various countries and added that in order to transition back to "business as usual", we need to track contact with individuals who are sick, as well as ramp up testing. There is evidence to support that many of the infections have been undetected, rather than increasing dramatically over the last several days. Dr. Scarpino thanked Somerville for leading the way in taking this seriously and added that measures to prevent the re-introduction of cases that are suggested include testing, notification, and isolation of sick individuals. Because of the time it takes from symptom-onset to hospitalization means that the peak of both hospitalizations and mortality has not yet occurred and we need to continue to mobilize around both testing and providing personal protective equipment (PPE).

The Mayor added that a tsunami is coming and Dr. Scarpino confirmed that the cases are doubling every 2.5 days and Dr. Santillana added that there will likely be increases for the next three weeks. Councilor McLaughlin asked how the Council or others can assist, if they do not have supplies available. Mr. Lanphere, EMD CHA noted that the situation around PPE is dire. The N95 masks were depleted but there is a stockpile; surgical masks and goggles are the primary need at this point to protect staff. Ms. Cassesso added that they are asking for donations through neighborhood groups. The pattern and directions are linked online, or fabric can be donated. Please visit the following website for more information:

https://www.challiance.org/about/newsroom/personal_protective_equipment_ppe_donations_1179

Councilor Scott commented that the number of hospitalizations is an important indicator and wondered about the number in Somerville and the trend in the area. Dr. Santillana responded that the lag time is about two weeks, so those entering the hospital now were infected about two weeks ago. But hospitalizations are not reported at the City level. Councilor Ballantyne added that according to a press conference this afternoon, Ms. Sudders (Secretary of HHS) noted that City-level information is not being shared because of the stigma attached to people who have contracted COVID-19. Councilor White wondered whether joggers pose a risk and Dr. Santillana noted that per a call with the CDC, asymptomatic transmission is a concern, so the 6 foot distance should still be maintained even if outside. The Mayor will add that to the general guidelines. Councilor Niedergang suggested opening some streets to pedestrians (outside of residents of the street), as the Community Path is already crowded and there are not many places for people to run.

Councilor Ewen-Campen asked about the lag time between when shutdown measures are instituted and when we will see a peak. Dr. Santillana emphasized that in an ideal world, if everyone could stay indoors for two weeks, transmission of the virus could be stopped. The level of susceptibility is still high, and new hot spots can be easily generated. In a more realistic scenario, the current interventions need to be in place for 4-6 weeks while still increasing testing and contact tracing. The peak of

infections is estimated at 3-4 weeks from when measures are implemented, and the peak on the hospital system is an additional 1-2 weeks from that time. Councilor Hirsch wondered if the lack of regional response and porous borders in the area affect this cycle. Dr. Scarpino noted that the imported cases are a small part of the outbreak. The local cases swamp the outside cases. Once the first part of the curve is past, preventing re-introduction is critical. Councilor Mbah asked further about timelines and severity and Dr. Scarpino clarified that it generally takes between 5 days and 2 weeks to show symptoms, but it is important to remember that a person can infect others even before they have symptoms. Mr. Lanphere also shared that on an average day, the hospital system in the state is already at approximately 97% capacity. The impact of social distancing has helped decrease this in the short term. The capacity of ICU level care is short, and preventing the decompensation from occurring in order to limit the need for this care is important.

Councilor Rossetti asked about whether South Korea or China have changed the criteria relative to contact tracing and forcing those individuals to isolate. Dr. Scarpino noted that the case numbers are beyond what can be addressed with contact tracing at this point. An important mechanism has been using mobile and web-based tools for establishing these contacts.

Councilor Hirsch asked which City functions remain in focus, including street sweeping and clearing bike lanes. Ms. Webber announced that street sweeping will be delayed until at least April 15. Ms. Connor noted that essential functions currently are listed on the City's website and is constantly updated, but payroll, paying bills, mail collection, and public works emergency issues are still ongoing. Mr. Kress included information about protecting front line workers, in particular that the City is trying to identify locations for housing for employees to stay at to remain safe. He emphasized that social distancing and hand washing are imperative. Councilor Hirsch asked for clarification around trash collection, and Ms. Connor expressed that it likely remains under the authority of the contractor who provides the service, but will follow up with the Law Department to confirm.

Councilor Rossetti wondered about an extension of the closures and Ms. Connor noted that they would likely remain closed beyond the initial two weeks, but an exact date remains unknown. Ms. Webber added that the Mayor would remain involved with regional efforts. Councilor Ballantyne asked about a chart of staff contacts, and Ms. Connor indicated that those individuals are the leads in the incident command staff for the crisis, and not a comprehensive list of working staff. Councilor Scott asked whether there is a central repository for giving and/or receiving assistance in the City. Mr. Kress shared that there is a volunteer coordinator working to connect abilities with needs, but there is a process to conduct CORI checks and ensure that there are long-term commitments made, as well as continued adherence to social distancing.

RESULT:	KEPT IN COMMITTEE
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209807: That the Administration mandate that all public gathering places, including institutions, have hand sanitizers available at entrances to limit the spread of coronavirus.

Councilor Mbah noted that since this is a time when not many people are gathering, this could be a good time to expand the availability of sanitizing stations. Ms. Webber will follow-up about a longer-term plan. Mr. Kress also noted that many buildings also have hand sanitizer available, but it has become a widely sought item and can be difficult to procure. Posters encouraging social distancing have also been distributed.

RESULT:	WORK COMPLETED
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209921: Submitting a compilation of residents' questions regarding coronavirus.

RESULT:	WORK COMPLETED
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