

Follow-up for Positive COVID-19 Cases and their Close Contacts

Tools for LBOHs

January 18, 2022

Hillary Johnson, MHS, Infectious Disease Epidemiologist
Scott Troppy, MPH, PMP, CIC, Surveillance Epidemiologist
Bureau of Infectious Disease and Laboratory Sciences
MA Department of Public Health



Topics Today

- **MAVEN Updates**
 - Reports
 - Workflows
 - COVID Wizard
 - Check your Routine and Pending workflows
- **CDC & MA Updates to Isolation & Quarantine**
 - General Guidelines
 - HCW Guidelines
 - Testing FAQs
- **Your Questions**

When no one told you life was gonna be this way.

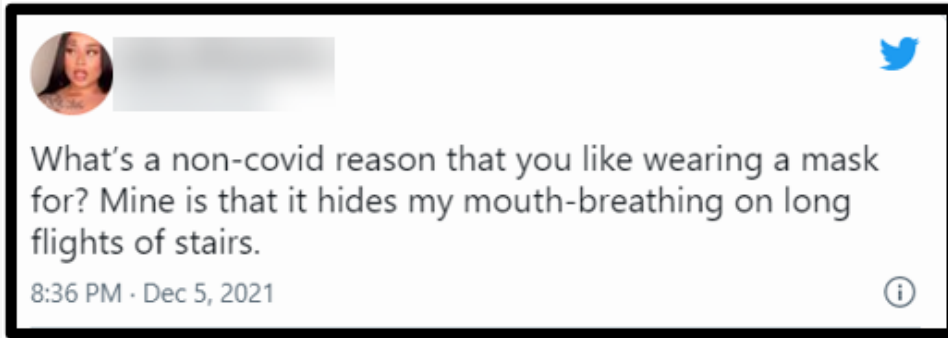
Your jobs remote, you're broke, you're hiding from a plague.

It's like you're always stuck in quarantine. You might be there a day, a week, a month or even a year.



MDPH Conducts Weekly COVID-19 Case Investigation Webinars

- **MDPH presents weekly on Tuesdays 11:00-12:15 p.m.**



- Updates in Guidance
- Troubleshooting MAVEN
- How to conduct case investigations and contact tracing in different settings.
- Target Audience: Health Agents, Contact Tracers, and Public Health Nurses doing this work.

MAVEN Help has Guidance Documents and
Previous Webinars:
[http://www.maven-
help.maventrainingsite.com/toc.html](http://www.maven-help.maventrainingsite.com/toc.html)

New
URL!



Webinars: Tuesdays @ 11am

MDPH Epi Program: 617-983-6800

MDPH MAVEN Help Desk: MavenHelp@mass.gov

MAVEN Onboarding: MavenTraining@mass.gov

MDPH MAVEN Help Desk: 617-983-6801

MDPH MAVEN Fax: 617-983-6813

DESE Rapid Response Help Center: (781) 338-3500

COVID-19 Case Investigations

Tools for LBOHs

January 18, 2022

Hillary Johnson, MHS, Infectious Disease Epidemiologist
Scott Troppy, MPH, PMP, CIC, Surveillance Epidemiologist
Bureau of Infectious Disease and Laboratory Sciences
MA Department of Public Health



Updates for today, Tuesday, 1/18/2022

- COVID Reports – three new reports to assist with prioritization
 - **New:** Pediatric <5 years of age
 - **New:** Pediatric Report - < 18 years of age
 - **New:** Adult Report (> or = to 18 years of age)
 - **Existing Report:** LBOH Confirmed and Probable Report (extracts ALL Confirmed and Probable Cases)
- COVID Workflows
 - <18 Pediatric workflow & >=18 Adult workflow
- COVID Wizard – updated wizard
- LBOH Steps for Completing Case Investigation – **Suggestions for Streamlined Approach**
 - Yes you spoke to case and updated question packages
 - No you didn't reach case
- Reminder to scan and check your Immediate, Routine & Pending Workflows in MAVEN

LBOH Confirmed and Probable <5

LBOH Confirmed and Probable <18

LBOH Confirmed and Probable > or = 18



Three New Reports to assist with prioritization

- 1) Confirmed and Probable <5**
- 2) Confirmed and Probable <18**
- 3) Confirmed and Probable >= 18**

Maven Reporting

Maven Reporting

Category: Custom Reports

Select Report: COVID-19 LBOH Confirmed and Probable Case line list Report for

Description: COVID-19 Confirmed & Probable Case Line List for <18 years of age. . Your city/town name must be in all CAPS. Limit the date parameter to 30 days. Report displays the first positive specimen date for the labs.

Report Period*: ☒ Date Range ☐ Period

Start Date: 01/01/2022 End Date: 01/11/2022

Official City*: BEVERLY

Disease classification status*:

Suspect
Probable
Confirmed
Revoked
Contact

Output Type: CSV

This report has been configured to run on the reporting database.

[Run Report](#) [Dashboard](#) [Help](#)

LBOH Confirmed and Probable Report (All Cases)

- This report will extract **ALL** cases of Confirmed and Probable cases
- As you know our COVID Immediate workflow stops working at 5000 cases and given the number of cases we are now having he workflow is not working

Fun Fact: * This report has been ran **13,005 times** since 1/1/2022

Maven Reporting

Maven Reporting

Category:	Custom Reports
Select Report:	COVID-19 LBOH Confirmed and Probable Case line list Report
Description:	COVID-19 Confirmed & Probable Case Line List. Your city/town name must be in all CAPS. Limit the date parameter to 30 days. Report displays the first positive specimen date for the labs.
Report Period*:	<input checked="" type="radio"/> Date Range <input type="radio"/> Period
	Start Date: 12/01/2021 End Date: 11/30/2021
Official City*:	FLORIDA
Disease classification status*:	<div>Suspect Probable Confirmed Revoked Contact</div>
Output Type:	CSV
This report has been configured to run on the reporting database.	

Run Report

Dashboard

Help

Two COVID Workflows

Changes to Workflows for COVID

- **Added** a bulk action feature for COVID cases workflow to allow you to update Step 1 to Yes (LBOH Notification)
- Workflow will only hold cases for **72 hours (based on the first positive specimen date)** – you will need to use your Confirmed and Probable Report to manage cases
- Workflows are up and down on a daily basis given the high number of cases.

★	LBOH Notification for Adult (= or > 18 years) Immediate Disease (COVID only)
★	LBOH Notification for Pediatric (<18 years) Immediate Disease (COVID only)

LBOH Notification for Immediate Disease – COVID Only – Update to the workflow

Bulk Action Feature will allow you to populate Step 1 to Yes. Workflow will only hold cases for 72 hours (based on first positive specimen result). Many cases are not going into the workflow based on first positive specimen date.

Maven Disease Surveillance Suite - TEST

Enter Case ID

Search

LBOH Notification For Immediate Disease (COVID Only) (Last Update: 11/29/2021 04:48 PM)

1

☐

	Name	Official City	Create Date	Event Date	Specimen Date of First Positive Test Result	Ordering Facility of First Positive Test Result	Education Institution	Last Update
100772216	COVID Test Case	BROOKFIELD	11/29/2021	11/27/2021	11/27/2021	Addison Gilbert Hospital - 298 Washington Street, Gloucester, MA 01930, (978) 283-4001		11/29/2021
100772215	COVID Test Case	BARNSTABLE	11/29/2021	11/28/2021	11/28/2021	Cape Cod Hospital - 27 Park Street, Hyannis, MA 02601, (508) 862-5024		11/29/2021
100772146	COVID UMASS TEST	CHICOPEE	11/16/2021	11/29/2021	11/29/2021	University of Massachusetts-Amherst - 150 University Drive, Amherst, MA 01003, (413) 577-5101	University of Massachusetts-Amherst	11/29/2021

Filter

Event ID

Contains

Apply

Clear

Assign to user (Assign to me)

Assign to group

Assign

Reassign

Export All

Set LBOH Notification to Yes

2

Workflows

Dashboard

Help

Updated COVID Wizard


- Updated the COVID Wizard
- Reduced the number of fields in the wizard to streamline cases.
- Do your best when you investigate your cases.

Event Data Labs Concerns Participants Tasks Event History Trail

Question Packages

Question Package	Person
1. Administrative	Event ID
2. Demographic	Molly Foxboro
3. Clinical	Molly Foxboro
4. Vaccine and IG Information	Molly Foxboro
5. Risk/Exposure/Control & Prevention	Molly Foxboro
6. Contact Monitoring	Molly Foxboro
6. Epi-linked and Outbreak Information	Molly Foxboro
8. ECR Information	Molly Foxboro
9. Exposure Notification (ENX) Information	Molly Foxboro

View Question Package Wizards: COVID-19 Case Investigation Wizard COVID-19 Contact Notification Wizard View Wizard



Streamlined Steps Case Report Form Is Completed

- Acknowledge your Case – **Step 1 as Yes**
- If you interview a case, you can select Yes, for **Case Report Form Completed, Step 4**. Then select a reason.
- **Selecting Yes** will give you the option to show completed by someone at LBOH.

Local Health and Investigation Steps (1 - 5)

① Step 1

Step 1 - LBOH acknowledged: LBOH acknowledged date:

Yes 01/11/2022

Step 2 - Investigation started:

Step 3 - LBOH/Agency Investigator:

+ Add New

LBOH/Agency:

LBOH/Agency Investigator phone:

② Step 4

Step 4 - Case Report Form Completed: Case Report Form complete date:

Yes 01/10/2022

Completed by:

Local Board of Health (LBOH) - Ready for MDPH review

Step 5 - LBOH final review:

Save Save & Stay Cancel Help

Streamlined Steps Case Report Form Not Completed

- Acknowledge your Case – **Step 1 as Yes**
- If you decide not to interview a case, you can select No, for **Case Report Form Completed, Step 4**. Then select a reason.
- You can also select Other** that will give you a text field where you can note a specific local protocol or policy.

Local Health and Investigation Steps (1 - 5)

Step 1 - LBOH acknowledged:

LBOH acknowledged date:

Yes

01/11/2022

Step 2 - Investigation started:

Step 3 - LBOH/Agency Investigator:

Step 4 - Case Report Form Completed:

Case Report Form complete date:

No

01/10/2022

Primary reason:

Choose or type Other

Other (Specify)

outside isolation period

Step 5 - LBOH final review:

Save

Save & Stay

Cancel

Help

1 Step 1 is Yes

2 Step 4 = No when you don't talk to the case

- Patient lost to follow-up
- Physician not reachable
- Language barrier
- Inadequate resources at LBOH
- No investigation needed per MDPH
- Other
- ISIS - LBOH investigation not attempted/completed

Check your Immediate, Routine & Pending Workflows



- **Reminder to check your Immediate, Routine, Pending Case Report Form Workflows**
 - **LBOH Notification for Immediate Disease**
 - **LBOH Notification for Routine disease (722 cases currently waiting for you today)**
 - **LBOH Case Report Forms (CRF) are pending (1,112 cases in this workflow)**
 - **Cases in this workflow range from Jan 2020 – Jan 2021**

Key Guidance Links 1/18/22

- New Digital Vaccination Record <https://www.mass.gov/massachusetts-vaccination-records>
- Main DPH Guidance Pages for 2022:
 - Isolation & Quarantine:
 - <https://www.mass.gov/info-details/what-to-do-if-you-have-or-have-been-exposed-to-covid-19>
 - Public Health Testing Advisory:
 - <https://www.mass.gov/advisory/public-health-advisory-regarding-covid-19-testing>
- CDC Updates and Shortens Recommended Isolation and Quarantine Period for General Population
 - New [CDC Isolation and Quarantine Guidance Page](#) (Jan 9, 2022)
 - New [CDC Background Page](#) (Jan 4, 2022)
 - [Press Release](#) that started it all (Dec 27, 2021)
- DESE Updated Protocols – December 30, 2021
 - <https://www.doe.mass.edu/covid19/on-desktop/protocols/>
 - New Testing Program <https://www.doe.mass.edu/covid19/on-desktop/2022-0118new-testing-program.pdf>
 - Updated DESE I&Q Flow Charts <https://www.doe.mass.edu/covid19/on-desktop/flowcharts.pdf>
- DPH Isolation and Quarantine for Health Care Personnel - December 29, 2021
 - <https://www.mass.gov/doc/isolation-and-quarantine-guidance-for-health-care-personnel/download>
- EEC Guidance for Childcare Settings (Jan 6, 2022)
 - Main Page (PDF Guidance at Bottom):
 - <https://www.mass.gov/service-details/eecs-health-and-safety-guidance-during-covid-19-recovery-for-child-care-providers>
 - English PDF Guidance:
 - <https://www.mass.gov/doc/covid-19-recommended-protocols-and-guidelines-for-eec-licensed-child-care-programs/download>
- COVID-19 Antigen Testing Resources:
 - <https://www.mass.gov/info-details/covid-19-self-test-distribution> (Distribution to Towns Program)
 - <https://www.mass.gov/info-details/covid-19-statewide-contract-resources-for-antigen-test-kits> (Resources for Procurement)

Main MA
Resources

DESE
Protocol

HCW Isolation &
Quarantine Guidance

Childcare
Protocol

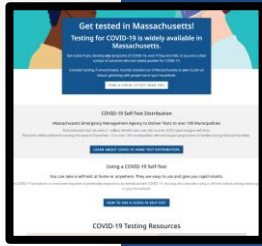
CDC Updated Pages

- **CDC Staying Up to Date on Your Vaccines**
 - <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>
 - Important information for determining who is up to date and who is not (applicable for I&Q guidance)
- **CDC Vaccines Guidance Page:**
 - **[“Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States”](#)**
 - Everything you need to know regarding vaccination guidelines.
 - Who should get what vaccine?
 - Timing of vaccines.
 - Recommendations for additional doses or boosters for different populations.
 - Contraindications and precautions.
 - Vaccine ingredients.
 - Administration of Vaccines (how to, what to use, etc.)
 - This is a living document that gets updated as recommendations are adopted and refined.
- **Immunization Action Coalition (IAC)’s Ask the Experts page**
 - https://www.immunize.org/askexperts/experts_cov.asp
 - Great resource for all your vaccine questions in a Q&A format.
- **CDC guidance on VACCINATED PEOPLE:**
 - [Interim Public Health Recommendations for Fully Vaccinated People](#)
 - Talks about what precautions are still needed for fully vaccinated people, etc.
 - Some recommendations are still under consideration here in MA.

Mass.gov Updates!

There have been important updates to mass.gov to help simplify language and guidance.

- **Main Landing Page for All things COVID-19 Testing:**
<https://www.mass.gov/covid-19-testing>
- **Search Engine for Finding COVID-19 Testing:**
 - <https://www.mass.gov/info-details/find-a-covid-19-test>
- **About COVID-19 Testing (General FAQs for the public about COVID-19 Testing)**
 - Who should be tested, what are the tests, what to do if you are positive, resources in different languages, etc.
 - <https://www.mass.gov/info-details/about-covid-19-testing>
- **Self-Tests (Over-the-Counter (OTC) Tests) FAQs and General Guidance for the Public**
 - <https://www.mass.gov/info-details/using-a-covid-19-self-test>



Updates – A quick recap for Jan 18, 2022

We Last Met Jan. 11, 2022:

- **MAVEN Updates**
- **Testing Concepts**
- **CDC & MA Updates to Isolation & Quarantine**
 - General Guidelines
 - DESE Updated K-12 Protocols
 - EEC Updated Guidance for Childcare Settings
- **Your Questions**



**Always Remember you can
see recent webinar
recordings and slides in
MAVEN Help.**

**New
URL!**

MAVEN Help: <http://www.maven-help.maventrainingsite.com/toc.html>

Updated Mask Advisory 12/21/21



- **Mask Advisory:** DPH released an updated mask advisory in December, recommending that all individuals, regardless of vaccination status, wear a mask or face covering in indoor, public spaces.
 - DPH particularly urges this recommendation for individuals who have a weakened immune system, or are at increased risk for severe disease because of age or an underlying medical condition, or if someone in their household has a weakened immune system, is at increased risk for severe disease, or is unvaccinated. To read the full advisory, visit: [here](#).
 - All people in Massachusetts (regardless of vaccination status) are required to continue wearing face coverings in certain settings, including transportation and health care facilities. Please see [here](#) for a complete list of venues where face coverings have remained mandatory since May 29, 2021.
 - **Additionally, masks continue to be required in the following locations (except for those exempted by age or medical conditions):**
 - On Public and Private Transportation,
 - Healthcare facilities
 - Congregate care facilities
 - Emergency shelter programs,
 - Houses of Correction, Department of Correction prisons, jails, and other correctional facilities.
 - Health Care and Day Services and Programs operated, licensed, certified, regulated, or funded by the state.
 - Home health care workers
 - K-12 schools and Day Cares, subject to DESE and EEC guidance.

The New CDC Guidance...



Classical Studies Memes for Hellenisti...
@CSMFHT

The CDC recommends bringing the giant wooden horse into the city, it seems nice



Nicole Pellegrino
@nicpellegrino

The CDC says don't go chasing waterfalls, please stick to the rivers and the lakes that you're used to

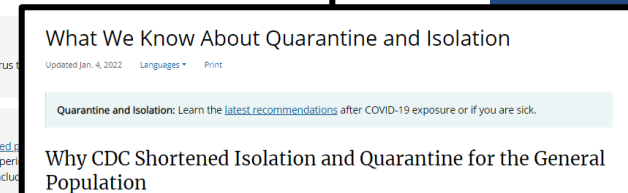
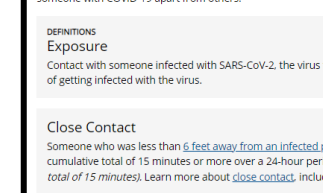
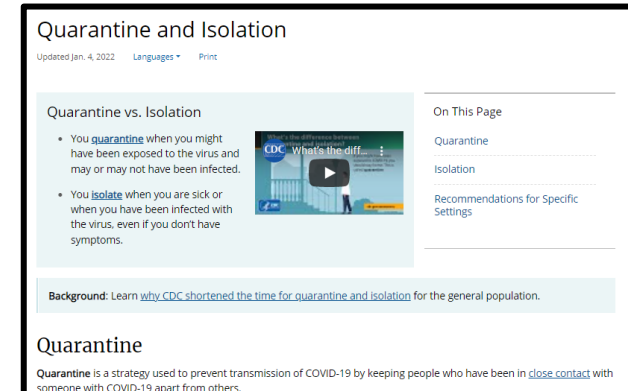


Carrie Ann
@barelycarrie

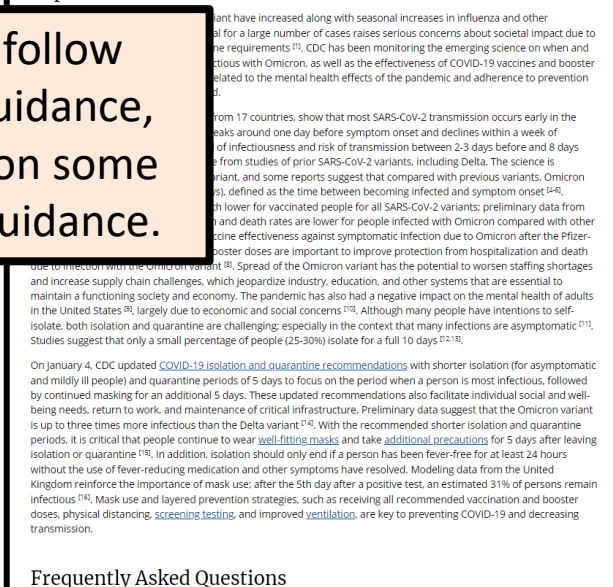
The CDC said just wear jeans and a cute top

New CDC Isolation & Quarantine Guidance Page

- **New Guidance Page is Up.**
 - Not every bullet point of the CDC guidance is being adopted in MA. More clarification and mass.gov FAQs are in the works.
 - **There is a STRONG focus on the need to effectively mask throughout the 10 day period – especially in the household setting.**
- Many sector-specific guidance pages from CDC have not been updated yet to reflect these new I&Q timelines.
- New [Background Page](#) is helpful.
 - Studies suggest that only a small percentage of people (25-30%) isolate for a full 10 days [12,13].
 - Modeling data from the United Kingdom reinforce the importance of mask use; after the 5th day after a positive test, an estimated 31% of persons remain infectious [16].



REMINDER: We follow Massachusetts Guidance, which may differ on some points with CDC guidance.



Following the CDC Guidance Updates...

- MA updated our isolation and quarantine page and incorporated much of the new guidance here:
 - <https://www.mass.gov/info-details/what-to-do-if-you-have-or-have-been-exposed-to-covid-19>
- **DESE Updated Protocols – December 30, 2021**
 - <https://www.doe.mass.edu/covid19/on-desktop/protocols/>
 - Updated DESE I&Q Flow Charts
<https://www.doe.mass.edu/covid19/on-desktop/flowcharts.pdf>
- **EEC Guidance for Childcare Settings (Jan 6, 2022)**
 - <https://www.mass.gov/doc/covid-19-recommended-protocols-and-guidelines-for-ee-licensed-child-care-programs/download>



DESE UPDATES: New At-Home Testing Program!

A press release and conference happened at 10am this morning, announcing a new At-Home Testing Program for DESE schools opting in:

- **New At-home Testing Program replaces Test and Stay in schools that choose to participate. However, schools participating in at-home testing need to do either/or pooled testing or symptomatic testing.**
 - At-home program allows school staff to concentrate on symptomatic testing and not on contact tracing.
 - School will be able to apply to program this week, and at-home testing for staff starts 1/24 and for students 1/31. Schools can opt into new program or can stay in Test and Stay.
 - Kits will be given to school districts for further re-distribution. Kits are packaged 2 tests per kit and will be handed out every 2 weeks.
 - Any positive tests must be reported to the school (and own provider). The school will then report to DESE via mechanism already in place.
 - Testing doesn't replace vaccination (and boosters if indicated.) Gov. stressed that the state will go to any school at any time to vaccinate as part of the mobile vaccine program.
 - Test and Stay program over the past year has shown that low transmission occurs in school; 99% of tests have been negative.

<https://www.doe.mass.edu/covid19/on-desktop/2022-0118new-testing-program.pdf>

Key Takeaways for Updated Isolation and Quarantine Guidance

- We are moving to a model of personal responsibility and best practices for risk reduction. COVID-19 is here to stay and we have tools to reduce risk, but not eliminate it completely.
- Understanding lab tests and what they can (and cannot) tell us.
 - Antigen Tests can be helpful tools for in-the-moment assessments.
- Effective and consistent MASKING is critical to reducing risk under these new Isolation and Quarantine periods.
 - [Well-Fitting Masks](#) for cases, contacts, and everyone in between.

General Public

- **Main DPH Guidance Pages for 2022:**

- **Isolation & Quarantine:**

- <https://www.mass.gov/info-details/what-to-do-if-you-have-or-have-been-exposed-to-covid-19>

- **Public Health Testing Advisory:**

- <https://www.mass.gov/advisory/public-health-advisory-regarding-covid-19-testing>

The screenshot shows the Mass.gov website with the title "COVID-19 Isolation and Quarantine Guidance for the General Public". Below the title, it states "Isolation and quarantine are important steps to help stop the spread of COVID-19." A "PLEASE NOTE" section follows, detailing the scope of the guidance for various settings and programs. A "TABLE OF CONTENTS" section is visible at the bottom of the page, listing topics such as "About COVID-19 isolation and quarantine", "If you test positive for COVID-19 (isolate)", "If you were exposed to someone with COVID-19 (quarantine)", and "Isolation and quarantine guidance for health care personnel".

The screenshot shows the Mass.gov website with the title "Public Health Advisory Regarding COVID-19 Testing". It includes a "DATE:" field showing "01/11/2022" and an "ORGANIZATION:" field showing "Department of Public Health". A "REFERENCED SOURCES:" section lists "COVID-19 Testing: What You Need to Know | CDC.GOV". A "TABLE OF CONTENTS" section is visible, listing topics such as "When should I get tested?", "What kind of test should I get?", "What is the difference between PCR tests and rapid tests?", and "Downloads". The "When should I get tested?" section is expanded, providing detailed information about testing protocols for isolation and quarantine, including references to CDC guidance and specific situations in childcare.

If you test positive for COVID-19 (Isolate)

Everyone, regardless of vaccination status:

- Stay home for 5 days.
- If you have no symptoms or your symptoms are resolving after 5 days, you can leave your house.
- Continue to wear a mask around others for 5 additional days.

If you have a fever, continue to stay home until 24 hours after your fever resolves (without fever reducing medications).

Cases isolate. But you may be able to discontinue isolation earlier than 10 days based upon symptom criteria. Masking will be important to reduce additional exposure.

<https://www.mass.gov/info-details/isolation-and-quarantine-guidance-for-the-general-public>

If you were exposed to someone with COVID-19 (Quarantine)

Q to determine if you need to quarantine:
Are you up to date with your vaccines?

If you:

Yes, Up to Date!

Have been boosted

OR

Completed the primary series of Pfizer or Moderna vaccine within the last 6 months

OR

Completed the primary series of J&J vaccine within the last 2 months

- Wear a mask around others for 10 days.
- Test on day 5, if possible.

If you develop symptoms get a test and stay home.

If you:

No, Not Up to Date!

Completed the primary series of Pfizer or Moderna vaccine over 6 months ago and are not boosted

OR

Completed the primary series of J&J over 2 months ago and are not boosted

OR

Are unvaccinated

- Stay home for 5 days. After that continue to wear a mask around others for 5 additional days.
- If you can't quarantine you must wear a mask for 10 days.
- Test on day 5, if possible.

If you develop symptoms get a test and stay home

<https://www.mass.gov/info-details/isolation-and-quarantine-guidance-for-the-general-public>

Instead of asking if someone is “fully vaccinated” we should start to ask if they are “up to date.”
Quarantine status is based upon if you are up to date, not if you have completed your primary series.

Page for “Staying up to Date on Your Vaccines”

- <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>

Stay Up to Date with Your Vaccines

Updated Jan. 5, 2022 Languages Print

- For some immunocompromised children aged 5–11 years old, CDC now recommends an additional dose of the Pfizer-BioNTech COVID-19 vaccine to complete the primary series – a total of three doses. See [media statement](#) | [Spanish](#).
- CDC now recommends booster shots at 5 months after the completion of the primary series of Pfizer-BioNTech COVID-19 vaccine for those aged 12 and older. See [media statement](#) | [Spanish](#).

[COVID-19 vaccines](#) are effective at protecting you from getting sick. Based on [what we know](#) about COVID-19 vaccines, and similar to what we know from other recommended vaccines, people who are up to date with their vaccines are well protected from serious illness or other health outcomes.

Get Vaccinated

Everyone 5 years and older is recommended to receive a primary series of a COVID-19 vaccine to be considered fully vaccinated.

For children 5 years through 17 years of age, a primary series consists of 2 doses of the Pfizer-BioNTech COVID-19 vaccine. For persons 18 and older, a primary series consists of:

- A 2-dose series of an mRNA COVID-19 vaccine (Pfizer-BioNTech or Moderna), or
- A single-dose COVID-19 vaccine (Johnson & Johnson's Janssen vaccine)

Pfizer-BioNTech or Moderna (COVID-19 mRNA vaccines) are preferred. You may get Johnson & Johnson's Janssen COVID-19 vaccine [in some situations](#).

Stay Up to Date with Your Vaccines

CDC recommends that people remain up to date with their vaccines, which includes [additional doses](#) for individuals who are immunocompromised or [booster doses](#) at regular time points. Individuals who are [moderately or severely immunocompromised](#) should get an additional primary shot and a booster shot.

Who Should Get a Booster Shot

Ensure you are optimally protected against COVID-19 by [getting vaccinated](#) and staying up to date with a [booster dose](#).

IF YOU RECEIVED	Who should get a booster:	When to get a booster:	Which booster can you get:
Pfizer-BioNTech	<ul style="list-style-type: none">• Everyone 12 years and older	<ul style="list-style-type: none">• At least 5 months after completing your primary COVID-19 vaccination series	<ul style="list-style-type: none">• Pfizer-BioNTech or Moderna (mRNA COVID-19 vaccines) are preferred in most* situations• Teens 12–17 years old may only get a Pfizer-BioNTech COVID-19 vaccine booster
Moderna	<ul style="list-style-type: none">• Adults 18 years and older	<ul style="list-style-type: none">• At least 6 months after completing your primary COVID-19 vaccination series	<ul style="list-style-type: none">• Pfizer-BioNTech or Moderna (mRNA COVID-19 vaccines) are preferred in most* situations
Johnson & Johnson's Janssen*	<ul style="list-style-type: none">• Adults 18 years and older	<ul style="list-style-type: none">• At least 2 months after receiving your J&J/Janssen COVID-19 vaccination	<ul style="list-style-type: none">• Pfizer-BioNTech or Moderna (mRNA COVID-19 vaccines) are preferred in most* situations

*Although mRNA vaccines are preferred, J&J/Janssen COVID-19 vaccine [may be considered in some situations](#).

Isolating Cases & Repeat Testing

- **FOR CASES:** In most settings, repeat antigen testing is not required to exit isolation after Day 5. Be sure to check your sector-specific guidance to be sure. For example:
 - [General Public Isolation Guidance in MA](#) does not require/recommend antigen testing. [DESE Guidance](#) states repeat viral testing is not recommended.
 - In Childcare Settings ([EEC Guidance](#)), testing on day 5 or later IS recommended (Not required).
 - For [HCWs](#), testing on Day 5 or later IS required for non-acute care hospital staff to return prior to Day 11.
- If testing is pursued, collect the test sample only if you are fever-free for 24 hours without the use of fever-reducing medication and your other symptoms have improved (loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation).

Isolating Cases & Repeat Testing

- **Q. What should a case do if they DO test on Day 5 and remain antigen positive? Can they exit isolation on Day 6?**
- **A.** If a case tests positive via antigen test on Day 5 or later, we would NOT recommend that they exit isolation at that time.
 - We would recommend retesting in a few days (Day 7-8) and they can exit isolation at that time if negative.
 - In all cases, masking is required through Day 10. Many cases are likely still positive and presumably infectious at Day 5.

Identifying Quarantine Timelines for Household Contacts

- It is important to remember that many people will remain positive and infectious after their first 5 days of isolation. Therefore, mask wearing and maintaining your distance (especially in the home) is critical to reducing additional exposures.
- If a case is able to minimize additional exposure around the house (maintain effective mask wearing around others and reduce distance) in days 6-10, then we would not consider those additional days exposures requiring extending quarantine.
- However, if the case does NOT maintain good mask wearing and precautions around the house, we would consider household contacts additionally exposed and subject to quarantine guidance on those dates.

Household Contacts to Cases

- **Quarantine countdown would begin based upon the final higher risk exposure to the case while infectious.**
- If a Case meets symptom-based criteria for discontinuing isolation by the time they reach Day 5 of isolation, they may exit isolation on Day 6 and should mask and keep their distance for Days 6-10 around the household.
 - If they maintain masking and best practices, Day 5 of Isolation would be the household contact's Day 0 of Quarantine.
 - If they are NOT able to mask or utilize best practices in the household, we would consider the case's Day 6-10 as additional exposures requiring continued quarantine.
 - New reduced isolation periods are not RISK-FREE. Meeting symptom-based criteria and Masking for the remaining days through Day 10 are KEY to addressing any remaining infectiousness and reducing risk.
 - Even if a case masks when outside the home, if they are not masking around household contacts during Days 6-10, we would consider those household contacts as having additional exposure subject to quarantine protocols.

Self-Tests

(Over the Counter (OTC) Home Tests)

- **Q. Should LBOHs recommend PCR tests to follow up on a positive self-test?**
 - **A.** No. People who test positive on an at-home test should isolate according to current DPH protocols and should notify their close contacts.
 - These individuals do not need a PCR.
 - People who test negative on an at-home antigen test AND have COVID symptoms should consider re-testing with an antigen test in 24-48 hours or get a PCR test.
- **Self-Tests (Over-the-Counter (OTC) Tests) FAQs and General Guidance for the Public**
 - <https://www.mass.gov/info-details/using-a-covid-19-self-test>

Your Questions: Lab Tests

- **Q. Does someone need to test PCR negative to no longer be considered infectious to others?**
- **A.** No. In fact, the PCR test is so sensitive, it has been shown to continue to pick up viral RNA fragments in the respiratory tract of some adults for several weeks. It amplifies traces of the virus – so if you have a small amount of virus, it can still detect it.
- Thus, it is not generally recommended for someone to stay in isolation until they test PCR negative. They may test positive for quite some time. (It is preferred to apply a symptom or time-based criteria for discontinuing isolation)
- Remember, the **PCR test looks for genetic material, and that is not the same thing as live, replication-competent virus**.
- Antigen tests don't magnify the amount of virus in the sample you take, so you need a pretty high viral load to test positive.
 - Are false positives possible due to other pathogens or issues? Yes. But in a global pandemic where everyone has COVID-19, odds are in favor of COVID-19

Testing Concepts

- No test is perfect. But they are the best indicators we have at the moment. Thus, we can apply some generalities to their results – understanding that we will not be correct 100% of the time.
- **Generalities:**
 - The PCR will be positive for a while. So probably not the best test for trying to test out of isolation earlier or determining if you are no longer infectious.
 - The antigen test is more likely to be positive when you have more virus, so the thought would be that this is the better test for testing out of isolation earlier or a preliminary indicator if your viral load has gone down. This test would become negative first.
 - **Are you not infectious towards others if your antigen is negative?** Not always, but you are probably less infectious, so this is a helpful sign.

Infectious Period for COVID-19

- **What is the infectious period for COVID-19? Has this changed with the new guidance?**
 - **A.** People can still be infectious up to 10 days after symptom onset. This has not changed.
 - Severely ill or immune compromised people may be infectious for longer
 - People are most infectious just before symptom onset and for the several days after
 - People are less infectious days 5-10 and this is addressed by the recommendation to mask during that time
- We are not saying there are no exposures after day 5, there may be. But infectiousness and risk is less after day 5 from onset.

Share your positive COVID test anonymously with MassNotify

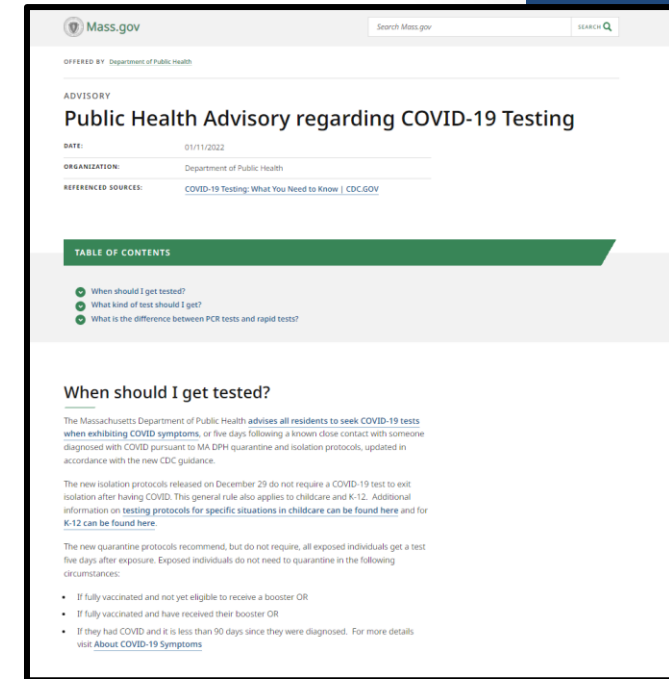
- **Anonymously share your COVID-19 positive test result with other MassNotify users:**
 - If you test positive for COVID-19, the Massachusetts Department of Public Health (DPH) will send you a text message with a link you can choose to use to anonymously share your positive test result with other MassNotify users.
 - If you didn't receive a text message with a verification link, your link expired, or you tested positive with an at-home test, you can request one directly in the MassNotify system. To request a MassNotify verification link:
 - *On an iPhone:* Go to Settings, then the Exposure Notifications section. Click "Share a COVID-19 diagnosis", tap the link at the bottom of the screen that says "Didn't get a code?", and follow the instructions to request your verification link.
 - *On an Android:* Go to the Google section within Settings, then the Exposure Notifications section. Click "Share a COVID-19 diagnosis", tap continue at the bottom of the screen, and then click "I need a code". Follow the instructions to request your verification link.

90 Day Exemption to Quarantine for Cases

- **Q. Are individuals with a recent COVID-19 diagnosis still exempt from quarantine and testing protocols in the following 90 days?**
 - **A. Yes.** Generally speaking, individuals who are within their 90 days of a recent diagnosis do not need to quarantine if identified as a close contact.
 - Strongly recommend that they mask as a best practice for those 10 days following an exposure, but they are not required to quarantine.
 - If they develop symptoms during their 90 days, they should consult their provider regarding if COVID testing is needed and possible rule-out alternative testing (Flu? RSV?). They should isolate at home while symptomatic (always a good recommendation).
 - This will not be a perfect catch all for every exposure, as we are in this transition from Delta to Omicron, and some data shows immunity from Delta is not a perfect match for Omicron. That said, guidance on the whole is not changed at this time regarding the 90 day exemption to quarantine following a diagnosis.
 - **Note:** Positive antigen tests later in the 90 days following a COVID-19 diagnosis should be treated with caution and we would recommend the individual isolate again if they are on the tail end of their 90 days. PCR tests can remain persistently positive and alone are not a good indicator of reinfection in that 90-day timeframe.

Public Health Advisory Regarding COVID-19 Testing (NEW!)

- **New Mass.gov Guidance Page!**
 - When should I get tested?
 - What kind of test should I get?
 - What is the difference between PCR tests and rapid tests?
 - Other important public health measures to help prevent the spread of COVID-19, including the Omicron variant,
- **New Page has this Guidance (under What is the difference between PCR & Rapids?):**
- **“Employers, schools, and daycare settings should not require PCR tests to return to those settings.** Employees, students, and children may return to these settings when they have met the state guidelines for isolation or quarantine. Please refer to DESE or EEC protocols for appropriate use of tests in those settings.
- Current DPH guidance is that people in quarantine are recommended, but not required, to get a viral test (rapid antigen or PCR) on Day 5 of their quarantine and only exit quarantine if negative.
- **The Department of Public Health’s protocols do not require a return to work or school letter for anyone returning from isolation or quarantine; clearance letters are not necessary, and this requirement is discouraged.**
 - Neither local boards of health nor the Department of Public Health provide these letters and, if required, employees would need to obtain any return to work letters from their health care provider.”

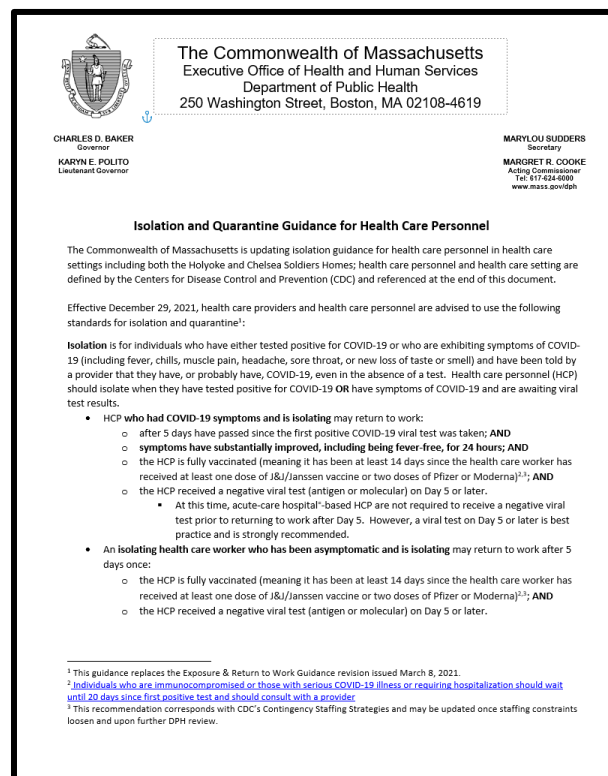


<https://www.mass.gov/advisory/public-health-advisory-regarding-covid-19-testing>

Healthcare Personnel Guidance

Health Care Professionals ([Guidance Section](#) on Mass.gov)

- New as of 12/29/21: Isolation and Quarantine Guidance for Health Care Personnel
 - <https://www.mass.gov/doc/isolation-and-quarantine-guidance-for-health-care-personnel/download>
 - **This guidance replaces the Exposure & Return to Work Guidance revision issued March 8, 2021.**
 - It defines Healthcare Personnel (HCP) and also Healthcare Settings (2nd page)
 - Very clearly notes which settings this guidance applies to (otherwise apply [GENERAL State I&Q Guidance](#)).



PLEASE NOTE: This guidance does not apply to group homes, residential treatment programs, community-based acute residential treatment programs, and clinical stabilization service programs funded, operated, licensed, and/or regulated by the Department of Early Education and Care (EEC), the Department of Children and Families (DCF), the Department of Youth Services (DYS), the Department of Mental Health (DMH), the Department of Public Health (DPH), the Department of Developmental Services (DDS), the Department of Veterans' Services (DVS), the Massachusetts Commission for the Blind (MCB), and the Massachusetts Rehabilitation Commission (MRC). Additionally, this guidance does not apply to emergency shelter programs, including individual and family homeless shelters, domestic violence and sexual assault shelters, Veterans' shelters, including those funded by the Department of Housing and Community Development, and approved private special education schools which offer residential services and are approved by the Department of Elementary and Secondary Education.

Isolation for Healthcare Providers

- **Symptomatic HCPs who are isolating** can return to work when the following conditions have been met:
 - At least 5 days have passed since first positive test
 - Symptoms have substantially improved (and fever-free for 24 hours)
 - HCP is fully vaccinated
 - HCP tests negative on Day 5 or later*

- **Asymptomatic HCPs** may return to work after isolating for 5 days, so long as they:
 - Are fully vaccinated
 - Test negative on Day 5 or later*

*HCPs at acute-care hospitals are not required to obtain a negative test, but it is best practice and strongly recommended

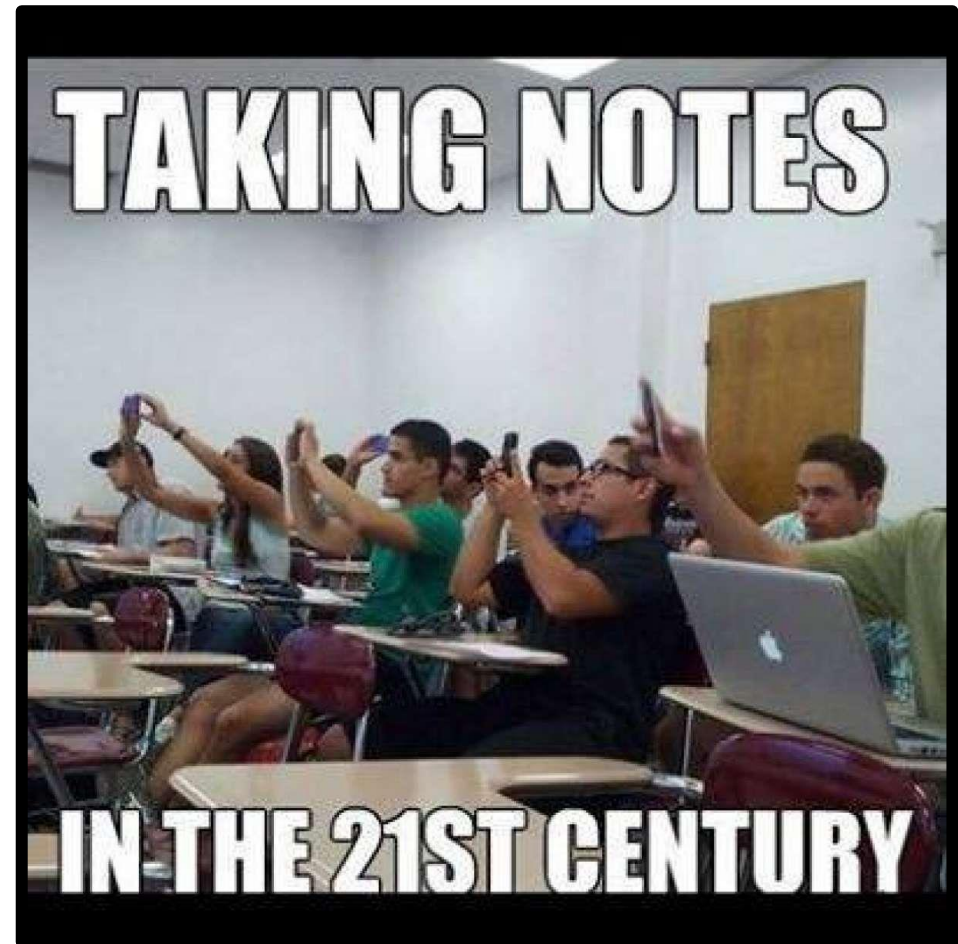
- If a provider returns to work prior to the 10-day mark, they should avoid caring for immunocompromised patients until they reach the 10-day mark

Quarantine for Healthcare Providers

- HCPs may continue to work, even if subject to quarantine, provided they remain asymptomatic
- If a HCP had a community exposure, they should have a negative test prior to returning to work, even if they are not subject to quarantine outside of work following their exposure
 - Timing for this negative test is not specified—common practice in LTCFs is to Binax before each shift for at least the first 5 days following exposure
- For work exposures, no testing is required, though the facility may choose to conduct testing or exclude the HCP from work if they wish
- HCPs who are fully vaccinated do not need to quarantine, so long as they:
 - Have been boosted, or
 - Do not yet qualify to be boosted based on timing (e.g., they received a second dose of Pfizer <6 months ago)
- This guidance overrules the LTCF vaccine mandate which required unvaccinated HCPs to be excluded from work following an exposure

K-12 School Settings (DESE GUIDANCE)

- **DESE Updated Protocols – December 30, 2021**
 - <https://www.doe.mass.edu/covid19/on-desktop/protocols/>
- **New Testing Program**
<https://www.doe.mass.edu/covid19/on-desktop/2022-0118new-testing-program.pdf>
- **Updated DESE I&Q Flow Charts**
<https://www.doe.mass.edu/covid19/on-desktop/flowcharts.pdf>



Appendix A Revised October 19, 2021: Additional Precautions for Staff Supporting Students Who Cannot Wear Masks

Please note: this guidance applies to students in special education settings.

- Some students cannot wear masks for medical or behavioral reasons and, like any other students, they might be identified as close contacts who can participate in Test and Stay. When this happens, the staff members who interact with such students should follow the guidelines that the Centers for Disease Control and Prevention describes for “[direct service providers](#)”. Direct service providers include educators, personal care attendants, paraprofessionals, therapists, related services personnel, assistants, school nurses, health office staff, and any other staff who must interact closely with students who cannot wear masks while participating in Test and Stay.

- Direct service providers are essential for the health and well-being of the students they serve. Direct service providers should be aware of and trained on how COVID-19 spreads, risk factors, and prevention. Additional preventive measures may need to be taken depending on the activity and the risk level of the activity. Below, please find additional information on the Personal Protective Equipment (PPE) for direct service providers:

<i>Classification of Individual Wearing protective equipment</i>	<i>N95 or KN95 Respirator</i>	<i>Face Shield</i>	<i>Disposable Gowns</i>	<i>Disposable Gloves</i>	<i>Gowns/Coveralls/Other Body Covering</i>	<i>Cloth Face Covering</i>	<i>Disposable mask</i>
DSPs in care areas of students who cannot wear masks and are identified as close contacts	X	X	X	X	X		X (with face shield if N95/KN95 not available)
DSPs in the same facility but not in the care areas for students who cannot wear masks and are identified as close contacts						X	
DSPs providing personal care to students without suspected COVID-19 but who may		X (preferred)		X			X
		X		X	X		
personnel/monitors who must come in direct physical contact with passengers (e.g. buckling/unbuckling, performing wheelchair safety services)				X		X	

[Oct 12 FAQ Appendix](#): For students who come back to K-12 settings prior to day 10 and cannot mask, this is the DESE guidance on how to handle that. All Published DESE FAQs are [HERE](#).

[DESE FAQ Date Oct. 12, 2021](#)

