

CRTF HEALTH SUBCOMMITTEE MEETING NOTES 15SEPTEMBER2020

1) City Council Meeting – mask ordinance was approved last night, effective immediately. The subcommittee's recent suggestions (see memo to City Council dated 8/26/20) were not incorporated into the ordinance. Kim assured the members this was not wasted effort; the points made in the memo may be relevant to educational efforts and/or future actions. A Councilor had requested feedback on proposed language changes. Individual conversations between task force members and councilors should be avoided, and it was not possible to act on this request between Task Force meetings. The request was withdrawn by the Councilor after last night's vote.

2)FAQs

James continues to work on Ventilation FAQ. Intro by Ann needs to be added in, and **Stephanie** will work on hyperlinks both internal (e.g. from Table of Contents to definitions) and external (to references). It is close to ready - **all** are asked for feedback.

Ann circulated a list of questions to be included in the Household Readiness FAQ and general support for scope as reflected in those questions was expressed. **Ann** to add in "where can I go" (r/t quarantine and other details during and post travel outside of our region) and any other questions that come in (RSVP, **All!**) and will rely on **Stephanie** for editing and format. Aim is to keep to main points, using infographics when possible, and use links and references as described above rather than an overload of detailed advice within the document.

FAQ Update process – **Stephanie** will use Ventilation FAQ as a pilot for a process that will facilitate ongoing review, by creating a page on the city website specific to this document. During the test period and until Task Force review and approval, it will not be visible to the public. Approval of the concept and raw content will be requested ASAP, possibly at tomorrow's CRTF meeting. We will emphasize that it is a working document so that if approved, the Subcommittee would be authorized to make minor changes, reformat, etc. Substantive changes would need to go back to the Task Force for review and approval. Following this pilot process, all other FAQs will be handled the same way. **All** are asked to continue to share evolving evidence and guidance within the subcommittee. The original "first author" of each document would then shepherd the updates through revision. That means **Ann** for Masks, **Kathie** for Testing, and **James** for Ventilation.

3) Public information STEPHANIE

Letters – **Stephanie** will review available information, reformat as appropriate, and circulate to members. Some municipalities to be included in target list for letters to Town Managers have taken action on masking proposals since we last discussed. Senator Clark will be asked to provide feedback on language in the letter to Governor Sununu. Ideally, he would make a public statement reflecting what we believe he supports: municipal action on mask usage; with the State setting minimum standards that may be exceeded by municipalities. We do not require City Council approval for documents, such as these letters, that cite their work, but we will inform the Council.

Weekly dashboard – the daily data for the past 2 weeks for positivity in NH suggest an upward trend. Gaps continue to show in MA data. **Stephanie** offered to review the JHU website critically. After the meeting she added more explanation to the dashboard and reformatted the state snapshots from JHU. Of clear concern: rising cases and falling testing in NH.

4) Public Health – the recent [MMRW report](#) has limitations but along with other available evidence, the subcommittee concludes there is ample reason for concern regarding certain activities and gatherings, especially over the next few months as progressively more time will be spent indoors. Examples include, but are not limited to, gathering, eating and drinking at restaurants, bars, and coffeeshops. Multiple risk factors such as being indoors, diminished caution under the influence of alcohol, raised voices, close proximity to others, poor air exchange, and people from many different communities gathering in one place all may coincide in these settings. We do not want to wait for a serious outbreak and then react. We want to support local businesses but not at the risk of public health, and possible long term impact on these business that could be equally deleterious if not worse, after an outbreak. It was proposed that the subcommittee support a press release from the Health Depart on this subject. Discussion will continue at the next meeting.