



CITY OF WORCESTER, MASSACHUSETTS
Department of Health & Human Services
Division of Public Health



Public Health
Prevent. Promote. Protect.

Matilde Castiel, MD
Health & Human Services
Commissioner

Karyn E. Clark
Public Health
Director

Date: February 14, 2022
To: Board of Health
From: Karyn E. Clark, Director of Public Health
Re: Board of Health Meeting/WebEx Meeting Minutes February 7, 2022

Welcome & Introductions

Meeting called to order at 6:37 PM

Members Present: Jerry Gurwitz, MD, Vice Chairman, Frances Anthes, Chareese Allen, Van Tran, MD, Gary Rosen

Staff Present: Karyn Clark, Director of Public Health, Michael Hirsh, MD, Medical Director

Guests: Edward Augustus, City Manager

Approval of minutes from January 10, 2022

Chareese Allen makes a motion to approve the minutes.

Motion seconded by Gary Rosen.

Motion Approved.

COVID-19 Updates and Mask Mandate Presentation

Dr. Hirsh provides information on the proposal to rescind the mask mandate.

- The City Manager put forward a proposal crafted using advice from the Worcester Department of Public Health, his cabinet, voices from the community, from the Chamber of Commerce, and restaurant owners.
- Although we strongly recommend mask-wearing for certain populations and those who want to wear masks, effective Friday February the 18th the emergency mask mandate will be rescinded. Institutions, corporations, businesses, and institutions of higher learning with a 90% vaccination rate or greater could rescind the mandate tomorrow if the proposal is passed.
- The mask mandate for the Massachusetts Department of Elementary Education and Secondary Education will be rescinded February 28th. Diocesan and Charter Schools will abide by the DESE recommendation.
- COVID numbers have come down as far as cases. This was seen in the Omicron surges that happened in South Africa and Europe. Our positivity rate is getting close to negligible in the waste water.



- We have a 60% full vaccination rate and there's an additional 52,000 positive cases since the beginning of the pandemic. There is a certain amount of natural immunity that will make our immunity numbers higher than 60%.
- Hospitalization rates have fallen. The Massachusetts Department of Public Health has said that as of next week hospitals can begin doing elective surgeries again up to a 50% capacity and they anticipate that by March 1st they can be up to full capacity.
- There were many mental health concerns pertaining to mask wearing, being isolated, or being able to socially interact properly. The business community has been frustrated about patrons seeking out dining and shopping options in other areas that do not have a mask mandate. This economic instability has been creating unemployment, homelessness, eviction, as well as bankruptcy and we should be sensitive to this plea.
- COVID has affected the elderly. There was a shift with the Omicron variant, however overwhelmingly, the people who have been admitted to the hospital have been in the 55 and over age group. The death toll has mostly affected the elderly. Many of the elderly that were the first to get vaccinated have not received their boosters.
- The mitigation that seems to be the most important right now is vaccination. The true number of breakthrough cases of those who have been completely vaccinated is very low. Those who are not fully vaccinated are not true breakthrough cases because they are not considered to be fully vaccinated. Those who are unvaccinated continue to be a large part of the COVID admissions. Those who are unvaccinated and partially vaccinated make up 75% of the admissions of those being treated for COVID.
- 60% of individuals in Worcester are fully vaccinated and only 26% have received their booster, which is too low. 72% of Worcester residents have received at least one dose of the COVID-19 vaccine. The older age groups are the ones who have been more thoroughly vaccinated.
- In Massachusetts, only 44% of the population has pursued booster shots. Some reasons for this are that individuals may have contracted Omicron in-between their second vaccine dose and their booster dose. Others are having a 'wait and see' attitude because they feel the booster may be altered to deal with Omicron instead of taking the booster that was made to deal with the Alpha variant.
- The parents of the youngest age group haven't had a widespread acceptance to get their children vaccinated.
- Cases surged until January 11th and then began to drop. Our rate of change over the last 14 days for the number of cases is -68% (this is for Worcester County, not just the City of Worcester). The test positivity rate for Worcester County is 16%.
- Our case numbers for the 7 day averages have gone down—last week we had 135 cases per day. The week before the average was 270 cases per day. The week prior to that the average was 580 per day, and the week before that it was over 1,000 cases per day. In December we were up to 2,000 cases per day.
- We have been averaging 42 cases per day and the hospitals are reporting a large decrease in the number of in-patients. Saint Vincent's Hospital has seen a 67% decrease in in-patients and UMass has had a 50% decrease.
- ICU admissions and deaths are continuing to go up. We are not finding evidence that the hospitals are overwhelmed and the healthcare personnel are not getting sick in the same volumes that they were in the beginning of January.

- There was an upshot in early January of virus concentration in the wastewater. It has fallen back down and is expected to get down to undetectable levels by the beginning of March.
- We feel it is okay to rescind the mask mandate. That does not mean we are advising the public to not wear masks. This is not completely gone and it is legitimate to still wear masks. Those who are unvaccinated have a 97 times more likely chance of dying from COVID. The unvaccinated should continue to mask. Those who are immunocompromised should also continue to wear a mask.
- Individual establishments can continue to have their 'Mask Up' sign displayed if they choose to. Individuals who want to wear a mask should continue to wear a mask. The community should recognize that if people are masked that is their right and they don't need to have confrontations with individuals wearing masks.
- If you are symptomatic, do not go to work. Schedule a test or use an at-home test. If you turn out to be positive, you will have to stay home for 5 days and come back to work wearing a mask for 5 additional days. If exposed to someone who is positive and you are asymptomatic, you should do 5 days of masking at home and then another 5 days of masking at work.
- We have come to the conclusion that with 2 more weeks of additional data, we will be able to confirm our indicators for a mitigation to end. There are still regulations beyond our control, such as when flying on a plane or taking public transportation. The WRTA will continue to have individuals wear masks.
- There will be a push for vaccinations and boosters. We are waiting for guidance for the 6 month to 5 year old age group. Dr. Castiel has started a child vaccination task force to help set up appropriate clinics with vaccinators that have childhood experience.

Discussion

Dr. Tran asks to verify that 30% of the Worcester population is boosted and that the ICU admissions and death counts are still up, as well as that COVID is still detected in waste water. Dr. Tran asks if there is any consideration in delaying the rescinding of the mandate as respiratory illnesses are worse in the winter and the death counts are still up. The minority population in Worcester are even less vaccinated and she is worried that unmasking will put those populations at more risk. Has this been considered? And what are some protective measures that can be taken as we end this mandate?

Dr. Hirsh recognizes there is a disparity issue with how this pandemic has struck these communities and that there are continuing disparities in how they have sought out vaccination. We are counting on the numbers to show that by the 18th we will have a low enough level immunity wise that the likelihood of spread is low. There will still be contact tracing and recommendations about masking. The real challenge is whether or not a family can go shopping and feel like they have to wear a mask. We do not think that it is necessary for the individuals who have followed the vaccination protocols.

Chareese is leery about lifting the mask mandate too soon after seeing the number of individuals from the minority communities come through the hospital and they are the ones who are less vaccinated. We may go through another surge of COVID because we don't have enough of a lucid population and a lot of the minority population is not vaccinated.

Gary thanks Dr. Hirsh for his presentation and for showing support to end the mask mandate in Worcester. It is not time for everyone to take off their masks and not wear them again. There are populations who should wear them but we are at a point where we are mentally, emotionally, and socially tired. The Department of Public Health will keep after this and continue to make recommendations to the Board of Health and the community. It is important to educate and teach people that vaccination is the safest

way. There are many Boards of Health in surrounding towns that never had a mask mandate. Gary supports Dr. Hirsh's recommendation to rescind the mask mandate. Fran is open to the idea that the recommendations for masking may continue but the enforcement might not. Will any restaurant staff be wearing masks? Would essential workers be allowed to wear masks in the grocery store or would that feel like an issue of stigma? There have been newspaper reports about hospitals having issues with capacity—are the hospitals not worried about capacity or have they just seen drops in the amount of need? If unvaccinated individuals should continue to wear masks and the under 5 population has not been vaccinated at all, and 80% of the 5-20 year olds are unvaccinated, it sounds like we need to think of them as part of the unvaccinated group. Have the numbers in the Worcester Public Schools changed? And what happens to children who are exposed? Are they quarantined and sent home? That disruption could be worse than being allowed to stay in school and wear a mask.

Dr. Hirsh states that the school numbers have come down and schools have reported a 60% reduction in the number of cases. Most of the cases are in the staff—not the kids. The American Academy of Pediatrics, Massachusetts Chapter stated that the kids are not the spreaders we thought they were going to be and they are not getting sick. Superintendent Binienda opted to do the test and stay program. If exposed the child is tested in school for 5 consecutive days and will be in a quarantine class area to allow them to stay in school. Children continue to be masked. Some teachers say kids are adaptable and are doing fine with masking and others are saying that children just need to see faces. Dr. Dixon from the UMass system agrees with the City Manager's request. The UMass and Saint Vincent systems do not feel maxed out or overwhelmed. The City Manager left it up to the proprietors of establishments if they want to continue a mask policy for employees. It's going to be up to the individual patrons if they want to go into a restaurant. This decision was not made lightly. People have now been given a choice to wear a mask or not. If you're unvaccinated you should not be out there unmasked.

Dr. Gurwitz recognizes that things are better than they were but not perfect. He supports the decision to rescind the mandate and thinks that everything right now is about vaccination. What would be the indicators that would make us go back to a mask mandate? Is there anything that would trigger that in the future?

Dr. Hirsh feels that if there was a significant community uptick from a 7% positivity rate to 15% in the next few weeks, or if we see the waste water reflect a 25% inflection back up, or if we start to experience an ER surge of COVID patients—there will be early warning signals we would see that will show if the BA2 stealth Omicron variant turns into something that fills the void that the current Omicron variant leaves. If that happens it won't be difficult to work with the City Manager to put the brakes on and reverse the rescission until a later date.

Edward expresses his thanks to the Board of Health for considering this proposal. He hopes that the fact this is the first time he is present at a Board of Health meeting asking them to consider something like this will carry some weight. There have been hundreds of difficult decisions that have had to be made over the last two years including issuing a mask mandate before the state did and opening a field hospital. Given where we are now and where we're likely to be, it is reasonable and safe for us to remove the mask mandate. Many of us will still wear masks and be under the mask advisory put out by Governor Baker. We are doing things that are prudent based on where we are. Edward states that he appreciates the Board's thoughtful consideration of this so that we can continue to work as a team.

Dr. Gurwitz suggests two options for the Board. They can vote on the motions and then open for discussion, or discussion can take place first and then a vote can be taken. Fran asks for clarification about the date to rescind the mask mandate for K-12 schools and also suggests voting on the two proposals separately.

Dr. Hirsh explains that we do not have jurisdiction over the masking policies of the public schools. We are going by their guidelines which say that their mask mandate will end on February 28th. We do not really have anything to vote on as far as K-12 in the public schools because they are going by a different guideline set by the state.

Dr. Tran asks if our mandate remains, will children in K-12 be required to wear masks in school?

Dr. Hirsh states that if our mask mandate remains it doesn't really effect anything--the school system makes its students and teachers abide by the DESE rules and our mask mandate only applies to everyone else in the community.

Dr. Gurwitz asks Karyn Clark to clarify the item on the agenda related to the school mask mandate.

Karyn explains there was an error on the agenda item. The school mask mandate recension date should say February 28th to mirror the DESE mask extension deadline. Chareese asks if for some reason the numbers start going up, would we consider changing the date to mirror the school date?

Dr. Hirsh explains if by the 17th we do find that the numbers are going up we don't know if we would go for a 10 day extension or a two week extension. It depends on what has changed, if there's a new variant that has come along or if this is a result of the school vacation week that could cause more interactions. There is not a hard extension date. Fran asks if it is decided that the mask mandate needs to be put back in place, will the Board of Health need to meet again or will this mandate be able to be put in place without meeting.

Dr. Hirsh states that they could do an emergency order to cancel the recension and then come before the Board of Health in March with a new plan at that time.

Dr. Tran expresses that it's not a matter of if the mask mandate will be removed, but a question of when.

Gary asks why buildings will be opening up to the public again on February 14th but the mask mandate will be lifted days later on February 18th.

Edward explains that the 18th was chosen to allow a two week buffer from the day the city announced the possibility of rescinding the mandate. Opening up city offices wouldn't make sense to do on a Friday, so it was just logistical matter.

Dr. Gurwitz asks if anyone has a motion on the proposal to rescind the city wide mask mandate on February 18th, 2022.

Gary makes a motion to say that the Board of Health will rescind the city wide mask mandate to take effect February 18th, 2022.

Dr. Gurwitz seconds the motion.

Dr. Tran votes against rescinding the mask mandate.

Chareese votes against rescinding the mask mandate.

Gary votes in favor of rescinding the mask mandate.

Fran votes in favor of rescinding the mask mandate.

Dr. Gurwitz votes in favor of rescinding the mask mandate.

Motion passes 3-2.

Dr. Gurwitz asks if anyone has a motion on the proposal to rescind the K-12 mask mandate on February 28th, 2022.

Fran asks if this vote could be held off until the March meeting. She is concerned about the children and them coming back from vacation. Children will not have been in school the week before and there will not be any information at that time.

Dr. Gurwitz asks if the Board would agree to consider additional information from Dr. Hirsh on the motion to rescind the mask mandate in K-12 schools.

Dr. Hirsh explains that if DESE were to extend the mask mandate for public schools it would override anything that the Board of Health or City of Worcester would do. He does not believe that the Board has to necessarily vote on this item because it is out of our purview. This proposal asks the charter and diocesan schools to abide by this date as their rescission date, unless an individual school can show that they have a 90% vaccination rate, then masks can be removed earlier.

Dr. Gurwitz asks if the DESE regulations end on February 28th but the Board of Health extends the mask mandate for schools, would schools be following the DESE guidelines or the mandate passed by the Board of Health.

Karyn explains that if Worcester has a mask mandate in place for K-12 schools after February 28th, the schools would need to follow the city mandate.

Gary asks Dr. Hirsh what his recommendation is concerning the school mask mandate. Dr. Hirsh's recommendation is to follow the DESE guidelines pertaining to the mask mandate recension for K-12 schools on February 28th.

Gary would like to make a motion saying that the City of Worcester Board of Health should take the same action that DESE does concerning ending the school mask mandate on February 28th. He does not agree with tabling the vote for the school mask mandate rescission.

Dr. Gurwitz explains that in order for the Board to defer to the DESE guidelines the Board of Health would need to rescind the current K-12 mask mandate. Our local regulations override DESE. Dr. Gurwitz seconds the motion made by Gary stating that the Board of Health rescinds the K-12 mask mandate to take effect February 28th, 2022. However, the Board of Health recommends continuing to adhere to the DESE guidelines relating to masks.

Fran votes against rescinding the school mask mandate.

Gary is in favor of rescinding the school mask mandate.

Chareese votes against rescinding the school mask mandate.

Dr. Tran votes against rescinding the school mask mandate.

Dr. Gurwitz votes in favor of rescinding the school mask mandate.

The motion fails.

Fran would like to review the number of cases and the vaccination rates at the March meeting before voting on the K-12 mask mandate.

Dr. Tran is open to meeting prior to the March meeting to discuss the K-12 mask mandate as needed.

Next Meeting/Topics

Revisit the K-12 mask mandate rescission

COVID-19 update

Robert's Rules and Open Meeting Law

Civilian Review Board

Discuss the work the Board of Health does and its future

Discuss Mass General Brigham in Westborough

WRTA future fare policy

Next meeting will be Monday, March 7th, 2022 at 6:30 PM via WebEx.

Adjourn 8:38 PM



COVID 19 MITIGATION CHANGE PROPOSAL

2/7/2022 BOARD OF HEALTH MEETING

MICHAEL P. HIRSH, MD
CHIEF PANDEMIC INFORMATION OFFICER
MEDICAL DIRECTOR,
WORCESTER DIVISION OF PUBLIC HEALTH



The City of
WORCESTER
Public Health



PROPOSAL BEFORE THE WORCESTER BOH

RESPECTFULLY SUBMITTED ON BEHALF OF CITY MANAGER ED AUGUSTUS AND MIKE HIRSH
THOUGH WE CONTINUE TO STRONGLY RECOMMEND MASK-WEARING...
EFFECTIVE 2/18,

- THE EMERGENCY INDOOR MASK MANDATE ISSUED IN OCTOBER 2021 WILL BE RESCINDED FOR ALL CITIZENS
- WE WILL ALLOW INSTITUTIONS, CORPORATIONS, BUSINESSES AND INSITITUIONS OF HIGHER LEARNING WITH A >90% VACCINATION RATE TO ALLOW FOR MASK MANDATE RECISSION EFFECTIVE 2/8/2022 PENDING WBOH APPROVAL
- THE MA. DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION (DESE) HAS ITS OWN MASK MANDATE IN PLACE UNTIL 2/28. THIS WILL GOVERN WPS AND ITS FUTURE WITH MASKS.
- THE DIOCESAN AND CHARTER SCHOOLS WILL ABIDE BY THE DESE GUIDELINES

RATIONALE FOR NEW APPROACH

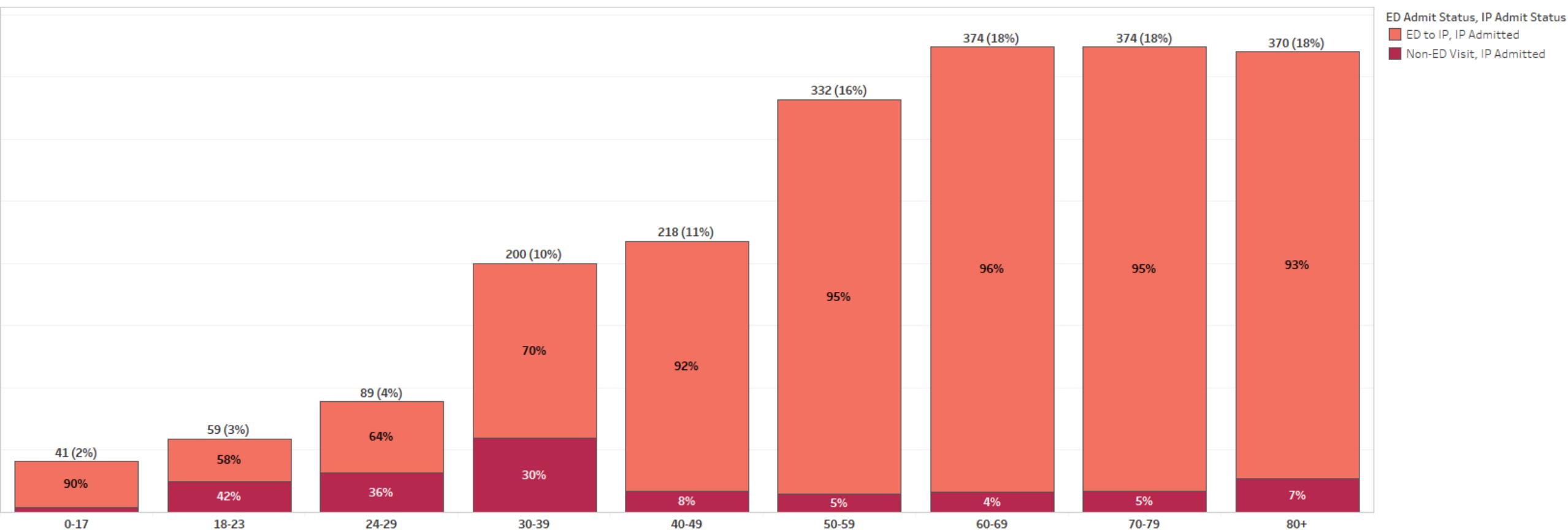
- COVID CASE NUMBERS HAVE DROPPED PRECIPITOUSLY AS HAS BEEN OBSERVED IN EUROPE AND SOUTH AFRICA WHICH EXPERIENCED THEOMICRON WAVE BEFORE US
- BLACKSTONE AREA WASTE WATER STUDIES CONFIRMED THIS TREND IS REAL AND NOT CAUSED BY HOME TESTING DIMINISHING OUR POSITIVITY RATE
- OUR CITY STANDS AT 60% FULL VACCINATION, AND WITH A TOTAL OF 52K COVID CASES SINCE 3/2020 WE FEEL THERE IS ADDITIONAL NATURAL IMMUNITY THAT WILL MITIGATE HUGE SPREAD IN THE COMMUNITY
- HOSPITALIZATION RATES HAVE DROPPED CONSIDERABLY, THOUGH ICU ADMISSIONS AND DEATH RATES ARE PREDICTABLY LAGGING BEHIND
- THE MADPH HAS AUTHORIZED EFFECTIVE 2/14 A RESUMPTION OF ELECTIVE SURGERY TO A 50% LEVEL.
- THE MENTAL HEATLH CONCERNS OF OUR CITIZENS WHO HAVE FELT THE MASK MANDATE HAS BEEN OPPRESSIVE IS REAL
- THE BUSINESS COMMUNITY IS POINTING TO THE FACT THAT MANY PATRONS CAN SEEK OUT ENTERTAINMENT, DINING, & SHOPPING OPTIONS IN NEIGHBORING MUNICIPALITIES WITHOUT THE MANDATE. THIS IS HURTING A BUSINESS COMMUNITY ALREADY ROCKED BY THE PANDEMIC. THIS CREATES ECONOMIC INSECURITY WITH POTENTIAL EXACERBATION OF UNEMPLOYMENT, HOMELESSNESS, EVICTION AND BANKRUPTCY.

UMMHC COVID - 19 Patient

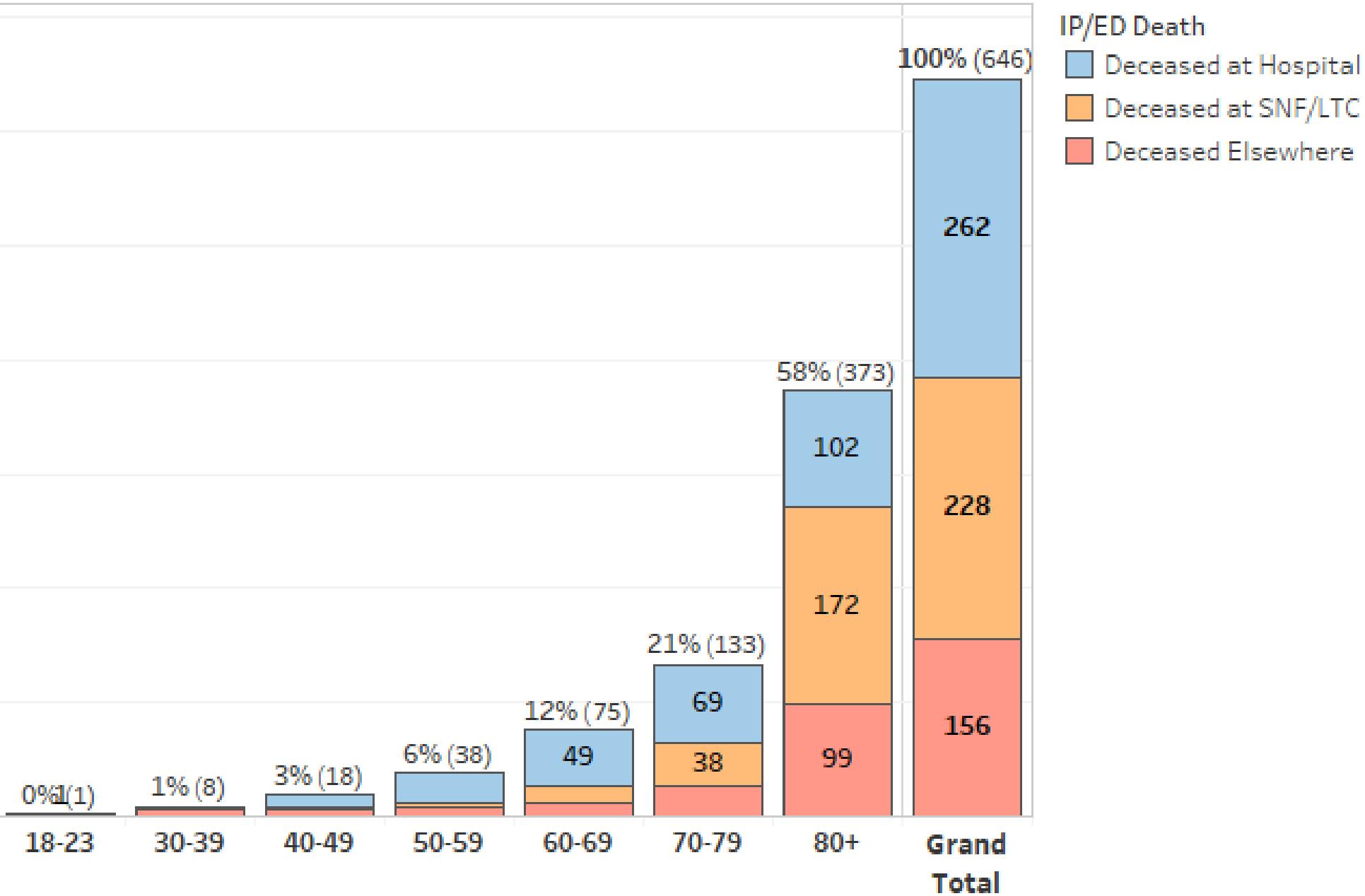
Demographic Summary

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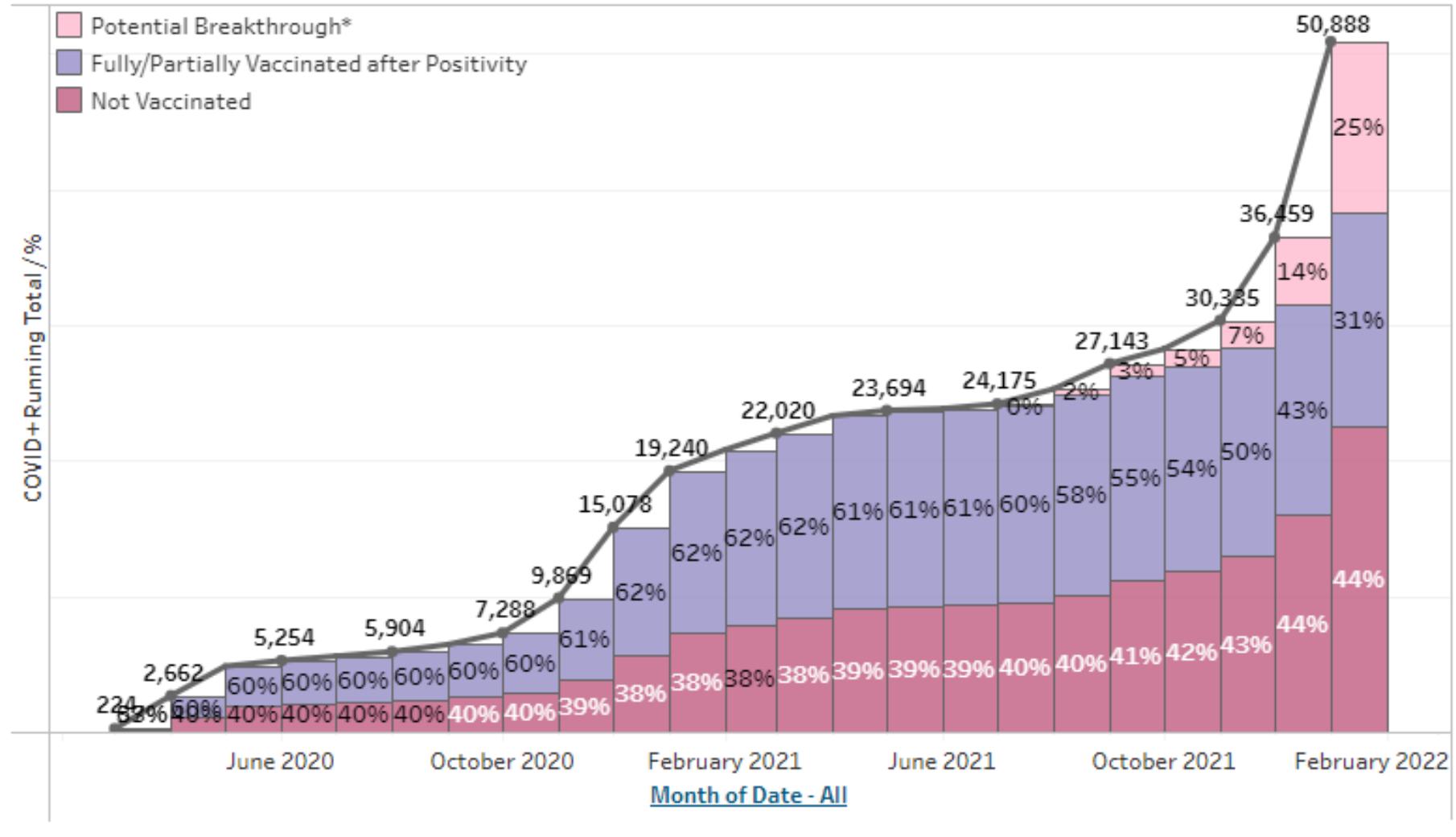
UMMH COVID+ IP Admissions by Age Group



Total COVID+ Deaths by Age Group and Location



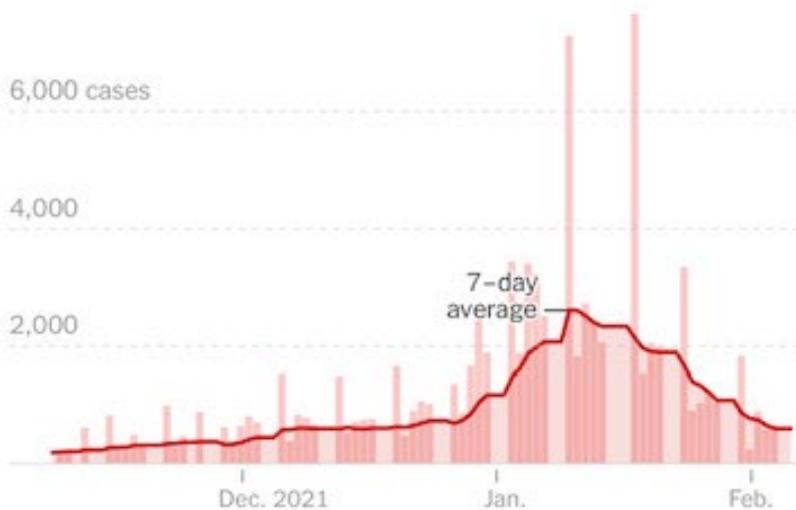
Cumulative Total Confirmed COVID+ Cases by Vaccination Status



Town	Age Group	Individuals with at least one dose	Individuals with at least one dose per capita	Fully vaccinated individuals	Fully vaccinated individuals per capita	Individuals with booster doses	Individuals with booster doses per capita
Worcester	5-11 Years	6,133	38%	3,368	21%	3	0%
Worcester	12-15 Years	6,653	72%	5,292	57%	559	6%
Worcester	16-19 Years	7,734	60%	6,330	49%	1,730	14%
Worcester	20-29 Years	24,519	68%	20,047	55%	6,150	17%
Worcester	30-49 Years	44,195	90%	37,585	77%	14,118	29%
Worcester	50-64 Years	33,002	>95%	28,920	89%	15,079	46%
Worcester	65-74 Years	15,425	>95%	13,673	>95%	9,250	66%
Worcester	75+ Years	10,527	>95%	9,309	91%	6,619	65%
Worcester	Total	148,213	77%	124,525	65%	53,508	28%
% Pop Vaccinated using New Census							
Total of 206,518			72%		60%		26%

New reported cases by day

DAILY AVG. ON FEB. 6 605 14-DAY CHANGE -68%



Hospitalized

14-DAY CHANGE
+4%



Deaths

LAST TWO WEEKS

129



Test positivity

14-DAY AVG.

16%



Fully vaccinated

ALL AGES

70%

5 AND UP

74%

65 AND UP

92%



Today



Covid-19



For You



Sections

Daily new cases PER 100K

72.8 >

Infection rate

0.65 >

Positive test rate

7.4% >

% Vaccinated 1+ DOSE

84.3% >



7-day average continues to fall, and is currently **135.14**, which is less than half of what it was last week, and now well below last year's peak of about 200.

BOTH HOSPITALS REPORTED CASES INPATIENT OVER THE WEEK DOWN AS OF 2/4 – BY 67% AT ST.VINCENTS AND 50% AT UMMHC

Upper Blackstone Clean Water Raw Influent

Sample collection date: February 2, 2022

SARS-CoV-2 virus in wastewater

DETECTED

Virus concentration
(copies per liter of sewage)

743,213

Normalized* virus concentration
(copies per liter of sewage)

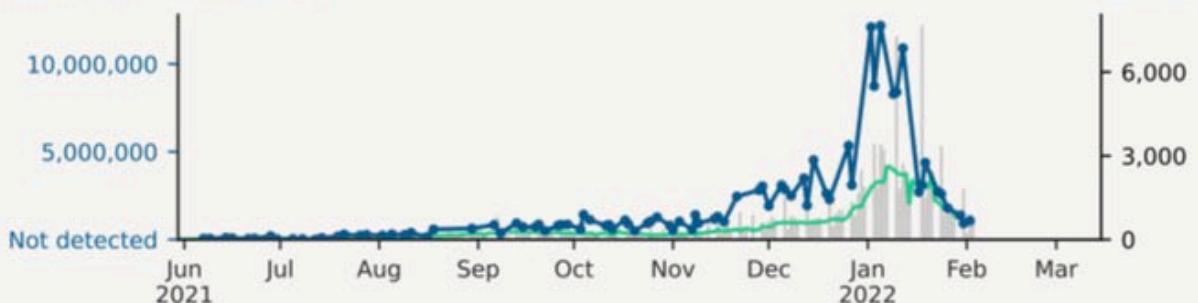
1,076,077

*Normalized virus concentration value is derived by adjusting the raw virus concentration to the PMMoV fecal marker in order to account for dilution

Normalized virus concentration over time

Normalized SARS-CoV-2 virus
concentration (copies / L of sewage)

New cases in county
on sampling date



—●— Normalized SARS-CoV-2 virus concentration

—■— 7-day rolling average of new cases in your county

||| New cases in your county

CAVEATS TO OUR PROPOSAL

- THE UNVACCINATED, WITH A 97x MORE LIKELY CHANCE OF MORTALITY FROM COVID, SHOULD CONTINUE TO MASK
- PATIENTS WITH IMMUNOCOMPROMISE DISEASE (APPROX. 5% OF THE POPULATION) SHOULD CONTINUE TO MASK
- VACCINATED INDIVIDUALS LIVING/WORKING WITH THE TYPE OF PEOPLE DESCRIBED IN ITEMS 1 & 2 SHOULD MASK
- ANYONE OVER 75 SHOULD CONSIDER CONTINUING TO MASK IN PUBLIC INDOOR SITUATIONS
- ANYONE MAY CHOOSE TO CONTINUE TO MASK FOR THEIR OWN SENSE OF WELL BEING
- INDIVIDUAL ESTABLISHMENTS MAY CONTINUE TO ASK THE PUBLIC TO MASK IN CONSIDERATION OF THEIR EMPLOYEES
- WE MUST BE A MASK-TOLERANT COMMUNITY THAT DOES NOT SHAME OR CONFRONT MASK-WEARERS
- THE CITIZENS OF WORCESTER SHOULD NOT THROW THEIR MASKS AWAY-MORE OUTBREAKS AND POTENTIAL VARIANTS CAN EMERGE
- WE ENCOURAGE CITIZENS TO MAKE MAXIMUM USE OF TESTING ESPECIALLY WHEN SYMPTOMATIC AND FOLLOW 5 DAY QUARANTINING GUIDELINES FOR EXPOSURE AND 5 DAY WITH TEST POSITIVITY WITH MASK WEARING FOR A TOTAL OF 10 DAYS IN BOTH SITUATIONS
- IT WILL BE THE WDPH'S DUTY TO BE MONITORING ALL THE TRENDS AND DATA TO BE ABLE TO ISSUE WARNINGS ABOUT CHANGES IN OUR RECOMMENDATIONS- THIS IS A REFLECTION OF THE EVER-CHANGING POTENTIAL OF THE VIRUS TO MUTATE



WDPH PROPOSAL FOR WBOH CONSIDERATION



- IT IS OUR CONSIDERED OPINION THAT WITH AN ADDITIONAL 2 WEEKS OF DATA THAT WE WILL ACCRUE BY 2/18 THAT WE WILL SEE THE POSITIVE INDICATORS IMPROVE EVEN MORE
- 2/19-2/28 IS SCHOOL VACATION WEEK AND WILL MAKE FOR A GOOD PERIOD OF TIME TO SEE IF THERE ARE CHANGES IN OUR OUTLOOK . IT WILL ALSO GIVE FAMILIES MORE OPTIONS TO RECREATE AND ENGAGE IN COMMERCE IN WORCESTER
- THE STRAINS ON THE ECONOMY AND MENTAL WELLNESS OF OUR CITIZENRY HAVE BEEN GREAT. WE BELIEVE IT IS TIME TO JUDICIOUSLY RESCIND SOME OF THE RESTRICTIONS THAT HAVE BEEN A SOURCE OF STRESS.
- NEEDLES IN ARMS AS A GOAL FOR THE CITY ARE NOT GOING AWAY. THERE WILL BE A MAJOR PUSH FOR SCHOOL VACCINATIONS DURING SCHOOL VACATION WEEK AND WE ARE CONTINUING TO ENCOURAGE VACCINATION/BOOSTERS AT NUMEROUS FREE CLINIC OPPORTUNITIES THROUGHT THE CITY.
- WE CONTINUE TO STRONGLY URGE THAT PEOPLE WHO WISH TO WEAR MASKS CONTINUE TO DO SO AT THEIR OWN DISCRETION
- WE THANK THE WORCESTER BOARD OF HEALTH FOR THE OPPORTUNITY TO PRESENT THIS PROPOSAL AND TO THE CITIZENS OF WORCESTER FOR THEIR SUPPORT OF PUBLIC HEALTH MEASURES THROUGHOUT THE PANDEMIC



hirshm@ummhc.org

info@gunbuybacks.org

<http://www.gunxgun.org/>

