OFFICE OF THE TOWN ADMINISTRATOR
870 Moraine Street
Marshfield, MA 02050

MARSHFIELD'S COVID – 19 TASK FORCE UPDATE

July 6, 2020

Task Force: Police, Fire, Board of Health, Board of Selectmen, Emergency Operation Center, Town Administrator, Schools, DPW and Council on Aging.

To All Marshfield Residents:

This update is intended to inform Marshfield residents and visitors that the Massachusetts Department of Public Health, per the MAVEN database, is reporting that as of July 6, 2020 there are at least 1,446 suspected and/or confirmed cases of Covid-19.

The number of confirmed cases in Marshfield is 169. The number of probable cases is 29 which we are now reporting separately, and not grouping with confirmed cases, in accordance with DPH Covid-19 data reporting.

Moving forward, we will report both confirmed and probable cases separately and identified as such. We regret to report that to date, there have been 23 deaths in our community attributed to Covid-19.

The numbers we provide are cumulative data from March 17, 2020 to the present date.

BOSTON — The Baker-Polito Administration today announced that on July 6, Phase III of the Commonwealth's reopening plan will begin and updates on gatherings will be in effect. For the City of Boston, Phase III and the gatherings order will take effect on Monday, July 13.

The Department of Public Health (DPH) also issued updated guidance to mitigate the spread of COVID-19.

Step One of Phase III:

On May 18, the administration released a four-phased plan to reopen the economy based on public health data, spending at least three weeks in each phase. Key public health data, such as new cases and hospitalizations, have been closely monitored and has seen a decline allowing for Phase III to begin on July 6th. Phase III will begin on July 13 in Boston.

Since mid-April, the 7-day average for the positive COVID-19 test rate is down 94 percent, the 3-day average of hospitalized patients is down 79 percent and the number of hospitals in surge is down 86 percent.

More than 1,000,000 total COVID-19 tests have been administered, and testing continues throughout the state.

The following businesses will be eligible to reopen in Step One of Phase III, subject to industry-specific rules concerning capacity and operations:

- Movie theaters and outdoor performance venues;
- Museums, cultural and historical sites;
- Fitness centers and health clubs;
- Certain indoor recreational activities with low potential for contact;

- Professional sports teams, under the authority of league-wide rules, may hold games without spectators

Full guidance and list of businesses eligible to reopen in Step One of Phase III can be found at **www.mass.gov/reopening**. Businesses and sectors set to begin opening in Phase III are subject to compliance with all mandatory safety standards.

Revised Gatherings Order:

Under the updated gatherings order, indoor gatherings are limited to eight people per 1,000 square feet, but should not exceed 25 people in a single enclosed, indoor space.

Outdoor gatherings in enclosed spaces are limited to 25 percent of the facility's maximum permitted occupancy, with a maximum of 100 people in a single enclosed outdoor space. This includes community events, civic events, sporting events, concerts, conventions and more. This order does not apply to outdoor, unenclosed gatherings if proper social distancing measures are possible.

This revised order does not supersede previously issued sector guidance, and is effective beginning Monday, July 6. It will be effective Monday, July 13 in the City of Boston.

Public Health Guidance:

In Phase III, health care providers may continue to provide in-person procedures and services as allowed in Phase II, with the addition of certain group treatment programs and day programs. These programs include adult day health, day habilitation programs, and substance abuse services day treatment and outpatient services. Certain human services programs can reopen including community based day services for adults with intellectual and cognitive disabilities and psychosocial rehabilitation clubhouses.

Health care providers are subject to compliance with all mandatory safety standards, and must continue to utilize prioritization policies established in Phase II for care delivery and scheduling, as well as monitor patient volume for non-essential, elective procedures and services.

Read the full guidance **here**.

In Phase III, visitation guidelines have been updated for 24/7 congregate care facilities and programs overseen by the Executive Office of Health and Human Services, including the Departments of Developmental Services, Youth Services, Children and Families, Public Health, Mental Health and the Mass Rehabilitation Commission. Offsite visits, including overnight visits, will be allowed, under specific guidelines. Other updated guidelines, including visitation for long term care facilities, will be released later today. Complete visitation guidance is available at **www.mass.gov/hhs/reopening**.

MassHealth will also extend its current telehealth flexibility through at least the end of the year to ensure member access to critical health care services and encourage continued adherence to preventative public health precautions.

More

Executive Office of Health and Human Services

The Executive Office of Health and Human Services is the largest secretariat in state government and is comprised of 12 agencies, in addition to 2 soldiers' homes and the MassHealth program. Our efforts are focused on the health, resilience, and independence of the one in four residents of the Commonwealth we serve.

For immediate release
Thursday, June 25, 2020
Contact: Jacqueline Reis 781-605-4419

DESE Releases Initial Back-to-School Guidance

In-person learning a priority, health and safety requirements outlined

BOSTON – Today, the Department of Elementary and Secondary Education (DESE) released initial guidance for school reopening this fall that prioritizes getting students safely back to school in person, following a comprehensive set of health and safety requirements. The Department is also requiring schools to create hybrid learning plans to teach students in-person and remotely on alternating schedules, and to have robust remote learning plans in place, should those alternate learning models be needed.

In addition, the Baker-Polito Administration announced the allocation of approximately $200 million from the Commonwealth's federal Coronavirus Relief Fund for costs related to reopening public schools. Schools are eligible to receive up to $225 per student for eligible costs incurred due to the COVID-19 public health emergency, such as training for school staff, supplemental social and academic services, reconfiguration of school spaces, leasing of temporary facilities, and acquisition of health and hygiene supplies.

Municipalities, school districts, and charter schools may apply for these funds in the next few weeks, and this funding is intended to supplement other resources the Administration is providing to local cities and towns for COVID-19 response efforts. Other potential funding sources to support school reopening include $502 million from the Coronavirus Relief Fund that had previously been allocated by Governor Charlie Baker to cities and towns, as well as $194 million in federal Elementary and Secondary School Emergency Relief Fund grants.

In partnership with legislative leadership, the Administration is also committing $25 million in federal funds for a matching grant program to help school districts and charter schools close technology gaps that have inhibited remote learning for students and families who lack access to computers or internet connections.

The reopening approach is built on a thorough review of current medical and scientific literature and was developed after extensive consultation with medical professionals from Massachusetts General Hospital, the Massachusetts COVID-19 Command Center's Medical Advisory Board, and others. Based on the current public health data and COVID-19 trends, the medical community supports Massachusetts students' return to in-person learning, with appropriate health and safety guidelines in place.

"This plan will allow schools to responsibly do what is best for students — bring them back to school to learn," **said Governor Charlie Baker.** "COVID-19 has presented numerous challenges for our schools, educators and students, but through collaboration with school officials and the medical community, we have developed both a comprehensive plan endorsed by the Massachusetts Chapter of the American Academy of Pediatrics and a financial package to support schools throughout the Commonwealth."

"Our educators and staff are essential to preparing for the safe and successful fall reopening of schools throughout the Commonwealth," **said Lt. Governor Karyn Polito.** "As we prepare to head back to school, we continue to work collaboratively to develop guidance that will support the ability to meet the challenges presented by this public health emergency."

"There is clear consensus from both education and medical groups that while we must respect the risks of COVID-19 transmission associated with in-person schooling, we must also acknowledge the challenges and consequences of keeping students out of school, which affects their physical health, social and emotional well-being and educational progress," **said Education Secretary James Peyser.**

At this time, the public health evidence suggests schools have not played a significant role in COVID-19 transmission and that children, particularly younger children, are less likely than adults to be infected with COVID-19. Furthermore, if they become infected, it appears children may be less likely to transmit COVID-19 to others.

“The message from the medical community remains strong and consistent: We need to get our children back to school, as soon as it is safe to do so,” **said Sandra Nelson, MD, an infectious diseases physician at Massachusetts General Hospital.** “We believe that returning to the classroom — with appropriate precautions in place — can be done safely if we all remain vigilant. Our children deserve nothing less.”

The Massachusetts Chapter of the American Academy of Pediatrics endorsed the guidance.

“The Massachusetts Chapter of the American Academy of Pediatrics and the Department of Elementary and Secondary Education share the goal of bringing most students in the Commonwealth back to in-person learning this fall while minimizing the risk to them, the school staff, and their families,” **said Dr. Lloyd Fisher, incoming president of the MCAAP.** “We are quite pleased with the recommendations in these guidelines and impressed with how thorough the Department was in researching the current data and their understanding of the spread of illness, impact of the disease on children, likelihood of children infecting others, and the significant negative consequences that prolonged school closures have on the educational, emotional and social well-being of children.”

To reopen schools in the fall, school officials must develop the following three models of learning:

- In-person learning with new health and safety requirements: Students return to school buildings, but schedules, classrooms and protocols are modified to meet health and safety requirements.
- Hybrid learning: Students learn both in-person and remotely.

- Remote learning: Learning takes place entirely remotely.

“While the Department is working toward the full in-person return to school of all students, school districts must be prepared to work on a continuum of three broad options for reopening,” **said Elementary and Secondary Education Commissioner Jeffrey C. Riley.** “We feel this gives school districts the readiness they need to educate students in person, and the flexibility to adapt if the health situation changes.”

“My first concern is student and community safety, and all of us on the Return-to-School Working Group focused on how to balance this priority with learning,” **said Takeru Nagayoshi, an English teacher at New Bedford High School and the 2020 Massachusetts Teacher of the Year.** “This initial back-to-school guidance is the product of many stakeholders’ combined efforts. It recognizes the importance of in-person learning while establishing guardrails to prevent the virus from spreading.”

Public school officials will need to indicate to DESE if it is feasible for their district to return students to school for in-person learning following the health and safety requirements. In August, districts will be required to submit comprehensive fall reopening plans that include all three models. Additionally, all school districts will also need a focused plan for effectively serving special student populations in each of these learning models.

In-Person Learning

The guidance prioritizes getting students back to in-person learning — safely, following a comprehensive set of health and safety requirements. The Department DESE is asking school officials to change classroom configurations to space students farther apart from each other, set up additional classrooms in libraries, auditoriums, and cafeterias, and make scheduling changes.

- Elementary schools should aim to keep students in the same group throughout the day, and middle and high schools are encouraged to minimize mixing student groups to the extent feasible.

- All students in second grade or older are required to wear a mask or face covering, with time built in for mask breaks throughout the day.
    - Kindergarten and first grade students should be encouraged to wear a mask or face shield.
    - Face shields may be an option for students with medical, behavioral or other challenges who are unable to wear masks.
- All adults, including educators and staff, are required to wear masks or face coverings.
- Exceptions to mask or face covering requirements must be made for people for whom wearing a mask or face covering is impossible due to medical conditions, disability impact or other health or safety factors.

Physical Distancing

As reviewed and advised by the Massachusetts COVID-19 Command Center Medical Advisory Board, schools are encouraged to aim for a physical distance of 6 feet when feasible, and 3 feet is the minimum distance allowed as informed by evidence.[i]

There is no maximum number for group size, so long as schools adhere to the physical distancing requirements above.

Health Screening

Families will be the primary health screeners of students, looking for signs or symptoms of COVID-19. Screening procedures are not required for students to enter school. Temperature checks are not recommended for students due to the high likelihood of potential false positive and false negative results.

Families will receive information to support them in conducting symptom checks, and they should not send students to school if they exhibit COVID-19 symptoms. The Department will provide a symptoms checklist and other guides to help families and students.

- A student who shows COVID-19 symptoms during the school day should be moved to a specific room designated for medical isolation until they can be picked up by a family member. This room must be separate from the nurse's office or other space where routine medical care is provided.

Schools should have an inventory of standard health care supplies such as masks and gloves. The Department has made $193.8 million in federal funds available to help districts address needs associated with the COVID-19 pandemic, such as technology and safety supplies. That money, available through CARES Act Elementary and Secondary School Emergency Relief Funds, is allocated based on district poverty levels. In addition, DESE is providing a bulk state ordering opportunity through which districts can submit their orders and payment to make the process as easy as possible.

Hybrid Learning Plans

In planning for the hybrid learning models, DESE recommends that school officials consider using an A/B cohort model that isolates two distinct groups of students who attend school in-person on different weeks, days or half days each day.

For instance, Group A would attend school in person from Monday through Friday of Week 1, while Group B learns at home remotely. In Week 2, Group B would attend school in person and Group A would engage in remote learning at home. The week on/week off model may be easier on families, giving them a chance to prepare for childcare for a full week at a time.

Remote Learning

Remote learning will continue to be a feature for many students this fall. The Department's guidance states it is critical that districts have remote learning plans in place in the event modified in-person learning is not possible or in case remote learning is needed for individual students who cannot yet return to school in-person.

Additional guidance and final reopening guidance will be released in coming weeks. The guidance will address subjects including transportation, facilities and operations, athletics and extra-curricular activities, electives, student and teacher supports and other key policies.

JUNE 22, 2020

BOSTON — Today, the Baker-Polito Administration announced that Step Two of Phase II of the Commonwealth's four-phase reopening plan, ***Reopening Massachusetts***, will begin on Monday, June 22 to allow additional industries to resume operations under sector-specific guidelines.

Businesses and sectors set to begin operating in Step Two of Phase II are subject to compliance with all mandatory safety standards.

On May 18, the Administration **released** a four-phased plan to reopen the economy based on public health data, spending at least three weeks in each phase. Key public health data, such as

new cases and hospitalizations, has been closely monitored and seen a significant decline allowing for Step Two of Phase II to begin on June 22.

The following will be eligible to reopen in Step Two of Phase II on Monday, June 22:

- Indoor table service at restaurants;
- Close contact personal services, with restrictions;
- Retail dressing rooms, by appointment only;
- Offices, at 50 percent capacity

Full list and safety protocols available at **www.mass.gov/reopening**.

In order to give Step 2 businesses time to prepare, the Administration had previously released sector-specific guidance in advance of Phase II for industries including restaurants, close-contact personal services and sectors not otherwise addressed:

- **Guidance for Restaurants**
- **Guidance for Close-Contact Personal Services**
- **Guidance for Other Industries**
- **Guidance for Sectors Not Otherwise Addressed**

Before these sectors can resume operations under the guidelines, businesses must meet all safety standards, create a COVID-19 control plan, and complete a self-certification.

The Town of Marshfield will continue to follow the state's guidelines and recommendations on Boating, Marinas, Recreational Activities and Golf.

Safety Standards and Checklist: Restaurants

Reopening Phase II mandatory safety standards, recommended best practices and a checklist for restaurants. Permitted to open for outdoor table service: Phase II, Step 1, June 8th.

Restaurants may provide outdoor table service at the commencement of Phase 2 of the Commonwealth's Reopening Plan. Restaurants will be authorized at a later date and by a subsequent Phase 2 Order to commence indoor table service if the public health data reflects continued positive progression.

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Social Distancing

When indoor table service is permitted, restaurants are encouraged to structure operations to operate as much as possible through outdoor table service and to strictly limit indoor table service in order to assure effective compliance with social distancing requirements and to limit activities within confined spaces

Restaurants must comply with the following sector specific social distancing rules for providing dining services in all customer seating areas:

•Tables must be positioned so to maintain at least a 6 foot distance from all other tables and any high foot traffic areas (e.g., routes to bathrooms, entrances, exits); tables may be positioned closer if separated by protective / non-porous barriers (e.g., structural walls or plexi-glass dividers) not less than 6 feet high installed between tables and high foot traffic areas

•The size of a party seated at a table cannot exceed 6 people

•Restaurants may not seat any customers at the bar, but subject to any applicable building and fire code requirements, bar areas may be re-configured to accommodate table seating that complies with all spacing and other requirements in these COVID-19 safety standards

•All customers must be seated; eat-in service to standing customers (e.g., around bar areas) is prohibited

•Restaurants may provide carry-out or delivery service, but all safety standards for table separation, size of party, and hygiene must be maintained for any indoor or outdoor table seating that is available to carry-out patrons

•All other amenities and areas not employed for food and beverage service (e.g., dance floors, pool tables, playgrounds, etc.) must be closed or removed to prevent gathering of customers

•

Ensure separation of 6 feet or more between all individuals (workers, vendors, and customers) unless this creates a safety hazard due to the nature of the work or the configuration of the workspace:

•Close or reconfigure worker common spaces and high density areas where workers are likely to congregate (e.g., break rooms, eating areas) to allow 6 feet of physical distancing; redesign work stations to ensure physical distancing (e.g., separate tables, stagger workstations on either side of processing lines so workers are not face-to-face, use distance markers to assure spacing including in the kitchen area)

•Establish directional hallways and passageways for foot traffic if possible, to minimize contact (e.g., one-way entrance and exit to the restaurant). Post clearly visible signage regarding these policies

•Prohibit lingering in common areas (e.g., waiting areas, bathrooms) and ensure social distancing in common areas by marking 6 feet spacing with tape or paint on the floor and signage

•All customer-facing workers (e.g., servers, bus staff) must minimize time spent within 6 feet of customers

Designate assigned working areas to workers where possible to limit movement throughout the restaurant and limit contact between workers (e.g., assigning zones to servers)

Stagger work schedules and staff meal and break times, regulating maximum number of people in one place and ensuring at least 6 feet of physical distancing

Minimize the use of confined spaces (e.g., elevators, vehicles) by more than one individual at a time

Require face coverings for all customers and workers at all times, except where an individual is unable to wear a face covering due to medical condition or disability

Recommended best practices

Improve ventilation for enclosed spaces where possible (e.g., open doors and windows)

Customers may remove face coverings while seated at tables

Hygiene Protocols

All workers must wash their hands frequently, and table servers must wash their hands or apply hand sanitizer between each table interaction

Ensure access to handwashing facilities on site, including soap and running water, and allow sufficient break time for workers to wash hands frequently; alcohol-based hand sanitizers with at least 60% alcohol may be used as an alternative

Alcohol-based hand sanitizers with at least 60% alcohol should be made available at entrances, exits, and in the dining area

Supply workers at workplace location with adequate cleaning products (e.g., sanitizer, disinfecting wipes)

Post visible signage throughout the site to remind workers and customers of hygiene and safety protocols

Self-serve, unattended buffets, topping bars, drink stations, and other communal serving areas must remain closed

Condiments and similar products (e.g., salt, pepper, and salad dressing) should not be pre-set on tables and should instead only be provided upon request either in single-serving portions (e.g., individual packages or cups) or in serving containers that are sanitized between each use

Menus must be one of the following: 1) paper, single-use menus disposed after each use, 2) displayed menu (e.g., digital, whiteboard, chalkboard), 3) electronic menus viewed on customers' phones / mobile devices

Utensils and place settings must be either single-use or sanitized after each use; utensils should be rolled or packaged. Tables should not be pre-set to reduce opportunity for exposure

Tables and chairs must be cleaned and sanitized thoroughly between each seating

Staffing and Operations

When possible, reservations or call ahead seating should be encouraged; managers must ensure that diners waiting for tables do not congregate in common areas or form lines

Restaurants may not provide customers with buzzers or other devices to provide alerts that seating is available or orders are ready; restaurants should instead use no-touch methods such as audio announcements, text messaging, and notices on fixed video screens or blackboards

Provide training to workers on up-to-date safety information and precautions including hygiene and other measures aimed at reducing disease transmission, including:

•Social distancing, hand-washing, and requirement and proper use of face coverings

•Modifying practices for serving in order to minimize time spent within 6 feet of customers

•Self-screening at home, including temperature or symptom checks

•Reinforcing that staff may not come to work if sick

•When to seek medical attention if symptoms become severe

•Which underlying health conditions may make individuals more susceptible to contracting and suffering from a severe case of the virus

Restaurant operators should establish adjusted workplace hours and shifts for workers to minimize contact across workers and reduce congestion at entry points

Limit visitors and vendors on site; shipping and deliveries should be completed in designated areas

Workers should not appear for work if feeling ill

Restaurants must screen workers at each shift by ensuring the following:

•Worker is not experiencing any symptoms such as fever (100.3 and above), cough, shortness of breath, or sore throat;

•Worker has not had ‘close contact’ with an individual diagnosed with COVID-19. “Close contact” means living in the same household as a person who has tested positive for COVID-19, caring for a person who has tested positive for COVID-19, being within 6 feet of a person who has tested positive for COVID-19 for 15 minutes or more, or coming in direct contact with secretions (e.g., sharing utensils, being coughed on) from a person who has tested positive for COVID-19, while that person was symptomatic

•Worker has not been asked to self-isolate or quarantine by their doctor or a local public health official

•Workers who are sick or feeling ill must be sent home.

Anyone showing signs of illness may be denied entry

If the employer is notified of a positive case at the workplace, the employer shall notify the local Board of Health (LBOH) in the city or town where the workplace is located and assist the LBOH as reasonably requested to advise likely contacts to isolate and self-quarantine. Testing of other workers may be recommended consistent with guidance and / or at the request of the LBOH

Notify workers that they may not work if they test positive for COVID-19 (they should be isolated at home) or are found to be a close contact of someone with COVID-19 (they should be quarantined at home)

Post notice to workers and customers of important health information and relevant safety measures as outlined in the Commonwealth's **Mandatory Safety Standards for Workplace**

Designate the Person in Charge (105 CMR 590) for each shift to oversee implementation of the guidelines in this document

Restaurants will be allowed to maximize outdoor dining space, including patios and parking lots where available, where municipal approval is obtained

Recommended best practices

When taking reservations and when seating walk-in customers, restaurants should retain a phone number of someone in the party for possible contact tracing

Encourage use of technological solutions where possible to reduce person-to-person interaction (e.g., contactless payment, mobile ordering, text on arrival for seating)

Workers who are particularly high risk to COVID-19 according to the Centers for Disease Control (e.g., due to age or underlying conditions) are encouraged to stay home or arrange an alternate work assignment

Workers are strongly encouraged to self-identify symptoms or any close contact to a known or suspected COVID-19 case to the employer

Encourage workers who test positive for COVID-19 to disclose to the employer for purposes of cleaning / disinfecting and contact tracing

Cleaning and Disinfecting

Clean commonly touched surfaces in restrooms (e.g., toilet seats, doorknobs, stall handles, sinks, paper towel dispensers, soap dispensers) frequently and in accordance with CDC guidelines

Keep cleaning logs that include date, time, and scope of cleaning

Conduct frequent disinfecting of heavy transit areas and high-touch surfaces (e.g., doorknobs, elevator buttons, staircases)

Implement procedures to increase cleaning / disinfecting in the back-of-house. Avoid all food contact surfaces when using disinfectants. Food contact surfaces must be cleaned

and sanitized before use with a sanitizer approved for food contact surfaces. Non-food contact surfaces must be frequently cleaned

In the event of a presumptive or actual positive COVID-19 case of a worker, patron, or vendor, the restaurant must be immediately shut down for 24 hours and then must be cleaned and disinfected in accordance with current CDC guidance before re-opening

Checklist

SOCIAL DISTANCING

Ensure >6ft between individuals

☐ When indoor table service is permitted, restaurants are encouraged to structure operations to operate as much as possible through outdoor table service and to strictly limit indoor table service in order to assure effective compliance with social distancing requirements and to limit activities within confined spaces

☐ Restaurants must comply with the following sector specific social distancing rules for providing dining services in all customer seating areas:

•Tables must be positioned so to maintain at least a 6 foot distance from all other tables and any high foot traffic areas (e.g., routes to bathrooms, entrances, exits); tables may be positioned closer if separated by protective / non-porous barriers (e.g., structural walls or plexi-glass dividers) not less than 6 feet high installed between tables and high foot traffic areas

•The size of a party seated at a table cannot exceed 6 people

•Restaurants may not seat any customers at the bar, but subject to any applicable building and fire code requirements, bar areas may be re-configured to accommodate table seating that complies with all spacing and other requirements in these COVID-19 safety standards

•All customers must be seated; eat-in service to standing customers (e.g., around bar areas) is prohibited

•Restaurants may provide carry-out or delivery service, but all safety standards for table separation, size of party, and hygiene must be maintained for any indoor or outdoor table seating that is available to carry-out patrons

•All other amenities and areas not employed for food and beverage service (e.g., dance floors, pool tables, playgrounds, etc.) must be closed or removed to prevent gathering of customers

☐ Ensure separation of 6 feet or more between all individuals (workers, vendors, and customers) unless this creates a safety hazard due to the nature of the work or the configuration of the workspace:

•Close or reconfigure worker common spaces and high density areas where workers are likely to congregate (e.g., break rooms, eating areas) to allow 6 feet of physical distancing; redesign work stations to ensure physical distancing (e.g., separate tables,

stagger workstations on either side of processing lines so workers are not face-to-face, use distance markers to assure spacing including in the kitchen area)

•Establish directional hallways and passageways for foot traffic if possible, to minimize contact (e.g., one-way entrance and exit to the restaurant). Post clearly visible signage regarding these policies

•Prohibit lingering in common areas (e.g., waiting areas, bathrooms) and ensure social distancing in common areas by marking 6 feet spacing with tape or paint on the floor and signage

•All customer-facing workers (e.g., servers, bus staff) must minimize time spent within 6 feet of customers

☐ Designate assigned working areas to workers where possible to limit movement throughout the restaurant and limit contact between workers (e.g., assigning zones to servers)

☐ Stagger work schedules and staff meal and break times, regulating maximum number of people in one place and ensuring at least 6 feet of physical distancing

☐ Minimize the use of confined spaces (e.g., elevators, vehicles) by more than one individual at a time

☐ Require face coverings for all customers and workers at all times, except where an individual is unable to wear a face covering due to medical condition or disability

☐ Improve ventilation for enclosed spaces where possible (e.g., open doors and windows)

☐ Customers may remove face coverings while seated at table

HYGIENE PROTOCOLS

Apply robust hygiene protocols

☐ All workers must wash their hands frequently, and table servers must wash their hands or apply hand sanitizer between each table interaction

☐ Ensure access to handwashing facilities on site, including soap and running water, and allow sufficient break time for workers to wash hands frequently; alcohol-based hand sanitizers with at least 60% alcohol may be used as an alternative

☐ Alcohol-based hand sanitizers with at least 60% alcohol should be made available at entrances, exits, and in the dining area

☐ Supply workers at workplace location with adequate cleaning products (e.g., sanitizer, disinfecting wipes)

☐ Post visible signage throughout the site to remind workers and customers of hygiene and safety protocols

☐ Self-serve, unattended buffets, topping bars, drink stations, and other communal serving areas must remain closed

☐ Condiments and similar products (e.g., salt, pepper, and salad dressing) should not be pre-set on tables and should instead only be provided upon request either in single-serving portions (e.g., individual packages or cups) or in serving containers that are sanitized between each use

☐ Menus must be one of the following: 1) paper, single-use menus disposed after each use, 2) displayed menu (e.g., digital, whiteboard, chalkboard), 3) electronic menus viewed on customers' phones / mobile devices

☐ Utensils and place settings must be either single-use or sanitized after each use; utensils should be rolled or packaged. Tables should not be pre-set to reduce opportunity for exposure

☐ Tables and chairs must be cleaned and sanitized thoroughly between each seating

STAFFING & OPERATIONS

Include safety procedures in the operations

☐ When possible, reservations or call ahead seating should be encouraged; managers must ensure that diners waiting for tables do not congregate in common areas or form lines

☐ Restaurants may not provide customers with buzzers or other devices to provide alerts that seating is available or orders are ready; restaurants should instead use no-touch methods such as audio announcements, text messaging, and notices on fixed video screens or blackboards

☐ Provide training to workers on up-to-date safety information and precautions including hygiene and other measures aimed at reducing disease transmission, including:

•Social distancing, hand-washing, and requirement and proper use of face coverings

•Modifying practices for serving in order to minimize time spent within 6 feet of customers

•Self-screening at home, including temperature or symptom checks

•Reinforcing that staff may not come to work if sick

•When to seek medical attention if symptoms become severe

•Which underlying health conditions may make individuals more susceptible to contracting and suffering from a severe case of the virus

☐ Restaurant operators should establish adjusted workplace hours and shifts for workers to minimize contact across workers and reduce congestion at entry points

☐ Limit visitors and vendors on site; shipping and deliveries should be completed in designated areas

☐ Workers should not appear for work if feeling ill

☐ Restaurants must screen workers at each shift by ensuring the following:

•Worker is not experiencing any symptoms such as fever (100.3 and above), cough, shortness of breath, or sore throat;

•Worker has not had ‘close contact’ with an individual diagnosed with COVID-19. “Close contact” means living in the same household as a person who has tested positive for COVID-19, caring for a person who has tested positive for COVID-19, being within 6 feet of a person who has tested positive for COVID-19 for 15 minutes or more, or coming in direct contact with secretions (e.g., sharing utensils, being coughed on) from a person who has tested positive for COVID-19, while that person was symptomatic

•Worker has not been asked to self-isolate or quarantine by their doctor or a local public health official

•Workers who are sick or feeling ill must be sent home.

☐ Anyone showing signs of illness may be denied entry

☐ Encourage workers who test positive for COVID-19 to disclose to the employer for purposes of cleaning / disinfecting and contact tracing. If the employer is notified of a positive case at the workplace, the employer shall notify the local Board of Health (LBOH) in the city or town where the workplace is located and assist the LBOH as reasonably requested to advise likely contacts to isolate and self-quarantine. Testing of other workers may be recommended consistent with guidance and / or at the request of the LBOH

☐ Notify workers that they may not work if they test positive for COVID-19 (they should be isolated at home) or are found to be a close contact of someone with COVID-19 (they should be quarantined at home)

☐ Post notice to workers and customers of important health information and relevant safety measures as outlined in the Commonwealth's **Mandatory Safety Standards for Workplace**

☐ Designate the Person in Charge (105 CMR 590) for each shift to oversee implementation of the guidelines in this document

☐ Restaurants will be allowed to maximize outdoor dining space, including patios and parking lots where available, where municipal approval is obtained

☐ When taking reservations and when seating walk-in customers, restaurants should retain a phone number of someone in the party for possible contact tracing

☐ Encourage use of technological solutions where possible to reduce person-to-person interaction (e.g., contactless payment, mobile ordering, text on arrival for seating)

☐ Workers who are particularly high risk to COVID-19 according to the Centers for Disease Control (e.g., due to age or underlying conditions) are encouraged to stay home or arrange an alternate work assignment

☐ Workers are strongly encouraged to self-identify symptoms or any close contact to a known or suspected COVID-19 case to the employer

CLEANING & DISINFECTING

Incorporate robust hygiene protocols

☐ Clean commonly touched surfaces in restrooms (e.g., toilet seats, doorknobs, stall handles, sinks, paper towel dispensers, soap dispensers) frequently and in accordance with CDC guidelines

☐ Keep cleaning logs that include date, time, and scope of cleaning

☐ Conduct frequent disinfecting of heavy transit areas and high-touch surfaces (e.g., doorknobs, elevator buttons, staircases)

☐ Implement procedures to increase cleaning / disinfecting in the back-of-house. Avoid all food contact surfaces when using disinfectants. Food contact surfaces must be cleaned and sanitized before use with a sanitizer approved for food contact surfaces. Non-food contact surfaces must be frequently cleaned

☐ In the event of a presumptive or actual positive COVID-19 case of a worker, patron, or vendor, the restaurant must be immediately shut down for 24 hours and then must be cleaned and disinfected in accordance with current CDC guidance before re-opening

Phase II Downloads and Translations

Baker-Polito Administration Releases Detailed Guidelines for the Phased Reopening of Child Care, Camps and Summer Recreational Programs

FOR IMMEDIATE RELEASE:
6/01/2020

- Executive Office of Education
- Office of Governor Charlie Baker and Lt. Governor Karyn Polito
- Governor's Press Office

BOSTON — The Baker-Polito Administration today released health and safety requirements that apply to the reopening of all child care programs, recreational camps and municipal or recreational programs not traditionally licensed as camps as part of the phased reopening of the Commonwealth.

The Department of Early Education and Care (EEC) assembled a Health and Safety Working Group and solicited input from thousands of child care providers from across the Commonwealth, as well as consulted with medical experts at Boston Children's Hospital, to develop the **Massachusetts Child and Youth Serving Programs Reopen Approach: *Minimum Requirements for Health and Safety.*** These requirements must be implemented to protect the health and safety of all children, families and staff and minimize the spread of COVID-19.

Child care programs licensed by EEC will be required to submit plans to the department to be approved once Phase II reopening begins. The Department will provide templates for submission as the process is launched and will utilize an attestation approval process. In order to mitigate the impact of business interruptions caused by fluctuations in family demand and changes in group sizes outlined in the health and safety guidelines, EEC will provide grants to programs that currently receive CCDBG subsidies through the first two months of reopening. More details on the reopening process and child care provider grant program will be released shortly.

Recreational camps and municipal or recreational youth programs not traditionally licensed as camps may open during Phase II. Residential camps and other overnight stays will not be allowed until Phase III.

Some highlights of the Minimum Requirements for Health and Safety include:

Preparedness Planning: Prior to reopening, all programs must develop plans for daily health screenings and ways to identify children and staff who are sick, symptomatic, or who become exposed to coronavirus. Programs must also have a plan in place to handle possible closings, staff absences, and gaps in child attendance, as well as determine how to communicate with staff, parents, local boards of health and others.

- Programs must screen all staff and children with a temperature check, before they are permitted to enter the child care space. Programs must establish one entry point to ensure no one is allowed in the building until they pass a health screening.
- Parents must wear masks or face coverings when picking up and dropping off their child on a staggered schedule and will be met at the door by staff.

Face Coverings: Children over the age of 2 should be encouraged to wear a face covering, at the discretion of parents or guardians, if they can safely wear, remove, and handle masks. Certain exceptions are detailed in the guidance. Masks do not need to be worn while playing outdoors if children are able to keep 6 feet apart.

- Children should not wear masks while eating, drinking, sleeping, or napping.

Staff members are encouraged to wear masks or cloth face coverings at all times when caring for children and interacting with parents and families. If possible, the department recommends staff wear transparent masks to enable children to see facial expressions, which is important for child development.

Programs are asked to make additional changes to their operations, including canceling field trips and not holding activities involving attendance of multiple groups. Non-essential visitors, including parents and volunteers, will be restricted from entering the premises of child care programs.

Group sizes and staffing: Group sizes must be restricted to a maximum of 10 children, with a total of 12 individuals including children and staff in each room. Consistent with pre-Covid operations, the infant-to-staff ratio is smaller, with 7 infants to 2 staff members and a maximum of group size of 9.

- Children must remain with the same group each day and at all times while in care. Siblings should be kept in the same group, when suitable.
- Groups must not be combined at any time.
- The same staff must remain with the same group of children each day. Staff should not float between groups either during the day or from day-to-day, with some limited exceptions.

Group transportation should only be provided during the phased reopening when there is no other option to transport children to and from the program. Programs intending to provide transportation services should follow detailed **guidance.**

For summer day camps: Campers and counselors will need daily health screenings, including temperature and other checks for signs and symptoms of illness. Camps will need plans in place for when a staff member or child becomes sick.

- Camp spaces will need to be prepared to ensure physical distancing.

- Camps will need to have at least two health services staff on site at all times.
- Other protocols require campers and counselors to stay together in their groups and staff will not be able to move between groups either during the day or from day-to-day, unless needed to provide supervision of specialized activities such as swimming.
- Snacks and meals should be brought from home, pre-packaged, or ready-to-serve in individual portions to minimize handling and preparation. When this is not feasible, staff must prepare and serve meals. No family-style food service.
- Parents must wear face coverings and camps must develop safe pickup/drop off procedures to maintain social distancing.
- Camps may not take campers on field trips or for other offsite travel.

For the full document and Frequently Asked Questions about the minimum requirements click **here**.

On May 18th, the Baker-Polito Administration released Reopening Massachusetts, the Reopening Advisory Board's report, which details a four-phased strategy to responsibly reopen businesses and activities while continuing to fight COVID-19.

Marshfield Council on Aging Bus Schedule to
Resume on June 8, 2020
Also known as GATRA Dial-A-Ride
Call 781-834-5581 for more information
Reservation required, 24 hour notice requested

MONDAY	**AM**	**Shopping at Star Mkt, arrivals starting at 9:30 am**
		Stops at CVS, post office and Webster Square banks, as needed
	PM	***In-town medical appointments 12:30 - 2:30 pm***
		(NO EARLIER than 12:30 pm and NO LATER than 2:30 pm)
TUESDAY	**AM**	**Shopping at Roche Bros, arrivals starting at 9:30 am**
		Marshfield Food Pantry from 10:00 am to 12 noon
WEDNESDAY	**AM**	**Shopping at Stop & Shop, arrivals starting at 9:30 am**
		In-town medical appointments 12:30-2:30 pm
THURSDAY	**AM**	***In-town medical appointments 9:30 am- 2:30 pm***
		Stops at CVS, post office and Webster Square banks, as needed
		Hair appointments 9:30 to 2:30 pm.

FRIDAY	**AM**	**Shopping at Star Mkt, arrivals starting at 9:30 am** **Stops at CVS, post office and Webster Square banks, as needed** **Marshfield Food Pantry from 10:00 am to 12 noon**

SUGGESTED DONATIONS: $1.75 one way; $3.50 round trip for all in-town trips. *Unmarked envelopes will be distributed upon disembarking from the bus for your donation. Envelopes should be placed in the cash box at the front of the bus at final destination. No one will be denied ridership for inability to donate.*

MARSHFIELD COUNCIL ON AGING (COA) BUS PROTOCOL FOR PANDEMIC AS OF 5/26/2020

1) All drivers, escorts and passengers must wear masks or face coverings.
2) Passengers who are not feeling well, who have a household member not feeling well or who have been in direct contact with a person who has tested positive for COVID 19, should not ride the bus. These individuals may call the Senior Center at 781-834-5581 to arrange for a COA volunteer to shop for them.
3) Passengers will be limited to small groups of no more than four at a time.
4) Passengers and drivers will practice social distancing with regard to seating, boarding and disembarking from the bus.
5) COA Drivers/COA Escorts cannot go inside homes to assist clients.
6) The COA Bus Drivers will sanitize the buses at the end of each day with a deep cleaning mist.
7) Drivers will wipe down handrails and other frequently touched surfaces during the course of the day with sanitizer.

VENTRESS LIBRARY NEWS!

Dear Ventress Memorial Library Borrower,

On Monday, June 1, 2020 the Marshfield Board of Selectmen voted to allow the library to begin returning to service. On Monday, Jun 8, 2020 the book drop will be opened and you may return your checked-out items.

We will start offering curbside pickup on Monday, June 15, 2020. If you want materials, please email mapickup@ocln.org, or call the library at 781-834-5535, and library staff will place holds for you. We can offer you specific titles, or we can recommend titles for you.

Delivery between libraries has not yet been restored, so your choices are limited to items we currently have in the building.

Visit our website for more details at https://www.ventresslibrary.org/

We look forward to seeing you soon!

Reopening: When can my business reopen?

The following detailed commentary provides guidance for industries on the reopening plan as of June 11, 2020.
The following detailed commentary is related to the Executive Orders signed by Governor Baker on May 18, 2020, and June 1, 2020. This document is intended to provide additional information on businesses and activities summarized in the Reopening Massachusetts report. This is not an exhaustive list of all possible businesses that will be authorized open in each phase. The list may be updated from time to time.

For additional information please visit the Reopening Massachusetts website **www.mass.gov/reopening**.

Unless otherwise stated, businesses expected to be authorized to re-open in future phases will be subject to certain limitations and guidelines that will be provided at a later date. These limitations and guidelines will include a variety of mandatory context-specific

COVID-19 safety measures such as occupancy limitations, operational modifications, social distancing rules, and specialized cleaning requirements. All businesses are required to follow Mandatory Workplace Safety Standards and Sector specific safety protocols and best practices.

All of this information is subject to revision based on the latest public health data. Each phase will last at least three weeks, but could last longer, depending on the public health data. Each phase may contain multiple steps that stagger the reopening dates for businesses and activities within that phase.

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Businesses

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Category	When you can reopen	Additional comments
All businesses deemed essential by previous orders	Currently allowed	These businesses will be required to comply with **Mandatory Workplace Safety Standards** and any applicable sector specific safety protocols / best practices by May 25, 2020.

Category	When you can reopen	Additional comments
Banks	Currently allowed	These businesses will be required to comply with **Mandatory Workplace Safety Standards** and any applicable sector specific safety protocols / best practices by May 25, 2020.
Financial services	Currently allowed	These businesses will be required to comply with **Mandatory Workplace Safety Standards** and any applicable sector specific safety protocols / best practices by May 25, 2020.
In house services (such as nannies, babysitting)	Currently allowed	These businesses will be required to comply with **Mandatory Workplace Safety Standards** and any applicable sector specific safety protocols / best practices by May 25, 2020.
Real estate open houses	Currently allowed with restrictions	These businesses will be required to comply with **Mandatory Workplace Safety Standards** and any applicable sector specific safety protocols / best practices by May 25, 2020.
Construction	Phase 1 – May 18	All construction businesses, please refer to **detailed guidance** for reopening
Firearm retailers and shooting ranges	Phase 1 – May 18	
Home remodeling	Phase 1 – May 18	All construction businesses, please refer to detailed **guidance** for reopening (includes guidance for remodeling in 1-3 family residences)
In home installations	Phase 1 – May 18, construction related	Construction related – e.g., painting, repairs, etc. Non construction related – e.g., carpet installation, home theaters, security systems

Category	When you can reopen	Additional comments
	Phase 2 – non construction related	
Manufacturing	Phase 1 – May 18	All manufacturing businesses, please refer to detailed **guidance** for reopening
Places of worship	Phase 1 – May 18	Please refer to detailed **guidance** for reopening
Auto dealers and wholesalers	Phase 1 – May 25 for curbside pickup and delivery only	Follow guidelines for non-essential retail and car dealerships found in the **Essential Services FAQ**
	Phase 2 – browsing inside the showroom with restrictions	Please refer to retail **guidance** for Phase 2
Car washes	Phase 1 – May 25	Please refer to detailed **guidance** for reopening
Drive-in movie theaters	Phase 1 – May 25	Please refer to detailed **guidance** for reopening
Hair salons / barbershops	Phase 1 – May 25	Scroll left Scroll right Please refer to **detailed guidance** for reopening, including requirement that salons must limit services to hair services performed on the head. Services on the face or other parts of the body are prohibited and limit services to one client per worker

Category	When you can reopen	Additional comments
		per appointment (workers are not permitted to service more than one client appointment at a time).
General office spaces	Phase 1 - May 25 except City of Boston Phase 1 – June 1 City of Boston	Please refer to detailed **guidance** for reopening
Lab space	Phase 1 – May 25	Please refer to detailed **guidance** for reopening
Libraries	Phase 1 – May 25 for curbside pickup and delivery only	Please refer to detailed **guidance** for reopening
Pet grooming	Phase 1 – May 25	Please refer to detailed **guidance** for reopening
Retail Stores, including stores in malls	Phase 1 – May 25 for curbside pickup and delivery only Phase 2 – browsing inside the store with restrictions	Please refer to detailed **guidance** for reopening in Phase 2

Category	When you can reopen	Additional comments
Casinos	Hotel & Restaurants – Phase 2 Gaming floors – Phase 3 Theaters / arenas – Phase 3/4	Casinos and hotels attached to them should follow the guidelines for each section of the property (e.g. hotel, restaurants, etc.).
Horse racing tracks and simulcast facilities (no spectators)	Phase 3	
Driving schools	Currently allowed to offer classroom instruction online Phase 2 – behind-the-wheel training	
Occupational Schools	Phase 2 – for the limited purposes of permitting students to complete a degree, program, or prerequisite for	

Category	When you can reopen	Additional comments
	employment, or other similar requirement for completion	
Hotels, motels, inns, and other short-term lodgings	Currently open to provide services to essential workers and vulnerable populations.	
	Phase 2 – reopen to serve other guests with restrictions	Please refer to detailed **guidance** for reopening
Personal services that don't involve close personal contact (such as photography, window washers, career coaching)	Phase 2	
Close contact personal services (such as massage therapy, nail salons, tattoo parlors, electrolysis studios)	Phase 2 – Step 2	

Category	When you can reopen	Additional comments
Personal trainers	Phase 2 – as a close contact personal service in Step 2	Appointment-only training with only one customer (or two from the same household) allowed in the facility at a time
Restaurants	Phase 1 – can continue to offer takeout and delivery options	
	Phase 2 – outdoor seating permitted in Step 1, indoor seating permitted in Step 2	Please refer to detailed **guidance** for reopening
Amusement parks, theme parks, indoor or outdoor water parks	Phase 4	
Fitness centers and health clubs	Phase 3	Including: • cardio/weight rooms/locker rooms/inside facilities • fitness studios (yoga, barre, cross-fit, spin classes, general fitness studios) • locker rooms/shower rooms

Category	When you can reopen	Additional comments
		• indoor common areas • indoor swimming pools • indoor racquet courts and gymnasiums • excluding saunas, hot-tubs, steam rooms See entries on ‘outdoor fitness classes,’ ‘personal trainers,’ and ‘Saunas, hot-tubs, steam rooms’ for more information
Saunas, hot-tubs, steam rooms at health clubs, gyms, and other facilities	Phase 4	
Movie theatres	Phase 3 – moderate capacity Phase 4 – large capacity	
Museums	Phase 3	
Aquariums	Phase 3	
Theaters and performance venues	Phase 3 – both indoor and outdoor	Large performance venues will open in Phase 4 following guidance for other large venues.

Category	When you can reopen	Additional comments
(such as concert halls) of moderate capacity		
Large capacity venues used for group or spectator events (such as theaters and concert halls, ballrooms, stadiums and arenas, dance floors, exhibition and convention halls, private party rooms)	Phase 4	
Flight schools	Phase 2	
Beer gardens / breweries / wineries / distilleries	Phase 2: if providing seated food service under retail food permits issued by municipal authorities Phase 4: if not providingseated food service under	Please refer to detailed **guidance** for reopening in Phase 2

Category	When you can reopen	Additional comments
	retail food permits issued by municipal authorities	
Bars, dance clubs, and nightclubs	Phase 4	
Non-athletic instructional classes in arts / education / life skills	Phase 2 – youths under 18 years of age, in groups of fewer than 10	
	Phase 3 – people of all ages	
Funeral homes	Phase 2	40% capacity limit; one service at a time in the facility
Warehouses and distribution centers	Phase 2	
Weddings/events/large gatherings in parks, reservations, and open spaces	Phase 3 - with moderate capacity	

Category	When you can reopen	Additional comments
Motion picture, television and streaming production	Phase 3	Activities that have been authorized to reopen in earlier phases (e.g. office work, construction) may open in those phases
Fraternal Orders	Phase 2 if providing seated service of food prepared on-site under retail food permits issued by municipal authorities, following restaurant protocols (outdoor table service is permitted as of June 8, and indoor table service will be permitted in step 2) Phase 4 if serving as a large capacity venue used for group or spectator events Phase 4 if serving as a bar All other uses are subject **Covid-19**	

Category	When you can reopen	Additional comments
	Order No. 38, which limits gatherings in enclosed indoor or outdoor spaces to 10 people.	

Recreation & outdoors

Category	When you can reopen	Additional comments
Beaches	Open with restrictions in Phase 1 – May 25	Please refer to detailed guidance for reopening
Golf	Currently allowed with restrictions	Continue to follow guidance outlined in the **Essential Services FAQ**
Golf facilities including outdoor driving ranges	Phase 2	
Parks	Services/facilities will reopen in Phase 1 – May 25	Please refer to detailed **guidance** for reopening
Fishing, hunting and boating	Phase 1 – May 25	Please refer to detailed **guidance** for reopening

Category	When you can reopen	Additional comments
Outdoor adventure activities (including ski area summer activities, zip-lines, and mountain biking)	Phase 1 – May 25	Please refer to detailed **guidance** for reopening
Outdoor gardens, zoos, reserves and public installations	Phase 1 – May 25	Please refer to detailed **guidance** for reopening
Outdoor theatres and performance venues	Phase 3 – moderate capacity venues	
Camps including sports and arts camps	Phase 2 – recreational day camps Phase 3 – overnight camps	Please refer to detailed guidance for reopening
Limited organized youth and adult amateur sports programs and activities	Phase 2 – outdoor only for adults, indoor for supervised youth programs and activities Phase 3 – indoor and outdoor for all ages	
Professional sports practice and training programs	Phase 2	
Other outdoor recreational facilities (pools, playgrounds, spray decks, mini golf, go karts, batting cages, climbing walls)	Phase 2	

Category	When you can reopen	Additional comments
Indoor recreational and athletic facilities for general use (not limited to youth programs)	Phase 3	
Other indoor recreation (such as batting cages, driving ranges, go karts, bowling alleys, arcades, laser tag, roller skating rinks, trampolines, rock-climbing)	Phase 3	
Sightseeing and other organized tours (bus tours, duck tours, harbor cruises, whale watching)	Phase 3	
Outdoor historical spaces / sites	Phase 2	
Indoor historic spaces / sites	Phase 3	
Cruise ships	N/A	Operating under federal guidance, No Sail order currently in effect
Outdoor fitness classes	Phase 1 – May 25	Please refer to detailed Outdoor Education Program **guidance**
Fishing and hunting tournaments and other amateur or professional derbies	Phase 3	
Street Festivals, Parades and Agricultural Festivals	Phase 4	

Category	When you can reopen	Additional comments
Road races and other large, outdoor organized amateur or professional group athletic events	Phase 4	

Overview of Four-Phase Approach

The goal of the phased reopening plan is to methodically allow businesses, services, and activities to resume, while avoiding a resurgence of COVID-19 that could overwhelm our healthcare system and erase the progress we've made so far.

- **Each phase will last a minimum of three weeks and could last longer** before moving to the next phase
- **If public health data trends are negative,** specific industries, regions, and/or the entire Commonwealth **may need to return to an earlier phase**
- The Commonwealth will **partner with industries to draft Sector-Specific Protocols in advance of future phases** (example: restaurant specific protocols will be drafted in advance of Phase 2)
- **If we all work together to defeat COVID-19, we can proceed through each phase**

Four phases to reopening

- **Stay at Home**. Essential business and services only.
- **Phase 1: Start**. Limited industries resume operations with severe restrictions.
- **Phase 2: Cautious.** Additional industries resume operations with restrictions and capacity limitations.
- **Phase 3: Vigilant**. Additional industries resume operations with guidance.
- **Phase 4: New Normal**. Development of vaccines and / or treatments enable resumption of "new normal".

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Community Tracing Collaborative

Thank you for your help in spreading the word about contact tracing in Massachusetts. Along with testing and social distancing, contact tracing is an important part of continuing to stop the spread of COVID-19 in Massachusetts.

We have put together a small toolkit of material, including social media-ready messages and images you can use to help spread the word about the importance of contact tracing.

Attached is a document that includes some language for use in newsletters, blogs, websites and other platforms you use to communicate with your constituents. Also attached are images with English and Spanish language for your use. Below are some suggested social media messages that can be used with the attached images.

Answer the call and stop the spread of COVID-19. If you get a call from the MA COVID Team with area codes 833 or 857, answer the call and help our contact tracing effort. Learn more at mass.gov/matracingteam.

Governor Baker has issued an **Order** effective Wednesday, May 6 requiring face masks or cloth face coverings in public places where social distancing is not possible. This applies to both indoor and outdoor spaces. Exceptions include children under the age of 2 and those unable to wear a mask or face covering due to a medical condition. Read the full DPH **Guidance**.

Tips on the Proper Use of Masks and Face Coverings

There are many things that you can do to help protect yourself and others from becoming infected with COVID-19. People who show no symptoms of illness may still be able to spread COVID-19. A face covering may help prevent you from spreading COVID-19 to other people.

- A face covering can include anything that covers your nose and mouth, including dust masks, scarves and bandanas.
- Do not use health care worker masks, such as the N95 masks - those should be preserved for healthcare workers.
- It is important that you wear these face coverings or masks in situations where it is difficult to maintain a social distance of six feet from others. For example, in a pharmacy or grocery store.

When you wear a cloth mask, it should:

- Fit snugly but comfortably against the side of the face,
- Be secured with ties or ear loops,
- Include multiple layers of fabric,
- Allow for breathing without restriction, and
- Be able to be laundered and machine dried without damage or change to shape.

When putting on and taking off a mask, do not touch the front of it, you should only handle the ties or ear straps, and make sure you wash the cloth mask regularly. Wash your hands or use hand sanitizer after touching the mask.

Cloth masks should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

Face Covering Do's and Don'ts and instructions on **how to make your own cloth mask** are available on the CDC web site.

In addition to wearing a cloth mask you should continue to practice proven methods to protect yourself.

- Practice social distancing at all times by remaining 6 feet away from others when you have to leave your home for essential trips.
- Stay home if you are sick and avoiding close contact with others.
- Wash your hands often with soap and water for at least 20 seconds; using alcohol-based hand gel with at least 60% alcohol if soap and water are not available.
- Avoid touching your eyes, nose, and mouth.
- Clean things that are frequently touched (like doorknobs and countertops) with household cleaning spray or wipes.
- Cover your mouth when you cough or sneeze. Use a tissue or your inner elbow, not your hands.

Daily update BOH
Update on Contact Tracing

On April 3, the Baker-Polito Administration announced an initiative to mitigate the spread of COVID-19 in Massachusetts through contact tracing. Working with Partners in Health, Massachusetts was the first state in the nation to develop a program to trace individuals who have tested positive for COVID-19 as well as their immediate contacts who may have been exposed to the virus. Through a team of leading medical experts working with the Department of Public Health, this program has already hired 176 employees to do contact tracing by phone, and hundreds of additional staff will be trained and on board in the coming weeks.

Residents who receive a phone call from the Contact Tracing Collaborative are urged to take the call and provide the relevant information.

The Board of Health would like to remind residents not to inject or ingest disinfectants, bleach or rubbing alcohol.

MARSHFIELD BOARD OF HEALTH

Tyler Nims, Chairman, Board of Health
Mark MacDonald, Vice-Chairman, Board of Health
Paul Armstrong, Member, Board of Health

The BOH has ensured that Local Supermarkets are following the directive to limit the number of people in each facility at one time. **Now it is time to do your part.** Plan your trip and try to shop alone. **Shopping is not a social event** and should only be done when it is time to get a proper supply of foods and essential items (resist the one item temptations, the Twinkies' can wait). The **workers** in these establishments are **essential personnel** and deserve our respect for their service. Please observe the social distancing of 6' from other shoppers and staff while they perform the tasks that provide us with the foods we need. Follow the arrows guiding traffic patterns as you go through the store. When standing in line outside the building social distances also applies.

Personal protective equipment, or **PPE:** protects its user against any physical harm or hazards that the environment may present **ONLY WHEN USED CORRECTLY!** People often get a false sense of security when using and forget.

- There is no substitute for proper hand washing/sanitizing and be mindful to do so before and after use.
- Understand how to use and remove the PPE. (improper use can do more harm than good)
- Please properly dispose of the PPE after use.

Buoy Health's new online resource: for residents to check their symptoms and connect with the next appropriate health care resource. This tool does not replace emergency medical care, but it may be used as a support for residents during the COVID-19 outbreak to connect them with appropriate health care resources if they display coronavirus symptoms. Buoy Health's online 24/7 tool is free for Massachusetts residents and uses current COVID-19 guidance from the CDC and DPH. As always, your first choice is to contact your own health care provider. Buoy's online tool is not to be used in place of emergency medical care. If this is an emergency, call 911 or visit the nearest emergency room. **www.Buoy.com/mass**

The Massachusetts Department of Public Health (DPH) announced that Massachusetts 2-1-1., a 24-hour telephone hotline, will now provide real-time COVID-19 information, resources, and referrals in multiple languages. **https://mass211.org/**

Additional updated information from MEMA on COVID-19:
https://www.mass.gov/orgs/massachusetts-emergency-management-agency

SCHOOL INFORMATION

Governor Baker announced yesterday, schools in Massachusetts, both public and private will be closed for the remainder of the academic year.

TREASURER COLLECTOR INFORMATION

Below you will find the necessary paper work to request a hardship waiver from the Town of Marshfield for real estate taxes, excise taxes and utility bills.

TOWN OF MARSHFIELD
OFFICE OF THE TREASURER-COLLECTOR
870 MORAINE STREET MARSHFIELD, MA 02050

COVID -19 FINANCIAL HARDSHIP WAIVERS

NAME OF APPLICANT: _____
ADDRESS OF APPLICANT: _____
DATE OF APPLICATION: _____

PROOF OF HARDSHIP – PLEASE MARK "X":
UNEMPLOYMENT APPLICATION:
PROOF OF CLOSED BUSINESS:
MEDICAL WAIVER:

TYPE OF BILL (S) NEEDING RELIEF – PLEASE MARK "X"
REAL ESTATE TAXES:
EXCISE TAXES:
UTILTY BILLS:

BELOW SECTION IS FOR TOWN OF MARSHFIELD STAFF

APPLICATION WAS RECEIVED ON:_____

APPLICATION WAS APPROVED BY:_____

APPLCIATION WAS DENIED BY: _____

REASON:_____
_____

REQUESTED APPEAL TO TOWN ADMINISTRATOR BY PATRICK DELLORUSSO ON:_____

TOWN OF MARSHFIELD
OFFICE OF THE TREASURER-COLLECTOR
870 MORAINE STREET
MARSHFIELD MA 02050

FREQUENTLY ASKED COVID-19 QUESTIONS ANSWERED BELOW

Is there someone working today?

The Treasurer-Collector office has been open and responding to residents each day during the crisis and ensuring the Town has the resources it needs to provide safety and services. We will continue this mission.

You may always email questions to pdellorusso@townofmarshfield.org this will get you a response very quickly.

BEST WAYS TO PAY YOUR BILLS:

- Please visit our website and select the "FIND IT FAST" option
- Next select online bill payments and enter your bill information
- If you do not have your bill information, please email pdellorusso@townofmarshfield.org and the Treasurer will make sure you are responded to within 24 hours
- You may also call the main line at 781-834-5548 and someone will return your call within 24 hours as we have limited staff and they will guide you on how to make a payment online.
- You may mail in your payments with the remittance coupon to the lockbox provider.
- You may drop your payment off in the mail drop slot located near the handicap ramp at the front of Town Hall when you walk up from the parking lot. You may call for further instructions.
- You may also mail payments directly to our office at:

  870 Moraine Street, Marshfield MA, 02050 Attn: Collector

REAL ESTATE TAXES:

- The tax deadline for quarter four (4) real estate bills will not be changed from its dead line of May 1st.
- If a resident has been impacted by the COVID-19 virus they may like all other delinquent tax payers set up a re-payment plan with the Tax office.
- All payments must be current by 6-30-20 by vote of the Board of Selectman. Any payment not received by then will be subject to interest.
- If you do not notify the tax office of your inability to pay you will be assessed interest and fees in accordance with the Law.
- There will be no refunds of any interest or demands
  - You must show proof of your COVID-19 impact i.e. unemployment application and acceptance and or termination notice. The Treasurer will examine each request for a hardship arrangement on a case by case basis in accordance with the Board of Selectman Vote.

- The Town will be issuing demand and bills normally and it is the responsibility of the homeowner to show proof of hardship. **Demand bills will be issued 6-1-2020** to all accounts with a balance on record, and Tax liens will follow in line with normal collection action after this date.

UTILTY BILLS:

- The deadlines for the utilities bills are 30 days after issuance
- The Town of Marshfield in line with the Governor's Order will not be terminating utility services until an undetermined time after 6-30-2020.
- All balances must be current by 6-30-2020
- Failure to pay your bill will result in the utility charges being added to your tax bill as a utility lien next year while incurring interest and fees per MGL.
- There will be no refunds of any interest or demands

    - You must show proof of your COVID-19 impact i.e. unemployment application and acceptance and or termination notice. The Treasurer will examine each request for a hardship arrangement on a case by case basis in accordance with the Board of Selectman Vote.
- If you do not notify the tax office of your inability to pay you will be assessed interest and fees in accordance with the Law.
- If a resident has been impacted by the COVID-19 virus they may like all other delinquent tax payers set up a re-payment plan with the Tax office.
- The Town will be issuing demands and bills normally and it is the responsibility of the resident to show proof of a hardship.

EXCISE TAXES:

- Excise taxes will not be sent to collections until 6-30-2020; however interest will accrue on all delinquent balances and unless hardship is show, will not be waived.
- Excise taxes issued after 3-20-20 will not receive demands until 6-30-2020
- Marshfield Excise tax bills for commitment #1 were issued prior to the Declaration of emergency and are not subject to hardship waivers by law.
    - However Marshfield will if a resident is able to show proof of a COVID-19 impact i.e. unemployment application and acceptance and or termination notice. The Treasurer will examine each request for a hardship arrangement on a case by case basis in accordance with the Board of Selectman Vote.

The Treasurer's Office looks forward to remaining open for business and is here to help any resident who needs it and will remain fair and consistent while understanding the unique situations of all.

Please do not hesitate to contact the office for anything and we will get you the answers your looking for!!!1

Patrick D. Dello Russo JR.
Treasurer Collector
Town of Marshfield

Fire Department:

Anyone experiencing symptoms consistent with COVID – 19 such as difficulty breathing or chest pain should call 911 and activate EMS. Other minor symptoms, including a low grade fever, you should call your PCP for recommended treatment. Most cases with minor to moderate symptoms can be safely managed at home without going to the hospital. AS always, with any other medical emergencies, call 911 and activate EMS right away.

MOST IMPORTANTLY RESIDENTS ARE REMINDED THAT JUST BECAUSE YOU MAY BE EXPERIENCING SYMPTOMS OF COVID-19 VIRUS DOES NOT MEAN THAT YOU NEED TO CALL 911 FOR EMERGENCY

ASSISTANCE. EIGHTY PERCENT (80%) OF PERSONS WHO BECOME EXPOSED WILL BE ABLE TO MANAGE THEIR CARE ON THEIR OWN AND BY CONTACTING THEIR MEDICAL PROFESSIONALS.

HERE ARE THE BOARD OF HEALTH'S RECOMMENDATIONS FOR MEDICAL CARE:

Call **911** for **severe** shortness of breath or difficulty breathing. The Massachusetts Department of Health (DPH) says do not wait for the results of a COVI-19 test to call 911.

Call a health care provider for shortness of breath or other serious symptoms. DPH says to continue to self-isolate if symptoms are becoming more severe.

For people with mild symptoms:

Early on, symptoms may feel like a common cold, including a combination of cough, body aches, fatigue, and chest tightness.

People who are not at high risk of severe illness may not need to be evaluated in-person or tested for COVID-19. Not everyone with symptoms or who may have been exposed to COVID-19 will be tested right away.

If you have mild symptoms including a fever, cough, shortness of breath, or suspect that you were exposed but are not able to be immediately tested, please stay home and avoid contact with others. Isolate yourself until:

* You have had no fever for at least 72 hours (that's 3 days of no fever without the use of medicine that reduces fevers)

  AND

* other symptoms have improved (for example, when your cough or shortness of breath have improved)

  AND

* At least 7 days have passed since your symptoms first appeared.

Use over-the-counter medication to treat mild symptoms.

There is currently no specific treatment for COVID-19.

The 911 system is not intended for minor injuries or general medical questions. DPH says those seeking general advice or wishing to be tested for COVID-19 should not call 911.

The Massachusetts Department of Public Health (DPH) announced that Massachusetts 2-1-1., a 24-hour telephone hotline, will now provide real-time COVID-19 information, resources, and referrals in multiple languages. **https://mass211.org/** and **www.Buoy.com/mass** for residents to check their symptoms and connect with the next appropriate health care resource

General Information:

Please remember to wear personal protective gear when out in the public. When you are through with the protective gear, please remember to properly dispose of them.

One final thought or suggestion! You might want to call and check on an elderly neighbor or family member to make sure they are okay. We know these are very difficult times, but remember to cherish each moment spent with loved ones.

If you have any questions, please refer to the town's website at Marshfield-ma.gov.

Very truly yours,
Michael A. Maresco
Town Administrator

P.S. The pinnacle of the steeple on the top of Town Hall will be lit in green to recognize and congratulate the Marshfield High School Class of 2020.