



Select Board

Meeting Agenda

The Provincetown Select Board and Board of Health will hold a Joint Meeting on Monday, August 3, 2020, at 5 pm in Judge Welsh Room, Town Hall, 260 Commercial Street, Provincetown, MA 02657.

NOTE: THIS IS A REMOTE PARTICIPATION MEETING

The Pursuant to Governor Baker's March 12, 2020 Order Suspending Certain Provisions of the Open Meeting Law, G.L. c. 30A, §18, and the Governor's March 15, 2020 Order imposing strict limitation on the number of people that may gather in one place, this meeting of the Provincetown Select Board will be conducted via remote participation to the greatest extent possible. Specific information and the general guidelines for remote participation by members of the public and/or parties with a right and/or requirement to attend this meeting can be found on the Provincetown website, at <https://www.provincetown-ma.gov/>. For this meeting, members of the public who wish to watch/listen and participate in the meeting may do so in the following manner:

1. Watch on PTV GOV Channel 18, as well as an online livestream of PTV GOV at <http://www.provincetowntv.org/watch.html>
2. To listen and participate in this meeting, dial **(833) 579-7589**. When prompted, enter the following Conference ID number: **508 028 164** When prompted, state your name, then press #.
 - Keep your phone muted at all times when not talking (*6 to mute & unmute your phone)
 - Do not use speakerphone
 - Do not use Bluetooth devices
 - Mute all background noises
 - Mute PTV on the television or computer and use only the phone audio
 - Please do not speak until the chair or the meeting moderator asks for public comments or questions.

No in-person attendance of members of the public will be permitted, but every effort will be made to ensure that the public can adequately access the proceedings in real time, via technological means. In the event that we are unable to do so, despite best efforts, we will post on the Provincetown website an audio or video recording or other comprehensive record of proceedings as soon as possible after the meeting.

1. Joint Meeting with Board of Health – (Votes May Occur)
 - a. Epidemiological Surveillance at the State Level – Scott Troppy, MADPH
 - b. Local Dashboard Metrics – Morgan Clark
 - c. Letter to Command Center re: Testing – Morgan Clark
 - d. Update on Local Testing Initiatives – Morgan Clark
 - e. Fall/Future Planning – Morgan Clark

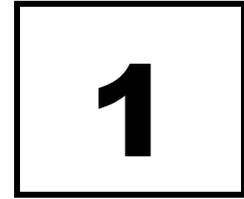
2. Discuss Expansion of Mask Order – (Votes May Occur)
3. Discuss sending letter to the MA Department of Public Health to request cross town reporting of COVID cases – (Votes May Be Occur)
4. Executive Session – Vote to go into Executive Session – MGL c30A Sec 21(a) Clause 2 for the purpose of:

Clause 2 – To conduct strategy sessions in preparation for negotiations with non-union personnel or to conduct collective bargaining sessions or contract negotiations with non-union personnel. Interim Town Manager Contract Negotiations. (Votes may be taken.)

Posted by the Town Clerk, www.provincetown-ma.gov, 07/30/2020 1:30pm PG



**Provincetown Select Board
AGENDA ACTION REQUEST
Monday, August 03, 2020**



JOINT MEETING – BOARD OF HEALTH

Requested by: Health Director Clark

Action sought: Discussion

Proposed Motion(s)

Discussion Dependent/Votes May Occur

Additional Information

Discussion Topics to include

- Epidemiological Surveillance at the State Level – Scott Troppy, MADPH
- Local Dashboard Metrics – Morgan Clark
- Letter to Command Center re: Testing – Morgan Clark
- Update on Local Testing Initiatives – Morgan Clark
- Fall/Future Planning – Morgan Clark

Board Action

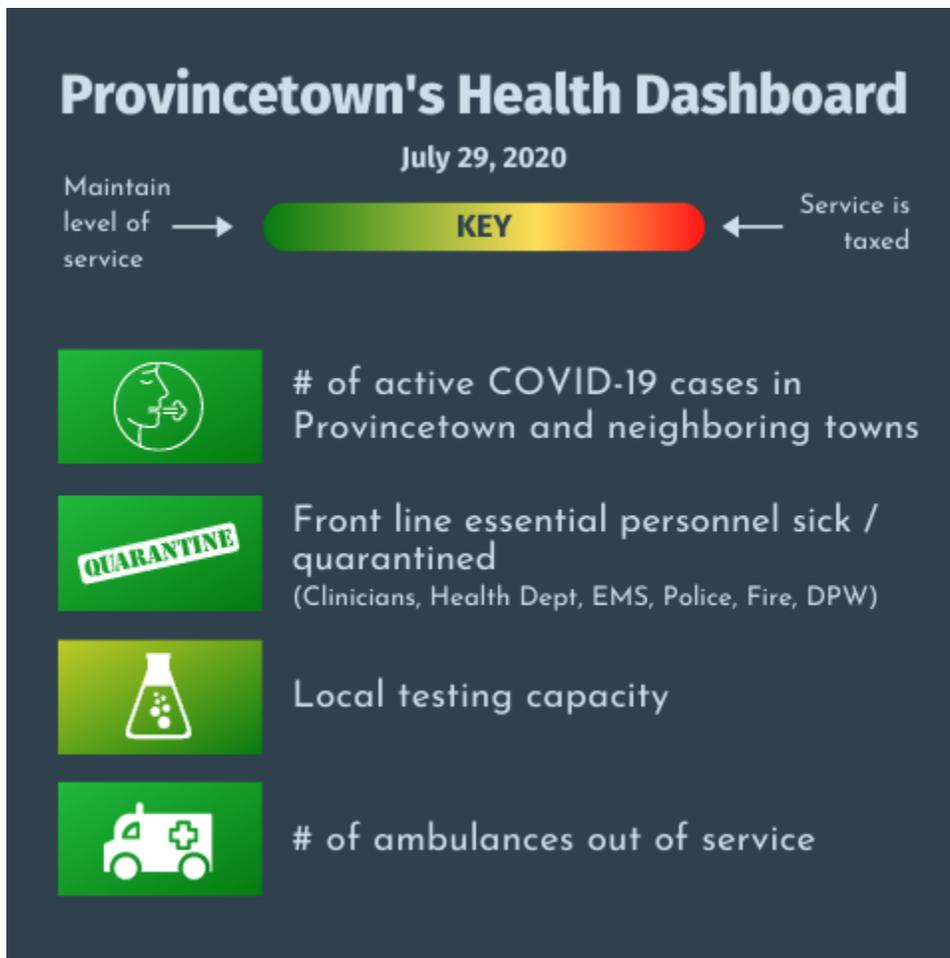
<i>Motion</i>	<i>Second</i>	<i>Yea</i>	<i>Nay</i>	<i>Abstain</i>	<i>Disposition</i>

Morgan Clark

From: Morgan Clark <mclark@provincetown-ma.gov>
Sent: Wednesday, July 29, 2020 4:41 PM
To: Morgan Clark
Subject: [COVID-19 Updates] Weekly COVID-19 Recap - 7/29/20

Welcome to the COVID-19 Provincetown Recap. This weekly email is designed to keep you updated on Town operations related to the COVID-19 pandemic. This is not a breaking news announcement.

COVID-19 Information July 22 - July 29, 2020



Commonwealth of Massachusetts/Baker Administration COVID-19 Update

Travel Restrictions Starting August 1, 2020:

Last Friday, July 24, 2020, Governor Baker issued new strict guidelines for people traveling to Massachusetts. There is a new 14-day mandatory quarantine requirement for out of state visitors as well as for residents who are returning to the Commonwealth.

Currently, Provincetown is waiting for implementation guidance from the Baker Administration. Once the Health Department receives the information, you will be updated through this COVID-19 alert system.

Click [here](#) for more on the Governor's travel order. Additional information pertaining to the travel order can be found [here](#).

Update on Provincetown COVID-19 Efforts

MacMillan Pier:

The main pier, public way, boardwalks, and excursion floats are now a part of the mandatory mask wearing zone. The fishing fleet areas consisting of the floating dock marina and the two fixed fingers docks are excluded. Compliance has been successful.

Recreation Department:

As of July 17, 2020, the Chelsea Earnest and Mildred Greensfelder playgrounds and courts are reopened. Masks are required when social distancing cannot be maintained, hand sanitizer is available, and no more than 25 people are permitting to use the playground or court at once.

You can check the status of playground and courts daily on the Recreation Department Facebook page.

Health Department:

Compliance and enforcement staff report a high level of compliance in restaurant and retail operations, even during spot inspections performed off-hours and on weekends. All complaints are investigated and if any changes are required, licensees respond immediately.

The July 22, 2020 asymptomatic testing initiative with Outer Cape Health Services and the business community tested 132 hospitality and retail employees. The Health Department is looking at more options to expand asymptomatic testing in our community.

Community Ambassador Program:

The program is based at Firehouse #3 on Commercial Street near Town Hall. Ambassadors are on duty from 11:00am until 9:00pm daily.

During the July 16th weekend, two Boston-based Sisters of the Perpetual Indulgence volunteered as guest ambassadors. They were a great help to the program and well received by the public.

As of Thursday, July 23rd, ambassadors have distributed approximately 2000 masks while monitoring the mandatory mask zone; an additional 500 masks were handed to visitors at the Firehouse.

Mandatory Mask Zone Updates:

The Town has more than doubled its signs for the mandatory mask zone and on side streets entering the zone. Additional banners will be up in the near future.

ICYMI – (In Case You Missed It):

[Here's a link](#) to a July 24, 2020 Statement from Health Director Morgan Clark and Board of Health Chair Steve Katsurinis.

You received this message because you are subscribed to the [MA-Provincetown-COVID-19 Updates] group. Replies to this email will go to the MA-Provincetown-COVID-19 Updates group. To reply only to Morgan Clark, email mclark@provincetown-ma.gov.

To post to this group, send email to: MA-Provincetown-covid-19-updates@regroup.com.

Visit this topic here: <https://MA-Provincetown.regroup.com/networks/MA-Provincetown/groups/covid-19-updates/topics/weekly-covid-19-recap-7-29-20>

To unsubscribe from this group click here: <https://MA-Provincetown.regroup.com/networks/MA-Provincetown/groups/covid-19-updates/unsubscribe>.

Clean Water Utility Considerations for Epidemiological Surveillance of Wastewater for **COVID-19** (SARS-CoV-2)



INTRODUCTION

These considerations were compiled by the National Association of Clean Water Agencies (NACWA) and its members – publicly owned wastewater treatment works (POTWs) of all sizes throughout the United States – as information to use by its members and other clean water utilities. This document highlights key considerations for clean water utilities that may be assessing whether and to what degree to sample wastewater for the virus that causes COVID-19.

Nothing in this document is intended as legal or regulatory advice or recommendations to utilities regarding sampling wastewater for COVID-19, nor should anything in this document be intended as such. This document also does not create any legal or regulatory obligations for utilities, nor does it suggest any “best practices” for utilities to follow. It does not take a position on whether utilities should or should not engage in COVID-19 monitoring – that is a decision each utility should make on its own in consultation with local public health officials. Instead, this document is intended to provide a series of considerations for utilities that have questions regarding sampling wastewater for COVID-19 or evaluating whether to do so.

BACKGROUND

What is Epidemiology and Wastewater-Based Epidemiology?

The Center for Disease Control and Prevention (CDC) defines “epidemiology” as the study of the distribution (frequency and pattern) and determinants (causes, risk factors) of health-related events in specified populations and the application of this study to control health problems.

Wastewater-based epidemiology (WBE) is a surveillance technique that can be used to identify the distribution (occurrence trends or hotspots) of viral diseases in the raw influent coming into a wastewater treatment plant. WBE can be used as an indicator tool to monitor over time the extent and duration of disease outbreaks. As more information becomes available, and can better account for many variables and assumptions, it may be possible for WBE to be used as a technique to assist local health departments with understanding the community spread of particular viral diseases during outbreaks.

Wastewater-based epidemiology (WBE) is a surveillance technique that can be used to identify the distribution (occurrence trends or hotspots) of viral diseases in the raw influent coming into a wastewater treatment plant.

Sampling wastewater as an epidemiological tool is not a new phenomenon. In the past, WBE has been used to help understand illicit drug use and infectious diseases such as MERS-CoV, a relative of COVID-19, adenoviruses, and polio among others. It is important to note that the ability to use WBE as a surveillance technique to understand viral outbreaks in a community continues to evolve over time with advances in the science and data analysis. Using WBE data in tandem with clinical data from local health departments is critical to maximizing its effectiveness.

Why is There a Desire to Sample Wastewater for COVID-19?

The COVID-19 global pandemic has created a significant public health interest in quantifying the magnitude of asymptomatic and symptomatic individuals in different populations. Given limited testing capacity in the United States, hospitals and public health departments are often relying on clinical data from individuals to make local, state, and national policy decisions. However, clinical data may only represent a partial estimate of the disease occurrence because data are collected at hospitals or clinics where individuals are more likely to be symptomatic.

Sampling wastewater for COVID-19 has the possibility to capture data on community spread including both symptomatic and asymptomatic individuals carrying COVID-19. As such, there has been a growing interest to sample raw wastewater influent for COVID-19 as a means to gain a better, more accurate estimate of the prevalence of COVID-19 in a given community and possibly as an indicator for public health departments to consider as they make policy decisions to prevent future spread.

What is Being Sampled?

It is critical to understand and communicate effectively with the public that WBE samples for COVID-19 are looking for the inactive genetic material within the enveloped virus and for not live or infectious viruses. This inactive genetic material, known as RNA (ribonucleic acid), is present in all living organisms. Scientists can determine whether or not the genetic fragments are present or absent and quantify the magnitude of RNA concentration through a relatively simple, yet advanced molecular biological technique, known as qPCR (quantitative polymerase chain reaction). But, as discussed further below, qPCR results alone do not tell scientists or public health officials whether the virus material present is capable of causing an infection.

When sampling raw wastewater influent, scientists are looking for COVID-19 RNA. Some studies are going further and using qPCR to detect for COVID-19 in primary sludge.

What can Sampling Tell us and What Can't it Tell Us?

Sampling for COVID-19 RNA can tell us a few things. First, it can tell us whether or not viral RNA copies are present or absent in wastewater. Second, if viral RNA copies are found, the amplification of the genetic signal can help estimate the number of viral RNA copies in a given volume of wastewater. With this information, scientists can loosely estimate over time the number of individuals infected in a particular community if they have data on the number of COVID-19 RNA copies per liter of wastewater per day and how many COVID-19 RNA copies are shed in feces per person per day.

Sampling wastewater for COVID-19 RNA cannot tell us whether there are live, active viruses within raw sewage. Also, samples represent a snapshot in time and are indicative of that moment. Furthermore, samples are likely not to be used to trace COVID-19 RNA to a specific individual or household, but with greater precision in sampling and analysis, a more exact location could be determined depending on the service area.

Sampling wastewater for COVID-19 RNA cannot tell us whether there are live, active viruses within raw sewage.

The wastewater collection system is a massive network of underground sewer connections to homes, businesses, and industries. Sampling methodologies can include a broad, catchall approach (e.g., collecting a raw influent sample at the wastewater intake) or a narrower approach (e.g., collecting a raw sample at a specific point within the collection system, like a hospital, a long-term health care facility, a prison, or a specific sewershed). Either approach requires a robust sampling plan to minimize uncertainties and assure data validity.

UTILITIES LEADING WBE EFFORTS

Why are Some Utilities Leading Efforts to Conduct Wastewater-Based Epidemiological Studies for COVID-19 and why are Some Uncertain About Engaging in This Effort?

Public wastewater utilities are essential operations and strive each day to protect public health and the environment. Utility leaders and their staff provide vital services and are stewards within their communities. There has never been a more important time to champion public water and wastewater utilities for their continued dedication and commitment to ensuring our water resources are clean and safe.

Many utilities participating in COVID-19 WBE were approached by local or state health departments seeking to expand surveillance efforts, while in some cases utilities initiated the WBE work on their own, relying on existing relationships with their health departments to coordinate on a broader scale. Other utilities are assisting university research teams and/or regional U.S. Environmental Protection Agency (EPA) research teams on developing a standardized method for sampling and analysis. A standardized method will help minimize data uncertainty while simultaneously improving confidence that results reflect what is truly happening in a community. It will also help with comparing results between communities.

For those utilities that remain uncertain about engaging in WBE efforts, it is important to remember that the decision whether to engage in sampling wastewater for COVID-19 is entirely at their discretion. Some private corporations seeking to promote their WBE technology have been pressuring utilities/ offering these services to analyze samples for a significantly reduced cost, at least initially, only to raise those costs is taking place in some instances. Utilities should consider whether these initiatives are in their best interests. Until there is a standardized method, utilities are right to be wary of engaging.

In addition, making decisions based on WBE analyses

is outside the traditional role of a clean water utility. The agencies that have chosen to engage are working closely with their local and/or state health departments because of the key role these entities play in communicating epidemiological data and making decisions based on such analyses.

CONSIDERATIONS FOR UTILITIES CONTEMPLATING WASTEWATER SAMPLING

Working with Private Corporations vs. Public Universities or Other Public Entities

Private entities with qPCR capabilities are urging public utilities and, in some cases, their respective oversight bodies to send wastewater samples to them for analysis. Often this is being done without encouraging wastewater utilities to consult with local public health authorities to determine if testing would be helpful or appropriate for that community. However, it is important to note that many NACWA members have been collaborating effectively with these private entities. At the same time, NACWA members have also found that public universities with qPCR technology offer the same analytical capabilities and can turn around analysis more quickly and at lower costs.

NACWA is aware of several universities, including Oregon State University, the University of Hawaii, the University of Michigan and Stanford University among others, that have received rapid response grants from the National Science Foundation to surveil wastewater for COVID-19. The University of Arizona and Arizona State University are also doing significant work on wastewater surveillance research. NACWA encourages members interested in sampling wastewater for COVID-19 to reach out to local, state, and regional universities to see what sampling analysis options are available.

Concerns have been raised that private corporations

active in this space have not returned data in a timely manner and that there could be possible inconsistencies in the data. Utilities that select to send samples to private corporations should also consider splitting samples and retaining samples for later data verification and validity.

Creating and Building Proactive Relationships with Local, Regional, and State Health Departments and Research Universities

Some utilities have taken a more proactive approach, initiating relationships with local, regional, and state health departments as well as local universities, to highlight the potential insights WBE can provide. They are doing this in tandem with public health agencies. This type of teamwork strategy has created a role for utilities to serve as “hubs,” offering resources and guidance for other stakeholders just beginning to consider WBE. Some of these efforts have also been successful in securing additional funding from the state health department.

Some utilities have taken a more proactive approach, initiating relationships with local, regional, and state health departments as well as local universities, to highlight the potential insights WBE can provide.

Sampling and Monitoring Quality Assistance/Quality Control (QA/QC)

Currently, there are no EPA-approved standards or methodology for sampling wastewater for COVID-19.

Sampling protocols for COVID-19 RNA are not different than those used when sampling for bacteria. Proper PPE is critical when collecting the sample as well as when preparing the sample for analysis. If the analysis is immediate, the same molecular techniques for preservation apply that would be used for bacterial analysis. If the analysis is not immediate, samples must be frozen at -80 degrees Celsius in a

freezer that does not have a defrost cycle. Samples are not pasteurized.

Incorporating COVID-19 Sampling into Existing Sampling Work

Many utilities that are sampling wastewater influent for COVID-19 have incorporated this type of WBE monitoring into their existing sampling design rather than creating an entirely new sampling approach. In doing so, utilities can reduce the amount of staff, the staff time and costs associated if samples are collected as part of an existing sampling regime.

Validating Data

Validating data is a function of data quality objectives for accuracy, precision, sensitivity, comparability, completeness, etc. EPA and CDC have not set these universally. Analytical methods have not undergone a thorough interlaboratory study, but the Water Research Foundation is proposing to do so currently.

Assessing Costs

The costs associated with sampling wastewater for COVID-19 can vary and include sampling materials, shipping, handling and analysis. Private corporations have approached public utilities offering free initial analysis if the utility would cover the cost of shipping and handling, around \$120 per sample. However, if a utility would like to continue sending samples, the private companies are offering to continue conducting analysis but at a much greater cost, sometimes reaching upwards of \$1,200 per sample.

Additional costs a utility should consider are the internal costs to conduct the sampling. Utilities will need to factor for proper protective equipment (PPE) for staff collecting samples, sampling collection equipment and supplies, and staff time. Some of these costs have been minimized by incorporating this sample collection into regular sampling activities. Utilities should consider the number of samples collected as well as the frequency of sampling. Shipping and handling of samples, laboratory analysis and personnel time, as well as long term storage

of samples are costs to consider.

Potential Legal/Regulatory Issues with Surveilling Wastewater

Wastewater utilities are designed to treat and manage wastewater and stormwater. It is not the role of utilities to act as sentinels for disease prediction. This is the role of the local, regional, or state public health agency. As these health organizations look to wastewater utilities for epidemiological information to survey the health of a community, there are concerns that sampling will become a regulatory mandate and utilities will be required to sample for future disease outbreaks.

Some utilities are happy to work collaboratively with local public health authorities to help track COVID-19 in wastewater to advance public health goals related to the virus, but they should not be penalized for doing so via any additional regulatory requirements to do so. As detailed above, there are various reasons why a utility or community may not find value in conducting COVID-19 surveillance. Thus far there have been no reports of any regulatory mandates resulting from this testing, but NACWA will continue to engage closely with federal and state regulators to ensure inappropriate regulatory actions are not taken.

Broadening the Role of Other Water Sector Associations in this Effort

In addition to NACWA's advocacy, other associations within the water sector are participating in the effort to better understand COVID-19 in wastewater. The Water Research Foundation (WRF) and the Water Environment Federation (WEF) have convened webinars and have various resources on this issue. WRF published a compendium of expert best practices on the current state of knowledge and communicating this information to stakeholders.¹

State and regional associations can play a key role as well. In Oregon, the Oregon Association of Clean Water Administrators is assisting local utilities in their efforts. The California Association of Sanitary Agencies is also providing assistance to utilities.

1. [Wastewater Surveillance of the COVID-19 Genetic Signal in Sewersheds: Recommendations from Global Experts](#). The Water Research Foundation (May 22, 2020).

COMMUNICATING WITH AND DEVELOPING MESSAGES FOR THE MEDIA AND PUBLIC

The possible use of wastewater testing to track COVID-19 has generated intense media interest, both within the United States and internationally. Local media outlets and national media platforms have covered the surveillance of raw wastewater influent for COVID-19. This new media attention can have both positive and negative impacts for clean water utilities, largely depending on how the story frames the issue, the utility's role in this space, along with accurate coverage of what WBE surveillance can tell us and what it cannot. This means public discussion of COVID-19 wastewater surveillance must be conducted carefully and thoughtfully.

On the plus side, these tracking techniques can help reinforce for the public the importance of wastewater collection systems/wastewater utilities and how they can serve/benefit the public in new and innovative ways. These stories highlight the “cool new science” often happening in the water sector and serve as a way to further inform the public about the real value their local clean water systems provide that may not have been as clear absent the pandemic. In short, engaging in COVID-19 testing – if done in an appropriate manner and in consultation with local public health officials – can have an ancillary benefit for clean water utilities of providing a good media “hook” to better explain the critical role these agencies play.

On the other hand, there are potential downsides from a media relations standpoint if the media instead chooses to spin a story that focuses on the danger to public health of COVID-19 in wastewater. While the CDC has not confirmed any report of COVID-19 spreading from raw sewage to an individual and there continues to be no evidence that exposure to untreated sewage can cause infection, this is an angle that may prove enticing to reporters

These stories highlight the “cool new science” often happening in the water sector and serve as a way to further inform the public about the real value their local clean water systems provide that may not have been as clear absent the pandemic.

and potentially useful to environmental activists seeking stricter regulatory requirements. There have already been instances of reporters trying to write stories about the presence of “untreated” COVID-19 in combined sewer overflows and basement back-ups. If utilities choose to voluntarily publicize their work about testing for and tracking COVID-19 in their wastewater flows, they should also be prepared to answer potential media question about public health exposure. Protecting the safety of utility operators and staff as well as the public from COVID-19 is of the utmost importance, and utilities must make that point clear.

The bottom line is that messaging WBE surveillance to the public is a delicate balance that must be done thoughtfully, especially when there is concern that live, infectious viruses could be found in raw wastewater samples. The public health issues presented by COVID-19 are significant and the responsibility of a public wastewater utility to inform and communicate effectively to their community is real.

NACWA member utility the Northeast Ohio Regional Sewer District has developed some media talking points in response to these issues and has graciously shared them with the Association's Communications and Public Affairs Committee. The talking points are as follows:

- **Testing for COVID-19 in Wastewater**

As an agency committed to protecting public health, the Sewer District is exploring a partnership with the US Environmental Protection

Agency to provide wastewater samples from our three treatment plants, which collectively serve over 1 million people. The purpose of providing samples would be to detect the levels of COVID genetic material in wastewater over a period of time. The findings from these samples could be helpful in informing public health officials about potential increased detection of the virus in wastewater, including in community hotspots, as well as protecting the public from possible future COVID outbreaks. While these discussions are in the very beginning stages and protocols have not yet been developed, the Sewer District remains committed to this process, and continues exploring how we can assist today and in the future.

- **Treatment Process**

The process at the plants has not been altered in response to COVID-19. On any given day, wastewater contains a significant amount of pollutants, human waste, and potential viruses. That is the nature of wastewater and why our industry has been, and will continue to be, focused on protecting human health and the environment.

- **It's the Sewer District's job to:**

- Ensure we invest our customers' money in our regional sewer infrastructure, so that we can effectively and safely transport

wastewater from homes and businesses.

Treat wastewater from homes and businesses at the plant, so that it can be safely returned to the environment as clean water.

We do that work 24/7/365. While the importance of managing wastewater is in the spotlight today during these unprecedented times, it was just as important pre-COVID-19 and it will be just as important when we resume normal day-to-day activity. Wastewater treatment is one of the most important public health investments in our community.

NACWA is interested in hearing from public utilities that are engaging in wastewater based epidemiology, including responses to media inquiries about COVID-19 wastewater testing that utilities may have put together. If you have examples to share, please send them to Emily Rimmel or David Zielonka.



Emily Rimmel

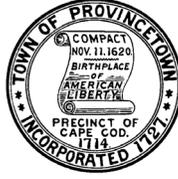
Director, Regulatory Affairs

☎ 202.533.1839 ✉ ERimmel@nacwa.org

David Zielonka

Manager, Media & Communications

☎ 202.533.1810 ✉ DZielonka@nacwa.org



**Town of Provincetown
260 Commercial Street
Provincetown, MA 02657**

**Board of Health
Telephone (508) 487-7020
Fax (508) 487-7040**

July 30, 2020

Secretary Marylou Sudders
Executive Office of Health and Human Services
1 Ashburton Place
11th Floor
Boston, MA. 02108

Dear Secretary Sudders,

We want to thank you for all the work you are doing to fight the COVID-19 pandemic as head of Governor Baker's COVID Command Center. We are in the midst of extremely challenging times and we appreciate all the state has done to mitigate the spread of COVID-19 throughout the Commonwealth. The process of re-opening Massachusetts has been thoughtfully implemented as it works to protect the health and safety of all its residents.

We value the transparency on COVID-19 statistics, especially the information on hospitalization rates, which gives insight into how intensely the virus can spread. We are particularly happy to see "Stop the Spread," a free strategic testing initiative that targets asymptomatic individuals for testing in communities with a higher number of COVID-19 positive residents, double in size. This initiative is a great example of the Baker Administration's mission to expand the capacity and distribution of testing.

The issue of testing is of great importance to our community. As one health expert noted, "testing is the tool we use to make our enemy visible during this pandemic." We are greatly concerned about the slow processing times at national labs for PCR COVID-19 test results. In Provincetown, our summer season brings a massive increase in our population. As a tourist destination, even this summer, we have had numerous day trippers and visitors arrive to town. With many businesses turning to remote working opportunities, many of our second homeowners are living here as well, increasing our population. This activity brings with it a heightened health concern for many who work in hospitality and retail industries.

The town recently joined with the business community and Outer Cape Health Services to proactively test asymptomatic hospitality and retail workers. The initiative was well received, but with a 7-day delay for results, it could make it harder for our community to contain the spread of the disease, as anyone who tested positive could potentially expose others to COVID-19 while waiting for results. As a rural community that is doing its part, we deserve a shorter turnaround for our proactive testing initiatives.

We ask that the Baker Administration develop standards for testing turnaround time of not more than 48 hours. With each positive result comes contact tracing, and delaying contact tracing increases the potential for additional exposures. Delayed results also postpone the ability for a case's workplace to deep clean after an exposure in a timely manner.

Currently, Quest Diagnostics is the lab analyzing all the tests administered in Provincetown. We realize the company is working overtime to deliver results and is overwhelmed by the surging COVID-19 cases in Western and Southern states. Our request is that if Quest is unable to shorten their turnaround time to 48 hours, that the Commonwealth facilitate a means for Community Health Centers in rural communities such as ours to work with Massachusetts-based labs to get faster results. Currently issues such as integrating records systems and establishing new courier methods stand in the way. It is imperative that the state help rural communities expand their capacity for testing when their community health center does not have its own laboratory.

By providing a network of labs to use and a barrier-free means for accessing those labs, coupled with a standard of a 48-hour turnaround time for COVID-19 testing results, we feel that we will be able to proactively protect our community by containing the spread of COVID-19 when it strikes.

Very Truly Yours,

Steve Katsurinis
Chair, Board of Health

Dr. Susan Troyan
Vice Chair, Board of Health

Morgan Clark
Health Director

Kalliope Chute
Member, Board of Health

Dr. Elise Cozzi
Member, Board of Health

Dr. Janet Whelan
Member, Board of Health

Irv Morgan
Member, Board of Health

Christopher Hartley
Member, Board of Health



**Provincetown Select Board
AGENDA ACTION REQUEST
Monday, August 03, 2020**

2

DISCUSSION

Expansion of Mask Order

Requested by: Select Board Member Lise King

Action sought: Discussion

Proposed Motion(s)

Discussion Dependent/Votes May Occur

Additional Information

Current mask order is as such:

Individuals are required to wear a mask or other cloth face covering over the nose and mouth when along the public way from Bang Street to Pleasant Street and include the Town's Commercial Center Zoning District 24 hours a day, 7 days a week. The Eastside Commercial Fishing Docks of McMillian pier would be excluded. This order does not apply to children under the age of 2 or any person who is unable to wear a mask or face covering due to a medical condition or is otherwise exempted by the Department of Public Health guidance. Persons not able to wear a mask due to a medical condition are not required to produce documentation of the condition. This Order is intended to supplement the requirements of the Governor's mask order, which continues to remain in place throughout the Town.

Board Action

<i>Motion</i>	<i>Second</i>	<i>Yea</i>	<i>Nay</i>	<i>Abstain</i>	<i>Disposition</i>

**TOWN OF PROVINCETOWN+
SELECT BOARD AND BOARD OF HEALTH**

**JOINT EMERGENCY RULE AND ORDER IMPOSING CERTAIN MEASURES TO
PREVENT THE SPREAD OF
COVID -19 WITHIN THE TOWN**

In accordance with the authority under G.L. c 111, §§ 31, 122, and 95 through 105, and any other applicable law, the Provincetown Select Board and the Provincetown Board of Health hereby issues the following Joint Order:

1. The intent of this Order is to impose measures to address the expected significant increase in people residing in or visiting the Town of Provincetown during the summer season. The Board of Health has estimated that the Town's year round population, which is approximately 3,000, may increase on any given day during the summer season to between 35,000 and 40,000. The extreme population density within the Town during the summer months presents challenges with regard to ensuring the safety of Town residents as well as visitors during the State of Emergency declared by the Governor and the Town due to the ongoing COVID – 19 pandemic. The unique circumstances of the Town requires local measures that may be more stringent than the Governor's emergency orders in order to protect public health and safety because the requirements for social distancing to minimize the inherent risk of COVID-19, a highly contagious disease, are not feasible in many areas of the Town including walking on Commercial Street and other streets within the Town especially during the summer season.
2. All provisions of this Order should be interpreted to effectuate this intent. Failure to comply with any of the provisions of this Order is deemed to constitute an imminent threat to public health.
3. This Order incorporates by reference all prior Orders of the Select Board and Board of Health, the provisions of which shall remain in effect unless they are in conflict with this Order, in which case the provisions of this Order shall take precedence.
4. This Order incorporates by reference the Declaration of Emergency issued by Governor Baker on March 10, 2020, and all subsequent orders, guidelines, and regulations issued by the Commonwealth relative to the COVID-19 State of Emergency, whether now in effect or issued in the future, and said orders, guidelines and regulations shall be enforced in the same manner as a regulation of the Board of Health.
5. This Order shall remain in effect until this Order is amended or rescinded by the Town.
6. This Order acknowledges that many of the measures contained herein affecting businesses and other activities are currently not allowed under the Governor's COVID-19

Order No. 33 and related regulations and guidelines. Nevertheless, this Order is intended to provide residents, visitors, and businesses with some degree of certainty and predictability regarding local measures, which may apply in future phases of the Governor's Re-Opening Plan, depending on present public health conditions and the containment of COVID-19.

7. To the extent that any provisions of this Order imposes requirements or restrictions that are different from those imposed by the Governor or state agencies, the provisions that are most protective of public health shall prevail.

Dining (Indoor and Outdoor Seating):

On June 1, 2020, the Governor issued COVID-19 Order No. 35, which allows restaurants to provide outdoor table service at the commencement of Phase II of the Commonwealth's phased re-opening of workplaces. The Governor's Order authorizes the Select Board to establish the process for approving requests from restaurants to provide outdoor table service. This Order sets forth the process for restaurants operating in Provincetown.

1. "Outdoor table service" shall have the same meaning as set forth in COVID Order No. 35. It shall mean service that is provided outside the restaurant building envelope, whether on a sidewalk, patio, deck, lawn, parking area, or other outdoor space. Outdoor table service may be provided under awnings or table umbrellas or other cover from the elements, provided, however, that at least 50 percent of the perimeter of any covered dining space must remain open and unobstructed by any form of siding or barriers at all times.
2. Any restaurant wishing to expand their premises to include outdoor dining areas, shall make written application to the Board of Health and shall receive the approval of the Board or its authorized agent prior to using any outdoor dining space.
3. The application shall include a plan showing the location of the proposed outdoor dining area, the size of the outdoor dining area, the number of seats and tables that will be located in the outdoor dining area, and any other information required by the Board or its agent. In anticipation of the allowance of indoor dining, the plan submitted should also include, for approval, the configuration of indoor tables along with the total number of proposed seating.
4. Approval to use an outdoor dining area shall not result in an increase in the number of seats authorized for the premises. In the event the Commonwealth authorizes at a later date indoor table service, this Order may be deemed revised accordingly, except that the number of seats permitted inside the establishment shall be reduced by the number of seats allowed outside the establishment.

5. The expansion of outside dining onto Town-owned beaches is subject to approval by the Board of Health and the Select Board. Expansion of dining on to private beaches is subject to approval of the beach owner and the Board of Health.
6. The permit holder shall demonstrate a legal right of access to the proposed outdoor space, through either ownership, lease or written permission of the owner. Under no circumstances shall outdoor dining be allowed on any public sidewalk, within the Town's public right of way or on any other Town-owned property, unless approved by the Select Board, in writing.
7. Notwithstanding the provisions of chapter 40A of the General Laws, or any special permit, variance or other approval thereunder, or any general or special law to the contrary, the Building Department shall approve requests for expansion of outdoor table service. The approval need not comply with the notice and publication provisions of section 11 of Chapter 40A of the General laws. Simultaneously, the Building Department may approve the configuration of an amended indoor seating plan. This may be accomplished by submitting a singular amended plan.
8. If the establishment intends to serve alcohol in the outdoor area, the holder of the liquor license may apply to the Licensing Board for a change in the description of the licensed premises to allow outdoor alcohol service. The Licensing Board may grant the change in location without a public hearing and without further review or approval by the Alcohol Beverages Control Board ("ABBC") prior to issuance. See the COVID-19 Order and the ABCC Advisory issued on June 1, 2020.
9. If the establishment intends to use the outdoor area for entertainment, the permit holder shall obtain a permit from the Licensing Board.
10. The outdoor area shall physically abut the primary premises, such that wait staff and patrons shall not have to cross streets, private property or parking lots to access the outdoor area.
11. The outdoor area shall be physically designated with ropes, fencing or other barriers and no space outside the designate area shall be used for outdoor dining purposes.
12. The permit holder shall comply with and enforce all rules, orders and guidance of the Governor, the Department of Public Health and the Town of Provincetown Board of Health relative to COVID-19 safety measures, including but not limited to, workplace safety requirements, gathering size limits, physical distancing, and face covering requirements.
13. The permit holder shall be solely responsible for sanitizing the tables and chairs after each use, cleaning the outdoor area and securing tables, chairs and equipment when the area is not in use.
14. The hours of alcohol sales allowed at businesses with pouring licensees shall be between 8:00 am to 11 pm Monday – Saturday and 1-:100 am – 11 pm on Sunday. All other regulations and permits conditions, including hours of operations, shall remain in effect and the service areas shall be subjected to inspection by agents of the Board of Health

and Licensing Agent.

15. The Board of Health reserves the right to impose additional requirements on a case-by-case basis as may be necessary to protect public health, safety and welfare.
16. Pursuant to the Governor's COVID-19 Order No. 35, on November 1, 2020, or the date the Governor's Order is rescinded, whichever is sooner, any approvals under this section shall automatically revert back to its status prior to the approval of the change for expansion of outdoor table service or in the description of a licensed premise.
17. Food Trucks and the outdoor dispensing of food at hotels located out of the center of Town, as determined by the Board of Health, are not allowed.

Outdoor Display of Merchandise:

The outdoor display of merchandize shall be permitted subject to approval of the Building Department, but may not encroach into the public way.

Cruise Ships and Excursion Marine Vessels:

In light of the significant risk caused by an influx of visitors to the Town caused by these activities which will make social distancing more difficult to achieve, the use of any docking facilities within the Town by cruise ships, whale watching, dinner or sightseeing cruises, gambling cruises, or other vessels for hire shall not be permitted except with the approval of the Board of Health, after consultation with the Harbormaster and the Provincetown Public Pier Corporation. This prohibition does not apply to scheduled ferry service, which is considered an integral part of the Town's transportation infrastructure.

Bus Tours:

For the same reasons, leisure bus tours or other vehicles for hire services that are designed to transport ten people or more are not allowed to disembark passengers anywhere within the Town or park tour buses or other vehicles in any Town parking areas, except with the approval of the Board of Health, in consultation with the Tourism Board and the Cape Cod Chamber of Commerce. This prohibition shall not apply to regularly scheduled passenger bus service, which are also considered an integral part of the Town's transportation infrastructure.

Street Performers:

Street performers must be duly licensed by the Town and are required to wear a mask or other face covering while performing as provided for in this Order. Licensed street performers shall be permitted to perform only within certain designated zones and during the hours as set forth in Section 9-4 of the Town's General Bylaws. It is the intent of this prohibition that street performers have the right to exercise freedom of speech subject only to reasonable time place and manner restrictions, and are designed to protect public health, safety and welfare. The Board

of Health reserves the right to issue further orders in this regard should the Board determine that the ability to social distance is not possible during performances.

Mask Order:

Individuals are required to wear a mask or other cloth face covering over the nose and mouth when along the public way from Bang Street to Pleasant Street and include the Town’s Commercial Center Zoning District 24 hours a day, 7 days a week. The Eastside Commercial Fishing Docks of McMillian pier would be excluded. This order does not apply to children under the age of 2 or any person who is unable to wear a mask or face covering due to a medical condition or is otherwise exempted by the Department of Public Health guidance. Persons not able to wear a mask due to a medical condition are not required to produce documentation of the condition. This Order is intended to supplement the requirements of the Governor’s mask order, which continues to remain in place throughout the Town.

Public or Semi-public showers:

No gym, marina, campground, or other facility providing public or semi-public showers, saunas, or steam rooms may operate without the approval of the Board of Health and in accordance with any safety standards established by the Board of Health.

Indoor Entertainment:

Live indoor entertainment, including cabarets and other live performances, which would otherwise require an entertainment license by the Licensing Board is hereby prohibited.

Shared Bathrooms:

No guesthouse or other lodging houses may provide for the shared use of bathrooms by persons who are not related to each other, without the approval of the Board of Health.

Food Buffets:

Food buffets and/or any kind of self-service of any food that is not pre-packaged, including self-serve coffee soft drinks, and water dispensing areas, are not allowed to operate.

Outdoor Areas of Restaurants or Bars

Smoking in outside restaurant areas or bar areas is prohibited.

Use of Town Property

As the custodial board of Town property, the Select Board will make certain properties available for use by members of the public for the consumption of take-out meals. Said outdoor areas shall be subject to such reasonable rules and regulations as the Select Board deem necessary and shall be available on a first-come, first-serve basis. Pursuant to the authority of the Select Board over public ways and authority to enact traffic regulations, the Select Board will temporarily remove parking spaces on Ryder Street to promote social distancing and pedestrian movement. The Select Board will permit the expansion of the Farmer's Market and the Sunday Vendor's Market onto the Town Hall lawn.

Enforcement:

1. Copies of this Order and any other notices required by this Order shall promptly be: (1) made available at the Provincetown Hall; (2) posted on the Town Website; and (3) provided to any member of the public requesting a copy of this Order; and (4) a summary of which shall be published in the Cape Cod Times, Provincetown Banner, and the Provincetown Independent.
2. If any provision of this order or the application thereof to any person or circumstance is held to be invalid, the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.
3. Whoever violates any provision of this Order may be penalized by indictment or on complaint brought in the district court. Except as may be otherwise provided by law and as the district court may see fit to impose, the maximum penalty for each violation or offense shall be one thousand dollars (\$1,000). Each day or portion thereof shall constitute a separate offense. If more than one, each condition violated shall constitute a separate offense. The Board of Health and/or the Select Board may seek to enjoin violations thereof through any lawful process, and the election of one remedy by the Board of Health shall not preclude enforcement through any other lawful means.
4. The Provincetown Health Director, Assistant Health Officer, Agent of the Board of Health, and/or any Police Officer of the Town of Provincetown may enforce this Order as a regulation of the Board of Health.
5. Whoever violates any provision of this Order may be penalized by a noncriminal disposition process as provided in Massachusetts General Laws, Chapter 40, section 21D and the Town's non-criminal disposition by-law.
6. If non-criminal disposition is elected, then any person who violates any provision of this Regulation and Order shall be subject to a penalty in the amount of one hundred dollars (\$100) for the first offense; two hundred dollars (\$200) for the second offense; and three hundred dollars (\$300) for a third and subsequent offense. Each day or portion thereof

shall constitute a separate offense. If more than one, each condition violated shall constitute a separate offense.

7. Notwithstanding the foregoing, agents and officers are encouraged to educate offenders and to exercise their judgment on a case-by-case basis, and they may issue verbal or written warnings prior to determining that an offense has occurred.

So Ordered by the Provincetown Board of Health on this 1st day of June, 2020

So Ordered by the Provincetown Select Board on this 1st day of June, 2020



**Provincetown Select Board
AGENDA ACTION REQUEST
Monday, August 03, 2020**

3

DISCUSSION

Letter to Massachusetts Department Public Health

Requested by: Select Board Member Lise King

Action sought: Discussion

Proposed Motion(s)

Discussion Dependent/Votes May Occur

Additional Information

Please see attached draft letter

Board Action

<i>Motion</i>	<i>Second</i>	<i>Yea</i>	<i>Nay</i>	<i>Abstain</i>	<i>Disposition</i>



Provincetown Select Board
AGENDA ACTION REQUEST
Monday, August 3, 2020

4

EXECUTIVE SESSION MOTION

MGL c30A Sec. 21 (a) Clause 2

Requested by: Select Board

Action Sought: Discussion

Proposed Motion(s)

MOVE that the Select Board vote to go into Executive Session pursuant to MGL c30A Section 21 (a) Clause 2 for the purpose of:

Clause 2 – To conduct strategy sessions in preparation for negotiations with non-union personnel or to conduct collective bargaining sessions or contract negotiations with non-union personnel. Interim Town Manager Contract Negotiations. Votes may be taken.

and [not] to convene in open session thereafter.

- Roll Call Vote:** David Abramson:
John Golden:
Robert Anthony:
Lise King:
Louise Venden:

Additional Information

Board Action

<i>Motion</i>	<i>Second</i>	<i>Yea</i>	<i>Nay</i>	<i>Abstain</i>	<i>Disposition</i>