


# COVID REPORT #15

JANUARY 24, 2022

Contents: Data from 1/10 & 1/3

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Bottom line: The situation is changing constantly;  
increasing case numbers are alarming.

*Next report expected January 31 (Monday schedule)*



# WEEKLY MESSAGE

I'm now on a Monday weekly schedule (delayed due to holiday). I call our current status: ***"Vaccination is the answer."*** Hospital admissions are overwhelming capacity, with most patients ***unvaccinated***. On the positive side, deaths are down compared with last year, largely attributable to vaccinations (plus available treatments).

## ***PLEASE FOLLOW THE USUAL RECOMMENDATIONS:***

- Mask indoors; observe social distancing; avoid large indoor gatherings
- Get vaccinated & boosted! (See next slide for information.)

***"Omicron" masks:*** Public health experts advise that tight-fitting, non-cloth masks (N95 or KN95; 95% filtration) provide much better protection against infection than cloth masks for both wearers & those around them. This is because it takes many fewer Omicron virus particles to mount an infection than earlier variants. However, it may be difficult to obtain N95 or KN95 masks. Local medical supply houses can't get KN95s. While available on the internet, it can be difficult to assure that a particular brand is legitimate & meets specifications. **Look for "NIOSH Approved," as listed on the CDC site below.**

## ***MORE INFORMATION ON MASKING:***

- Fitting: Mask should be tight & collapse slightly when inhaling
- Also acceptable: KF94 ("Korean filter") gives 94% filtration
- Go to CDC ([cdc.gov/coronavirus](https://cdc.gov/coronavirus)) & click under "Testing & Masks"
- **Town masking discussion: Most respondents so far would like to see more public masking, whether by mandate or strong public messaging.**



# VACCINE INFORMATION

Current recommendations are for all individuals 5 years & over to be vaccinated against the Covid-19 coronavirus (unless there is a medical contraindication). Preference is for a 2-dose mRNA vaccine (Pfizer/BioNTech or Moderna), but the single dose J&J is also acceptable. Pfizer is authorized for all age groups, the other 2 for 18+. *From Medicare, 1/10/22:* Everyone 18+ should get a booster 2 months after their J&J vaccine, or 5 months after completing their primary mRNA vaccine series. Youth ages 12 to 17 should also get a booster of Pfizer-BioNTech 5 months after their primary series.

**Adams Vaccination Status:** Slide #12 shows our vaccination status by age group. Our fully vaxed rate is relatively good – 70% overall. However, our boosting rate lags far behind at 30%. People are still continuing to get vaccinated & boosted (see the weekly increments), but we have a ways to go.

**Vaccination & Omicron:** We've known for a while that vaxed individuals are susceptible, but that the infection is much milder. Importantly, vaccination protects one from hospitalization & death. Boosting confers an even greater protection. **See Slides #13 & #14 for further details from recent studies.**

## VACCINATION OPTIONS:

- Local vaccination resources & scheduling:  
<https://getvaccinatedberkshires.org/> (The next clinic is still TBA; check back periodically.)  
<https://home.color.com/vaccine/register/berkshire> (search for other options)
- Statewide: <https://vaxfinder.mass.gov/>
- Community Health Programs Mobile Unit (offers both testing and/or vaccinations)  
<https://www.chpberkshires.org/mobile/> (Van schedule)  
Telephone: 1-413-528-0457 (Note: appointments are now required for the Mobile Unit)
- Berkshire Health Systems:  
Schedule via your Patient Portal or call the Hotline 1-855-262-5465.
- Vaccines are also available at local pharmacies. Contact yours for an appointment.

# WORKPLACE SAFETY STANDARDS

The impetus for issuing the Emergency Orders on Workplace Safety Standards for Local Businesses & Enterprises (including Special Public Events & “Clubs”) was the recent uptick in Covid-19 cases in town. Data in this Report provide ample evidence that Covid is still with us & surging again. The Delta variant’s high transmission rate has led to this resurgence despite our relatively high vaccination rate here & statewide. Recently added Slide 10 shows case counts since January 2020. Please note: (i) we are about where we were 1 year ago & (ii) we’re just entering winter, when Covid peaked to its highest levels last year.

During the state emergency, Covid cases were to be reported to the Board of Health. That mandate ended last May, when the emergency was lifted. To control virus spread, we need to reestablish this measure to assist us with tracing contacts as quickly as possible. Thus, the emergency order creates 2 mandates: (i) reporting & (ii) suspension of operations & cleaning following an exposure. The 1<sup>st</sup> mandate helps us & the 2<sup>nd</sup> is the sensible response. The remaining requests in the orders amount to strong encouragement to comply with the best practices for stopping the spread of Covid-19.

## ***IMPORTANT NOTES:***

- Privacy: Confidentiality will be maintained. Personal information will only be known to the Board of Health & our health agents (Code Enforcement & Public Health Nurse).
- We will only use provided information to ascertain the source of an infection or to alert potential contacts so they may take necessary measures (e.g., testing, quarantine, etc.).
- An employer will **not** be held accountable if an employee fails to report his/her positive test.
- Finally, the Board of Health has the authority to issue such emergency orders without hearing public comment (see MA code & statute cited in the order). The rationale is that time may be of the essence. The board has the responsibility to weigh benefits & burdens in protecting public health with such an order. However, we are still subject review via appeal (noted in the order).

Adams Data as of 1/21/22 (from MAVEN*)			
	Date Range	Days	Cases
<b>Previous case numbers</b>	July	31	16
	August	31	71
	Sep 1 - Sep 28	28	25
	Sep 23 - Oct 12	20	36
	Oct 13 - Oct 28	14	63
(Note the different time spans)	Oct 29 - Nov 4	7	10
	Nov 5 - Nov 11	7	19
	Nov 12 - Nov 18	7	27
	Nov 19 - Nov 25	7	51
	Nov 26 - Dec 2	7	63
<b>Accumative total</b>	Dec 3 - Dec 9	7	58
<b>1,207 cases = 14.7%</b>	Dec 10 - Dec 16	7	16
(Adams pop = 8,227)	Dec 17 - Dec 24	8	24
	Dec 25 - Dec 31	7	67
	Jan 1 - Jan 7	7	97
	Jan 8 - Jan 14	7	103
<b>Current cases</b>	<b>Jan 15 - Jan 21</b>	<b>7</b>	<b>73</b>
<b>Current rate</b>	<b>11.4 new cases/day</b>		
<b>Current cases by age cohort</b>	<5		3
	5-20		13
	21-40		24
	>40		33
<b>Vax status: 46 were listed as vaccinated (60.7% of those eligible)</b>			
*Massachusetts Virtual Epidemiological Network			



# Public Health Institute of Western Massachusetts

publichealthwm.org/covid-19/data/Berkshire

Based on best available data as of 1/20/22

## Berkshire County COVID-19 Data

Western Mass COVID-19  
County Data Dashboard

Current 2-Week Period: Jan 2, 2022–Jan 15, 2022

Prior 2-Week Period: Dec 26, 2021–Jan 8, 2022

### CASES



Confirmed Cases  
(current 2 week period)

3,969

Prior 2-week period: 3,200

Cumulative Confirmed Cases: 18,282

### TESTS



Tests  
(current 2 week period)

32,826

Prior 2-week period: 26,930

### DEATHS

Deaths  
(current 2 week period)

6

Note: No new deaths in 2<sup>nd</sup> week of span.

Cumulative Confirmed &  
Probable Deaths: 358



Average Daily  
Cases per 100,000  
(current 2 week period)

224.3

MA: 278.9

Prior 2-week period: 180.8



Percent Positive  
Tests (current 2 week period)

12.8%

MA: 20.61%

Prior 2-week period: 12.42%

Symbols indicate change when compared to prior two-week period. **For New Cases, Incidence per 100,000, and Total Tests:** Higher (upward arrow) means the number in the current two-week period is higher than the prior period. Lower (downward arrow) means the number in the current two-week period is lower than prior two-week period. No change (equals sign) means the number in the current two-week period is the same as the prior period. **For Percent Positivity:** Less than 0.10% difference in the percent positivity is considered No change (equal sign).

Data sources: MDPH, 1/20 and 1/13 COVID-19 Weekly Public Health Report Raw Data & COVID-19 Daily Dashboard <https://www.mass.gov/info-details/covid-19-response-reporting>.

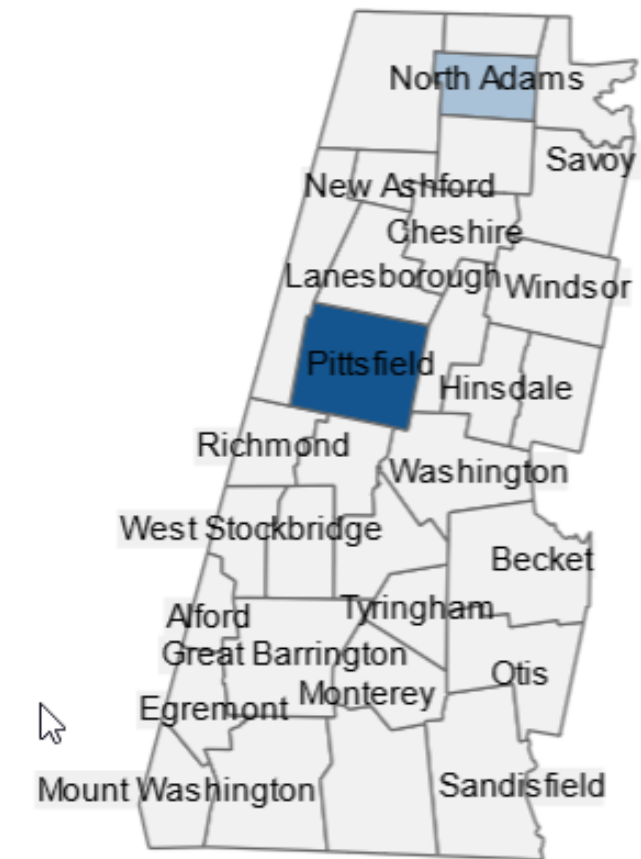
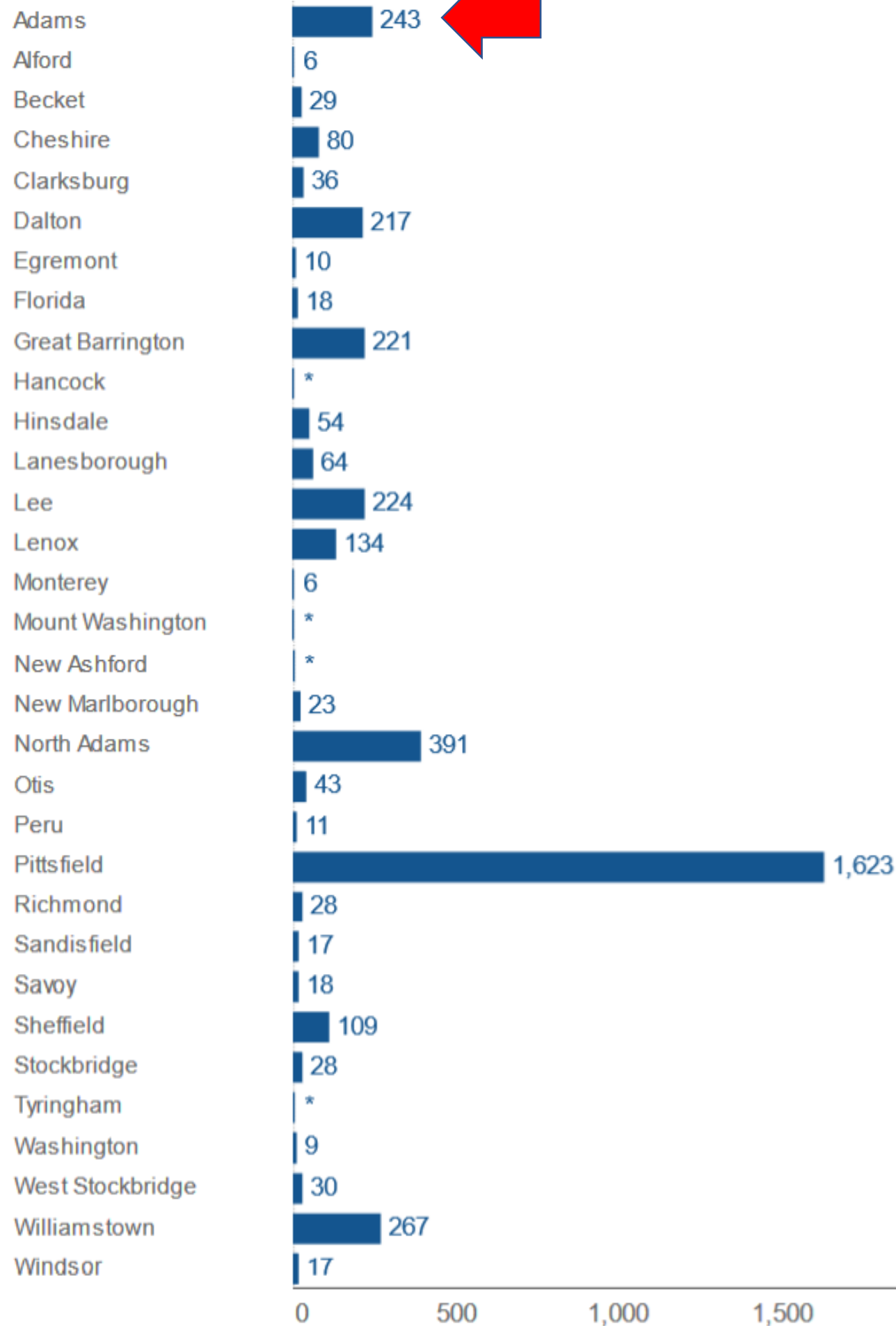


Note that most panels also list data for previous week.

**Cumulative deaths = 361 (1 per 357 persons in the county\*)**

\*April 2020 population = 129,026 per US Census data (calculation revised 1/14/2021)

# 1/20/22 data: 14-day case counts (Jan 2 – Jan 15, 2022)

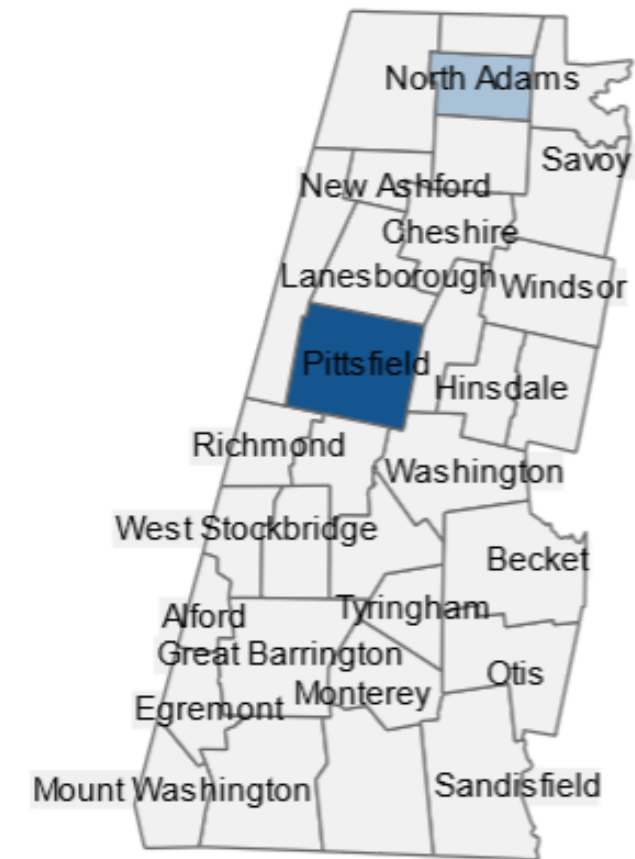
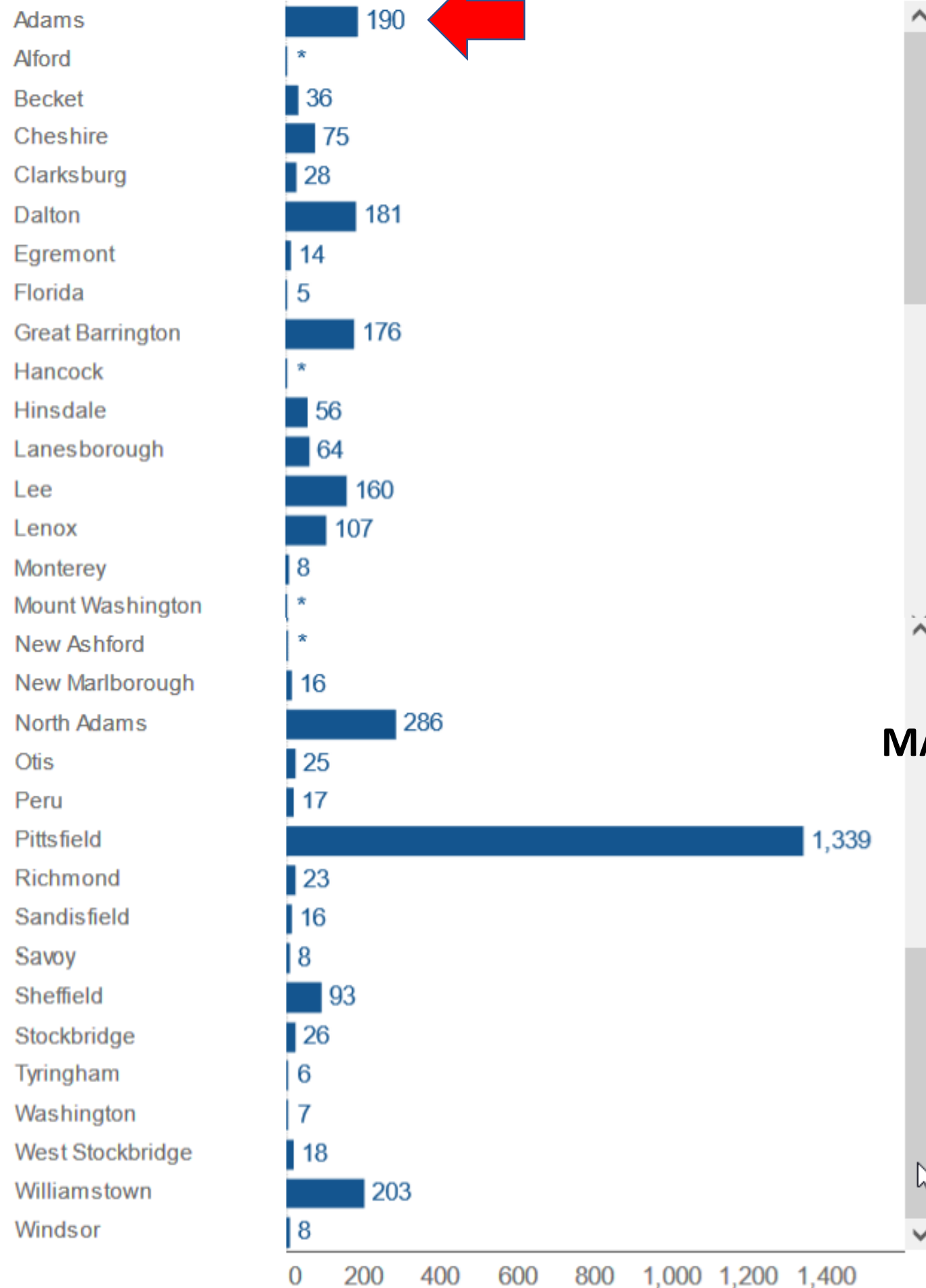


**MA totals = 271,940; Berkshire County = 3,969**

([www.mass.gov/info-details/covid-19-response-reporting](http://www.mass.gov/info-details/covid-19-response-reporting))

**Current 2-week span**

# 1/13/22 data: 14-day case counts (Dec 26 – Jan 8, 2022)



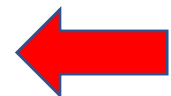
**MA totals = 260,623; Berkshire County = 3,200**

([www.mass.gov/info-details/covid-19-response-reporting](http://www.mass.gov/info-details/covid-19-response-reporting))

**Previous 2-week span reported**

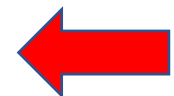


Case Counts (total per 2 weeks shown)			
Date range*	MA	County	Adams
8/15-8/28	19,049	380	46
8/29-9/11	22,489	350	23
9/12-9/25	22,175	326	14
9/26-10/9	18,528	309	25
10/10-10/23	17,081	441	59
10/24-11/6	17,738	579	43
11/7-11/20	29,741	781	68
11/21-12/4	46,475	1,063	129
12/5-12/18	65,835	951	50
12/12-12/25	80,930	963	41
12/19-1/1	147,905	1,691	99
12/26-1/8	260,623	3,200	190
1/2-1/15	271,940	3,969	243



**\*Note that every other previous 2-week ranges are shown in earlier data.**

14-Day Average Daily Incidence Rate (per 100,000)			
Date range*	MA	County	Adams
8/15-8/28	19.5	21.5	39.9
8/29-9/11	23.1	19.8	20.0
9/12-9/25	22.7	18.4	12.2
9/26-10/9	19.0	17.5	21.7
10/10-10/23	17.5	24.9	51.2
10/24-11/6	18.2	32.7	37.3
11/7-11/20	30.5	44.1	59.0
11/21-12/4	47.7	60.1	112
12/5-12/18	67.5	53.7	43.4
12/12-12/25	83.0	54.4	35.6
12/19-1/1	151.7	95.6	85.9
12/26-1/8	267.3	180.8	165.0
1/2-1/15	278.9	224.3	211.0

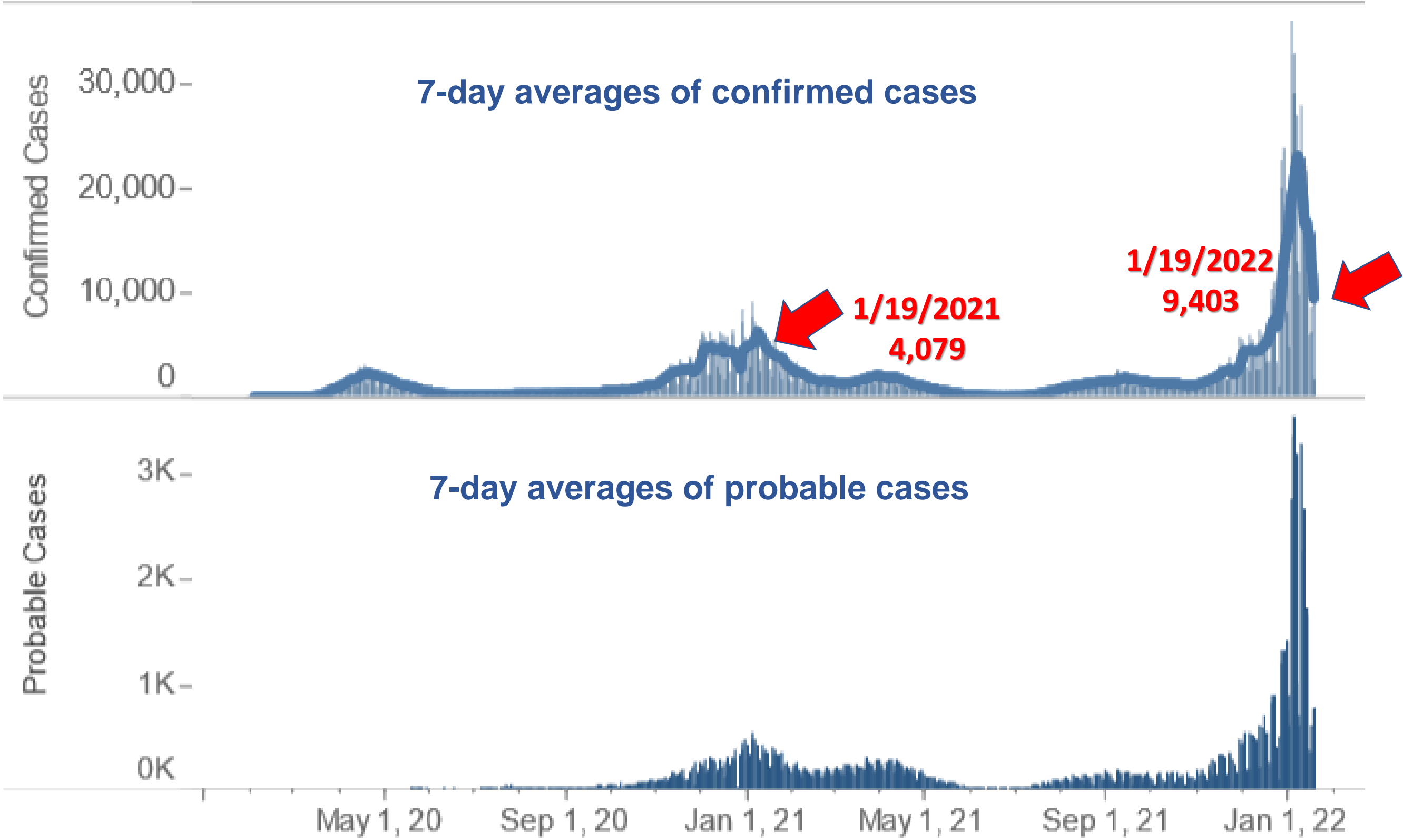


**\*Note that every other previous 2-week ranges are shown in earlier data.**

# MASSACHUSETTS COVID-19 CASES OVER TIME

Select dates:

1/29/2020  1/19/2022



MA totals (confirmed + probable): Cases = 1,519,783 (21.4%); Deaths = 21,295 (0.30%, about 1/333)

[[www.mass.gov/info-details/covid-19-response-reporting](http://www.mass.gov/info-details/covid-19-response-reporting) (Covid-19 Cases)]

1/18/22

Ages	Pop	Per capita	Fully vaxed	% of Age	% of Town	Boosted	% of Age	% of Town
5-11 Yr	573	7%	180	31%	3%	-	0%	0%
12-15 Yr	328	4%	224	68%	4%	18	5%	1%
16-19 Yr	329	4%	246	75%	4%	75	23%	3%
20-29 Yr	1,068	13%	650	61%	11%	192	18%	7%
30-49 Yr	1,941	24%	1,347	69%	23%	558	29%	20%
50-64 Yr	1,885	23%	1,472	78%	26%	793	42%	28%
65-74 Yr	1,014	12%	921	91%	16%	663	65%	24%
75+ Yr	775	9%	717	92%	12%	522	67%	19%
Total	8,227	100%	5,757	70%	100%	2,821	34%	100%

(Data posted 1/20/22)

(+31)

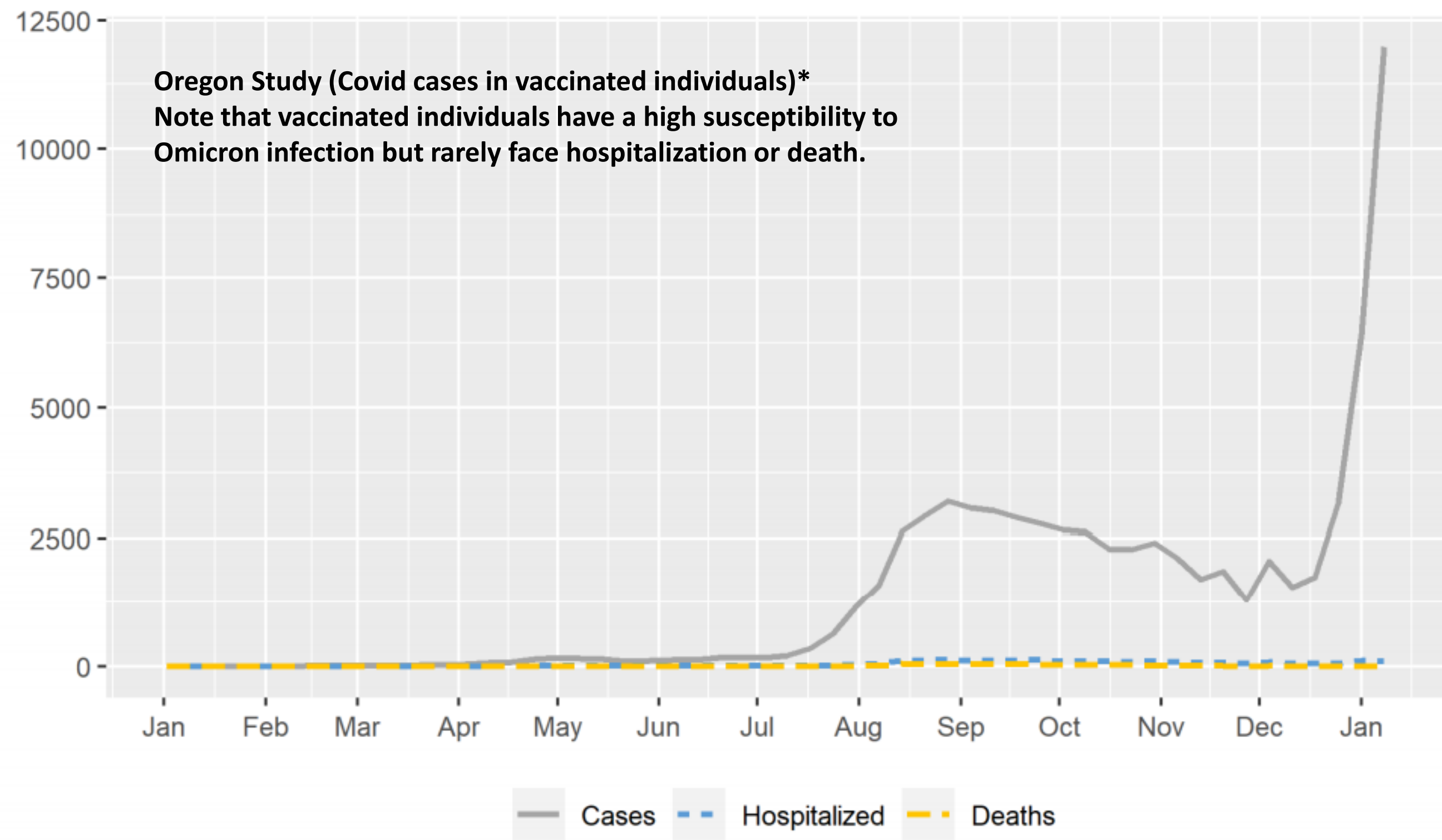
(+159)

1/11/22

Ages	Pop	Per capita	Fully vaxed	% of Age	% of Town	Boosted	% of Age	% of Town
5-11 Yr	573	7%	170	30%	3%	-	0%	0%
12-15 Yr	328	4%	221	67%	4%	4	1%	0%
16-19 Yr	329	4%	242	74%	4%	64	19%	2%
20-29 Yr	1,068	13%	648	61%	11%	166	16%	6%
30-49 Yr	1,941	24%	1,341	69%	23%	512	26%	19%
50-64 Yr	1,885	23%	1,466	78%	26%	757	40%	28%
65-74 Yr	1,014	12%	920	91%	16%	647	64%	24%
75+ Yr	775	9%	718	93%	13%	512	66%	19%
Total	8,227	100%	5,726	70%	100%	2,662	32%	100%

(Data posted 1/13/22)

**Figure 2. COVID-19 breakthrough cases, hospitalizations and deaths, by week**



\*From Dr. Dan Doyle's BHS/BOH call January 19<sup>th</sup>.

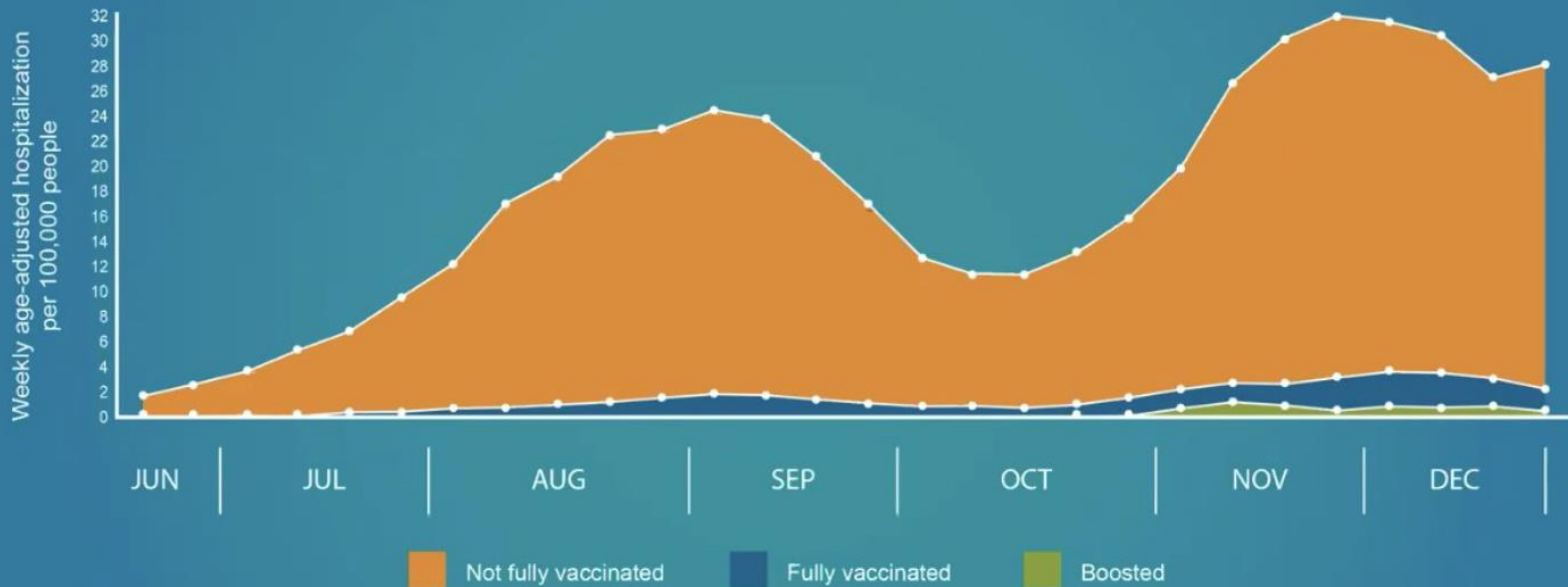


## Nebraska Study (Hospitalization vs. vaccination status)\*

PEOPLE WHO WERE FULLY VACCINATED (BUT NOT YET BOOSTED) WERE **11X LESS LIKELY** TO BE HOSPITALIZED FOR COVID-19  
PEOPLE WHO WERE BOOSTED WERE **46X LESS LIKELY** TO BE HOSPITALIZED FOR COVID-19

...THAN PEOPLE WHO WERE NOT FULLY VACCINATED

COVID-19 hospitalization rates by vaccination status in Nebraska, 2021



\*From Dr. Dan Doyle's BHS/BOH call January 19<sup>th</sup>.

# ADDITIONAL INFORMATION

The following material from the CDC (<https://www.cdc.gov/coronavirus/>): Click on “Quarantine & Isolation” link for all the details.

## ***RECOMMENDATIONS / GUIDELINES:***

- **Quarantine:** Quarantine if you have been in close contact (within 6 feet of someone for a cumulative total of 15 minutes or more over a 24-hour period) with someone who has COVID-19, unless you have been fully vaccinated. People who are fully vaccinated do NOT need to quarantine after contact with someone who had COVID-19 unless they have symptoms. However, fully vaccinated people should get tested 5-7 days after their exposure, even if they don't have symptoms and wear a mask indoors in public for 14 days following exposure or until their test result is negative.
- **Isolation (for individuals positive for Covid-19):** People who are in isolation should stay home until it's safe for them to be around others. At home, anyone sick or infected should separate from others, stay in a specific “sick room” or area, and use a separate bathroom (if available). To calculate your 10 full day isolation period, day 0 is your first day of symptoms. Day 1 is the first full day after your symptoms developed. If you test positive for COVID-19 and never develop symptoms, day 0 is the day of your positive viral test (based on the date you were tested) and day 1 is the first full day after your positive test. If you develop symptoms after testing positive, your 10-day isolation period must start over. Day 0 is your first day of symptoms. Day 1 is the first full day after your symptoms developed.