

COVID-19

Andrew Artenstein, MD, Chief Physician Executive & Chief Academic Officer, Baystate Health; Laura McCormick, OHP CLMS, Director, Employee Health & Leave Programs, Baystate Health

How close of a match is the COVID-19 booster being offered now to what we most likely will be seeing in the fall and winter?

Andrew Artenstein: That's a great question. We've learned that the bivalent vaccine, which is, as you may have noticed in the news, was recently approved, will likely provide an enhanced degree of protection from serious COVID-19 illness this winter. I highly recommend you get this booster if you're eligible. It is based on two strains of the Omicron variant. Remember that the Omicron variant of this virus is the mutated form that caused the latest wave that we had last winter, in January and February. This was a very challenging time across the country, and for us locally as well. Now, there are two sub-strains of Omicron which have been circulating throughout the world, and are predicted to potentially be candidates for causing, or at least related to, the next surge. That's an educated guess by predictive scientists, and that's what the vaccine is based on. So getting it will probably boost your immune system, and it may help prevent the worst of the next wave.

But we don't know for certain what it's going to be. There are numerous mutated strains circulating at any given time throughout the world. And we, meaning our national and international viral experts, monitor those through the public health apparatus we have set up. We try to identify and predict what's going to potentially cause the next outbreak. But we don't know with certainty, but the best tool we have is that Bivalent vaccine and getting fully vaccinated, and then boosted.

Just remember with flu, we get an annual flu vaccine. It's mandated to Baystate Health and many other health systems, and it's mandated to ensure your safety and the safety of you, your patients, loved ones and families. That vaccine changes every year, because flu also mutates every year. And there's multiple strains circulating in the world and the World Health Organization and others predict what the most likely causes of next year's outbreak will be a year in advance for pair of vaccines, which takes nearly a year to prepare with four or five of those strains embedded within it.

Also understand that some years are better than others are better than others. Some years the strains match perfectly, and we all we see almost one hundred percent vaccine advocacy, and some years the match is much less robust. But we still get protection from the vaccine. It protects us against getting really sick and dying of influenza. Same can be said for COVID-19. It may not be 100% but it will protect from severe symptoms and death.

Is Baystate going to require employees to get the COVID booster?

Laura McCormick: Baystate Health does not require employees to receive additional boosters beyond the initial primary series vaccination. However, the MA DPH does require home health and hospice team members to receive a booster.

For the COVID-19 vaccine: is it OK to switch for example if you got Moderna and changed to Pfizer?

Laura McCormick: Yes. Individuals with Moderna primary series and previous boosters can receive the Pfizer bivalent and vice versa. Consult with your healthcare provider if you have questions about which bivalent is right for you.

For visitors to non-patient areas like 280 Chestnut Street, are masks optional in those areas, regardless of vaccination status?

Laura McCormick: At this time, masks are optional for employees working in non-patient buildings, regardless of COVID vaccine status. However, employees with approved exemptions for *flu* vaccine will need to continue to wear masks during the designated influenza season (which began on Oct. 28).

Are there any plans to alter our protocols and guidelines related to the recent recommendations regarding universal masking based on our levels of community immunity? It seems both Hampden and Hampshire County are either low or moderate spread, and I feel our hospital network has an opportunity to put our best face forward to continue being a local leader regarding health care in the Pioneer Valley.

Andrew Arstenstein: We have changed the guidance through the recommendations of our infection control providers and practitioners and our pandemic emergence team, which is a multidisciplinary team that's been doing this work and vigilantly monitoring the environment. Masks, as of today, will no longer be required in parts of Baystate Health that do not deliver care. That is, buildings where no care is delivered. If you're in a building where clinical care is delivered (eg. hospitals and ambulatory sites), you will still need a mask.

Baystate Health is leading through example by suggesting that we have lots of vulnerable people who come through our doors in clinical care. We have to assume that at any given moment there are people who have vulnerabilities to serious illness, and we want to try to limit those exposures.

I would still suggest that we respect people's rights and privileges to wear masks, because everyone has to make their own decisions, even in a non-clinical area. But I'll also suggest you that the caveat of these changes is they could change again, as you recall, for two and a half plus years of pandemic response. We were successful in ensuring the Health site, safety, and well-being of our patients and team members and our community, we intend to continue following that guiding principle. Therefore we have to be prepared to adapt, as the environment changes, and it changes rapidly, as seasons change and respiratory viruses become more prominent. We might see different guidance two months from now, a month from now, based on what's going on, on the ground. But for now we feel pretty comfortable.