What should the next phase of COVID-19 look like in Montgomery County. I have some reasonable suggestions as its time to think about what endemic coronavirus looks like in our county.

1. Being upfront, transparent, and clear with your goals. The goal can no longer be to prevent infection because Omicron is too contagious. The goal needs to be managing severe outcomes and hospital capacity. Over the next few months you need to clearly state this as often as possible.

2. Shifting mask mandates to suppress the worst seasonal peaks, not to control infection during the entire year. This includes:
   - Drop the indoor mask mandate this spring. We know Coronavirus is seasonal and spring, summer, and early fall are very low risk periods. This allows everyone some level of normal, but at a very low risk overall to hospital capacity, and risk of infection due to low COVID circulation.
   - Given the high level of Omicron immunity in Montgomery County this spring and Summer should be very similar to last year.

3. Be upfront that mask mandates MIGHT need to return during winter months next fall/winter, but those mandates will be temporary with the goal of keeping hospital capacity high. (Example, Mask Mandates from Black Friday though February 1st.)

4. Provide access to good N95 masks for those that want the maximum protection.

5. Being prepared for COVID spikes with stock piles of rapid tests, popup testing centers during the winter months, etc.

6. Congratulating everyone in Montgomery County for the amazing job they have done for the last two years, and again being clear that the new goal is to manage the seasonal high periods of COVID for a few years, but allowing as much of a normal life as possible during the low periods.

7. Schools: masking should continue for this school year, with a possible exception for May of cases are very low. This is because a vaccine is not yet available for children under 5. But once that vaccine is available late spring the county should consider dropping the mask mandate for next fall.