

COVID-19 case information

Location	Current Cases	Total Cases	Deaths
Global	-	104,370,550	2,271,180*
United States	-	26,523,297	454,209†
New Jersey	-	637,357	19,699‡
Morris County	-	28,511	859‡
Montville	336	1124	§

* As reported by WHO (World Health Organization) on <https://covid19.who.int/>

† As reported by CDC (Centers for Disease Control) on <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>

‡ Confirmed deaths, as reported by NJDOH (NJ Department of Health) on https://www.nj.gov/health/cd/topics/covid2019_dashboard.shtml

§ Per NJ Office of Vital Statistics and Registry, local health departments remain prohibited from disclosing the number of deaths in a municipality due to a specific cause

Changes to previous information are highlighted in yellow.

COVID-19 basics

- COVID-19 vs other coronavirus pandemics (global):
 - COVID-19: 104,370,550 cases, 2,271,180 deaths, Case Fatality Rate (deaths per cases) = 21.7%
 - MERS (2012): 2500 cases, 858 deaths, Case Fatality Rate = 34.3%
 - SARS (2003): 8,000 cases and 774 deaths, Case Fatality Rate = 9.7%
- Incubation period: 2 to 14 days
- Main Symptoms:
 - Respiratory: fever (100.4 or above), cough, and shortness of breath
- Other symptoms:
 - Chills, shaking with chills, headache, sore throat, new loss of taste/smell, congestion, runny nose, nausea, vomiting, diarrhea, fatigue, muscle/body aches
- Thought to spread through:
 - Respiratory droplets from coughing, sneezing, breathing, vocalizing (speaking/shouting/singing)
 - Touching surfaces with live virus on it, then touching eyes, nose, mouth
- Treatment:
 - FDA approved one drug, remdesivir (Veklury), an antiviral medication that prevents the virus from producing a particular enzyme that is necessary for the virus to replicate itself. At this time, only hospitalized patients may be treated with remdesivir.
 - Other potential treatments are still under investigation
 - Treat the symptoms at home with OTC medications, rest, fluids
 - Severe symptoms may require treatment in hospitals
- Risk Factors:
 - Coming into contact with infected persons. Infected persons may be symptomatic, pre-symptomatic, or asymptomatic.

Risk reduction / prevention

- Identifying and isolating lab-confirmed positive cases (both symptomatic and asymptomatic)
- Identifying and quarantining household and close contacts of lab-confirmed positive cases
- Non-pharmaceutical interventions (NPIs) to limit/prevent spread of disease
 - Personal NPIs

- Wearing effective face coverings indoors, and outdoors when social distancing is not possible
 - Social distancing – stay at least 6 feet away from others (with the exception of household members, romantic partners, and caretakers)
 - Practicing good hand-washing hygiene
 - Practicing good respiratory etiquette (cough/sneeze into elbow instead of hands)
 - Minimizing hand contact with eyes, nose, mouth
 - Avoiding others who are unwell
 - Self-isolating at home if unwell, and getting tested
 - Self-quarantining at home if exposed to someone who has tested positive
 - Self-quarantining at home after travel to areas of high community transmission
- Community NPIs
 - Social distancing
 - Closures and/or modified operations of facilities where people gather
 - Cancellation and/or modified operations of public events
- Environmental NPIs
 - Cleaning that helps eliminate viruses from frequently-touched surfaces
 - Use products that kill viruses
 - Use products per label instructions
 - Ensure staff understand safe handling/application
 - Clean with these products at recommend frequency
- **Pharmaceutical interventions – Vaccination**
 - Vaccination to be conducted in phases
 - Phase 1A – Healthcare workers, long-term care residents (began December 2020)
 - Phase 1B – First responders (began January 2020)
 - Phase 1C – Adults 65+ years of age and adults with high-risk conditions (began January 2020)
 - Phase 2 – General public
 - There are two vaccines currently available in NJ: Pfizer (two doses) and Moderna (two doses). Other vaccines remain under development, including AstraZeneca (two doses), and Johnson and Johnson (1 dose).
 - Several counties will operate “mega” sites, including Morris County. The Morris County vaccination site is capable of vaccinating up to 2500 persons per day.
 - Vaccine remains extremely limited, causing frustration for those seeking appointments. 4 million NJ residents are eligible to receive the vaccination, and in the beginning of Phase 1B and 1C, only 100,000 doses were being shipped to the state. That amount has increased each week, and as of this writing, 250,000 doses are expected next week, with 111,000 set aside for second doses.
 - The vaccine is extremely difficult to work with, even for large organizations.
 - Both Pfizer and Moderna require special deep freezers.
 - They are shipped in dry ice, and the specialty gloves, and supplemental dry ice pellets, are both in short supply.
 - Once defrosted, the Moderna vaccine is extremely fragile and cannot be transported by vehicle without special equipment and record-keeping.
 - Once a vial is begun to be administered, it has an extremely short shelf life and the entire vial must be administered within hours.
 - Records of each vaccination must be entered into the state database within 72 hours.
 - Despite these challenges, the Montville Health Department is exploring options to provide COVID-19 vaccinations here in the Township, however, new providers for the vaccine are not being

approved at this time due to the short supply of vaccine. It is also important to note that increasing the number of locations at which the vaccine is available will not increase the amount of vaccine that the state receives each week.

History of COVID-19 response

- CDC response (per <https://www.cdc.gov/coronavirus/2019-ncov/cdcreponse/index.html>)
 - Established COVID-19 Incident Management System on January 7, 2020.
 - Activated its Emergency Operations Center on January 21, 2020.
 - More than 2,600 staff are supporting the response.
 - Deployed multi-disciplinary teams to support state health departments in case identification, contact tracing, clinical management, and public communications.
 - Issued travel guidance, clinical guidance, guidance for long-term care facilities and other settings, and guidance on the use of PPE during a shortage.
 - Responded to more than 300 daily inquiries from various public health partners.
 - Developed a COVID-19 diagnostic test and equipped state and local public health labs with testing capacity.
 - Direct funds to public health organizations to assist them in meeting surges.
 - Direct funds to public health organizations for surveillance, epidemiology, lab capacity, infection control, mitigation, communications, and other preparedness and response activities.
- State Government response
 - Declared a State of Emergency on March 9, 2020.
 - Subsequently issued multiple Executive Orders and Administrative Orders closing the majority of non-essential businesses and facilities, restricting operations of essential businesses, and restricting social movement in public. Executive Orders are enforced by police departments.
- NJDOH response
 - NJDOH COVID-19 Dashboard, and NJ COVID-19 Information Hub
 - Providing technical assistance and guidance to local HDs, schools, healthcare facilities, long-term care facilities and others.
 - Clinical guidance to healthcare facilities and healthcare providers.
 - Providing guidance to state officials to help guide state-wide orders to protect public health.
 - Issuing Executive Directives in conjunction with Executive Orders as needed. NJDOH Executive Directives are enforced by Local Health Departments.
 - Created NJ Interim Vaccination Plan. At this time, when a vaccine is approved and available, it will be distributed in stages. Vaccine will be distributed in phases (Phase 1A healthcare workers, first responders; Phase 1B other essential workers, persons at high risk, persons over 65; Phase 2 remaining general population).
- Morris County Office of Health Management response
 - Coordinating information and supplies between NJDOH and local HDs.
 - Providing support and guidance to local HDs.
 - Coordinating with County OEM on protection of first responders throughout County.
 - Set up/run test site at Morris County Community College in Randolph.
 - As a County LINCS agency, coordinates all state-hired corps of case investigators / contact tracers assigned to Morris County
 - As a County LINCS agency, act as link between NJDOH and local health departments in eventual COVID-19 vaccination distribution/administration.
 - Set up/run Morris County mega vaccination site in conjunction with Atlantic Health
- Montville Health Department response (assisted as needed by state corps contact tracers)

- Cases in CDRSS (long-term care facility residents/employees) and CommCare (everyone else)
 - Case investigation, including health history and detailed movements for 2 days prior to onset of symptoms.
 - Contact tracing of close contacts and household contacts
 - Instructions given for isolation of case and quarantine of close/household contacts.
 - Frequent health monitoring throughout entire isolation/quarantine periods.
 - Isolation is defined as separating unwell people from those who are well.
 - Quarantine is defined as separating and restricting the movement of those who were exposed to an unwell person, but have not yet become unwell themselves.
- Dispensing information on cases, news, and guidance to businesses and residents via:
 - Township website – Health Department COVID page (Health Department).
 - Nixle system (as appropriate) (OEM).
 - Newspapers and online local news outlets (OEM).
 - Electronic display boards at Township Building and Police HQ (OEM).
 - Electronic display boards at fire department (Montville Fire Departments).
 - Electronic display boards at schools (Montville School District).
 - Portable police department electronic road signs (OEM).
 - Posting of notices on/in Township buildings (Health Department and OEM).
 - Township social media sites (OEM).
 - Mailings (Health Department and OEM).
 - Weekly social media posts with alternatives to in-person meetings, as requested by the Board of Health.
- Provided guidance to other Township agencies and departments.
- Developed/distributed information fliers to businesses and Township facilities throughout the Township with information on COVID-19, social distancing, and adherence to Executive Orders.
- Developed/distributed orders of closure to Township facilities that were closed by Township orders.
- Developed protocols for health monitoring and infection control for employees in Township buildings, for employees working in the field, for the return of employees to Township buildings after being on reserve, for employees working in the animal shelter, and for intake of animals at the shelter.
- Developed protocols with OEM for the partial reopening of the Municipal Building to the public. The building re-opened to public access on July 13th on a limited schedule, and is limited to a maximum of 3 members of the public at any one given time. Mondays 9-12:30, Tuesdays 12:30-4, Wednesdays 9-12:30, Thursdays 12:30-4, Fridays closed to the public. All members of the public must check in at the foyer, provide name and contact information, and be screened for temperature and symptoms by the foyer attendant. Foyer attendant calls the appropriate department, and that department decides if the member of the public must enter past the foyer. Employees assisting members of the public while they remain in the foyer is the preferred method and will be highly encouraged. Members of the public will be encouraged to continue to conduct as much business as possible online, over the phone, by mail, and via the yellow drop-box in the parking lot.
- Participant on Montville Board of Education District Reopening Committee to assist plan to reopen classroom instruction in public schools in the Township in September. This committee also included a physician, and several of the public school nursing staff.
- Coordinated with the school district, the Fire Departments, and the Police Department to have COVID safety messages displayed on stationary and portable electronic signs throughout the Township.

- Spot checks of businesses that are licensed/regulated by the Health Department for compliance with COVID safety measures (masks, barriers, etc.)
- Assisted in developing daily Employee Health Questionnaire (EAQ), which, in compliance with Executive Order 192, all Township employees must submit each day electronically through the Township website prior to reporting for work. The Health Department and OEM is copied on any EAQ that raises a concern, and guidance is issued. Paper copies of this form are also available for employees who are unable to access the form online, and must be turned in to their supervisor prior to starting their workday.
- Provided analysis of epidemiology information on cases to date as per Board of Health request.
- Authority
 - Under a state-declared state of emergency, the state government has overall authority and issues directives via Executive Orders and Administrative Orders that all county, regional, and municipal governments must comply with and cannot deviate from, and which are enforced by law enforcement agencies.
 - Under a state-declared public health emergency, NJDOH has overall authority over all public health response. They issue directives via Executive Directives that local health departments must comply with and cannot deviate from, and which are enforced by county, regional, and local health departments.
 - If the Governor does not declare a public health emergency, NJDOH or local Boards of Health and Health Departments have overall authority over public health response.
 - Health Officers direct the local health department response to the emergency in accordance with already-established plans and protocols, any Executive Orders or Administrative Orders from the Governor, and any Executive Directives from NJDOH.
 - Local Boards of Health can declare and define a nuisance in all public or private places within its jurisdiction.
 - Local Boards of Health can prohibit or remove any nuisance and all causes of disease that are injurious to the health of the inhabitants therein.
 - Local Boards of Education have the authority to open or close a public school. The owners of a private school has the authority to open or close it.
 - NJ Division of Children and Families (NJDCF) license, regulate, and inspect childcare facilities, and they have the authority to order childcare centers to close or allow them to reopen.

Montville cases:

- Long-term care facilities (per PDF on https://www.nj.gov/health/cd/topics/covid2019_dashboard.shtml)
 - The Chelsea (152 beds): 38 cases (24 residents, 14 staff), 8 confirmed resident deaths.
 - Fox Trail Memory Care (10 beds): staff and residents: 9 cases (5 residents, 4 staff), 5 confirmed resident deaths. In May, the facility closed, and transferred their 4 remaining patients (all of whom had tested negative and were without symptoms) to their Mahwah location.
- Congregate living facility – residential (as opposed to institutional) psychiatric care
 - Signature Care Homes (Formerly St. Alberts, formerly Greenbriar): no cases
- Analysis of positive cases (data as of 02/05/21. Changes in data are from last summary dated 12/11/2020)
 - 1123 cases. (increase of 559 cases)
 - Average age of cases: 44.9. (decreased by 2.7 years)
 - 4% of cases are age 10 or less. (new breakdown of under-18 cases per Board request)
 - 10% of cases are age 11 to 18. (new breakdown of under-18 cases per Board request)
 - 17% of cases are age 19 – 29. (1% increase)
 - 43% of cases are age 30-59. (1% increase)
 - 25% of cases are considered high risk due to age (age 60+). (6% decrease)

- 15% of cases are considered high risk due to underlying chronic health conditions. (4% decrease)
- 8% of cases were admitted into a hospital. (1% decrease)
- Reported household contacts: 977 total. Average number of household contacts per case: 0.6. (0.9 decrease)
- Reported close contacts: 389 total. Average number of close contacts per case: 0.3 (0.4 decrease)
- Source patients – none identified definitively. We did not identify any cases in which household/close contacts or cases appeared as household/close contacts for other cases. For dwelling units with multiple cases it is strongly suspected (but not proven) that for some of those cases the source patient was a household contact.
- Dwelling units with more than one case (not counting long-term care facility cases): 218 (increase of 127).
- For dwelling units with multiple cases: average is 2.5 cases per dwelling unit. (increase of 0.5)
- Cases by zip code - there are no “hot spots” or “clusters”. Total municipal population = 21,058 per www.census.gov (2019 estimates). This includes 20,915 in the below 3 zip codes, as well as 143 combined in the Kinnelon and Boonton zip codes.
 - 07045 (Montville) - population 10,655 for this zip code
 - 50.6% of Montville municipality population of 21,058
 - 46.9% of cases (1.5% increase)
 - 07082 (Towaco) - population 5,192 for this zip code
 - 24.7% of Montville municipality population of 21,058
 - 26.3% of cases (1.2% decrease)
 - 07058 (Pine Brook) - population 5,068 for this zip code
 - 27.2% of Montville municipality population of 21,058
 - 24.0% of cases (0.6% decrease)

- Deaths – per NJ Office of Vital Statistics and Registry, local health departments remain prohibited from disclosing the number of deaths in a municipality due to any specific cause, and per NJ Department of Health, are prohibited from disclosing the number of deaths due to COVID for any zip code with less than 20,000 persons. All 5 zip codes present in Montville Township (Montville, Towaco, Pine Brook, Boonton, Kinnelon) have less than 20,000 persons. The Montville Health Department is allowed to, and does each month on its monthly report to the Board of Health and the Township Committee, release the number of deaths that occur within the Township that month, and the number of Montville residents who pass away (regardless of where the death took place). The below table represents this information for 2017 through 2020.

Month	2017		2018		2019		2020		2021	
	Deceased Residents	Deaths in Montville	Deceased Residents	Deaths in Montville	Deceased Residents	Deaths in Montville	Deceased Residents	Deaths in Montville	Deceased Residents	Deaths in Montville
January	7	5	15	6	17	10	11	6	7	5
February	3	7	6	16	13	4	11	7		
March	3	9	14	8	18	3	10	3		
April	15	4	17	7	14	9	47	31		
May	9	4	13	7	17	12	11	8		
June	13	2	13	6	10	3	11	7		
July	14	6	12	8	13	9	17	9		
August	17	11	17	10	10	7	14	9		
September	2	3	13	10	13	8	12	8		
October	15	9	8	3	9	2	12	9		
November	3	7	13	9	12	5	16	10		
December	16	8	13	9	22	6	13	7		
TOTALS	117	75	154	99	168	78	185	114	7	5