

May 07, 2021

COVID-19 case information

Location	Current Cases	Total Cases	Deaths
Global	-	155,665,214	3,250,648*
United States	-	32,403,159	577,041†
New Jersey	-	879,918	23,129‡
Morris County	-	41,531	965‡
Montville	9	1617	31‡

* 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

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
- Medical interventions:
 - Antivirals
 - Steroids
 - Convalescent plasma
 - Monoclonal antibody treatment
 - Other potential treatments are under investigation
 - Vaccines: Pfizer (2 dose), Moderna (2 dose), Johnson & Johnson (1 dose)
 - 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 2021)
 - Phase 1C – Adults 65+ years of age and adults 16+ with high-risk conditions (began January 2021)
 - Phase 1C – Certain essential workers (educators K-12, childcare, transportation, public safety, migrant farm workers), tribal community members, homeless and in shelters (began March 15, 2021)
 - Phase 1-C – Certain essential workers (food production, eldercare, warehousing/logistics, social services, election personnel, hospitality, medical supply chain, postal, shipping, clergy, judicial system) (began March 29, 2021)
 - Phase 1-C – Certain essential workers (educators and support staff in higher education, communications infrastructure, construction, property management, maintenance, retail financial, sanitation/janitorial/hazmat, laundry service/dry cleaners, utilities, librarians and support staff), adults 55-64, individuals 16+ with intellectual and developmental disabilities (beginning April 5, 2021)
 - Phase 2 – General public age 16 and older (began April 19, 2021)
 - There are currently three vaccines that have received an Emergency Use Authorization (EUA) in the United States: Pfizer (two doses), Moderna (two doses), and Johnson & Johnson (1 dose). The CDC and FDA recommended a pause in the use of the Johnson & Johnson vaccine effective April 13, 2021 to investigate if a small number of reports of a rare and severe type of blood clots (cerebral venous sinus thrombosis, or CVST) were linked to the vaccine. A small number of persons in the US (7 women and 1 man between the ages of 18 to 48, all also with low platelet counts and elevated levels of antibodies to platelet factor 4) who received the vaccine subsequently developed CVST within 2 weeks of the vaccination. After a 2-week investigation, it was determined by the CDC and

FDA that the benefits greatly outweighed the small risk, and recommended resuming use of the Johnson & Johnson vaccine.

- Other vaccines remain under development or in the EUA process.
- Several counties are operating “mega” sites, including Morris County. The Morris County vaccination site is now vaccinating their maximum capacity of 4000 persons per day. There are discussions taking place to determine whether or not the space has the capacity for up to 6000 persons per day.
- Vaccination rates:
 - State: 7,440,122 total doses and 3,486,709 fully vaccinated persons (39%)
 - Morris County: 505,003 total doses and 284,472 fully vaccinated persons (58%)
 - Montville: Municipal-level data is not yet available from the state.
- Vaccine is now widely available, with open appointments available at many locations.
- The Pfizer and Moderna vaccines are 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.
- The Johnson & Johnson vaccine is easier to work with. Only a very small amount has been received by the state compared to Pfizer and Moderna. Merck and Johnson & Johnson entered into an agreement for Merck to assist them in manufacturing the vaccine.
 - It can be stored at refrigeration temperatures.
 - It is sturdy enough that it can be transported to those who are homebound or who otherwise have difficulty getting to a vaccination site.
- The Montville Health Department is exploring options to provide COVID-19 vaccinations here in the Township, however, with vaccine appointments readily available through multiple other locations, including pharmacies and supermarkets, a local vaccination clinic through the Health Department may be superfluous at this time. Despite this, the Health Department continues to prepare in the event that a Township vaccination clinic is necessary, potentially in the fall for booster shots.
- Morris County, in conjunction with Atlantic Health Systems, has begun to vaccinate the homebound in each Morris County municipality, including Montville Township. There are a very small number of those individuals who both qualify as homebound under Medicare, and who have not yet received their vaccination by other means.

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 residents, businesses and organizations 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, for intake of animals at the shelter, and for shelter adoptions.
 - 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.
 - Conducted outreach to VFW members, Meals on Wheels clients, Dial-A-Ride clients, and the Social Services Department to identify those in our community most at-risk for severe health outcomes from COVID-19, and thus in most need of vaccination. Divided list into those still able to travel, and those that are homebound.

- Assembled second list of seniors and others who contact the Health Department for assistance in obtaining vaccination appointments.
 - If they were not yet pre-registered online, and had internet capability, walked them through the process to pre-register with both the state and the county.
 - For those without internet capability, spoke with their emergency contacts and walked them through the process to pre-register with both the state and the county.
 - Referred those 75+ on both lists to contact Walmart (Boonton and others), as they are dedicating their appointments for only those 75+.
 - Referred those on both lists to Atlantic Health Systems for further assistance.
- Developed and posted flyer on the Health Department's COVID-19 page with information on the state's new hotline for those 75+, which will assist them with pre-registration with the state system, and assist them with making appointments. The state will also be calling those 75+ directly to make appointments for them.
- Developed and posted notice on the HD COVID page requesting those 65+ and those qualified as homebound (any age) by Medicare to contact the Health Department if they have still not yet been able to make a vaccination appointment.
- Referred Atlantic Health Systems information to the Montville School District regarding referral to AHS of high school seniors in need of vaccination.
- 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)
 - Concluded outbreaks:
 - Spring 2020: 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.
 - The Chelsea (152 beds)

- 2020: 38 cases (24 residents, 14 staff), 8 confirmed resident deaths.
 - 2020: 4 cases (1 resident, 3 staff), no deaths.
 - 2021: 23 cases (11 residents, 12 staff) 1 confirmed resident death.
- Congregate living facility – residential (as opposed to institutional) psychiatric care
 - Signature Care Homes (formerly St. Alberts, formerly Greenbriar): no cases, no outbreaks.
- Analysis of positive cases (data as of 05/07/21. Changes in data are from last summary dated 04/07/2021)
 - 1487 cases (increase of 130 cases)
 - Average age of cases: 42.1 (decreased by 0.5 years)
 - 5.1% of cases are age 10 or less (0.4% increase)
 - 12.6% of cases are age 11 to 18 (no change)
 - 18.1% of cases are age 19 – 29. (0.5% increase)
 - 41.5% of cases are age 30-59. (0.5% decrease)
 - 22.8% of cases are considered high risk due to age (age 60+). (0.4% decrease)
 - 20% of cases are considered high risk due to underlying chronic health conditions. (2% increase)
 - 7% of cases were admitted into a hospital. (no change)
 - Reported household contacts: 1833 total. Average number of household contacts per case: 1.1 (0.1 decrease)
 - Reported close contacts: 468 total. Average number of close contacts per case: 0.3 (no change)
 - 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): 445 (increase of 42).
 - For dwelling units with multiple cases: average is 2.5 cases per dwelling unit. (no change)
 - 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
 - 47.4% of cases (0.2% increase)
 - 07082 (Towaco) - population 5,192 for this zip code
 - 24.7% of Montville municipality population of 21,058
 - 26.1% of cases (0.1% decrease)
 - 07058 (Pine Brook) - population 5,068 for this zip code
 - 27.2% of Montville municipality population of 21,058
 - 23.1% of cases (0.4 increase)

The number of confirmed deaths due to COVID-19, as well as certain demographic information regarding those deaths, cumulative from the beginning of the pandemic, are now being reported by the state for all municipalities with a population of 20,000 or higher, which includes Montville, on their dashboard at https://www.nj.gov/health/cd/topics/covid2019_dashboard.shtml, and as of the date of this report is: **31**.

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). Please note that there may be overlap between these two numbers in cases where a Montville resident passes away while in the Township. The below table represents this information for 2017 through the current month as of the date of this report.

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	14	12
March	3	9	14	8	18	3	10	3	15	5
April	15	4	17	7	14	9	47	31	21	8
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	57	30