

COVID-19 Weekly Surveillance Report

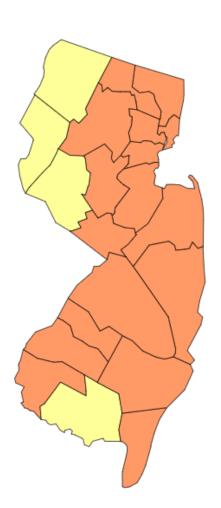
COCOS Communicable Disease derigo

Week ending August 11, 2022

Highlights

- CDC COVID-19 Community Levels for the week ending August 11, 2022:
 - High in 17 counties and Medium in 4 counties.
 - Since last week, Gloucester, Mercer, and Salem have shifted from Medium to High, and Warren shifted from Low to Medium.
 - Compared to last week, Gloucester and Salem had an increase in new COVID-19 cases while Hunterdon had a
 decrease. Hunterdon, Mercer, and Warren have had an increase in the rate of new hospital admissions.
 - The percentage of inpatient beds occupied by COVID-19 patients continues to be at Low levels for all counties.
- CDC COVID-19 <u>Community Transmission</u> levels used for healthcare settings are High in all counties as of August 11, 2022. Community transmission levels have not changed since the previous week.

1. COVID-19 Community Levels used for Most Settings



Layered prevention strategies can help limit severe disease and reduce potential strain on the healthcare system. <u>CDC COVID-19 Community Levels</u> are a tool to help communities and individuals determine what prevention meeasures to take.

The COVID-19 community level is determined by the higher of the new hospital admissions and inpatient beds metrics, based on the current level of new cases per 100,000 population in the past 7 days. COVID-19 community levels are classified as low, medium, or high as follows:

| COVID-19 Community Levels | | | | | | |
|---|--|--------|------------|--------|--|--|
| New COVID-19 Cases Per 100,000 in the past 7 days | Hospitalization Indicators | Low | Medium | High | | |
| Fewer than 200 | New COVID-19 admissions per 100,000 population (7-day total) | <10.0 | 10.0-19.9 | ≥20.0 | | |
| | Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average) | <10.0% | 10.0-14.9% | ≥15.0% | | |
| 200 or more | New COVID-19 admissions per 100,000 population (7-day total) | NA | <10.0 | ≥10.0 | | |

The following table includes recommendations for protecting yourself, your family, and communities. Additional information can be found at: https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html#anchor_47145.

| COVID-19 Community Level | Protect yourself and your family | Protect your communities, schools, and workplaces |
|--------------------------------|---|--|
| Low | Stay up to date with COVID-19 vaccines and boosters. Stay home if you are sick. Follow isolation & quarantine recommendations and wear a mask through day 10. Get tested if exposed to someone with COVID-19, if you develop COVID-19 symptoms, and before/after travel. Keep at-home tests on hand. Order them for free here. Look for ways to improve airflow when home or indoors. Wash your hands frequently. Clean and disinfect your home. If you are at high risk for severe disease, have a plan for rapid testing and talk to your healthcare provider about whether you are a candidate for treatments. | Promote equitable access to COVID-19 vaccines, testing, treatment, masks, outreach, and support services, particularly for those at high risk of severe illness and vulnerable populations. Contact your local health department for information. Ensure isolation & quarantine recommendations are followed. Maintain good indoor ventilation and airflow. Teach and reinforce importance of proper hand hygiene and respiratory etiquette. Ensure routine cleaning and disinfecting of buildings and facilities. Maintain screening testing infrastructure to allow for easier scale up when community levels are medium or high. |
| Medium | • If you are at high risk for severe disease, talk to your healthcare provider about whether you should wear a mask and take other precautions, such as testing. • If you spend time with someone at high risk for severe disease, consider self-testing before you see them and wearing a mask when indoors with them. | Follow recommendations for 'Low' above and: Implement screening testing or other testing strategies for people exposed to COVID-19. Implement enhanced prevention measures in high-risk congregate settings to identify cases early and prevent transmission during movement. Refer to CDC guidance for correctional facilities. Encourage physical distancing. |
| High | Follow recommendations for 'Low' and 'Medium' above and: Wear a mask indoors regardless of vaccination status, particularly when in crowded areas with poor ventilation. If you are at high risk for severe disease, wear a mask or respirator that provides greater protection such as a N95 or KN95 and avoid indoor activities where you could be exposed. | Follow recommendations for 'Low' and 'Medium' above and: • Implement universal indoor masking policies. • High-risk congregate settings, like shelters, should implement facility-wide, weekly screening testing. • Maximize physical distancing. • Implement cohorting in daycares, schools, among farm workers and in congregate settings. |

Table 1. COVID-19 Community Levels for current week ending August 11, 2022 and change since previous week.

| County | COVID Community Level | | New COVID-19 Cases per 100,000 | | New Hospital Admissions per 100,000 | | | Percentage of Inpatient Beds Occupied by COVID-19 patients | | | | |
|------------|-----------------------------|---------------------------|--------------------------------------|------------------|---|-------------------------------------|------------------|--|-------------------------------------|------------------|------------------|-------------------------------------|
| | Current Level | Previous Week Level | Change since Previous Week | Current Value | Current Level | Change since Previous Week | Current Value | Current Level | Change since Previous Week | Current Value | Current Level | Change since Previous Week |
| Atlantic | High | High | (-) | 245 | 200+ | (-) | 27.3 | High | (-) | 5% | Low | (-) |
| Bergen | High | High | (-) | 230.2 | 200+ | (-) | 11.3 | Medium | (-) | 4.4% | Low | (-) |
| Burlington | High | High | (-) | 227.7 | 200+ | (-) | 17.5 | Medium | (-) | 6% | Low | (-) |
| Camden | High | High | (-) | 257.7 | 200+ | (-) | 17.5 | Medium | (-) | 6% | Low | (-) |
| Cape May | High | High | (-) | 272.7 | 200+ | (-) | 27.3 | High | (-) | 5% | Low | (-) |
| Cumberland | Medium | Medium | (-) | 306.3 | 200+ | (-) | 0 | Low | (-) | 6.6% | Low | (-) |
| Essex | High | High | (-) | 289 | 200+ | (-) | 11.4 | Medium | (-) | 4.7% | Low | (-) |
| Gloucester | High | Medium | (个) | 217.4 | 200+ | (个) | 17.5 | Medium | (-) | 6% | Low | (-) |
| Hudson | High | High | (-) | 281.7 | 200+ | (-) | 11.3 | Medium | (-) | 4.4% | Low | (-) |
| Hunterdon | Medium | Medium | (-) | 176.1 | <200 | (↓) | 10 | Medium | (个) | 3.3% | Low | (-) |
| Mercer | High | Medium | (个) | 269.4 | 200+ | (-) | 10.3 | Medium | (↑) | 5.6% | Low | (-) |
| Middlesex | High | High | (-) | 262.8 | 200+ | (-) | 11.4 | Medium | (-) | 4.7% | Low | (-) |
| Monmouth | High | High | (-) | 234 | 200+ | (-) | 16.5 | Medium | (-) | 6.5% | Low | (-) |
| Morris | High | High | (-) | 206.2 | 200+ | (-) | 13.9 | Medium | (-) | 3.5% | Low | (-) |
| Ocean | High | High | (-) | 224.8 | 200+ | (-) | 16.5 | Medium | (-) | 6.5% | Low | (-) |
| Passaic | High | High | (-) | 243.5 | 200+ | (-) | 11.3 | Medium | (-) | 4.4% | Low | (-) |
| Salem | High | Medium | (个) | 203.6 | 200+ | (个) | 17.5 | Medium | (-) | 6% | Low | (-) |
| Somerset | High | High | (-) | 215.5 | 200+ | (-) | 11.4 | Medium | (-) | 4.7% | Low | (-) |
| Sussex | Medium | Medium | (-) | 193.6 | <200 | (-) | 13.9 | Medium | (-) | 3.5% | Low | (-) |
| Union | High | High | (-) | 224.3 | 200+ | (-) | 11.4 | Medium | (-) | 4.7% | Low | (-) |
| Warren | Medium | Low | (个) | 164.3 | <200 | (-) | 10 | Medium | (个) | 3.3% | Low | (-) |

Source: Centers for Disease Control and Prevention. COVID Data Tracker. Atlanta, GA: US Department of Health and Human Services, CDC; 2022, August 11. https://covid.cdc.gov/covid-data-tracker

2. Community Transmission Levels used for Healthcare Settings



COVID-19 Community Levels should not be used to inform decision-making in healthcare settings, such as hospitals and nursing homes. The CDC and NJDOH recommend the use of CDC Community Transmission levels for healthcare settings to assess risk of COVID-19 transmission to inform mitigation measures.

Two indicators, case rate and percent positivity, are used to determine the level of SARS-CoV-2 transmission for a county. If the two indicators suggest different transmission levels, the higher level is selected.

Community transmission risk is classified as low, moderate, substantial, or high as follows:

| Community Transmission Levels | | | | | |
|--|-----|------------|-------------|--------|--|
| Indicator | Low | Moderate | Substantial | High | |
| New cases per 100,000 persons in the past 7 days | <10 | 10 - 49.99 | 50 - 99.99 | ≥100 | |
| Percentage of positive NAAT tests in the past 7 days | <5% | 5 - 7.99% | 8 - 9.99% | ≥10.0% | |

Table 2. COVID-19 Transmission Levels as of August 11, 2022

| County | Community Transmission Level | New cases per 100,000 persons in the past 7 days | | Percentage of positive NAAT tests in the past 7 days | | |
|------------|---------------------------------|--|------|--|-------------|--|
| Atlantic | High | 245 | High | 13.76 | High | |
| Bergen | High | 230.21 | High | 13.01 | High | |
| Burlington | High | 227.69 | High | 12.46 | High | |
| Camden | High | 257.67 | High | 14.48 | High | |
| Cape May | High | 272.71 | High | 11.16 | High | |
| Cumberland | High | 306.3 | High | 9.07 | Substantial | |
| Essex | High | 289 | High | 13.19 | High | |
| Gloucester | High | 217.39 | High | 13.57 | High | |
| Hudson | High | 281.68 | High | 14.33 | High | |
| Hunterdon | High | 176.09 | High | 11.85 | High | |
| Mercer | High | 269.44 | High | 9.44 | Substantial | |
| Middlesex | High | 262.77 | High | 14.39 | High | |
| Monmouth | High | 234 | High | 13.57 | High | |
| Morris | High | 206.16 | High | 13.82 | High | |
| Ocean | High | 224.81 | High | 12.24 | High | |
| Passaic | High | 243.51 | High | 14.37 | High | |
| Salem | High | 203.57 | High | 15.01 | High | |
| Somerset | High | 215.54 | High | 13.88 | High | |
| Sussex | High | 193.61 | High | 12.05 | High | |
| Union | High | 224.32 | High | 11.09 | High | |
| Warren | High | 164.34 | High | 11.38 | High | |

Source: Centers for Disease Control and Prevention. COVID Data Tracker. Atlanta, GA: US Department of Health and Human Services, CDC; 2022, August 11. https://covid.cdc.gov/covid-data-tracker

Recommendations for Healthcare Settings

Information from this table is adopted from CDC <u>Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019</u> (COVID-19) Pandemic, Centers for Medicare & Medicaid services (CMS) & NJDOH.

This table does not supersede any federal or state requirements.

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|-------------|---|
| Low | Implement source control and physical distancing measures. Certain allowances could be considered to forgo use of well-fitting source control and physical distancing in counties with low community transmission. Healthcare personnel (HCP) should wear source control when they are in areas of the healthcare facility where they could encounter patients (e.g., hospital cafeteria, common halls/corridors). Encourage everyone to remain up to date with all recommended COVID-19 vaccine doses. Establish a process to identify and manage individuals with suspected or confirmed SARS-CoV-2 infection. Optimize the use of engineering controls and indoor air quality. Create a process to respond to SARS-CoV-2 exposures among HCP and others. Actively evaluate patients/residents at least daily for fever and other signs of COVID-19 or an acute respiratory infection. Facilities might elect to use a risk-based approach for determining which residents require quarantine upon admission. Per CMS QSO-20-38 NH: In nursing homes located in counties with low community transmission, expanded screening testing for asymptomatic HCP, regardless of vaccination status, is not recommended. |
| Moderate | Follow considerations for 'Low' above and: Per <u>CMS QSO-20-38 NH</u>: In <u>nursing homes</u> located in counties with moderate community transmission, HCP not up to date with vaccination, should be tested weekly. |
| Substantial | Source control and physical distancing (when physical distancing is feasible and will not interfere with provision of care) are recommended for everyone in a healthcare setting. This is particularly important for individuals, regardless of their vaccination status, who live or work in counties with substantial to high community transmission. Facilities must have a plan for implementing universal use of PPE. This includes consideration for implementing universal use of NIOSH-approved N95 or equivalent for HCP during all patient encounters or specific areas of the facility at higher risk for SARS-CoV-2 transmission. In situations when patients who are not up to date with all recommended COVID-19 vaccine doses could be in the same space (e.g., waiting rooms, cafeterias, dialysis treatment room), arrange seating so that patients can sit at least 6 feet apart, especially in counties with substantial or high transmission. This might require scheduling appointments to limit the number of patients in waiting rooms, treatment areas, or participating in group activities. Use a N95 or higher-level respirator for aerosol generating procedures in dental settings. Consider increasing the frequency of daily patient/resident monitoring for fever and other signs of COVID-19 or an acute respiratory infection. Per ED-21-012 & CMS QSO-20-39-NH: Provide testing to visitors or encourage visitors to test on their own within 2-3 days before coming to facility (Note: Visitors are not required to be tested as a condition of visitation) Per CMS QSO-20-38 NH: In nursing homes located in counties with substantial to high community transmission, HCP not up to date with vaccination, should have a viral test twice a week. |
| High | • Follow considerations for 'Substantial' above. |

This report will be updated weekly, on Thursdays, and posted at:

https://www.nj.gov/health/cd/statistics/covid/index.shtml.

For additional information visit:

NJDOH Communicable Disease Service: COVID-19

NJ COVID-19 Information Hub